STAFF GOVERNANCE COMMITTEE	Assynt House Beechwood Park Inverness IV2 3BW Tel: 01463 717123 Fax: 01463 235189 www.nhshighland.scot.nhs.uk
MINUTE of MEETING of the STAFF GOVERNANCE COMMITTEE	**05 May 2026 at 10.00 am**

Present

Philip MacRae, Non-Executive Director (Chair)
Kate Dumigan, Staffside Representative
Gerry O'Brien, Board Vice-Chair
Janice Preston, Non-Executive Director
Gavin Smith, Employee Director
Steve Walsh, Non-Executive Director

In Attendance:

Gareth Adkins, Director of People and Culture
Gaye Boyd, Deputy Director of People
Heledd Cooper, Director of Finance
Fiona Davies, Chief Executive
Arlene Johnstone, Chief Officer, Highland Health and Social Care Partnership
Claire Laurie, CSP
Jo McBain, Director of Allied Health Professionals
Richard Macdonald, Director of Estates, Facilities and Capital Planning
Brian Mitchell, Corporate Administrator
Laura Neil, Associate Director of Quality and Clinical Governance
Boyd Peters, Medical Director
Heather Richardson, Head of Operations
N Sturzaker, Head of Communications and Engagement
Dominic Watson, Head of Corporate Governance

Minutes transcribed by Mariska Pellens, Business Support Assistant, Public Services Delivery Scotland

1 WELCOME AND APOLOGIES

Apologies were received from Louise Bussell, Sarah Compton-Bishop, Albert Donald, David Park and Katherine Sutton.

1.2 Declarations of Interest

There were no declarations of interest.

2 ASSURANCE REPORTS & COMMITTEE ADMINISTRATION

2.1 MINUTE OF MEETING HELD ON 03 March 2026

The Committee **Approved** the circulated Minute from the 03 March 2026 Meeting as an accurate reflection of discussions held.

Decision: To approve the Minutes from the 03 March 2026 Meeting

2.2 ACTION PLAN

2.2.1 Members noted that all Actions were either marked as complete or were on the agenda for today's Meeting.

Decision: To note the circulated Committee Action Plan.

2.3 COMMITTEE WORKPLAN 2026-2027

2.3.1 The Committee Noted the Committee Workplan 2026/2027

3. MATTERS ARISING NOT ON THE AGENDA

3.1 No matters were raised in relation to this Item.

4. SPOTLIGHT SESSION (Health, Resilience and S&T)

Members were informed that this item had been removed from the agenda and would be rescheduled on the workplan.

5. ITEMS FOR REVIEW AND ASSURANCE

5.1 People and Culture Portfolio Board Update

G Boyd presented Members with the Assurance Report which outlined the progress across the People and Culture portfolio workstreams. Members noted that this would be the final report presented in the current format due to a recent review and subsequent changes to the governance structure and reporting arrangements. The following key points were highlighted;

- The most recent meeting of the People and Culture Portfolio Board had not been quorate, and therefore formal discussion of the workstreams and agreement of assurance had not taken place. Members were however assured that future changes to membership and remit were expected to support attendance.
- All workstreams were reported to be progressing, and moderate assurance was provided.
- The Leadership Development Programme was continuing, with additional cohort-based training being designed for Senior Charge Nurses. This work was aligned with the development of a new People Strategy, expected to be launched within the year
- The Employee Assistance Programme had been extended for a further year. The launch of the Once for Scotland Health at Work policies in March had supported progress in relation to reasonable adjustments and Access to Work initiatives.
- A Gaelic intranet homepage had been launched, alongside wider activity supporting the Gaelic Language Plan, including a promotional campaign. A development coordinator had been appointed for a one-year period to support this work. Members noted the positive uptake and interest from staff so far.

- Completion of the Health & Care Staffing Act end-of-year report (Quarter 1–Quarter 3) was noted. Work was ongoing to develop a safe and effective rostering policy.

The Committee sought further clarity on the rollout of Safe Care, particularly in areas where it was not currently implemented, including settings outwith acute services. It was confirmed that a detailed update outlining the rollout plan, including scope and timelines, would be developed and presented to a future meeting.

The Committee **Noted** the report content and took **Moderate** assurance.

