**NHS 24
BOARD MEETING
18 DECEMBER 2025
ITEM NO 9.4
FOR APPROVAL**

STAFF GOVERNANCE MONITORING EXERCISE 2024-2025

Executive Sponsor:
Dr Jacqui Hepburn, Deputy Chief Executive and Workforce Director

Lead Officer/Author:
Marnie Westwood, Associate Director of Workforce
Kenny Woods, Employee Director

Action Required:
The NHS 24 Board is asked to approve virtually the Staff Governance Monitoring return for 2024-2025 for onward submission to Scottish Government by 17 December 2025, with formal homologation at the NHS 24 Board meeting on 18 December 2025.

Key Points for the Board to consider:
- All NHS Boards are required to complete the Staff Governance Monitoring Framework as set out in the DL (2015) 26.
- The framework, designed in partnership, has been used to assess progress against the Staff Governance Standard at a local and national level.
- The Framework has been streamlined to ensure that staff experience measurements have been incorporated.

Governance process:
Presented for endorsement to October 2025 Executive Management Team and Area Partnership Forum and Staff Governance Committee in November 2025. The National Monitoring Return is to be signed off by the NHS 24 Chair, Chief Executive, Director of Workforce and the Employee Director prior to submission to Scottish Government Health and Social Care Directorates.

Strategic alignment and link to overarching NHS Scotland priorities and strategies:
This paper aligns to NHS 24's strategy regarding our strategic aim of providing a workplace where people can thrive by improving wellbeing and work life balance for our people. As well as the:
- National Workforce Strategy for Health and Social Care in Scotland.
- NHS Scotland Staff Governance Standards
- National Workforce Strategy for Health and Social Care in Scotland.

Strategic alignment and link to Corporate Delivery Plan activity:
This paper aligns to Corporate Delivery Plan:
- Activity 6.1 - Deliver sustainable workforce and plan our workforce to meet service requirements through attracting and retaining people.
- Activity 6.2 - Ensure the organisation has effective leaders and mangers that role model values and behaviours which enable an inclusive and supportive environment

and strengthens their capacity and confidence to engage, develop and challenge staff to deliver excellence.
- Activity 6.3 - Deliver an inclusive culture that supports our people's health and wellbeing.

Key Risks:
The content of this paper acts as mitigation against corporate risk:
- **Risk 003946** - There is a risk that NHS 24 are unable to fully support all health, and wellbeing needs of staff due to pace and scale of change and growth of the organisation.
- **Risk 008869** - There is a risk that NHS 24 will not promote an environment in which its people can thrive if it does not plan for, attract, and develop a sustainable workforce.

Financial Implications:
There are no financial implications because of this update paper.

Equality and Diversity:
The implementation of the Staff Governance Standard at NHS 24 is underpinned by a commitment to the nine protected characteristics of the Equality Act 2010 and the human rights principles of FREDA. This framework ensures that all staff are:
- Well-informed and involved in decisions affecting them.
- Appropriately trained and developed.
- Treated fairly and consistently.
- Provided with a safe and supportive working environment.

In practice, this means that organisational policies, workforce strategies, and operational changes are routinely assessed for their impact on equality and human rights. For example:
- Disability and Neurodiversity: Adjustments to working patterns, digital systems, and communication methods are reviewed to ensure accessibility and inclusion.
- Pregnancy and Maternity: Flexible arrangements and safeguarding measures are embedded to support expectant and new parents.
- Age, Gender, and Gender Reassignment: Workforce initiatives are designed to avoid bias and promote equal opportunity across all age groups and gender identities.
- Other Protected Characteristics: While no direct barriers may be identified, inclusive language, diverse representation, and equitable access remain central to governance and planning.

To uphold these standards, NHS 24 has embedded the following mechanisms:
- Equality Impact Assessments (EIAs) across all major workstreams including policy development, training, and service transformation.
- Inclusive governance structures such as the Area Partnership Forum and Staff Governance Committee, which monitor progress and escalate concerns where needed.

