Staff Governance Committee Minutes – Approved

Meeting of the Staff Governance Committee of Healthcare Improvement Scotland at 10am, 13 March, MS Teams

Attendance

Present

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

In Attendance

Aimie Littleallan, Partnership Representative
Angela Moodie, Director of Finance Planning & Governance
Ann Laing, Head of People and Workplace
Belinda Henshaw-Brunton, Staff Governance Associate
Clare Morrison, Director of Engagement & Change
Eddie Docherty, Director of Quality Assurance & Regulation
Eddie Warde, Partnership Representative
Geoff Morgan, Programme Manager
John McKee, Head of Communications
Laura Liddle, Associate Director of Workforce
Pauline Symaniak, Governance Manager
Robbie Pearson, Chief Executive
Safia Qureshi, Director of Evidence & Digital
Sandra Flannigan, Head of Organisational Development & Learning
Sybil Canavan, Director of Workforce

Apologies
Ann Gow, Deputy Chief Executive
Kenny Crosbie, Partnership Representative
Mhairi Hastings, Director of Nursing & Systems Improvement
Simon Watson, Medical Director/Director of Safety

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 also extended thanks to Laura Liddle for her contributions to the Committee and for her work with Healthcare Improvement Scotland.

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 23 October 2024

The minutes of the meeting held on 23 October 2024 were accepted as an accurate record, subject to the following amendments:

a) Revised wording to be provided for page five.
b)   An action to be added regarding Power BI and Power Automate, including the level of assurance provided and confirmation that there is no data bias.
c)   A typo error in item 7 to be corrected.
d) Correction of the job title for the Director of Evidence and Digital in the attendance list.

Decision: The Committee approved the minutes, subject to the above changes.

2.2   Review of Action Register for Staff Governance Committee

The Committee reviewed the Action Point Register and accepted the recommended closures as proposed. It was noted that Item 4.2: One Team was agreed as business as usual at the Audit and Risk Committee.

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

3.COMMITTEE GOVERNANCE

3.1   Business Planning Schedule

The Business Planning Schedule for 2025–26 was shared with the Committee. It was noted that One Team may need to be removed from the schedule in future.

Decision: The Committee approved the Business Planning Schedule.

3.2 Annual Report and Terms of Reference

The Committee noted that the Annual Report should include more detail on the Workforce Plan for the past year and that this should also be reflected in next year's plan. It was also suggested that highlighting the key items that come to the Committee in the Annual report would be helpful.

Decision: The Committee noted the update on the Annual Report and Terms of Reference.

4.CORPORATE PLANS

4.1 Integrated Planning Workforce/Workforce Plan

The Director of Workforce provided the Committee with a report on the current workforce planning activity identified within the Integrated Delivery Plan. The paper confirmed the key areas of focus and outlined the contents of the Director's letter. It also highlighted the decision by the Scottish Government to reduce pressure on Boards by stepping back from the requirement for a formal three-year workforce planning cycle.

Additionally, the Director of Workforce delivered a presentation to the Committee, detailing the planned return submission to the Scottish Government.

The Committee noted that rigid and unequal structures and processes hinder innovation. There is a need to explore how teams can collaborate more effectively within these frameworks and identify better integration and opportunities for innovation in reporting and delivery. Discussions on the wider NHS reform agenda are expected to commence. These discussions will likely influence existing frameworks, and there is a need to monitor and respond to developments as they emerge.

The Committee suggested that the four key points in the paper are clearly shown in the Business Planning Schedule and suggested using "HIS Employee" and "HIS Campus" instead of "One Team" to better reflect current priorities.

The Committee recommended placing greater emphasis on digitalisation and staff empowerment within the workforce planning approach.

Decision: The Committee scrutinised the paper and accepted moderate assurance from the update provided.
Action: Update the BPS to reflect discussion

4.2 Internal Audit Report on Recruitment

The Director of Workforce shared the KMPG Internal Audit Report on Recruitment with the Committee. The overall rating of the audit provided was significant assurance with minor improvement opportunities. The summary of key findings highlights two medium findings of Recruitment KPIs and WVRG Decision Making.

