

NHS 24

**Minutes of the Meeting of the
NHS 24 Staff Governance Committee
held on Tuesday 3 February 2026
at 10:00 am
Via Teams**

PRESENT

Mrs Anne Gibson – Committee Chair
Dr Martin Cheyne – Board Chair
Ms Suzy Aspley – Chief Communications Officer
Ms Joanne Edwards – Director of Service Delivery
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
Ms Geraldine Mathew – Board Secretary
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 – Director of Nursing & Care
Ms Linda Robertson – Risk, Resilience and Planning Manager
Ms Marnie Westwood – Associate Director of Workforce
Mr Kenny Woods – Employee Director

APOLOGIES

Mr Fred McCosh – Union Representative

IN ATTENDANCE

Ms Chantal Robinson – Secretariat
Ms Debbie Franch – Organisational Development & Learning Manager
Ms Beverley Walker - Organisational Development, Leadership and Learning Advisor

01. WELCOME, APOLOGIES AND INTRODUCTIONS

The Chair welcomed members present to the 3 February 2026 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 3 NOVEMBER 2025

The Staff Governance Committee considered the minute of the previous meeting held on Thursday 3 November 2025 [Paper No. Item 3]. The Committee were content to approve this as a complete and accurate record.

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 7 actions were complete.

Accordingly, actions 401, 403, 404, 405, 406, 407 and 408 were approved for closure. Action 393 to remain on Action Log until 1 July 2026 meeting.

There were no other matters arising raised.

APPROVED

05. ITEMS FOR ENDORSEMENT

05.1 WORKFORCE STRATEGY 2026 – 2029

The Committee considered the paper 'Workforce Strategy 2026-2029 [Paper No 5.1] presented by Ms Westwood. The Committee reviewed version 3 of the Powered by People Strategy 2026-2029, which incorporated extensive stakeholder feedback and aligns with national and corporate priorities. The strategy aimed to optimise workforce planning, promote sustainable inclusion, and evolve skills to meet future healthcare demands. Consultation and governance processes are ongoing, with final approval expected in February 2026 and publication planned for April 2026. Ms Westwood highlighted the following:

- **Strategy development and consultation:** The strategy has undergone multiple consultation phases including staff surveys, Board and Executive Management Team input, and external stakeholder feedback, resulting in a refined version 3 with tracked changes and updated action plans.
- **Alignment with national and corporate plans:** The strategy aligns with the National Workforce Strategy for Health and Social Care, NHS Scotland Recovery Plan, NHS 24 Corporate Strategy, and Corporate Delivery Plan activities focused on workforce sustainability, leadership, inclusion, and equality duties.
- **Staff engagement insights:** Staff broadly support the strategy's direction, emphasising the need for practical actions on accessibility, flexibility, skills

development, wellbeing, and meaningful engagement, with a desire for visible progress and voice in improvements.

- **Key thematic feedback - Workforce Optimisation:** Staff request accessible technology, ongoing skills development, better promotion of wellbeing services, more involvement in role design, clearer career pathways, and flexible rotas.
- **Key thematic feedback - Sustainable Inclusion:** There is a call for more support for neurodivergent and stressed staff, addressing geographical limitations, improved feedback and retention, action on bullying, and flexible, person-centered wellbeing approaches.
- **Key thematic feedback - Skills Evolution:** Requests include broader organisational learning beyond clinical teams, clearer non-clinical career pathways, protected CPD time, digital skills support, leadership development for all staff, and focus on patient experience.
- **Stakeholder feedback highlights:** Emphasis on detailed EDI considerations, ethical AI use, diverse and younger workforce recruitment, robust risk management, visible leadership on inclusion, trauma-informed practice, transparent communication, clear KPIs, and alignment with key legislative and strategic frameworks.
- **Measurable benefits and KPIs:** Proposed KPIs include metrics on time to hire, staff turnover, attendance, diversity representation, pay gap reduction, engagement scores, learning completion, appraisal rates, and leadership program participation, with quarterly reviews and annual reporting to monitor progress.

Action: A detailed one-year action plan would be developed and presented at the May 2026 Staff Governance Committee. MW

The Committee discussed the renaming convention of the Workforce Directorate and agreed to approve the change to People and Development.

