

NHS 24

**Approved Minutes of the Meeting of the
NHS 24 Staff Governance Committee
held on Thursday 31 July 2025
at 10:00 am
Via Teams**

PRESENT

Dr Martin Cheyne – Chair
Mr John Gebbie – Director of Finance
Ms Louise Gordon – Head of People Services
Dr Jacqui Hepburn - Deputy Chief Executive and Director of Workforce
Ms Amina Khan – Non-Executive Director
Ms Fiona Macaulay – Head of ODLL
Ms Liz Mallinson – Non-Executive Director
Mr Fred McCosh – Union Representative
Ms Helen Meldrum – Head of Learning Transformation
Mr Jim Miller – Chief Executive
Ms Lisa Morton – Associate Head of Communications
Ms Dawn Orr – Associate Director of Nursing and Care
Ms Steph Phillips – Director of Transformation, Strategy and Planning and Performance
Mr Patrick Rafferty - Associate Director of Operations and Nursing
Ms Linda Robertson – Risk, Resilience and Planning Manager
Mr Alan Webb (Committee Chair) – Non-Executive Director
Ms Marnie Westwood – Head of Resourcing and Planning
Mr Kenny Woods – Employee Director

APOLOGIES

Ms Jo Edwards – Director of Service Delivery
Mr Martin Macgregor – Union Representative

IN ATTENDANCE

Ms Chantal Robinson – Secretariat
Mr Billy Togneri – Clinical Services Manager, North Centre
Ms Louise Graham – Senior Nurse Educator
Ms Rachael McGrory - Workforce Digital Transformation Lead

01. WELCOME, APOLOGIES AND INTRODUCTIONS

The Chair welcomed members present to the 8 May 2025 meeting of the Staff Governance Committee. Apologies noted as above.

NOTED

02. DECLARATIONS OF INTEREST

The Chair invited members to declare any interests in any of the items being discussed. There were no declarations made.

NOTED

03. MINUTES OF PREVIOUS MEETING OF 8 MAY 2025

The Staff Governance Committee considered the minute of the previous meeting held on Thursday 8 May 2025 [Paper No. Item 3]. The Committee were content to approve this as a complete and accurate record with the addition of noting the welcome to Ms Amina Khan, Non-Exec Director.

APPROVED

04. ROLLING ACTIONS LOG

The Staff Governance Committee considered the paper 'Rolling Actions Log' [Paper No. 4] and were content to accept the recommendation that 8 actions were complete. Accordingly, actions 387, 390, 391, 392, 394, 395, 396 and 397 was approved for closure.

Action 393 to remain on Action Log until 1 July 2026 meeting.

There were no other matters arising raised.

APPROVED

05. BUSINESS ITEMS

05.1 STAFF GOVERNANCE COMMITTEE WORKPLAN

The Committee considered the paper 'Staff Governance Committee Workplan 2025-26' [Paper no 5.1] presented by Mr Webb.

The Committee approved the updated Workplan.

APPROVED

ITEMS FOR ASSURANCE

6.1 STAFF GOVERNANCE RISK REGISTER

Ms Robertson presented the Risk Register and asked the Committee to review the risks, provide feedback prior to recommending onward submission to the NHS 24 Board meeting on 28 August 2025.

Ms Robertson provided the following update:

- There are currently fifteen staff governance risks in total, compared with fourteen reported to the previous meeting on 8 May 2025.
- One new risk has been identified and outlined in section 5.8.
- Zero risks have been closed.
- Two risks have reduced in score as outlined in section 5.10.
- Zero risks have increased in score.
- In line with the workplan, the Committee is presented annually with all staff governance risks at its August meeting, regardless of score.

The Committee thanked Ms Robertson for the update provided.

NOTED

6.2 SHIFT REVIEW EVALUATION REPORT

The Committee considered the paper 'Shift Review Evaluation Report' [paper no 6.2] presented by Mr Rafferty. Mr Rafferty advised that the Shift Review Evaluation Group had commissioned a final evaluation of the programme. The Committee noted the findings and recommendations.

The organisational change process had been reviewed that lessons learned would be taken forward.

Action – Paper to be circulated to Planning & Performance Committee. PR

NOTED

6.3 WORKFORCE QUARTERLY REPORT

The Committee considered the paper 'Workforce Quarterly Report' [paper no 6.3] presented by Dr Hepburn. Dr Hepburn advised the Committee members to note the workforce report in terms of progress made during quarter 1 (April – June 2025).