Action: A detailed update on the rollout plan for Safe Care (including timelines and coverage across non-acute settings) to be presented to a future meeting.

5.2 Personal Development Review Action plan

G Adkins provided Members with a verbal update on the Personal Development Plans (PDP) Action Plan, noting that the paper had been circulated late. The following points were highlighted.

- Appraisal compliance had remained consistently low over a prolonged period.
- A revised action plan had been developed and approved through the Executive Directors Group and Area Partnership Forum. The plan set out ambitious targets to increase compliance to 60% by March and 80% by September the following year.
- The revised approach would focus on three key areas: strengthening reporting and accountability through more detailed performance data; providing targeted, hands-on support to operational areas via designated change partners; and improving the quality of appraisals alongside increasing completion rates.
- targeted work would be undertaken within key staff groups, including nursing and midwifery, social care, estates and facilities, and administrative staff.

The Committee discussed the scale of the challenge and recognised that appraisal improvement remained a significant organisational priority, with continued Board-level focus. The importance of cultural change, leadership visibility, and consistent communication of the value of appraisals was emphasised.

Members acknowledged the need to consider workforce structures and managerial capacity, including the number of direct reports, and the impact this may have on the ability to complete appraisals. The availability of training and development opportunities to support the PDP process was also highlighted.

After discussion, the Committee **Noted** the reported detail and **Agreed** to take **Moderate** assurance.

5.3 People Metrics and Integrated Performance and Quality Report

G Adkins spoke to the report which contained the key workforce metrics, the following points were highlighted;

- Sickness absence had reduced to an average of approximately 6.5%, which was above the desired target of 4%. Ongoing monitoring was required to support further improvement.

- The duration to fill vacancies had increased. This was attributed to increased recruitment activity, including posts linked to the reduction in the working week, alongside short-term capacity pressures within recruitment teams. Members were assured that this would continue to be closely monitored.
- Staff turnover was reported to remain low and was not currently identified as an area of concern.
- In relation to mandatory training, it was highlighted that recent changes to nationally developed modules had impacted reporting, including the introduction of a new fraud awareness module and updates to existing modules. Members noted that the new training would be reported separately going forward, as the uptake would be expected to build gradually.

Members held a discussion during which concerns were raised regarding the ongoing increase in time to fill vacancies. Clarification was also sought regarding the distinction between statutory and mandatory training, and the level of compliance with statutory requirements. It was noted that statutory requirements were primarily limited to fire safety training, with other training being mandatory but guidance driven.

After discussion, the Committee **Noted** the reported detail and **Agreed** to take **Moderate** assurance.

Action:
A breakdown of training compliance, including clarification of statutory requirements (particularly fire safety training), to be provided to a future meeting.

5.4 Workforce Monitoring Report

G Adkins spoke to the report which was presented as part of the Board's statutory requirements under the Public Sector Equality Duties in relation to the Equality Act 2010. Members noted that the report provided comprehensive analysis of workforce data by protected characteristic. It was highlighted that the reporting data went beyond the minimum statutory requirements, offering detailed insights into workforce trends, equal pay considerations, and implications for organisational strategy.

Members recognised the significant volume of information presented and commended the quality and accessibility of the report, as well as the progress made in strengthening this area of reporting. It was noted that national and local guidance would be issued in the near future which was expected to support managers and improve employee experience.

The Committee also considered themes relating to disclosure, recognising that lower declaration rates may have reflected personal perceptions of disability, limited understanding of the benefits of disclosure, or concerns about potential consequences within workplace processes. The Committee further discussed workforce metrics, including headcount changes and demographic trends.

It was noted that increases in workforce numbers may have reflected a strategic shift towards reducing reliance on supplementary staffing, rather than a planned expansion, and that there was no defined position on overall headcount. Wider demographic trends were acknowledged, including the risk of losing experience as staff retired, alongside the need to balance retention initiatives with attracting new entrants.

After discussion, the Committee **Noted** the report content and **Agreed** to take **Substantial** assurance.

5.5 Employability Annual Report

The Committee received the Employability Annual Report, noting it as the first annual report following the introduction of the strategy in April 2025.

