

## **NHS 24**

**Minutes of the Meeting of the  
NHS 24 Board  
held on Thursday 24 April 2025 at 10:30am  
The Board Room, NHS 24, Lumina Building,  
40 Ainslie Road, Hillington, G52 4RU**

### **PRESENT**

Dr Martin Cheyne (in the Chair)

Mr Alan Webb  
Ms Carol Gillie  
Ms Anne Gibson  
Ms Liz Mallinson  
Mr David Howe  
Ms Amina Khan  
Ms Abeer Macintyre  
Mr John Gebbie  
Mr Jim Miller  
Mr Andrew Moore  
Mr Kenny Woods  
Dr Ron Cook

### **IN ATTENDANCE**

Dr Jacqui Hepburn  
Ms Steph Phillips  
Ms Joanne Edwards  
Ms Ann-Marie Gallacher  
Ms Suzy Aspley  
Mrs Geraldine Mathew  
Mrs Paula Matchett (Minute)

### **01. WELCOME, INTRODUCTIONS and APOLOGIES**

The Chair welcomed everyone to the April Board Meeting.

Apologies were intimated on behalf of Mr Togneri.

The Chair welcomed Mr Bob Benson, Non-Executive Director from NHS Tayside, who was participating in the Aspiring Chairs Programme, in attendance to observe.

### **NOTED**

### **02. DECLARATIONS OF INTEREST**

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

The Chair reminded all Board members to ensure that any changes to their Register of Interest be notified to the Board Secretary within one month of the change occurring.

### **NOTED**

**NHS 24 OFFICIAL  
DRAFT – TO BE RATIFIED**

**03. MINUTES OF PREVIOUS MEETING OF 27 FEBRUARY 2025**

The Committee considered the minute of the previous meeting held on Thursday 27 February 2025 [Paper No. Item 03] and were content to approve the minute as a complete and accurate record.

**APPROVED**

**04. MATTERS ARISING**

**a) Rolling Actions Log**

The Board considered the Rolling Actions Log [Paper No. Item 04a]. Members were invited to consider and approve the recommended closure of three actions on the Rolling Actions Log.

The Board was content to approve the recommendation that three actions were closed and noted that three actions remained ongoing.

**APPROVED**

**05. NOTES ON ANY OTHER BUSINESS**

Members had been invited to raise any other matters not otherwise included on the agenda by the Board Secretary, prior to the meeting. There were no other matters raised.

**APPROVED**

**06. CHAIR'S REPORT**

The Chair had provided an overview of activities since the previous meeting on 27 February 2025, and these were included as an appendix for information. The Chair welcomed questions on the items included.

The Chair advised he had recently attended the QI24 FUNdamentals Cohort 5 Graduation and commented on what an excellent event it was, noting how uplifting it was to see staff celebrating achievement.

The Board was content to note the Chair's Report, and the activities undertaken since the last meeting.

**NOTED**

**07. EXECUTIVE REPORT TO BOARD**

The Board considered the paper 'Executive Report to the Board' [Paper No. Item 07] presented by Mr Miller, Chief Executive.

Mr Miller provided an overview of the Executive Report and highlighted various key points.

Mr Miller reported that recent visits to NHS 24 from the Ministry for Healthcare Transformation, Singapore and the Innovation for Health, Estonia had been highly successful, with both visitors and staff finding it beneficial. He noted that these visits signified a step towards enhancing global healthcare systems and adopting innovative approaches.

Board members were informed that the newly established Operational Performance Board met for the first time in March 2025. Chaired by Ms Steph Phillips Director of Transformation, Strategy, Planning and Performance, the group would focus on improving the Key Performance Indicators (KPIs) across the 111 service. A detailed workplan was being developed to provide assurance on the impact of improvement initiatives on performance.

Mr Miller also updated members on the two-year pay deal negotiations which remained ongoing with the Trade Unions.

## NHS 24 OFFICIAL DRAFT – TO BE RATIFIED

The Chair thanked Mr Miller for the report and excellent work carried out by all, and invited comments and questions from members.

In response to a question regarding funding for the pay deal, Mr Miller noted that Scottish Government have confirmed year 1 would be fully funded.

A question was raised regarding Phase 2 of the Advanced Nurse Practitioner (ANP) Video Consultation Test of Change (TOC). Dr Cook advised a full evaluation report for Phase 1 was now complete, and as a result of this areas for consideration included clinical key words and reduction of video call handling times. Ms Edwards advised that from 11 May, NHS 24 would pilot prescribing medication during consultations, supporting a timelier and more effective patient journey.