Dr Hepburn highlighted that the KPIs for each of the key strategic workforce objectives demonstrated the successes of the various workforce initiatives developed and embedded.

- We are currently over establishment for Call Handlers however this is to compensate for there being no core training during July/August to allow staff to be trained on the new system. Core training will pick up again in September when new staff will only be trained on the new system. Establishment control will ensure that through attrition and targeted recruitment we come in on budget/at establishment at the end of the financial year.
- The Clinical Supervisor establishment is at 180.01 WTE, with an additional 5.94 WTE through additional hours and overtime. By the end of July 2025, we forecast to reach the establishment target of 185 WTE.
- The overall compliance level for Essential Learning is sitting at 93% above the target of 90%.

- Cohort sixteen of the Management Essentials Programme completed in June 2025 with an overall effectiveness rating of 89% (target 85%). A further cohort is scheduled for autumn to ensure regular access for new managers.
- The People Services team are working productively with Service Delivery management teams now based at Cardonald following the move from Lumina to develop new and embedded existing practices.
- Management Training Sessions have been delivered nationally on a variety of topics including Bullying and Harassment, Attendance, Grievance, Capability, Occupational Health, Special Leave and Stress Risk Assessment Process.
- Phase 2 of the CC/CRM Training Plan for Mental Health Hub staff commenced on 15th July. Planning for Phase 3 Training of all remaining in scope staff is underway. DTP Training and Learning Project is working closely with Service Delivery, CRT, Estates and Communications.
- Year 2 Directorate Culture and Wellbeing Action Plans have been shared with all directorates for initial identification of local actions for the improvement of staff experience within each area.

NHS 24 Chair thanked all staff for the incredible achievements made during this Quarter. He recognised the significant work, success and outcomes that had been achieved.

NOTED

6.4 TRANSFORMING ROLES

The Committee considered the paper 'Transforming Roles' [paper no 6.4] presented by Dr Hepburn and Ms Westwood. Ms Westwood highlighted the following:

- The Transformation Roles workstream moved under the Workforce Directorate to ensure alignment with broader organisational change.
- The work will be progressed in line with the triumvirate approach between Medical, Nursing and Care and Service Delivery.
- A high-level roadmap proposes initial thoughts of what the next three years could look like in terms of what roles are in scope and when.
- Following approval of the high-level roadmap we will conduct wider stakeholder engagement and develop working groups to progress the various strands of work.

Ms Westwood advised the following would take place to ensure clarity of next steps:

- meet with key stakeholders individually to get their initial thoughts on the above and what their vision/expectations are.
- run a session at the 'future state' service pathways workshop on 2nd July 2025.
- have regular updates in Team Talk.
- develop a project plan for phase 1 of transforming roles for what work will be completed within the first 12 months.

The Committee acknowledged and endorsed the paper for assurance. Ms Khan thanked the Workforce Team for the inclusion of significant Equality & Diversity information to assist in the Committee's understanding of the Equality & Diversity impact. Ms Khan also

highlighted this was a very considered paper and the Workforce Team should be ‘best exemplar’.

Action: Update to be included going forward within the Workforce Report. MW

6.5 WORKFORCE STRATEGY AND PLAN OCTOBER 2025-MARCH 2026

The Committee considered the paper ‘Workforce Strategy and Plan October 25-March 26’ [paper no 6.5] presented by Dr Hepburn and Ms Westwood. Ms Westwood advised the Committee of the following:

- The current Workforce Strategy was developed and in delivery from October 2022 – September 2025 in line with Scottish Government requirements to ensure all boards complied a 3-year Workforce Plan aligned to the National Health & Social Care Workforce Strategy.
- The original plan and timescale for development and launch of a new Workforce Strategy was planned for 2025 however changes in reporting requirements from Scottish Government via a Directors letter issued to all Boards on 17 December 2024 (which supersedes DL 2022 (09) “Three Year Workforce Plans”) indicated that a “light touch” approach would be taken requiring all Boards to respond to 9 questions and no requirement to submit a longer-term plan. A response to Scottish Government was submitted on 17 March 2025.
- The current Workforce Strategy which runs until October 2025 will be extended to March 2026, in line with the corporate planning and financial planning. Additional actions have been drafted and added to extend the Strategy to 31 March 2026.
- The future Workforce Strategy will be developed and approved during 2025 and approved through Governance cycle for launch on 1 April 2026.

