

Meeting:	NHS Grampian Board
Meeting date:	Thursday 10 April 2025
Item Number:	13
Title:	Health and Care (Staffing) (Scotland) Act 2019 – Annual Report 2024/25
Responsible Executive:	Philip Shipman, Interim Director of People and Culture
Report Author:	Gerry Lawrie, Head of Workforce, Elizabeth Wilson, HCSA Implementation Programme Manager, Heather Taylor, HCSA Programme Facilitator

1 Purpose and recommendations

This is presented to the Committee for:

- **Endorsement**

NHS Grampian Board is asked to review and endorse NHS Grampian's first Health and Care (Staffing) (Scotland) Act 2019 Annual Report in advance of submission to Scottish Government by 30 April 2025.

This report relates to:

- Legal requirement
 - Health and Care (Staffing) (Scotland) Act 2019
- NHS Grampian Strategy: Plan for the Future
 - People – Strengthen Colleague & Citizen Engagement to Improve Health
- Board Annual Delivery Plan
 - Right Workforce to Deliver Care – Commence implementation of the Health and Care (Staffing) (Scotland) Act across relevant areas of the workforce

This aligns to the following NHS Scotland quality ambition(s):

- Safe
- Effective
- Person-centred

2 Report summary

2.1 Situation

NHS Grampian Board is being asked to review and endorse NHS Grampian's first Health and Care (Staffing) (Scotland) Act 2019 Annual Report in advance of submission to Scottish Government by 30 April 2025.

2.2 Background

The Health and Care (Staffing) (Scotland) Act 2019 (HCSA) requires an organisation to publish and submit an Annual Report to Scottish Ministers detailing how it has carried out its duties across all aspects except for *Duty to ensure appropriate staffing: agency workers*. A separate report on this duty is submitted to Scottish Ministers on a quarterly basis and published by them. A national reporting template for the Annual Report was provided, however for ease of reading and review by members it has been converted from excel into word and will subsequently be transcribed prior to submission. The NHS Grampian's Annual Report is for health care services only (services for or in conjunction with the prevention, diagnosis or treatment of illness).

The Annual Report requires a compliance assessment for the year 2024/25 across all four quarters. Due to reporting and governance timelines, NHS Grampian's Annual Report will include a compliance assessment for Quarters 1, 2, 3 and only part of Quarter 4.

Each organisation is asked to provide details of areas of success, achievement and learning associated with each duty or requirement, along with an indication of how this could be used in the future. To provide meaningful information that can inform health care staffing policy, organisations are asked to complete this in some detail.

Each organisation is then asked to provide details of any areas of escalation where they have been unable to achieve or maintain compliance with each duty or requirement or where they have faced any challenges or risks in carrying out these duties or requirements. In this section, organisations are also asked what actions have been or are being taken to address this. Again, to provide meaningful information that can inform health care staffing policy, organisations are asked to complete this in some detail.

The purpose of the Annual Report is to:

- enable monitoring of the impact of the legislation on quality of care and staff wellbeing;
- identify areas of good practice that can be shared;
- identify challenges relevant organisations are facing in meeting requirements in the Act and what steps they have taken / are taking to address these;
- identify any improvement support required; and
- inform Scottish Government policy on workforce planning and staffing in the health service, alongside other sources of information and data.

Following receipt of all Annual Reports, there are various requirements placed on Scottish Ministers regarding laying these before Parliament; while an exact timeline for this is unknown, it is anticipated this will be in advance of the Parliamentary recess in October 2025.

The Patient Safety Commissioner for Scotland Act 2023 places a further requirement on organisations to share details of the Annual Report with them; with that post currently unfilled, Health Workforce Directorate in Scottish Government have confirmed that no action is required for 2024/25 year.

2.3 Assessment

The first Annual HCSA compliance assessment has determined an overall Limited Assurance level with individual duties assessed as per Table 1 below:

Table 1 – NHS Grampian Level of Assurances

Duty to ensure appropriate staffing and guiding principles	Limited
Duty to have real-time staffing assessment in place	Limited
Duty to have risk escalation process in place	Limited
Duty to have arrangements to address severe and recurrent risks	Limited
Duty to seek clinical advice on staffing	Limited
Duty to ensure adequate time given to clinical leaders	Limited
Duty to ensure appropriate staffing: training of staff	Reasonable
Duty to follow the Common Staffing Method (CSM)	Limited
CSM - Training and Consultation of Staff	Limited
Planning and Securing Services	Limited

The Level of Assurance definitions were provided by Scottish Government (Table 2), however in applying them it is recognised there is a notable gap between Limited and Reasonable Assurance definitions. The assurance levels detailed above were based on lack of consistency in which systems and processes are robustly applied and in use across all roles in scope and a lack of governance mechanisms identified in the self-assessment processes and other intelligence. However, it is acknowledged that there is variation within each duty with optimism of improvement across year two (2025/26).

Table 2 – Scottish Government Level of Assurance Definitions

Level of Assurance	System Adequacy	Controls
Substantial assurance	A sound system of governance, risk management and control exist, with internal controls operating effectively and being consistently applied to support the achievement of objectives in the area audited.	Controls are applied continuously or with only minor lapses.