The Committee questioned who determined the KPI. The selection of appropriate KPIs has been an ongoing topic of discussion within the Quality and Performance Committee, particularly in relation to identifying the most effective measures. In some areas, KPIs may serve as a blunt instrument, especially where people-related outcomes are difficult to quantify. This is an area the Committee

should have the opportunity to review. KPIs should be meaningful and relevant to the Committee's work.

Decision: The Committee noted the update provided on the Internal Audit Report.

4.3   Anchors Strategic Plan 2025-26 Update

The Director of Workforce presented the Committee with a paper on the Anchors Strategic Plan Requirements and provided an update for 2025–26. The paper focusses on how the organisation can contribute as an anchor institution, particularly regarding employment, which is a key area for the Committee's consideration.

The Committee suggested that the expansion of links should include colleges as well as universities. They also discussed how the development of an employability strategy aligns with the Workforce Plan, the Anchor Plan, and the associated reporting structures.

Decision: The Committee approved the response and agreed proposals of the Anchors Strategic Plan and accepted a moderate level of assurance.

4.4   Equalities

4.4.1. Update on Equality Outcomes, Equality Mainstreaming Report, & Anti-Racism Plan
The Committee was presented with a paper on the Equality Mainstreaming Report and the Anti Racism Plan, both of which have been prepared for publication in April 2025.

In response to questions from the Committee, the following points were clarified:

a) The Equal Pay Statement and the Anti-Racism Plan have both been circulated to the Partnership Forum for feedback. Accompanying actions will also be submitted to the Forum. The Anti-Racism Delivery Group will include in its Terms of Reference that, at the conclusion of each meeting, the Partnership Forum representative will identify any items for discussion at the Forum.
b) Key documents have been shared with and discussed by the Race and Ethnicity Network. The Network is actively exploring how it can better utilise its places on the Partnership Forum and bring forward relevant issues. It was noted that it would be beneficial to have a dedicated discussion within the Network on known issues.

Decision: The Committee agreed the reports and accepted a significant level of assurance.

4.4.2 Workforce Equality Monitoring Report

The Director of Workforce provided the Committee with the Workforce Equality Monitoring Report, covering the period from April 2021 to March 2024. The report was presented for review and for publication alongside the other equality reports.

In response to questions from the Committee, the following points were clarified:

a) The report is intended to promote transparency rather than focus on specific targets. While it informs planning, outcomes also reflect ongoing efforts to do the right thing. Discussions with equality networks help identify areas for improvement, though some activity may not be fully captured.

b) The organisation is aiming for continuous improvement and greater proportional representation in line with the national population. Current workforce data indicates underrepresentation compared to national census figures, and efforts are being made to address this imbalance.

Decision: The Committee approved the report for publication and accepted moderate assurance.

4.5   One Team Update

The Chief Executive shared a paper updating the Committee on the proposed next steps for One Team in 2025-26.

In response to questions from the Committee, the following points were clarified:

a) In relation to organisational design, work is actively progressing, and a proposal will be brought forward outlining how this will be taken forward.
b) There was support for the direction of travel from the Audit and Risk Committee; however, it was noted that this work must be fully integrated across all areas and not treated as a standalone.
c) The Communications team has played a central role in delivering and reinforcing key messaging around this work over recent years. It is important to continue embedding the organisation's ethos and behaviours across all functions, and communication will remain a critical element. It is also noted that no communications posts are funded through the One Team initiative.
d) The three individuals who have been supporting the One Team work will be appropriately redeployed in future.

Decision: The Committee noted the update provided and accepted moderate assurance.
Action: Bring back an update to the next meeting

4.6   National Boards Collaboration

The Chief Executive provided the Committee with a verbal update, noting that there is significant activity occurring at the national level beyond the existing collaboration on business systems and services. The immediate focus of this work is to address issues that are expected to reach a natural conclusion by 2028. Efforts are being made to ensure alignment with the future design of corporate services on a national scale. It was acknowledged that further progress is needed to fully engage staff side representatives and the Partnership Forum, and to foster a sense of ownership among staff more broadly.

Additionally, the National Boards have issued a letter emphasising the importance of collaboration across boards. A paper outlining the collaboration agenda and the associated expectations will be presented to the Board.

Decision: The Committee noted the update provided.

5.WORKFORCE METRICS

5.1   Workforce Report & Flexible Work Location Policy

The Committee were provided with a paper detailing the current workforce position and pertinent workforce detail within the organisation and details on the implementation arrangements for the Flexible Work Location Policy.

