

Committee Minutes –1.0

Meeting of the Scottish Health Council

10.00am -12.30pm 4 September 2025; MS Teams

Attendance

Present

Suzanne Dawson, HIS Non-Executive Director, Chair (SD)
Gina Alexander, Member (GA)
Dave Bertin, Member (DB)
Emma Cooper, Member (EC)
Nicola Hanssen, HIS Non-Executive Director, Vice Chair (NH)
Jamie Mallan, Member (JM)
Nicola McCardle, Member (NMCC)
Michelle Rogers, HIS Non-Executive Director (MR)

In Attendance

Clare Morrison, Director of Engagement & Change, Lead Director (CM)
Derek Blues, Head of Engagement Practice - Assurance (DBL)
Richard Kennedy McCrea, Operations Manager (RKM)
Diane Graham, Head of Engagement Practice-Improvement (DG)
Christine Johnstone, Head of Engagement Practice (CJ)
Tony McGowan, Associate Director Community Engagement (TMG)
Evelyn McPhail Chair of Healthcare Improvement Scotland (EMcP)
Robbie Pearson, Chief Executive (RP)
Duncan Service, Employee Director (DS)
Rosie Tyler Greig, Equalities, Diversity & Inclusion Manager (RTG)
John Lund, HIS Non-Executive Director (Observer)

Apologies

Sharon Bleakley, Strategic Engagement Lead (SB)
Lisa McCartney, Strategic Engagement Lead (LMC)

Meeting Support

Susan Ferguson, Committee Support

1. Opening Business

1.1 Welcome and apologies

The Chair (SD) welcomed everyone to the meeting and extended a warm welcome to Evelyn McPhail, Chair of Healthcare Improvement Scotland (HIS), who was attending her first Scottish Health Council (SHC) meeting.

Apologies were noted as above.

1.2 Declaration of Interests

SD invited the Scottish Health Council (SHC) to note the Register of Interests and declare any conflicts.

No conflicts were declared.

Two members provided updates to be added to the Register.

Decision: SHC noted the Declaration of interests.

Action: Updates noted from MR and JM to be added to the Register of Interests (SF)

1.3 Minutes of previous meeting

The SHC considered the draft minutes from the previous meeting held on 15 May 2025 and accepted them as an accurate record, however sought assurance that clarity on the use of “care” and “social care” had been raised as an action.

SD provided the SHC with an update and confirmed this action had been raised and completed.

Decision: The SHC approved the minutes from the 15 May 2025 meeting.

Action: None

1.4 Review of Action Register

The SHC reviewed the Action Register, noting that most actions were recommended for closure.

An update was provided on Action 2.4 (Role of Public Partners), confirming that the Volunteering Policy & Procedures will be revised to cross-reference the Lone Working Policy.

RTG noted that the Lone Working Policy requires a refresh, pending further guidance.

Decision: The SHC noted the Action Register and agreed with the recommended actions for closure.

Action: Close agreed actions from register - SF

2. HIS Strategic Business

2.1 Statutory duties of Engagement

CM provided an update on current issues relating to statutory duties on engagement. She highlighted two key challenges: the pace of change across the NHS and public sector in Scotland, and the increasing shift towards regional and national service planning. CM also noted that the previously agreed nationally determined service change guidance placed HIS in a strong position.

Further updates included a focus on quality and safety in service change. The relevant paper had been considered by the Quality and Performance Committee (QPC), and the SHC agreed to the development of a signposting document to provide guidance, outline quality and safety considerations, and clarify roles and responsibilities.

Also highlighted were the two nationally determined service changes, vascular services and gender identity services for children and young people with thanks being expressed to Derek Blues (DBI) and his team for their engagement support to the respective service leads.

The paper also outlined key service changes currently being progressed by the team.

The SHC thanked CM for the update and acknowledged the rapidly evolving environment.

In response to points raised by the SHC the following assurance was provided;

1. CM confirmed that the HIS Medical Director had established contact with the new Patient Safety Commissioner, ensuring linkage.
2. In reference to Paper 2.2, CM clarified that the previous risk numbering system is no longer in use but will investigate whether a new system is in place.
3. Regarding the Greater Glasgow and Clyde (GG&C) Mental Health review, DBI advised that no update had been received, and it is unlikely the three-month consultation will be completed before the pre-election period begins.