This approach ensures that the Staff Governance Standard is not only a compliance framework but a strategic tool for embedding fairness, respect, equality, dignity, and autonomy into the everyday experience of NHS 24 staff.

1.   RECOMMENDATION

1.1   The NHS 24 Board is asked to approve virtually the Staff Governance Monitoring return for 2024-2025 submission to Scottish Government by 17 December 2025, with formal homologation at the NHS 24 Board meeting on 18 December 2025.

2.   TIMING

2.1   The exercise requires information for the period 1 April 2024 – 31 March 2025. The approved template must be returned to Scottish Government no later than 17 December 2025.

3.   BACKGROUND

3.1   The Staff Governance Standard is a statutory framework that underpins how NHS Scotland employers manage and support their workforce. It ensures that all staff—regardless of role or grade—are treated fairly, consistently, and with dignity and respect in an environment where diversity is valued. The Standard requires NHS Boards to demonstrate that staff are well-informed, appropriately trained and developed, involved in decisions, and provided with a safe and continuously improving working environment. It also outlines reciprocal responsibilities for staff, including active participation in organisational discussions, commitment to professional development, and adherence to ethical and safety standards. Embedded within the broader governance structure of NHS Scotland, the Staff Governance Standard promotes a culture of partnership working and is recognised as a key driver of high-quality care and organisational performance.

3.2   Scottish Government recently undertook a review of the annual Staff Governance Monitoring exercise process resulting in a streamlined standardised assurance template to be completed by all Boards.

3.3   The new template is intended to be less onerous on Boards while still providing ample opportunity to provide additional information and context that will help Scottish Government review returns and be satisfied that Health Boards are complaint with the Standard.

4.   ENGAGEMENT

4.1   Engagement has included relevant Workforce, Trade Union, and Professional Bodies colleagues.

5.   FINANCIAL IMPLICATIONS

5.1   There are no current financial implications.

6.   MEASURABLE BENEFITS

6.1   There is a suite of KPIs in place for measuring the success and identification of areas for improvement for all five strategic objectives of the Workforce Strategy. The KPIs are a measure of how workforce is aiding and contributing to the success of NHS 24 and were reported at our end of Year 2 position. A full benefit realisation for all Workforce activity for the previous two years has been completed, as below:

Priority	Direct Benefit
Improved Recruitment and Retention	Increased organisational capacity by increasing headcount
	Reduced recruitment costs through reducing attrition
	Reduced recruitment costs by bringing senior recruitment in-house
	Increased organisational capacity by reducing vacancy rate
	Increased diversity of workforce
	Increased HR productivity by reducing time spent on HR queries

Improved Culture, Learning and Wellbeing	Increased organisational capacity by increasing attendance at work
	Increased HR capacity through removal from Stage 1 and 2 meetings
	Increased organisational capacity by reducing case management numbers
	Increased safety of working environment, reducing personal injury claims
	Increased organisational capacity through improved mental health support
	Increased organisational capacity through reducing Essential Learning requirements in line with other NHSS Boards

7. NEXT STEPS

7.1 The attached response is signed by the Board Chair, Chief Executive, Deputy Chief Executive and Director of Workforce, and the Employee Director, and submission to the Scottish Government by 17 December 2025.

Staff Governance Monitoring (SGM) – Assurance of Compliance To be completed by NHS 24.

Scottish Workforce and Staff Governance Committee Co-Chairs,

This return serves as assurance that **NHS 24** is committed to supporting our workforce and effective partnership working through the Staff Governance Standard.

We confirm that we have systems in place to:
- assess that we are continuing to meet our responsibilities under each strand of the Staff Governance Standard
- identify areas that require improvement
- develop action plans that set out how improvements will be made.

The **Staff Governance Committee of NHS 24** confirm that the Board's review process included input from key stakeholders and partnership representatives, and that the iMatter results will be considered and actioned appropriately.

We the undersigned, on behalf of **NHS 24** provide assurance to the Scottish Workforce and Staff Governance Committee that it is continuing to meet the Staff Governance Standard strands, and can demonstrate that staff are:
- Well Informed
- Appropriately Trained
- Involved in Decisions
- Treated fairly and consistently, with dignity and respect, in an environment where diversity is valued
- Provided with a continuously improving and safe working environment, promoting the health and wellbeing of staff, patients, and the wider community.