CONTENT TO ENDORSE

05.2 WORKFORCE QUARTERLY REPORT QUARTER 3 (OCTOBER – DECEMBER 2025)

The Committee considered the paper 'Workforce Quarterly Report Quarter 3 [Paper No 5.2] presented by Ms Westwood. The Committee noted the workforce report in terms of the progress made during quarter 3.

Overall, the contents of the report demonstrated that NHS 24 continued to progress towards achieving its strategic objectives as set out in the Workforce Strategy and Plan 2022-2026.

Some key insights from the report worth highlighting are:

- NHS 24 continued to be at establishment target for both Clinical Supervisors and Call Handlers. It had been agreed at Establishment Control that from January 2026 onwards Recruitment Authorisation Forms would now be required for both skill sets, to ensure NHS 24 remained within the budgeted establishment.

- Other Clinical staff vacancy % saw a decrease of 2.57% in Q3 from 15.11% in Q2 to 12.54%. An increase of 10 WTE in the budget is due to the allocation of Held in Mind funding.
- Q3 turnover was 1.23% (81 heads), with voluntary turnover making up 0.97% (64 heads) of that total.
- Work to monitor and track bullying & harassment cases is now established as part of the dashboard. As we continue to collect data, we will present these figures as part of our workforce reports. No new formal B&H cases have been recorded in Q3, which has been an improvement since Q2 where three new formal cases were logged. Mediation and early intervention measures continue to be an area of focus, and we hope to continue to see improvements in formal case numbers.
- Following further national guidance in relation to the reduced working week, NHS 24 held successful discussions in partnership, agreeing the reference period for mark time protection calculations as 1st October 2024 to 31st March 2025. Where a shortfall is identified the difference will be reimbursed.
- A comprehensive review and drafting of TUPE Measures has taken place, including creating refreshed comparison documents and consultation letter.
- Our People Matters Podcast Channel has been well received. Work has now commenced for Series two.
- Work is underway to ensure readiness for Phase 2.2 of Once for Scotland Policy Refresh. There has been a soft launch of the next phase of policies these include Adverse Weather, Alcohol and Other Substance, Control of Substances Hazardous to Health (COSHH), Lone Working, Manual Handling, Menopause and Menstrual Health, Smoking and Vaping, Work-Related Driving, Work-Related Stress and Work-Related Violence and Aggression. We are reviewing these policies against existing ones and identifying any changes required to prepare for the go-live date.
- A corporate risk was addressed by transitioning responsibility for Half Pay/No Pay notifications to payroll teams. Employees and/or managers can make direct contact with payroll to request the dates for sick pay entitlements. This ensures accuracy and consistency of the process and data provided.

CONTENT TO ENDORSE

06. ITEMS FOR ASSURANCE

6.1 STAFF GOVERNANCE RISK REGISTER

Mr Gebbie 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 26 February 2025.

Since last presented to the Committee, the key changes for consideration are as follows:

- There are currently twelve staff governance risks in total (5 scoring 10 and above), compared with 14 reported at the previous meeting on 3 November 2025.
- 4 new risks have been identified as outlined in section 5.7.
- 5 risks have been closed, rationale for closure provided in section 5.8.
- 1 risk has changed Committee as set out in section 5.9.
- 2 risks have reduced in score as outlined in section 5.10.
- No risks have increased in score.

The Committee thanked Mr Gebbie for the update provided.

NOTED

6.2 HEALTH & SAFETY QUARTERLY REPORT Q2

The Committee considered the paper 'Health & Safety Quarterly Report' [paper no 6.2] presented by Ms Westwood. Ms Westwood advised the Committee members to note the report in terms of progress made during quarter 3 (October – December 2025).

This paper provides a brief overview for all key areas of H&S for the past three months.

- Completion of Site Annual audits. All sites successfully passed this year's annual audits. The minor issues identified were mainly linked to landlord responsibilities and are being monitored accordingly.
- Work continues embedding the new OFS policy suite to ensure consistent and compliant management of health and safety across the organisation. Policies have been soft launched with go live planned for March 2026.
- Digitalisation of Health and Safety processes and forms is underway with a detailed plan for future developments. Progress will be monitored via the Health and Safety Committee.
- Completion of the Management Annual audit with a score of 94.7 % - the score was reduced as a result of two areas that were awaiting OFS eLearning modules for stress and driving. These are no longer required and will be removed from next year's audit.
- Guidance for Night Workers with an associated Occupational Health referral pathway has been developed. Both documents are currently in draft and awaiting final approval from our Occupational Health provider.
- H&S action plan on track to complete by end March 2026.

