

Staff Governance Committee Minutes – Approved

Meeting of the Staff Governance Committee of Healthcare Improvement Scotland at
10am, 6 August 2025, MS Teams

Attendance

Present

Duncan Service, Committee Chair
Evelyn McPhail, Interim HIS Chair
Judith Kilbee, Non-Executive Director
Keith Charters, Non-Executive Director
Michelle Rogers, Committee Vice Chair
Nicole Hanssen, Non-Executive Director

In Attendance

Ann Gow, Deputy Chief Executive
Clare Morrison, Director of Engagement & Change
Eddie Docherty, Director of Quality Assurance & Regulation
Eddie Warde, Partnership Representative
Gillian Gall, Associate Director of Workforce
Jane Illingworth, Deputy for the Director of Finance Planning & Governance
John McKee, Head of Communications
Kenny Crosbie, Partnership Representative
Mhairi Hastings, Director of Nursing & Systems Improvement
Robbie Pearson, Chief Executive
Safia Qureshi, Director of Evidence & Digital
Sandra Flannigan, Head of Organisational Development & Learning
Simon Watson, Medical Director-Director of Safety
Sybil Canavan, Director of Workforce

Apologies

Aimie Littleallan, Partnership Representative

Ann Grant, Head of People and Workplace
Belinda Henshaw-Brunton, Staff Governance Associate

Meeting Support

Tara Duffy, Committee Secretary

1. OPENING BUSINESS AND COMMITTEE GOVERNANCE

1.1 Welcome and apologies for absence

The Chair welcomed everyone to the meeting, and the apologies were noted as above. The Chair and thanked Sybil Canavan for her contributions to the Committee on the occasion of her final meeting, extending best wishes for the future.

1.2 Declarations of Interest

There were no declarations of interest

2. MINUTES OF PREVIOUS MEETING

2.1 Minutes of Staff Governance Committee held on 29 May 2025

The minutes of the meeting held on 29 May 2025 were approved as an accurate record, subject to the correction of the spelling of Rogers in the attendance list.

Decision: The Committee approved the minutes.

2.1 Review of Action Register for Staff Governance Committee

The Committee approved the proposed closures in the Action Point Register and noted that the Workforce Planning Group terms of reference are expected within four to six weeks.

Decision: The Committee gained assurance from the progress with action points.

3.COMMITTEE GOVERNANCE

3.1 Business Planning Schedule

The 2025–26 Business Planning Schedule (BPS) was shared with the Committee. The BPS will be updated to ensure the Workforce Plan is presented at every meeting and that Leadership Development and Succession Planning are included in the plan for the next meeting.

Decision: The Committee noted the Business Planning Schedule.

4.CORPORATE PLANS

4.1 Workforce Plan

The Director of Workforce provided the Committee with a report on the current workforce plan activity underway across the organisation.

In response to questions from the Committee, the following was clarified:

- a) An agreed reporting template for directorates is in place and today's presentation reflects this.
- b) The alignment of this work with the workforce plan is being developed and an organisation-wide position will be available for the October meeting.

- c) A summary of the medical workforce model will be included in the September Executive Report to the Board.
- d) Work is aligned with the *Once for Scotland* flexible working policy and the Equalities Mainstreaming Action Plan. Consistency and staff engagement remain priorities, alongside planning for flexible work locations.
- e) There is a pool of 20 HIS staff across Administrative Officer and Project Officer roles. Further planning is required around vacancies, redeployment, and financial savings. A strategic redesign board is proposed to set priorities, strengthen partnership working, and improve agility in workforce deployment.

Decision: The Committee accepted moderate assurance that work is underway to ensure the Workforce Plan is implemented, recognising this remains a work in progress.

Actions: Paper on the HIS Employee to be brought to the next meeting; Table with timescales to be provided.

4.2 National Boards Collaboration inc Business Systems Update

The Chief Executive provided a verbal update. Work is ongoing on the development of a business case for national business systems. The Director of Workforce advised that a business case is progressing for a single business system across NHS Scotland, covering HR, Procurement, Payroll, and Finance. In parallel, work is emerging on the development of a common operating model for services across NHS Scotland. Early processes have been shared with the HR and Finance Directorates, providing an initial basis for discussion. Protected time has been committed for corporate functions to engage with national stakeholders in shaping the future model.

Decision: The Committee noted the update provided.

4.2 One Team Programme transition to BAU

The Committee received a paper on how the One Team Programme continues to deliver after the conclusion of the formal programme

Following questions from the Committee the following was clarified:

- a) Work is ongoing to ensure specialist data is used efficiently, with mapping being completed in advance of resource allocation.
- b) There is currently no KPI linking digital ambitions directly to staff objectives; however, work is underway to link digital ambitions to business objectives, with clearer alignment expected next year. Actions are being tracked through governance processes.
- c) Discovery work on the CRM system and M365 is ongoing to assess storage, licensing, and improvement opportunities.
- d) The Corporate Improvement Team is intended as an agile resource to accelerate change through short, targeted projects before transferring work to BAU.
- e) A strategic design gap has been identified, with early thinking on establishing a Strategic Design Board. Proposals will be developed for the Committee and other governance groups.