Following discussion on the delayed update on the mental health service changes within NHS Greater Glasgow and Clyde, the SHC agreed to include this item on the October agenda of the Service Change Sub-Committee.

The SHC also endorsed a proposal to collaboratively develop best practice guidance on joint engagement between the NHS and local authorities, in partnership with COSLA.

Decision: The SHC accepted a Limited level of assurance

Action: Additional agenda item to be added to the Service Change Sub-Committee on the mental health service change in NHS GGC - DBI

2.2 Governance for Engagement (GfE)

TMG provided the SHC with an update on Cycle 3 of the GfE process which included the following; All review dates for 2025/26 had now been confirmed which should allow all directorates clarity and time to prepare. He advised that the development of a proportionate version of the Quality Framework tool for corporate teams would be ready in October/November 2025.

TMG also highlighted that the new Chief Pharmacist is leading a review of Clinical & Care Governance (CCG), including consideration of how quarterly CCG updates might inform GfE monitoring, with the aim of reducing duplication across committees.

TMG concluded that the GfE process is operating effectively, with directors and teams engaging positively with the sub-committee, and the structure of improvement plan monitoring is bedding in well.

The SHC thanked TMG for the continued support to the GfE sub-committee members and colleagues in preparation for their meetings.

Decision: The SHC noted the update with no further comments and accepted Moderate level of assurance.

Action: None

2.3 Equalities, Diversity & Inclusion

RTG provided an update to the SHC on the ongoing work to ensure HIS meets its equalities and human rights duties.

Key highlights included; the consistent performance and focus on improving quality assurance on Equality Impact Assessments (EQIAs), the progress being made with the Anti Racism plan and the new training being piloted with People Experience Volunteers.

The SHC thanked RTG for providing the update.

Following discussion and points raised by the SHC, RTG provided the following assurances:

1. Inclusion bulletin: Advised that this is only available via the Source and staff networks; but can be shared with Council Members if requested.
2. EQIA quality assurance: RTG aims to take a more proactive approach, offering support to teams to improve the quality of EQIA completion.
3. Anti-Racism Plan: Advised that an internal delivery group is progressing the plan, with a current focus on leadership and noted that further work is needed on community engagement and building understanding of racism across the group.
4. Volunteer Remuneration: Noted consistent approach is being developed across HIS to ensure equitable engagement with people with lived experience.

The SHC discussed increasing local tensions with incidents of NHS staff across Scotland being exposed to racism. Given the increasingly challenging external environment, SHC members were keen for HIS to consider more externally focused work to promote an anti-racist message including support for NHS staff and volunteers.

It was agreed this is an area of equalities work that stretches across both SHC and the Staff Governance Committee so would need to be taken forward jointly.

Decision: The SHC accepted Moderate level of assurance

Action: Continued work on anti-racism to be taken forward jointly by SHC and the Staff Governance Committee-RTG, SD, DS.

3. Community Engagement Business

3.1 Engagement Practice – Improvement Programme

DG provided the SHC with an update on the Improvement Programme's three strategic priorities.

- Transforming volunteering in NHS Scotland, she highlighted that the team have been working to implement the new Volunteer Management System (VMS) which will improve volunteering experiences and data quality across Scotland.
- The second priority noted was building engagement capability for people-led change and highlighted that the launch of the Engagement Practice Improvement Learning System (EPILS) is set for 5 November 2025, advising that this work has been completed with strong engagement with HIS Quality Management System (QMS) and the Scottish Approach to Change.
- Finally, the third priority covered responsive support being developed to provide tailored advice and support to HIS and the wider system. DG noted that the paper also covers a broad range of activities mentioned within the scope of this priority and is confident they are on track to deliver the plans set out.

SD thanked DG for presenting the paper and highlighted that the strategic context was clearly driving all developments.

In response to the points raised the following assurance was provided;

1. Confirmed that in the Volunteering programme there are benchmarks and targets, and noted for the VMS, there is a benchmark for people and experience with a baseline to work with.
2. On having a role in expanding volunteers, advised they have an influence on thinking differently about volunteering, particularly around the involvement of young people.
3. Confident the EPILS launch is attracting the correct people including senior leaders.