NOTED

6.3 ESSENTIAL LEARNING REVIEW 2025/26

The Committee considered the paper 'Essential Learning Review 2025/26 [paper no 6.3] presented by Dr Hepburn and Ms Macaulay.

The Committee noted the annual review of e-learning modules and accessibility improvements made; and the introduction of nine national Once for Scotland e-learning modules due in March 2026.

Highlights included:

- The 2023/24 review of Essential Learning yielded an improved approach to statutory and mandatory training completion, supporting the achievement of related KPIs and releasing capacity. To ensure continuous improvement, an annual internal review of Essential Learning has been prioritised, to ensure the suite of e-learning modules remain of sufficient relevance and quality for all staff.

- The 2025/26 review focused on accessibility standards to align with national approach, embed inclusion, and ensure that all staff can complete essential learning without barriers.
- In addition to the internal annual review of Essential Learning, national work has been underway to standardise nine statutory/mandatory modules in a Once for Scotland approach, which are set to 'go live' for all boards in March 2026. This will include the introduction of a new module for NHS 24 staff.

NOTED

6.4 QUALITY MANAGEMENT IN PRACTICE LEARNING ENVIRONMENT (QMPLE)

The Committee considered the paper 'Quality Management I Practice Learning Environment [paper no 6.4] presented by Dr Hepburn and Ms Meldrum. Ms Meldrum highlighted the following:

- The PLE Educational Audit mechanism is a professional-to-professional discussion. Written evidence of compliance with QSPL standards is recorded within the Quality Management of the Practice Learning Environment (QMPLE) software system.
- NHS 24 Practice Educator PLE leads have collaborated with NES/NHS Practice Education Facilitators (PEFs) and Quality Assurance Academics from the Higher Education Institutes (HEI) to review NHS 24's PLE and QMPLE published Student Nurse feedback.
- Student Nurse feedback of the Practice Education PLE was consistently positive and highlighted that students were welcomed, respected and able to achieve required individualised learning outcomes.
- Practice Education PLE is compliant with Nursing and Midwifery Council (NMC) Standards for Education and Training. Excellence in practice was highlighted and no actions for improvement identified.
- The QMPLE system does not provide an option to download full audit details however a 'receipt' of QSPL evidence achievement is provided as titled Educational Audit of Cardonald Learning Centre in Appendix A for reference.

NOTED

6.5 WORKFORCE POLICY UPDATE

The Committee considered the paper 'Workforce Policy Update' [paper no 6.5] presented by Dr Hepburn and Ms Gordon.

The Committee noted the self-assessment exercise NHS 24 had recently undertaken as part of the soft launch of the next suite of Once for Scotland workforce policies. The members also noted recent policy changes and updates in relation to internal NHS 24 Workforce policies.

Committee members discussed policy updates and noted the Wellbeing pages on the intranet would be updated accordingly for staff and managers.

NOTED

6.6 ATTENDANCE TASKFORCE

The Committee considered the paper 'Attendance Taskforce' [Paper 6.6] presented by Dr Hepburn and Ms. Gordon.

Committee members noted the Attendance Improvement Plan had commenced on 1 September 2025 with actions being progressed on a monthly basis. The Attendance Improvement Taskforce meet fortnightly to ensure progress is maintained.

- The Attendance Improvement Plan is structured across three horizons:
 - Horizon 1 (by October 2025): Immediate actions including corporate messaging around attendance, management dashboard deployment, and process reviews.
 - Horizon 2 (by February 2026): Development of CPD-linked interventions, manager levelling sessions, and induction enhancements.
 - Horizon 3 (beyond February 2026): Strategic initiatives such as predictive analytics, leadership development, and cross-board collaboration.

An update in relation to the Attendance Deep Dive sessions was provided and the Committee members advised they had found the session to be extremely helpful in providing assurance. The Committee noted teams were working collaboratively to strengthen the approach to attendance.

Action: The team agreed to review attendance trends and incorporate them into the proposed new format.

The Committee Chair thanked the People Services team for their continued efforts in this area.

NOTED

6.7 EXAMPLE CAREER FRAMEWORK

The Committee considered the paper 'Example Career Framework' presented by Dr Hepburn and Ms. Macaulay.