NOTED

6.6 HEALTH AND SAFETY QUARTERLY REPORT Q1 April – June 2025

The Committee considered the paper ‘Health & Safety Quarterly’ [Paper 6.6] presented by Dr Hepburn. The Committee members noted the content of the report, and progress made during Q1.

The Committee noted the update.

NOTED

6.7 WORKFORCE SUSTAINABILITY

The Committee considered the paper ‘Workforce Sustainability’ [Paper 6.7] presented by Dr Hepburn and Ms. Gordon. Ms. Gordon highlighted that as NHS 24 enters a new era of development for the Workforce Strategy 2026–2029, the team actively scoped the areas that would shape the future direction. These include:

- identifying the key themes that will underpin a sustainable, agile, and people-centered workforce.
- embedding sustainability more deeply into strategic planning, enhancing digital capability across all roles, and designing flexible, future-ready job structures that support both service delivery and staff well-being.
- exploring how to strengthen partnerships, optimise resource use, and ensure our people policies reflect fairness, inclusion, and resilience. These themes will guide the evolution of our strategy to ensure NHS 24 remains responsive to the needs of our workforce and the communities served.

NOTED

6.8 FLEXIBLE WORKING UPDATE

The Committee considered the paper 'Flexible Working Update' [Paper 6.8] presented by Dr Hepburn and Ms. Gordon. Ms. Gordon highlighted the following:

- Achievements reviewed and efforts of the Workforce team in redesigning the flexible working process in conjunction with Service Delivery and the Trade Union and Professional Bodies.
- Considering the emerging risks in relation to capacity and the Equality Act (2010).
- Increase requests for hybrid working.
- The education and upskill of frontline managers in regard to service delivery demands and requirements.

The Committee noted the changes and improvements led by the Workforce Directorate to improve the flexible working process for all staff across NHS 24 and that going forward strategic oversight of the issues would be provided through scrutiny by Strategic Workforce Planning Group (SWFPLG).

Action: Lessons Learned Sessions to take place. LG

6.9 REDUCED WORKING WEEK UPDATE

The Committee considered the paper 'Reduced Working Week Update' [Paper 6.9] presented by Dr Hepburn and Ms. Gordon. Ms. Gordon advised the Committee of the work currently underway to identify the full cost options available to NHS 24, once received this information would be presented at the SLWG in July 2025. The Committee noted the actions the SLWG aim to take forward:

- A communications plan is to be developed once the decision regarding the implementation approach has been finalised.
- Continued engagement with members of Management Steering Group (MSG) to gain national insights on approach and issues.
- Submit an implementation plan through appropriate Governance channels including Area Partnership Forum for onward submission to Scottish Government in October 2025.
- Continuation with Service Transformation activity to support improvements in performance.

Dr Hepburn advised NHS 24 continued to work closely with other Boards via the NHS HRD community and highlighted that both Mr Gebbie and Ms Gordon attended the subgroup of the MSG which looked at additional work and guidance to ensure NHS 24 remained well informed and engaged.

NOTED

6.10 LEADERSHIP DEVELOPMENT END OF PROGRAMME REPORT

The Committee considered the paper 'Leadership Development End of Programme Report' [Paper 6.10] presented by Dr Hepburn and Ms. Macaulay.

Ms. Macaulay provided a comprehensive update in relation to the outcome of the Leadership Development Programme to date and assured the Committee of the positive impact the Programme has had.

- KPIs have successfully been achieved, with 195 (90%) of in-scope leaders completing the relevant programme within that timescale, and a 91% overall effectiveness score.
- The programme evaluated highly, with data showing an improvement in all thirty leadership competencies as well as an improvement in all 360-degree feedback competency areas following course completion.

The Committee Chair thanked the ODLL Team for the efforts involved in getting the programme to this phase. The Committee were extremely encouraged by the positive feedback received from participants, which highlighted how empowered staff felt at the end of the programme, and the feedback provided by members of the EMT who had observed the groups at conclusion.

NOTED

6.11 IDENTIFICATION OF BUSINESS-CRITICAL ROLES

The Committee considered the paper 'Identification of Business-Critical Roles [Paper 6.11] presented by Dr Hepburn and Ms Macaulay. The Committee noted NHS 24 carried out Talent Identification and Succession Planning on an annual basis. The identification of NHS 24 deemed as 'business critical' would enhance Succession Planning in priority areas and support resilience and business continuity work.