4. On responsive support and understanding our boundaries, noted that this is currently being developed internally and working in cycles. Advised it was about identifying who has the right skills to respond most effectively.

Decision: The SHC accepted Moderate level of assurance

Action: DG to produce a written update on the VMS to be circulated to the SHC members

3.2 Operational Plan Progress Report

RKM provided an update, for awareness, on some of the impact of work that has taken place in earlier quarters.

He highlighted the mix of formal and informal workshops that had taken place and felt encouraged to see that people completing these provide feedback on how attending sessions has benefited supporting some change in practices.

Raising awareness of the work of the organisation to the public through media, he highlighted the work on the Citizens Panel with topics relating to current health and care national policy.

Noted the positive feedback received for the service change team on the quality of the support and assurance they have provided.

The SHC thanked RKM for the update.

In response to the points raised, RKM provided the following assurance;

1. Qualitative feedback for CEIM potentially leading people to misunderstand the programme: RKM noted he would work with colleagues on this to ensure clarity on what the CEIM programme involves.

2. On the bluntness of numbers causing mismatch in figures: provided some rationale for this, advising the approach to KPIs has some set at corporate level and some at committee level. It was noted that for assurance of consistency in the numbers being reported to the SHC, further work with colleagues will be planned in.

CM noted that two Citizens' Panels have been quoted in Scottish Government policy documents, which is significant and positive. She congratulated Christine (CJ) and her team on this work.

Decision: The SHC accepted a Moderate level of assurance

Action: None

4. SHC Governance

4.1 Risk Register

CM provided the SHC with an update which focussed on the mitigation activity of the risks.

She advised that the updated guidance on major service change is planned for publication this month.

It was noted that the completion of the organisational change process to resolve the long-term Strategic Engagement Lead (SEL) vacancy will be completed during September 2025 and that they are actively monitoring the first two nationally determined service changes.

It was noted that the second risk (service change - quality and safety) had already been covered in item 2.1.

Decision: The SHC noted the Risk Register and accepted a Moderate level of assurance.

Action: None

4.2 Key Performance Indicators

CM provided an update highlighting that all governance committees are assigned two KPIs to monitor and noted that the proposal for SHC for the next year is; governance for engagement and EQIAs.

The SHC were asked to consider and agree the wording of the two KPIs as set out in the paper. She highlighted that at present these simply track numbers and there is recognition that there is a need for more qualitative measures and noted this will be developed for 2026/27.

The SHC discussed the wording for the KPIs, noting their keenness to see a more qualitative approach going forward. Proposals to be considered at the next SHC meeting in February 2026.

Decision: The SHC accepted the Moderate level of assurance

Action: None

4.3 Business Planning Schedule 2025/26

SD highlighted the Business Planning Schedule for 2025/26 and asked the SHC to note the contents.

Decision: The SHC noted the content of the 2025/26 SHC Business Planning Schedule.

Action: None

5. Reserved Business

5.1 Service Change Sub-Committee Draft Minutes of Meeting

The draft minutes from the Service Change sub-committee meeting held on 14 August 2025 were shared with the SHC for information.

Decision: The SHC noted the draft minutes from the service change sub-committee meeting held on 14 August 2025

Action: None

6. Reserved Business

6.1 Key Points for HIS Board

The following key points were agreed for reporting to the HIS Board meeting;

1. Statutory duties of engagement
2. Anti-racism
3. Positive performance

7. Any Other Business

CM provided the SHC with the following AOB.

The Audit & Risk Committee has asked for the Best Value report to be widened to all governance committees to identify work that would be considered to be Best Value particularly around influence and impact. If all committees are happy with the proposal, then more work will be done.

SD noted that there was a paper prepared that outlines this detail however notification for this came out after SHC papers being published.

SD asked if the SHC were comfortable with this proposal.

The SHC agreed with the proposal.

8.Date of Next Meeting

Next meeting will be held on
13 November 2025
10.00-12.30 Via Teams

Approved by: Suzanne Dawson, Chair Scottish Health Council

Date: 13/11/2025