Our action plan demonstrates our commitment to continuous improvement to foster a positive, open, and transparent culture and supportive working environment for all staff.

Assurance Report and Annual Workplan/Action Plan

We ask you to attach your Board's internal Staff Governance Committee's Assurance Report and Annual Workplan Matrix/Action Plan, Area Partnership Forum Assurance Report, Local Partnership Forum Report, and any other existing reports you feel would be relevant in providing this assurance.

Martin Cheyne
Board Chair
[Signature]
[Date]

**Health Workforce Directorate
Staff Governance Monitoring Exercise
2024 - 2025**

Jim Miller
Chief Executive
[Signature]
[Date]

Jacqui Hepburn
Deputy Chief Executive and Director of Workforce
[Signature]
[Date]

Kenny Woods
Employee Director
[Signature]
[Date]

Health Workforce Directorate
Staff Governance Monitoring Exercise
2024 - 2025

To be completed by NHS 24

Bullying and Harassment

The number of bullying and harassment cases from 1 Apr 2024 – 31 Mar 2025. These returns must cover all the following stages:

Bullying and Harassment cases 1 Apr 2024 – 31 Mar 2025	
Total amount of cases:	16
Early Resolution (if recorded):	4
Formal Procedure:	12
Breakdown of Formal Procedures*	
Upheld and justifies learning outcomes	0
Upheld and justifies referral to a formal conduct hearing	1
Partially Upheld	0
Not Upheld	7
No case to answer	3
Resigned	0
Cases ongoing	0
Requests to review	1

*This table is not exhaustive. If you have taken actions not outlined above please include details here:

NHS 24 has successfully mediated all 4 Early Resolution cases highlighted through our team of skilled mediators.

To ensure early resolution is not only encouraged but effectively implemented, NHS 24 has taken the following strategic actions:
- **Leadership Capability Building**: Through our *Management Essentials Programme*, managers are equipped with the skills and confidence to intervene early. The Employee Relations module specifically focuses on early intervention strategies, courageous conversations, and effective communication techniques. These are designed to empower managers to identify and address concerns proactively before they escalate.
- **Workforce Expertise in Mediation**: NHS 24 benefits from a number of accredited mediators within our Workforce Directorate. Their expertise is actively utilised to support resolution at the earliest possible stage, reducing the need for formal processes and promoting restorative outcomes.

- **Embedding Cultural Expectations**: Our *Culture and Values Framework*, supported by interactive workshops, sets clear behavioural expectations across all levels of staff. It empowers individuals to challenge inappropriate behaviours constructively and provides practical tools for doing so.
- **Mandatory Learning and Continuous Reinforcement**: We have made our Bullying and Harassment e-learning module mandatory for all new staff at induction. For managers, it is classified as *Essential Role Specific*, requiring a refresh every two years to ensure sustained awareness and capability.
- **Confidential Contact Network**: NHS 24 has established a confidential contact network to provide staff with safe, informal avenues for support and guidance, reinforcing our commitment to psychological safety.
- **Leadership Development Programmes (LDPs)**: Psychological safety is a core theme within our LDPs, ensuring that leaders at all levels understand their role in creating environments where staff feel safe to speak up and where concerns are addressed early and constructively.
- **Working In Parternership:** Collaborative working with Trade Union and Professional Body colleagues plays a vital role in supporting an early resolution approach. By fostering open dialogue, mutual respect, and shared understanding, these partnerships help to identify and address concerns at the earliest opportunity. This proactive engagement not only strengthens trust across the workforce but also contributes to more timely, fair, and constructive outcomes—benefiting individuals, teams, and the wider organisation.

NHS 24 can confirm that it **has implemented** steps to encourage early resolution and ensuring consistent application of policies. We provide assurance that all investigating managers are skilled in having these conversations.

Whistleblowing

The number of whistleblowing cases raised from 1 April 2024 – 31 March 2025. These returns must cover all the stages of whistleblowing cases.