The following additional information was shared in response to questions and comments from the Committee:

a) While there is a strong understanding of employee work locations, many employment contracts remain outdated. This is particularly relevant for distinguishing roles that require regular office attendance from those suited to hybrid or remote arrangements. Addressing these differences contractually is a priority. In addition, challenges persist in implementing the Once for Scotland policy consistently across the organisation.

b) Regarding whether employees of HIS can be designated as home based and whether this is dependent on the nature of the role. It was acknowledged that transparency, fairness, and consistency in both the process and its outcomes are critical. This requires aligning employee expectations with management's understanding of role requirements. One policy implication involves travel expenses: home based employees may be eligible to claim travel expenses, whereas office-based employees may not. This distinction could present challenges, underscoring the need for consistent application of the policy.

c) It was reported that at least two thirds of current contracts require review, due largely to turnover and recruitment over the past five years. Many long-standing employees still hold legacy contracts, necessitating significant effort to update and standardise employment terms. This issue is closely linked to broader discussions about expectations for office attendance. The policy inconsistency around travel expense eligibility - where home-based employees may claim expenses, and office - based employees may not - will be a focus in ongoing discussions.

d) Regarding the number of employees working outside the Central Belt, given the policy aim of reducing inequalities and enabling recruitment of top talent from across Scotland. A postcode analysis conducted by the Short Life Working Group, broken down by directorate, identified a small number of employees based outside the Central Belt, including some located in England and Northern Ireland. These arrangements were deemed appropriate given the nature of the roles. Directorates were asked to discuss the findings within their Directorate Management Teams and provide feedback. Further refinement of this data is required.

e) In the context of recruitment, travel, and the need for regional presence, particularly in hard to fill roles, the Committee questioned whether any analysis had been conducted comparing the cost of leaving a role unfilled versus hiring a highly skilled candidate located at a distance. While no detailed analysis has been completed, it was noted that the flexible work location policy allows for annual reviews of all contractual agreements, providing opportunities to revisit these decisions. Historically, the organisation has achieved cost savings related to employment travel.

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

5.2   NMAHP Registration Assurance

The Committee received a report on Nursing, Midwifery and Allied Health Professional (NMAHP) Registration Assurance. It was noted that HIS has a responsibility to ensure that both new and existing NMAHP employees maintain active registration with the Nursing and Midwifery Council

(NMC) and the Health and Care Professions Council, in line with the requirements of their employment contracts.

The Committee recommended that a future proposal should be brought forward to explore the implementation of revalidation processes across all professional groups.

Decision: The Committee noted the report and accepted the following levels of assurance:
- Significant assurance that all nurses and midwives employed have active registration with the NMC.
- Moderate assurance regarding the need for future developments required to further support RHCPs to maintain registration and meet requirements of professional regulating bodies efficiently and effectively.

Action: Look at Business Planning Schedule to include all processes together.

5.3   PDWR/Corporate Objectives

The Head of Organisational Development and Learning provided a verbal update and accompanying presentation on the Personal Development and Wellbeing Review (PDWR) process and the use of Corporate Objectives.

It was noted that Corporate Objectives were first incorporated into the PDWR process in 2015. Ten years on, a revised approach is being proposed. Discussions with the Partnership Forum have identified several challenges associated with the current Corporate Objectives model, particularly in light of changes to the organisational context and methods of staff engagement.

Investment has been made in the Strength Deployment Inventory (SDI) to support the development of a flexible and agile workforce. However concerns were raised that the use of multiple Corporate Objectives and the extensive discussions may detract from the core purpose of the PDWR.

As a result, it is recommended that Corporate Objectives be removed from this year's appraisal process. This reflects a broader organisational shift, with many strategic themes now embedded in everyday practice. Moving forward, HIS Campus will continue to support alignment between staff learning and organisational priorities.

Additionally, it is proposed that this year's PDWR trial includes a new discussion point: how individuals and line managers can best work together. High level actions from this conversation will be recorded within the appraisal. The SDI model will be used to support these conversations, and feedback on the process will be gathered through upcoming pulse surveys.