Discussion took place about the QI24 FUNDamentals Graduation and the support available to participants after the programme was complete. Ms Edwards noted that 2 members of Cohort 5 have now joined the Patient Flow Group, where they were encouraged to contribute their insights and ideas.

Board members congratulated colleagues on a successful recruitment drive, which has resulted in the organisation reaching full capacity for Frontline staff. The Chair recognised this was a significant achievement.

Mr Miller informed members of a temporary pause in the planned recruitment of Band 5 nurses in May 2025. Board members would be updated when the pause has been lifted.

A further discussion took place about NHS 24's recent recognition with a Bronze Award from the Defence Employer Recognition Scheme. Board members were advised this award acknowledged support for serving and former members of the armed forces and their families. It was also noted that NHS 24 offered opportunities to cadets and actively promoted related services, with armed forces personnel now included within the workforce.

The Board was content to note the Executive Report.

### **NOTED**

**08.**

#### **08.1 PATIENT STORIES**

Mr Moore, Director of Nursing & Care, shared details of a recent compliment received from a patient who had contacted the 111 service. The call was initially handled by call handler Karen, who then referred the patient to Nurse Clinician Anne. Anne advised the patient that their symptoms could indicate a collapsed lung or a clot on their lung and recommended that they go straight to A&E.

Following a series of tests and scans it was confirmed that the patient had multiple clots in both lungs and their chest. The patient expressed deep gratitude, stating that without Anne's clinical judgement and timely advice, the outcome could have been significantly different. The patient thanked both Karen and Anne for their care and support.

Mr Moore continued by providing an overview of a complaint received in relation to a call into the 111 service. The patient had initially called NHS 24 with persistent abdominal pain on their left side. The patient had attended A&E in person and was advised of a 3 hour wait and were redirected to NHS 24. During the call, the patient was directed to the Primary Care Out of Hours Service and was advised to consult their own GP the following day. The patient attended GP the following morning and a routine X-ray was arranged. However, their symptoms worsened overnight resulting in being unable to move. The patient called NHS 24 again with an update to their symptoms and was then referred to Primary Care Out of Hours Service again. The patient was subsequently admitted to hospital with sepsis and required a period of time in intensive care.

Following the complaint, all calls made by the patient were reviewed. It was concluded that the outcome of the first call was clinically appropriate. However, it was acknowledged that the second call should have resulted in a higher acuity response, given the severity of the patient's symptoms and the level of pain exhibited by the patient.

## NHS 24 OFFICIAL DRAFT – TO BE RATIFIED

A full explanation and apology was provided to the patient and learning points have been identified for the staff involved. This case has been used as a case study to support wider learning, particularly regarding the clinical assessment of return callers and requirement to identify clinical 'red flags' promptly.

The Chair thanked Mr Moore for the update and on behalf of the Board, extended thanks to the individuals and their families for sharing their stories and experiences, as well as to the staff involved.

### **NOTED**

**09.**

#### **09.1 CORPORATE DELIVERY PLAN UPDATE 2024/25**

The Board considered the paper 'Corporate Delivery Plan Update' [Paper No. Item 09.1] presented by Ms Phillips, Director of Transformation Strategy, Planning & Performance. The Board was asked to note the year-end status of the current 2024/25 Corporate Delivery Plan as part of the extant 2024-27 Three Year Corporate Delivery Plan. Ms Phillips noted that the paper had been presented to the Planning & Performance Committee at its meeting on 10 February.

Ms Phillips outlined the key points and provided an update on the progress made against the actions set out for the current year. She highlighted that several actions from the 2024/25 plan would continue into 2025/26. She also noted that NHS 24 awaited formal approval from Scottish Government.

The Chair thanked Ms Phillips for the update and invited comments and questions from members.

Ms Phillips went on to highlight progress within the digital mental health platform, including the Surviving Suicidal Thoughts and Mind to Mind Service where new digital content had been made available.

A discussion took place regarding the ongoing collaboration with SAS and NHS Lanarkshire. Board members enquired whether a similar model could be adopted with other health boards in the future. Dr Cook confirmed that this was anticipated, noting that discussions were currently underway with NHS Highland to explore their remote solutions for their Highland Hub.

Board members were assured that NHS 24 were making steady progress and were on track, in line with expectations at this stage of the plan. Ms Phillips also confirmed that the plan was regularly reviewed at Planning and Performance Committee.

Ms Phillips advised members that NHS 24 were managing transition via STP & DTP. New delivery models have been implemented and new ways of working including clinical staff working from home, transforming roles and reviewing skillsets.

The Board was content to note the status and overview of the Corporate Delivery Plan Update.