Decision: The Committee scrutinised the report and accepted a moderate level of assurance.

Action: Update on Strategic Design Board to be brought back to the Committee

4.4 Workforce Implications of Clinical and Care Governance Annual Report

The Committee was provided with a paper on Clinical Care Governance (CCG) following Limited Assurance in June 2025, outlining workforce-related actions to strengthen governance and achieve Significant Assurance by December 2025.

In response to comments and questions from the Committee, the following points were recorded:

- a) The Committee noted the need for accuracy and clarity in language when describing healthcare versus health and care.
- b) It was recognised that gaps in CCG over the past year had multiple causes and that wider workforce participation beyond clinicians is important.
- c) While processes were not included in the paper these will be addressed as part of the broader CCG review, with direct links to intelligence-sharing work.
- d) Opportunities were identified to strengthen healthcare support worker standards through improved induction processes, potentially delivered via HIS Campus as an organisational commitment.

Decision: The Committee acknowledged the work progressing but agreed not to provide a level of assurance until further discussion has taken place.

Action: Share the CCG QPC paper with the Committee; Provide an update paper at the next meeting;

Discuss at the Governance Chairs Committee how this work should be progressed.

4.5 Update on Equality Outcomes

Action: Provide the Committee with a written update following the meeting

4.6 Staff bank for Healthcare Staffing Programme observers

The Committee received a paper proposing the establishment of an HIS staff bank to employ observers for the Healthcare Staffing Programme.

The following points arose from the Committee's questions and comments:

- a) Initial discussions on Health Care Support Worker involvement suggest narrowing the scope to registered staff in the first instance. Risks associated with digital data collection will be considered by the task and finish group, with paper-based back-up processes in place.
- b) HIS has a legislative duty to maintain and develop staffing level tools. Existing tools are outdated and require observation studies to ensure outputs reflect current practice. Current reliance on Board staff causes delays and paper-based recording can result in incomplete data. A digital solution would improve accuracy, timeliness, and reduce costs, with staff contributing on a flexible, bank-shift basis. Without change, projected delays of 6–9 months are anticipated. Some tools require only minor adjustments while others will need full redevelopment.
- c) Alternative options, including the use of Board and regional bank staff, were considered but carried risks of reducing availability for clinical shifts. Longer-term solutions will continue to be explored.

Decision: The Committee supported the establishment and pilot of a staff bank for the Health Care Staffing Programme and accepted a moderate level of assurance on the work, provided it is kept under review.

Action: Progress updates on the work to be brought back and added to the BPS.

5. WORKFORCE METRICS

5.1 Workforce Report

Action: Circulate to the Committee for feedback offline.

5.2 Personal Development and Wellbeing Review Update

Action: Circulate to the Committee for feedback offline.

6. VALUES, BEHAVIOURS, ENGAGEMENT & COMMUNICATION

6.1 iMatter 2025

The Committee received a paper on the annual iMatter survey results which provides an overview to raise awareness and outline plans to use the findings to inform insight and action.

Decision: The Committee noted the update and accepted a moderate level of assurance.

Action: Share the presentation/results at another meeting or offline.

7. STAFF GOVERNANCE STANDARDS

7.1 Staff Governance Action Plan - People and Workplace Directorate

The Director of Workforce provided the Committee with a presentation covering activity in support of the staff governance standards.

The Committee noted the importance of clearly articulating actions and activities undertaken within individual directorates versus those carried out on a cross-organisational basis.

It was suggested that stronger links be made between directorate work and the Workforce Plan, particularly in relation to priorities, risks, and challenges

Decision: The Committee noted the presentation and were satisfied with the progress of the work to date.

8. RISK MANAGEMENT

8.1 Risk Management/Risk Register

The Committee received a report on current strategic and operational risks, noting alignment of all strategic risks under the Workforce category and updates to partnership and operational risks since the last meeting.

Key points from the discussion were the need to add a strategic and operational risk related to the staff bank and the establishment of the Risk Sub-Committee.

Decision: The Committee accepted a moderate level of assurance for all three risks.

Action: Create a staff bank risk and update the Clinical and Care Governance risk following discussions.

9. PAPERS FOR NOTING

9.1 Partnership Forum 3 Key Points

The key points were noted from the previous meeting.

9.2 Local Negotiating Committee Minutes

The minutes were noted from the previous meeting.

10. CLOSING BUSINESS

10.1 Board Report: three key points

The Key Points were agreed as follows: Staff Bank, Clinical and Care Governance, and Staff Governance Action Plan – People and Workplace Directorate Presentation.

11.DATE OF NEXT MEETING

Next meeting will be held on 22 October 2025

Approved by: Duncan Service

Date: 22 October 2025