Key Points from Committee Discussion:
a) The Committee agreed that the proposals were logical and reflective of organisational progress but noted the importance of reviewing mandatory training modules to ensure all key areas remain adequately covered.
b) The need to maintain staff connection to overarching Corporate Objectives and strategic direction was highlighted.
c) While the SDI model is recognised as a valuable tool, concerns were raised regarding potential biases. It was suggested that the same level of assurance applied to tools such as Power BI and Automate should also be considered for SDI.
d) Members welcomed the focus on meaningful dialogue between managers and staff, but expressed concern about maintaining visibility of staff governance and the Partnership Forum's evolving role. Further engagement opportunities may be beneficial.

e) The overall direction of travel was supported, with an emphasis on ensuring that conversations remain relevant to day-to-day work. The need for continued innovation in staff engagement methods was noted.

f) The Committee acknowledged that the proposal aligns well with the 4Ps framework, supporting greater understanding of individual motivators and potential derailers.

Decision: The Committee supported the proposed direction of travel and noted the update.

5.2 Sickness Absence Deep Dive

The Director of Workforce provided the Committee with a report on the work undertaken to complete the Sickness Absence Deep Dive as discussed in the October Committee meeting. This work has been undertaken by a Short Life Working Group, established in partnership which has now met twice. A further update will be provided to the Committee in May with recommendations after the group has concluded:

The following information was provided after questions from the Committee:

a) The Committee queried whether, in addition to reporting sickness absence data to the Scottish Government, comparisons should also be made with similarly sized organisations outside the NHS that face comparable challenges. Such benchmarking could provide useful insights. It was noted that a broad benchmarking exercise has already been conducted and presented to the Audit and Risk Committee, and this information can be shared. While national NHS data is available, it is not considered good practice to make direct comparisons with other NHS boards.

b) In relation to the menopause support provided, there is importance in measuring its impact. Given the demographic profile of the workforce, it was agreed that evaluating the effectiveness of existing support measures would be beneficial.

c) There is currently no specific information on long Covid, as reporting on this was stopped as part of overall sickness absence reporting. There may be opportunities to enhance how we track and analyse this data.

d) Regarding a policy on staff and policing, this issue has recently been raised, and discussions are underway to ensure appropriate support is provided.

e) Regarding accurately capturing all types of absences and whether our levels could be higher than reported, staff must self-report absence before their shift starts, usually via a phone call. Regular check ins also take place. If someone fails to report, follow up actions are taken. There have been no major incidents where a staff member was unaccounted for, but in some cases, in person checks have been conducted due to concerns. A new text-based system is being introduced to improve resilience and monitoring.

f) The Committee questioned whether absence rates are analysed by age group, noting that it would be useful to understand if there is a correlation between age and sickness absence.

Decision: The Committee noted the areas of discussion and planned actions and accepted moderate assurance on the report.

6. VALUES, BEHAVIOURS, ENGAGEMENT & COMMUNICATION

6.1 Organisational Culture

This item will come back to the Committee at a later date.

7. STAFF GOVERNANCE STANDARDS

7.1   Staff Governance Action Plan

The Director of Workforce provided the Committee with a report detailing the planned approach for gathering of evidence to assist with compilation of the Staff Governance Action Plan for Healthcare Improvement Scotland.

Decision: The Committee approved the planned approach and accepted moderate assurance.

8. RISK MANAGEMENT

8.1   Risk Management/Risk Register

The Director of Finance, Planning and Governance informed the Committee that one of the three strategic risks remain out of appetite and two of the operational risks remain unchanged.

In relation to Risk 1433, the Committee noted that the controls implemented to date should begin to be reflected in the risk rating going forward.

Regarding Risk 634, the Committee suggested that the residual nature of centralised systems and processes should be more clearly articulated within the risk narrative. This should support clearer communication and engagement with the Scottish Government.

Decision: The Committee accepted a limited level of assurance for the overall workforce risk (634) as it is out of appetite, and a moderate level of assurance for the other two risks.
Action: Risk register to be updated to include the suggestion noted above.

9. PAPERS FOR NOTING

9.1   Partnership Forum 3 Key Points

The key points and minutes were noted from the previous meetings.

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 3 Points were agreed as follows: Workforce Report & Flexible Work Location Policy, PDWR/Corporate Objectives, and Sickness Absence Deep Dive.

11.DATE OF NEXT MEETING

Next meeting will be held on 29 May 2025
Approved by: Duncan Service, Committee Chair
Date: 29 May 2025