Ms. Macaulay highlighted the following key steps would take place:

- Stakeholder Engagement sessions with each Director to facilitate scoring of directorate roles against indicators would be scheduled.
- All identified business critical roles per directorate would be collated and reviewed, providing organisational oversight. The roles would then be presented to the EMT for further review.
- Enhanced planning for business-critical roles within the wider context of Talent Identification and Succession Planning activity in Q3 to take place.

The Committee noted the update.

NOTED

6.12 BURSARY REVIEW

The Committee considered the paper 'Bursary Review' [Paper No. 6.12], presented by Dr Hepburn.

Dr Hepburn advised the Staff Governance Committee of the recommendations listed below:

- Maintain Bursary Award funding at 75% of course costs, capped at £1,500.
- Include a category to capture previous funding awarded to applicant in digital application process.
- Support more targeted comms as a method to encourage future Bursary applications from directorates which have previously been underrepresented.
- Retire the role of the Bursary Panel, as no longer necessary.
- Include Head of Department/Service approval to digital application process.
- Clarify organisational position on study leave within Bursary policy and guidance.
- Implement criteria to differentiate between learning required for 'competence in role' and Bursary applications voluntarily pursued for personal development.
- Capture all external courses and developments attended, including those which are free to attend or funded through an alternative budget.
- Issue a digital evaluation form to all those undertaking a Bursary Award or External Learning and Development Event at the conclusion of the learning.
- Issue a digital reminder, triggered to learner and line manager three months post completion, to cascade their learning amongst peers/teams.

NOTED

6.13 APPRAISAL 2025-26 APPROACH

The Committee considered the paper 'Appraisal 2025-26 Approach' [Paper No. 6.13] presented by Dr Hepburn and noted the 2025 Appraisal timelines. The Committee also noted:

- Significant progress was made on Appraisal completion in 2024/25, reaching 80% completion, exceeding the Year 2 KPI target of 75%.
- The timeline for the 2025/26 Appraisal year is proposed, to harness momentum, protect progress made and support NHS 24 staff through this year of transformation.

The Committee thanked Dr Hepburn for the comprehensive update.

NOTED

6.14 IMATTER 2025-26 TIMELINES

The Committee considered the paper 'iMatter 2025-26 Timelines' [Paper no 6.14] presented by Dr Hepburn.

- The iMatter cycle for 2024 is now complete.
- The 2024 iMatter results represent the strongest performance NHS 24 has achieved since the programme's introduction in 2017.
- NHS 24 has performed well nationally in 2024, as the highest scoring national patient facing board in multiple elements.
- The iMatter 2025 cycle begins in May 2025.

Dr Hepburn thanked the ODLL team involved in achieving a successful result. The Committee noted the update.

NOTED

6.15 DTP TRAINING UPDATE

The Committee considered the paper 'DTP Training Update' [Paper No. 6.15] presented by Dr Hepburn and Ms Meldrum. Ms Meldrum highlighted the following:

- Phase 1 findings show that 100% of designated staff had been signed off as competent to use the new CC/CRM and 97.7% rated themselves as confident in using it.
- An overview of the training for Phases 2 and 3 has been provided to ensure full alignment with the broader DTP Programme timelines.

The Committee noted that following the meeting, the training implementation planning would continue with suppliers and in conjunction with the other projects within the programme, particularly Phased Implementation Approach in the immediate term. Phase 2 Mental Health Hub and Phase 3 wider rollout of all remaining staff planning was underway. Approvals would be sought as required through the appropriate governance channels per the programme schedule.

Dr Hepburn advised feedback received from stakeholders recommended NHS 24 as exemplary and had asked if NHS 24 would consider speaking to a range of audiences in the future.