A presentation was provided to the Committee to note the first iteration of a Career Framework tool which had been developed to promote professional development.

- The initial version of a Career Framework has been created for the Workforce directorate as a 'test of change,' to seek feedback and mature the work.
- The intention is to further expand this, in time, to support wider career development across the organisation.
- Following feedback from Workforce colleagues, the opportunities to expand the Career Framework tool to support other directorates, roles and specialisms will be sought across the life cycle of the Powered by People Strategy 2026-2029.

The Committee provided positive feedback to the team and looked forward to receiving further updates as the Career Framework progresses.

NOTED

6.8 COMMUNICATIONS DELIVERY PLAN Q3 UPDATE

The Committee considered the paper ‘Communications Delivery Plan Update [Paper 6.8] presented by Ms. Aspley. Ms. Aspley highlighted the following:

- **Digital Transformation Programme (DTP)** - Communications continued to support DTP delivery, with a focus on building staff confidence ahead of the Festive period and providing clear updates on Phase 3 Training and Implementation. A comprehensive staff feedback report was produced following Week 1 of Go-Live, capturing survey responses from over 830 colleagues and more than 640 open-text comments. Insights were analysed and shared with the Programme team to inform system and process improvements. We developed a “You Said, We Did” summary which was published in full on the intranet and promoted via Team Talk and Wall Boards. During Q3, four editions of *Team Talk* carried five DTP-related features, complemented by four targeted email communications.
- **Spotlight Awards**
The Spotlight Awards were launched through *Team Talk* and a new intranet hub with guidance, categories, and past-winner stories. Promotion has been extensive across wallboards, intranet content, and *Team Talk*, generating more than 500 nominations. Local Awards ceremonies get underway in February commencing with the Corporate Staff Awards.
- **Supporting Attendance**
Communications continued to support the Attendance Improvement Taskforce, promoting early access to help, clearer guidance and wellbeing support via intranet content and digital screens, supported by targeted wellbeing messages. Managers received streamlined resources via monthly Managers’ Briefs.
- **Staff Experience Groups (SEGs)**
Support continued through monthly briefings, promotion of the staff suggestion scheme (resulting in three actionable ideas) and highlighting SEG meetings. Communications also supported key inclusion initiatives including the Anti-Racism Staff Network, Learning Disability Working Day, and Carers Rights Day.
- **Sustainability**
Work progressed on supporting the Sustainability and Climate Emergency Action Plan, with activity scheduled around Active Travel, Energy Efficiency, Waste Reduction, and national campaigns. Dedicated intranet pages are being finalised to centralise sustainability resources and support wider staff engagement.
- **Estates**
Communications supported the Estate Sustainability Project Board, including messaging around Cardonald operational changes, relocation to Lumina and the reopening of Lumina following building issues. Support for Dundee included FAQs on the water incident and a staff survey to inform planning and the Business Case, with findings presented to the Project Board.

The Committee noted planning was underway for 2026/27 and that the plan would be aligned to the corporate objectives. The plan would be kicked off in April 2026 and be presented to the Executive Management Team, Planning & Performance and Staff Governance Committee during May 2026.

The Committee Chair expressed her thanks to the Communications staff for their support during Patient Safety leadership discussions.

NOTED

6.9 APF FORUM UPDATE

The Committee considered the paper 'APF Forum Update' [Paper No. 6.9] 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
- Corporate Delivery Plan 2025-2026
- iMatter National Report 2025

The Committee noted the update.

NOTED

6.10 AREA PARTNERSHIP FORUM WORKPLAN

The Committee considered the paper 'Area Partnership Forum Workplan' [Paper 6.10] presented by Mr Woods and noted the update provided.

NOTED

6.11 WORKFORCE EQUALITY MONITORING REPORT

The Committee considered the paper 'Workforce Equality Monitoring Report' [Paper No. 6.11] presented by Mr Medina.