Level of Assurance	System Adequacy	Controls
Reasonable assurance	There is a generally sound system of governance, risk management and control in place. Some issues, non-compliance or scope for improvement were identified which may put at risk the achievement of objectives in the area audited.	Controls are applied frequently but with evidence of non-compliance.
Limited assurance	Significant gaps, weaknesses or non-compliance were identified. Improvement is required to the system of governance, risk management and control to effectively manage risks to the achievement of objectives in the area audited.	Controls are applied but with some significant lapses.
No assurance	Immediate action is required to address fundamental gaps, weaknesses or non-compliance identified. The system of governance, risk management and control is inadequate to effectively manage risks to the achievement of objectives in the area audited.	Significant breakdown in the application of controls.

Within the body of the report a range of Red, Amber, Yellow and Green (RAYG) status' have been aligned to the various subsections across all duties. RAYG definitions were also provided by Scottish Government and NHS Grampian's assessment is summarised in Table 3.

Table 3 – Scottish Government RAYG Definitions and NHS Grampian Assessment

Red	0	No systems are in place for any NHS functions or professional groups
Amber	54	Systems and processes are in place for, and used by, under 50% of all NHS functions and professional groups
Yellow	26	Systems and processes are in place for, and used by, 50% or above of NHS functions and professional groups, but not all of them
Green	2	Systems and processes are in place for, and used by, all NHS functions and all professional groups

There are 18 separate areas of success, achievement or learning and 24 areas of challenge, risk and/or where compliance has been unable to be achieved.

2.3.1 Quality/ Patient Care

The primary focus of year one of commencement has been in progressing the necessary systems and processes of each duty; this has limited the ability to consider outcome measures and triangulation of existing Safety, Quality and Workforce frameworks. This will be explored further in subsequent years.

2.3.2 Workforce

The Act's concepts are not new, however when progressing the necessary work, it has enabled positive and new opportunities of connecting work streams that overlap while also increasing the visibility of some aspects of workforce data.

Learning from this first Annual Report will help inform the development of NHS Grampian's Route Map for Strategic Change through the involvement of Board Level Clinicians and the HCSA Executive Lead in that process.

2.3.3 Financial

The challenging financial position continues to have the potential to impact the Board's progression to full compliance. The report references the implementation of "Finding Balance" methodology, the development of the Route Map for Strategic Change and the impact of financial pressures and efficiency savings.

2.3.4 Risk Assessment/Management

To ensure appropriate staffing "at all times" requires assessment of staffing risk in real time and prospectively. It is recognised that in considering if a service is "safe" this does not necessarily mean "no-risk".

The journey towards full compliance will continue beyond the first year of commencement (2024/25) which actualises the organisational risk of non-compliance against the legislation and is considered in the context of three strategic risks:

- Inability to meet population demand for Planned Care;
- Significant delays in the delivery of Unscheduled Care; and
- Inability to achieve the aspirations set out in Plan for the Future due to financial resource constraints and inefficiencies

Four key programme risks for compliance have also been identified:

- Competing priorities, system pressures, financial position, and impact of non-pay reforms;
- Systems and processes not embedded consistently across all services;
- Variation in understanding of clinical professional roles and responsibilities across all aspects of the Act; and
- Increased HCSA related workload on system and professional representatives on the Implementation Team.

Programme risks are routinely reviewed and managed at the six-weekly Implementation Team meetings and quarterly at Effective Workforce Utilisation Programme Board. The risks are also referenced within the Internal Quarterly Reports.

2.3.5 Equality and Diversity, including health inequalities

An impact assessment has not been completed because this is out of scope for this paper.

2.3.6 Other impacts

In reporting and publishing NHS Grampian's Annual Report and compliance assessment, including progress and areas of non-compliance, there is a potential to negatively impact citizen trust and staff morale.

2.3.7 Communication, involvement, engagement and consultation

The Annual Report has been prepared using a range of intelligence mechanisms gathered over 2024/25 including:

- Internal Quarterly Reports by Board Level Clinicians;
- Self-Assessments undertaken by Portfolios, Health and Social Care Partnerships and Public Health Directorate;
- Implementation Team's Live Learning Log;
- Informal discussions; and
- Wider organisational documents.

Board Level Clinicians and HCSA Executive Lead were consulted prior to the Annual Report being presented at Chief Executive Team Business Meeting thus ensuring a wider Executive Leadership perspective on the report.

- Chief Executive Team Business Meeting – 11 February 2025

2.3.8 Route to the Meeting

The Annual Report has been considered at Chief Executive Team Business Meeting and Staff Governance Committee.

- Chief Executive Team Business Meeting – 11 February 2025
- Staff Governance Committee – 25 February 2025
- NHS Grampian Informal Board Session - 6 March 2025

2.4 Recommendation(s)

The Board is asked to:

- Review and endorse NHS Grampian's first Health and Care (Staffing) (Scotland) Act 2019 Annual Report in advance of submission to Scottish Government by 30 April 2025.

Future reporting

The second Annual Report will be presented in advance of the April 2026 submission to Scottish Government.

3 Appendix/List of appendices

The following appendix/appendices are included with this report:

- Appendix 1 – NHS Grampian HCSA Annual Report 2024-25 – Reporting Template
- Appendix 2 – NHS Grampian HCSA Annual Report 2024-25 - Colleagues and Citizens Summary