Please also attach any current quarterly whistleblowing reports from 1 April 2025 to the date of this return.

Whistleblowing cases 1 Apr 2024 - 31 Mar 2025				
	Number	**Ongoing**	**Concluded**	**Feedback provided**
Raised at Stage 1	0	0	0	N/A
Resolved at Stage 1	0	0	0	N/A
Raised at Stage 1 and progressed to Stage 2	0	0	0	N/A
Raised at Stage 2	1	0	1	Yes
Resolved at Stage 2	1	0	0	Yes
Independent External Review	1	0	0	Yes
Total cases (at all stages)	1			
Total cases with a bullying or harassment element	0			

NHS 24 provides assurance that it responds to and addresses all concerns that are raised.

We can confirm that, where appropriate, investigations have been undertaken and concluded timeously. **NHS 24** are using Datix, or similar, to record reported incidents of whistleblowing as set out in the NHSScotland Whistleblowing Policy.

Equality Impact Assessment (EQIA) assurance

NHS 24 confirm that EQIA's are complete in accordance with the implementation of relevant policies, strategies and services undertaken by the Board, in compliance with the Public Sector Equality Duty.

Retire and Return

Using the table below, please outline the number of staff and the grade at which they were re-appointed into the service via the Retire and Return provisions in the NHSScotland Retirement Policy from 1 Apr 2024 – 31 Mar 2025:

	Admin	AHPs	HC Sciences	M&D	N&M	Other Therapeutic	Senior Managers	Support Services	**Total**
Band 2									
Band 3									
Band 4									
Band 5						2			2
Band 6					1				1
Band 7					1				1
Band 8a									
Band 8b									
Band 8c									
Band 8d									
Band 9									
Associate Specialist									
Consultant									
Locum Consultant									
Specialty Doctor									
Specialist Doctor									
Total	0	0	0	0	2	2	0	0	4

Challenges

In the section below, please provide a summary of the top three challenges your Board faced in meeting the Staff Governance Standard this year. Please also outline how you approached these challenges, overcame any barriers, and how you will continue to mitigate any associated risks. These may be discussed in further detail at Board Annual Review.

(**900 words maximum**)

Reduced Working Week

Phase 1 (30-minute reduction) was implemented in 2024 with Phase 2 (final 1-hour reduction) scheduled for 1st April 2026.

NHS 24 has had to restructure rotas and contractual hour groupings (e.g. 29.19h, 28.80h) to accommodate the reduction, especially for part-time staff. This has introduced complexity in shift swaps, rota modelling, and manual interventions, particularly for frontline services.

It is not yet known what level of funding NHS 24 shall receive to offset the lost hours. The level of funding received will affect staffing levels that can be recruited to, impacting on service capacity. The reduction equates to 44 WTE. NHS 24 have submitted a funding request to the Scottish Government for monies to backfill the loss and demonstrate the anticipated impact on performance.

In preparing and planning a Short Life Working Group have been actively exploring several strategic approaches to mitigate the impact of these time reductions on the basis that no funding was to be received including:
- Workload distribution and prioritisation
- Lean process improvements
- Service transformation initiatives (e.g. patient flow, transforming roles)
- Attendance improvement plan

The strategic approaches outlined above are designed to ensure that NHS 24 can effectively manage the increased time reductions while maintaining high standards of service delivery to our patients. By reassessing workload distribution, implementing lean process improvements, leveraging technology, and redesigning roles, we can mitigate the impact and continue to deliver exceptional care to our patients.

Sickness Absence

NHS 24 continues to experience high absence rates, exceeding seasonal expectations and presenting a growing concern particularly in the Service Delivery Directorate. NHS Scotland has an absence target for all Boards of 4%. In the past 10 years, NHS 24 has not achieved this target. When benchmarked against similar organisations and contact centre environments the accepted absence figure is

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nearer the 5-10% bracket. NHS 24's Corporate Delivery Plan recognises the challenging environment within which NHS 24 operate and has an agreed target for 25/26 of 7%. At the end of March 2025, NHS 24's rolling absence figure was 8.89%. As of 30 September 2025, it was 9.37%.