### **NOTED**

#### **09.2 FINANCE PLAN 2025/26**

The Board considered the paper 'Finance Plan 2025/26' [Paper No. Item 09.2] presented by Mr Gebbie, Director of Finance. Board members were asked to formally approve the 2025/26 Finance Plan.

Mr Gebbie noted that the plan had been presented to members at the Board Workshop in January, followed by the Board Reserved Meeting in February, prior to the final draft which was submitted to Scottish Government in March. He highlighted that the plan was subject to all funding allocation being received and confirmed that all associated risks were captured within the plan.

Mr Gebbie also advised that all staff located on floors 1 and 2 of the Lumina Building would be relocating w/c 28 April, this would allow other works within these areas to be completed before contract ending in September.

The Chair thanked Mr Gebbie for the update and invited comments and questions from members.

**NHS 24 OFFICIAL  
DRAFT – TO BE RATIFIED**

A discussion took place about inflation, during which members were assured that 3% had been built into the plan for non-pay spend, and that there would be no impact in the current financial year, although consideration has been given to future years.

Board members thanked Mr Gebbie and the Finance Team for their report. It was agreed that Audit and Risk Committee would continue to be kept informed in respect of any risks associated with the plan.

In summary, the Board formally approved the 3 Year Financial Plan 2024/25-27

**ACTION: Mr Gebbie**

**APPROVED**

**10.**

**10.1 CORPORATE PERFORMANCE REPORT**

The Board considered the paper 'Corporate Performance Report' [Paper No. Item 10.1] presented by Ms Phillips, Director of Transformation Strategy, Planning & Performance. The paper was presented to Board to provide assurance of the quality and performance of services provided for the period ended 31 March 2025 and to set the context for more detailed discussion on current performance.

Ms Phillips informed members that NHS 24 were currently in a stable position in terms of performance, supported by the recent appointment of a new clinical co-hort. The performance data reported over the Easter period provided clear evidence of stability.

The Chair thanked Ms Phillips for the update and invited comments and questions from members.

Members commended staff for their efforts and the positive performance results achieved over Easter.

Easter planning had been a success, and targets were met due to a variety of reasons including all new staff being fully trained on time, a reduction in absence rates compared to 2024 and an increased number of clinical staff available to support and manage calls. A review would be undertaken to identify any additional factors that contributed to this improvement, to support future planning and enhance the patient experience.

Ms Edwards also stated that she was on site over the Easter weekend and observed a calm and well managed environment.

All new starts since March would begin their training ensuring they were fully trained by the summer. The ongoing recruitment was enabling NHS 24 to employ staff with a diverse range of knowledge, skills and backgrounds which in turn helped to upskill the workforce.

Board members commented that it was helpful to see the alignment of all plans and the connection and praised NHS 24 on their efforts.

In summary, the Board was content to note the report and were assured by the information provided.

**NOTED**

**10.2 YEAR END FINANCE UPDATE 24/25**

Mr Gebbie, Director of Finance provided a verbal update on the year end finance position. Mr Gebbie highlighted that the final accounts for 2024/25 were currently being prepared and audited, and draft figures had been submitted to Scottish Government. It was anticipated that the organisation would meet all its financial targets.

The Chair thanked Mr Gebbie for the update and members commended Mr Gebbie, the Finance Team, and all staff for the work carried out to prepare the financial reports for the year end.

**NOTED**

**11.**

**11.1 HEALTH AND CARE STAFFING ANNUAL REPORT**

The Board considered the paper 'Health and Care Staffing Annual Report' [Paper No. Item 11.1] presented by Mr Moore, Director of Nursing & Care. The Board was asked to approve the first annual report to Scottish Government and publication on the NHS 24 website by 30 April 2025. Board members were also asked to note the ongoing work to ensure monitoring and compliance with the legislative requirements of the Health and Care (Staffing) (Scotland) Act 2019. Additionally, they were informed of the improvement actions that have been implemented to strengthen systems and process further, ensuring continued progress towards demonstrating substantial assurance for all relevant duties.

Mr Moore informed members that the report was reviewed quarterly by both Clinical Governance Committee and Staff Governance Committee, as well as Health Improvement Scotland (HIS). He also highlighted that ongoing collaboration with HIS ensured testing of quality care and provided assistance in managing adverse events.

The Chair thanked Mr Moore for the update and invited comments and questions from members.

Board members thanked and commended Mr Moore and his team for their hard work, progress made to date and quick turnaround on responding to suggested improvement areas.

In summary, the Board was content to approve submission of the Health and Care Staffing Annual Report to Scottish Government.