Mr Medina advised the key highlights:

- The data within the report provides an indication of progress, in terms of improved representation, across the each of the protected characteristic groups.
- Though the percentage of leavers has increased in some minority groups, this is offset by the overall increase of staff in post in corresponding groups. For example, the percentage of disabled leavers increased from 7.87% in the previous year to 8.03% this year. However, the disabled staff in post percentage increased from 10.61% to 12.62%.
- There has been a reduction in 'Prefer Not to Say' and 'Not Recorded' responses across most of the categories reported. Though, the protected characteristics of gender reassignment, religion or belief and sexual orientation, continue to have high non-disclosure rates.
- Overall, the data suggests that NHS 24 is making progress towards having an inclusive and representative workforce, although continued efforts are needed to sustain and build on these gains.
- The production of this report supports NHS 24 to meet the requirements set out in the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012, which note that public authorities must gather, use and publish employee data.

- The data must be published every two years, but it is produced annually to provide insight and assurance with regards to the progress made to help ensure NHS 24 remains an inclusive employer, that continues to support a diverse workforce.

The Committee thanked Mr Medina for providing an 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

7.2 RECRUITMENT RETENTION AND SUCCESSION INTERNAL AUDIT REPORT

The Committee considered the paper 'Recruitment Retention and Succession Internal Audit Report' [Paper no 7.2] presented by Dr Hepburn.

Dr Hepburn advised the report had previously been presented to the Audit & Risk Committee and noted the action for the report to be shared with Staff Governance Committee members. The positive report reflects the significant work the teams had put in. Dr Hepburn expressed her thanks to all staff involved in providing information for the report.

The Committee noted the report.

NOTED

7.3 CONTACT CENTRE ASSOCIATION (CCA) ACCREDITATION AUDIT

The Committee considered the paper 'Contact Centre Association (CCA) [Paper no 7.3] presented by Ms Edwards.

Ms Edwards advised the Committee that the CCA Global Standard Accreditation is a customer experience accreditation programme from CCA Global. The award is highly coveted and comprehensive framework designed to evaluate and enhance customer service practices within a range of organisations across a variety of sectors, aligning them with international standards.

Ms Edwards highlighted:

- NHS 24 have maintained the CCA Global Standard accreditation for 14 years, with ongoing audits and quality assurance supporting continual improvement. The

process is iterative, with feedback and action plans driving enhancements year on year.

- NHS 24 is recognised as a CCA Centre of Excellence and as such it is celebrated through networking events and communication bulletins shared with CCA Global members.

NOTED

7.4 HEALTHCARE STAFFING PROGRAMME

The Committee considered the paper 'Health and Care (Staffing) (Scotland) Act 2019 [Paper No. 7.4] presented by Mr Rafferty. The Committee noted:

- The overall assessment of the current level of compliance for Quarter 2 is substantial assurance.
- A number of improvement actions have been progressed with a clear path to substantial assurance against each duty.
- In addition to Quarterly reports there is a requirement to submit an NHS 24 Board approved report by the 30 April 2026.

NOTED

COMMITTEE BUSINESS

08.

8.1 ANNUAL COMMITTEE SELF-ASSESSMENT OF EFFECTIVENESS ACTION PLAN

The Committee considered the paper 'Annual Committee Self-Assessment of Effectiveness Action Plan' [Paper no 8.1] presented by Ms Matthew. The Committee were content to approve the presented Action Plan.

APPROVED

8.2 STAFF GOVERNANCE COMMITTEE WORKPLAN 2026/27

The Committee considered the paper 'Staff Governance Committee Workplan 2026-27' [Paper no 8.2] presented by Dr Hepburn. Dr Hepburn confirmed the Workplan fully aligned to workforce strategy.

The Committee approved the updated Workplan.

NOTED

8.3 COMMITTEE HIGHLIGHTS TO THE BOARD

The Committee highlights would be produced at the end of the meeting, sent to the Chair for approval prior to the Board Meeting due to be held on 26 February 2026.

ANY OTHER BUSINESS

9. 12:30pm

9.1 ANY OTHER BUSINESS

- **Additional investment from the Scottish Government into the King's Trust – NHS Scotland Partnership.**

Ms Westwood advised NHS 24 already had a well-established relationship with the Kings Trust and welcomed further investment by NHSScotland. NHS 24 had been involved in providing support to people being exposed to the world of work. In terms of supporting applications, interviews, and early career initiatives. Ms Westwood highlighted the support is slightly limited due to budget constraints.

There being no further business the meeting closed.

DATE OF NEXT SCHEDULED MEETING

10:00am, Thursday 7 May 2026 via Teams

The meeting concluded at 11:55am.