NHS 24 can evidence a range of measures that reflect CIPD-recommended best practice—such as structured absence monitoring, early intervention through return-to-work interviews, wellbeing initiatives, and flexible working options. An attendance improvement plan is in place structured around four high-level themes: Culture & Engagement, which focuses on shifting organisational attitudes and embedding wellbeing messaging; Data, Communication & Reporting, which leverages performance and absence data for transparency and targeted interventions; Management Accountability, which formalises line manager responsibilities and review mechanisms; and Cross-Functional Collaboration, which ensures shared ownership across departments and Trade Union and Professional Bodies.

Flexible Working

In April 2024, changes introduced through the Employment Relations (Flexible Working) Act 2023 came into effect, significantly altering the statutory framework for flexible working. Key changes included:

- The right for all employees to request flexible working from day one of employment.
- The ability to submit multiple requests per year.
- A reduced statutory timeframe for responding to requests from three months to two months.

These changes have direct implications for NHS 24. Non-compliance with the revised timescales, regardless of the outcome of the request, may result in financial penalties and reputational risk. Prior to this legislative shift, NHS 24 was already experiencing challenges in meeting the previous three-month response window with responses often taking closer to 4 and often 6 months.

Feedback from staff experience groups and Regional Partnership Fora highlighted staff concerns around the flexible working process, including:
 A perception that requests were frequently declined without clear rationale.
- A lack of transparency and consistency in decision-making.
- A paper-heavy process that hindered reporting, governance, and oversight.
- These insights underscored the need for a more streamlined, transparent, and digitally enabled approach to flexible working that supports both compliance and positive staff experience.

In January 2025, a revised flexible working process was launched. The new model was designed to improve compliance, consistency, and user experience. Key features include:

- Panel Consistency: A dedicated panel now reviews all flexible working requests over a rolling three-month period, enabling greater consistency, improved decision-making, and enhanced panel expertise.
- Weekly Review Meetings: Requests are reviewed on a weekly basis, significantly reducing delays, and supporting compliance with the new two-month statutory timeframe.
- Digitised Application Process: New digital forms were developed to align with the Once for Scotland policy, replacing the previous paper-based system.
- Dashboard Visibility: A dashboard view has been introduced to track case progress and monitor compliance with response times, improving governance and oversight.
- Process Automation: Power Automate has been deployed to streamline workflows, reduce manual handling, and ensure timely notifications and escalations.
- Stakeholder Engagement: A series of engagement sessions have been delivered with managers and staff to raise awareness, build confidence in the new process, and gather feedback for continuous improvement.

Our turnaround is now on average 16 days with 50% of applications being approved and a further 20% offered a compromise.

Successes

Reflecting on the past year, please outline your Board's top three successes that demonstrate your commitment to the Staff Governance Standard. These may be discussed in further detail at Board Annual Review.

(900 words maximum)

Recruitment and Retention

In 2024/2025 NHS 24 delivered measurable improvements across key workforce indicators:
- Headcount increased from 2,125 to 2,204 (+79).
- Vacancy Factor dropped from 7.64% to 4.23% (↓3.41%).
- Rolling Turnover decreased from 19.13% to 14.97% (↓4.16%).
- Stability Index rose from 83.84% to 85.62% (↑2.78%).
- Ethnic Minority Recruitment increased from 6.93% to 7.44%, surpassing the 7% target.

These gains were supported by targeted interventions, including the launch of a new Hiring Manager Hub and enhanced vacancy management through Establishment Control, which delivered over £294k in savings.

A major success was the expansion of the Clinical Supervisor workforce. NHS 24 ended the year with 169.57 WTE Clinical Supervisors, with a further 10 heads (6.79 WTE) contracted to start in April, reaching 176.36 WTE—exceeding the target of 175. 109 nurses were onboarded during the year. This enabled full resourcing of the Ayrshire & Arran DTP pilot without impacting the wider 111 service.