**APPROVED**

**10**

**11.2 HEALTH BOARD COLLABORATION AND LEADERSHIP**

The Board considered the paper 'Health Board Collaboration and Leadership' [Paper No. Item 11.2] presented by Mr Miller, Chief Executive Officer. The Board was asked to consider this paper that sets the context for renewal and reform following the First Minister's statement on 27 January 2025; briefing NHS Boards on the new governance arrangements with the establishment of the NHS Scotland Executive Group and wider efforts to support a more collaborative ethos in NHS Scotland; and described the need for all NHS Boards to ensure a systematic approach to balancing local delivery with the need to contribute to meet the needs of larger populations – beyond their geographical boundaries – in the delivery of planned care.

Mr Miller advised this paper was presented to Executive Management Team on 15 April prior to presentation to Board.

Board members were asked to note that there was a renewed approach to population planning across NHS Scotland following DL(2024)31.

Mr Miller advised there was a systematic approach to balancing local delivery with the need to contribute to meet the needs of larger populations beyond their geographical boundaries in the delivery of planned care. The DL emphasised the need for service planning to align with the population size and be collaborative. It highlighted a significant shift in planning, organising, delivery and potential funding of services. On 7 February, Boards received a letter from the Director General Health and Social Care and Chief Executive of NHS Scotland. This letter reaffirmed the principles set out in DL (2024)31 with an expectation for increased collaboration between NHS Boards to help improve the health and wellbeing of the citizens and communities of Scotland.

The Chair thanked Mr Miller for the update and invited comments and questions from members.

In response to a question about potential changes to governance processes and terms of reference, Mr Miller assured members that this was not necessary at this stage.

## NHS 24 OFFICIAL DRAFT – TO BE RATIFIED

The Chair suggested that it would be beneficial for the Integrated Governance Committee to review the brief at its next meeting. Furthermore, Mr Miller suggested that, going forward, the Executive Report to the Board, would provide a blend of both operational delivery updates and a system level overview.

Board members were advised that no further DL guidance has been received recently.

Ms Phillips advised there would be an opportunity for further discussion and review of the 3 products at the Board Workshop session in September.

In summary, the Board were content to note the update.

**ACTION:** Ms Geraldine Mathew

### **NOTED**

12.

#### **12.1 REGISTER OF INTERESTS UPDATE**

The Board considered the paper 'Register of Interests Update 2024' [Paper No. Item 12.1] presented by Mr Gebbie, Director of Finance. The paper provided an overview of the Register of Interests declared by Board members, EMT and Senior Managers within the organisation.

The Chair reminded all Board members to update this throughout the year via the Board Secretary and highlighted that a yearly review was undertaken in March.

In summary, the Board were content to note the report and were assured by the information provided.

### **NOTED**

#### **12.2 GIFTS AND HOSPITALITY UPDATE**

The Board considered the paper 'Gifts and Hospitality Register Update 2025' [Paper No. Item 12.2] presented by Mr Gebbie, Director of Finance. The paper provided an overview of the Gifts and Hospitality registered by Board members, Executive Management Team, and NHS 24 staff since April 2024 to March 2025. An extract from the Gifts and Hospitality Register was presented to the Audit and Risk Committee as part of the Corporate Governance Activity Report on a quarterly basis, with the full Gifts and Hospitality Register presented to the Board in April of each year.

The Chair reminded all Board members to ensure that all offers of gifts and hospitality, whether these were accepted or declined, were notified to the Board Secretary promptly.

In summary, the Board was content to note the report and were assured by the information provided.

### **NOTED**

#### **12.3 BOARD AND COMMITTEE COMPOSITION UPDATE**

The Board considered the paper 'Board and Committee Composition Update' [Paper No. Item 12.3] presented by Mr Gebbie, Director of Finance. The Board was asked to approve the recommended amendments to the Board and Committee composition. Mr Gebbie highlighted changes within the update including that Ms Gillie would move from Staff Governance Committee to Planning and Performance Committee and Ms Khan would move from Planning and Performance Committee to Staff Governance Committee. In addition, Ms Macintyre would step down from Audit & Risk Committee.

The Chair thanked Mr Gebbie for the update. There were no comments or questions raised.

In summary, the Board was content to approve the Board and Committee Composition update and the changes to composition outlined within the report.

**APPROVED**

13.

**13.1 ANY OTHER COMPETENT BUSINESS**

The Chair invited members to raise any other competent business.

In response to a question regarding recruitment of the Director of Nursing and Care post following the announcement of Mr Moore's retirement, Mr Miller advised that shortlisting had been completed, and interviews would take place on 01 May 2025.

**NOTED**

**DATE OF NEXT SCHEDULED MEETING**

Thursday 19 June 2025, 10.00am

The meeting concluded at 11:47am