The report highlighted significant progress in its first year and Members welcomed the breadth of activity and the clear alignment with organisational priorities around workforce sustainability, inequalities, and inclusive economic growth.

Consideration was given to how impact would be measured going forward, with further work underway to develop evaluation approaches. It was noted that the benefits of the programme extend beyond direct recruitment to NHS roles, contributing to wider positive employment outcomes across the region.

The Committee further noted positive operational impacts, including early recruitment successes and the development of new career pathways within services. Wider workforce considerations were also highlighted, including the need to support individuals facing barriers to formal education and to ensure alignment between employability initiatives and broader workforce planning and development priorities.

After discussion, the Committee **Noted** the reported detail and **Agreed** to take **Moderate** assurance.

5.6 People and Culture Strategic Risk Review

G Adkins provided Members with an update on the People and Culture Strategic Risk Review. the following key points were highlighted;

- progress had been made across a number of Level one risks and Service planning associated with workforce availability (Risk 706), and an upcoming internal audit of the Healthcare Staffing Act.
- The Committee noted that significant work had been undertaken to strengthen the risk management processes across Level two and Level three risks, Which had resulted in improved clarity regarding escalation routes.

A discussion was held around the wording used and whether potential revisions to the wording of certain risks would be possible. Members noted and agreed the principle that any changes to risk definitions or metrics should be evidence-based and undertaken with integrity.

It was agreed that further work would be undertaken to review the wording of strategic risks and that revised proposals would be brought back to a future Committee for consideration.

After discussions, the Committee **Noted** the report and **agreed** to take **moderate assurance**

5.7 Medical Education Report

Members welcomed Boyd Peters who was presenting today on behalf of the Director of Medical Education. The following points were highlighted;

- Increase in the number of medical students, resident doctors, and trainers across NHS Highland, reflecting national efforts to address workforce shortages.
- Medical education activity was supported by national ACT funding of approximately £8 million per annum, although this was expected to plateau, presenting potential financial pressures in future years.
- Robust quality assurance arrangements were in place, including oversight from universities, deaneries, the GMC, and NES, supported by local governance processes. The Committee noted that three deanery quality reviews had taken place in the previous year, and that where issues were identified, remedial action had been implemented.

The Committee discussed key risks and challenges which were being actively progressed through the Executive Director Group. It was also noted that departmental disruption had occurred following a temporary building closure, requiring service relocation.

The Committee acknowledged the significant scale and importance of medical education activity and commended the contribution of staff involved in delivering training.

After discussion, the Committee **Noted** the reported detail and **Agreed** to take **Moderate** assurance.

6. ITEMS FOR INFORMATION AND NOTING

6.1 Area Partnership Forum update of meeting held on 13 February 2026
6.2 Health & Safety Committee update of meeting held on 03 February 2026

The Committee **Noted** the relevant circulated documents.

7 ANY OTHER COMPETENT BUSINESS

7.1 Health and Safety internal audit report

P MacRae raised a concern regarding an internal audit report relating to Health and Safety, which had been presented to the Audit Committee in February 2026.
Given this Committee's responsibilities for assurance in this area, there were concerns raised that the report had not yet been formally considered at this Committee. Members were informed that the timing of governance cycles had meant that the report had progressed through the Audit Committee at the same time as the previous Staff Governance Committee cycle and therefore had not been brought forward at that stage.

Members acknowledged the need to ensure clarity around governance processes and avoid duplication of assurance across committees, while maintaining appropriate oversight. The Director of People and Culture confirmed willingness to bring the report to the Committee for noting following further discussion and suggested that this issue could be considered as part of upcoming committee self-assessment arrangements to review reporting flows and ensure appropriate coverage.

7.2 Items to be raised at the next formal Board Meeting

P MacRae advised Members that he would be raising the following items at the next Board Meeting.

- Personal development review action plan. (overview of IPQR Metrics)
- Workforce Monitoring Report
- Employability annual report

8. Date & Time of Next Meeting

8.1 The next meeting is scheduled for Tuesday 07 July 2026 at 10 am via Microsoft Teams**.**

9. Future Meetings Schedule

The Committee is asked to note the remaining meeting schedule for 2026/27:

07 July 2026 (Next Meeting)
02 September 2026
03 November 2026

The meeting closed at 12.30.