To achieve these successes, we:
- Implemented a modern recruitment approach aligned to strategic priorities.
- Developed an Equalities Plan to attract a representative workforce and remove barriers to employment.
- Introduced values-based recruitment, extended induction programmes, and real-time coaching.
- Delivered open events, career fairs, and hybrid working pilots to support staff wellbeing and retention.
- advanced our workforce planning and succession efforts.
- Achieved Real Living Wage accreditation, signed the Armed Forces Covenant, and received the Bronze Defence Employer Recognition Scheme award.
- Developed an Anti-Racism Action Plan and progressed the Equality Mainstreaming Report.

NHS 24 has achieved a historic milestone in Clinical Supervisor recruitment, reaching and maintaining a full establishment of 185 WTE from August 2025—the first time the organisation has had a complete nursing complement. This success is attributed to a multi-pronged strategy that includes open and online events, career fayres, partnerships with employability organisations, and a 12-month extended corporate induction programme. The introduction of buddy systems and continuous CPD support has further strengthened onboarding and retention.

Targeted actions within the workforce plan have already led to significant improvements in retention of clinicians. Attrition remains below target overall at 13.00%. The local and national attrition groups continue to meet regularly with a specific focus on reducing Clinical Supervisor attrition which has seen a reduction of 4.3% this year.

Leadership development

The planned roll out of the Leadership Development Programme is now complete, which saw six cohorts of 'Leading for Impact' for senior leaders and twelve cohorts of 'Leading with Courage' delivered over an 18-month period. Full programme evaluation has been conducted, and results are extremely positive:
- 91% overall effectiveness score.
- Post course improvements noted in all thirty leadership competencies.
- Post course improvements noted in all 360-degree feedback competency areas.

- Qualitative feedback highlighted the value delegates found in the transferable learning and the opportunities to build cross directorate relationships.

Follow on focus groups are scheduled for autumn for further post course evaluation, and to support refinements for future cohorts.

These programmes are designed to build psychological safety, inclusive leadership, and decision-making confidence—all key drivers of positive iMatter feedback. The 2025 iMatter comparison report shows a marked improvement across all key indicators:
- Response Rate: Up from 76% to 82%
- Employee Engagement Index (EEI): Up from 77 to 79
- Action Planning: 95%, up from 92%
- Approachability of Direct Line Managers: Increased to 94
- Support for Health and Wellbeing: Up by 2 points
- Confidence in Line Managers: Up by 1 point

These gains are directly attributed to:
- Regular 1:1s
- Improved appraisal compliance
- Active participation in the Management Essentials Programme (MEP) and Leadership Development Programme (LDP)

Workforce Data and Digital Developments

The Workforce Data and Digital Workplan is designed to embed digital-first thinking and data-driven decision-making across the organisation. Spanning three years from October 2023 to September 2026, the workplan comprises 66 targeted actions aimed at streamlining operational processes, enhancing workforce analytics, and improving employee experience through automation and digital solutions. Year 1 saw the successful implementation of 23 initiatives. These projects have already delivered tangible benefits, including improved access to workforce data for managers, enhanced recruitment stability, and increased digital literacy across teams. Year 2 is now complete with a further 16 tasks completed.

The prioritisation of tasks is guided by a matrix evaluating urgency, scope, impact, and effort, ensuring resources are focused where they yield the greatest value. The plan is reviewed quarterly by the Digital Group, with progress tracked via a live Power BI dashboard that enables transparency and continuous improvement.

Examples of the work completed include:
- Automated processes for internal consultancy, retire/return, flexible working, stress risk assessments, and trade union activity.

- Dashboards for culture, wellbeing, attrition, absence, and establishment control.
- Hiring Manager Hub and automated feedback tools for candidates and managers.
- Digital induction tracker and enhanced case management systems.
- Flexible working dashboards were deployed for management.
- Productivity metrics (e.g. Average Handling Time) were integrated into manager dashboards.
- SysAid replaced People First for helpdesk operations.
- Automated processes were introduced for hiring manager questionnaires, exit interviews, TU facilities time, and Establishment Control reporting.

As a result, there is improved access to workforce data for managers.