NOTED

6.16 COMMUNICATIONS DELIVERY PLAN Q4 UPDATE

The Committee considered the paper 'Communications Delivery Plan Q4 Update' [Paper No. 6.16] presented by Ms Morton. The Committee noted the range of internal activity delivered during the last quarter to support staff experience:

- Internal communications team continue to be proactively involved across all Digital Transformation Programme projects and provide fortnightly updates via Team Talk, Intranet and Wallboards, as well as a monthly update in to Staff Experience Groups. Key points to note:

- Following dissemination of our Staff Experience Group survey initially with Cardonald and Lumina to ascertain baseline information, the survey was rolled out across all other centres. Evaluation with centre-specific recommendations nearing completion.
- Key messaging to support staff understanding of their corporate responsibilities regarding the use of AI tools developed and disseminated to all staff in advance of the NHS roll-out of Co-Pilot Chat.
- Staff feedback on patient and partner knowledge and understanding of our services supported the development of the Connecting Health Programme. Activity focuses on educating primary care professionals on our services, and how and when to signpost their patients on to them.
- iMatter: close collaboration with Workforce to promote organisational change and improvements through *Feedback Into Action (You Said, We Did)* articles to re-enforce and promote importance of staff voice.
- Two Patient Safety Leadership sessions were held in Aberdeen and Cardonald. Members of staff were able to meet with our EMT and non-executive directors, to ask questions on potential patient safety issues and to discuss topics meaningful to them. These sessions are followed up with an all-centre email ensuring all staff have the opportunity to hear about topics discussed and to submit any additional questions.

The Committee thanked Ms Morton for the comprehensive update.

NOTED

6.17 APF FORUM AND WORKPLAN UPDATE

The Committee considered the paper 'APF Forum and Workplan Update' [Paper No. 6.17] presented by Mr Woods, who highlighted the following:

The Committee is asked to note the highlights of discussion and development taking place within the forum namely:

- Workforce strategy update for 2026-2029.
- Shift Review Evaluation Paper.
- Digital Transformation Programme (DTP) portfolio.

The Committee noted the update.

NOTED

ITEMS FOR AWARENESS

7.1 SCOTTISH GOVERNMENT KEY PUBLICATIONS

The Committee considered the paper 'Scottish Government Key Publications [Paper no 7.1] presented by Dr Hepburn.

The Committee noted the recent correspondence received from Scottish Government in relation to relevant PCS/DL Circulars.

NOTED

ITEMS FOR NOTING

8.1 HEALTHCARE STAFFING PROGRAMME

The Committee considered the paper 'Health and Care (Staffing) (Scotland) Act 2019 [Paper No. 8.1] presented by Dr Orr. The Committee noted:

- The ongoing work to ensure monitoring and compliance with the legislative requirements of the Health and Care (Staffing) (Scotland) Act 2019.
- The improvement actions in train that will strengthen systems and processes further and ensure progress towards substantial assurance for all relevant duties.
- The requirement to submit quarterly reports to Healthcare Improvement Scotland and to receive feedback from them regarding any further improvement actions.

NOTED

8.2 WHISTLEBLOWING STANDARDS

The Committee considered the paper 'Whistleblowing Standards' [Paper No. 8.2] presented by Mr Rafferty. The Committee noted: The Whistleblowing Group continued to meet monthly. Activities during the last quarter included:

- Objectives agreed for 2025/26 period.
- Initial discussions regarding communication plan for Speak Up week.

NOTED

8.3 STAFF TRAINING AND DEVELOPMENT AUDIT

The Committee noted the Audit Report which had been provided by NHS 24 Internal Auditors, Azets who highlighted the following Good Practice examples:

- There are comprehensive documents that outline the mandatory training for each specific role, category, and specialism, helping to ensure that it is clear what training each member of staff is required to complete.
- There are robust controls in place to identify and prioritise employees' individual training needs, through the annual appraisal process and in-year monthly catch ups between managers and employees to discuss training and development needs. As at December 2024, all eight directorate areas had exceeded the 75% completion target and had achieved 80% completion at the end of the appraisal window.

- Each manager has access to their own "Manager Dashboard," which allows them to view whether their direct line reports have completed all of their required training on a monthly basis. Within the dashboards, there is clear and regular reporting on training compliance for each module, providing comprehensive details that enable the appropriate groups to scrutinise the information presented.
- Cumulative reporting on completion rates of both Essential Learning and Personal Development Plan (PDP) conversations is considered at meetings of the Staff Governance Committee through the quarterly Workforce Report. This report is also considered by the Executive Management Team before being presented to the Staff Governance Committee, and onwards to the Board thereafter.
- Employees are asked to provide feedback upon completion of training modules by completing a questionnaire. This allows feedback to be collated across the organisation and used to inform development of new training courses.

NOTED

8.4 ANY OTHER BUSINESS

There being no further business the meeting closed.

DATE OF NEXT SCHEDULED MEETING

10:00am, Monday 3 November 2025

The meeting concluded at 12:11.