

Meeting:	NHS Grampian Board
Meeting date:	11 December 2025
Item Number:	10
Title:	iMatter
Responsible Executive:	Philip Shipman, Interim Director of People and Culture
Report Author:	Philip Shipman, Interim Director of People and Culture

1 Purpose and recommendations

This is presented to the Board for:

- Assurance
- Endorsement

Recommendations

- **Assurance** –review and scrutinise the information provided in this paper and confirm that it provides assurance that the policies and processes necessary are in place and are robust
- **Endorsement** – endorse the priorities for improving future staff experience

This report relates to:

- NHS Grampian Strategy: Plan for the Future – People : Colleagues are included, supported and empowered to make their best contribution
- Government policy/directive

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

- Safe
- Effective
- Person Centred

This subject matter of this report is relevant to the mitigation of the following strategic risks (further information provided in the Risk section below):
Deteriorating Workforce Engagement

2 Report summary

2.1 Situation

This paper provides an update on NHS Grampian's annual NHS Scotland Staff Experience Survey, compares the experience of NHS Grampian staff to national

benchmarks and highlights the 5 priorities for improving our staff's experience over the coming 12 months.

2.2 Background

All NHS Scotland Boards have been required since 2018 to use iMatter, the annual NHS Scotland Staff Experience Improvement Model, to measure and discuss staff experience and action planning for improvement at team and organisational level. iMatter provides a longitudinal evidence base of the experience of staff in NHS Grampian (NHSG), and local authority colleagues within the three Health and Social Care Partnerships (HSCPs), and is an annual Key Performance Indicator (KPI). iMatter data allows national benchmarking with other Health Boards in Scotland.

2.3 Assessment

NHS Grampian performs above the national average on several individual experience items, but generally lags behind the national average on items related to Team Management and My Organisation.

NHS Grampian is performing in line with the national average on 13 questions. These generally cover core duties, information access, dignity and respect, and team function.

NHS Grampian scored lower than the national average on 12 questions. The most significant deficits are in the "My Organisation" and "My Team/My Line Manager" sections, indicating challenges in corporate confidence, visibility, and performance management.

NHS Grampian achieved a 13% increase in action plans to 58%, at the 8 weeks mark (which is the cut-off point – we are currently at 69% for action plan completion as of 12/11/25). 3 geographical boards are the same as us, 4 are higher, and 6 are lower. The non-geographical patient facing boards, and the support boards, all do very well here. 4 of them scoring 90% or higher.

The iMatter 2025 results for NHS Grampian reveal persistent strengths at the team and individual level, but with declines in key organisational-level indicators with an overall slight reduction in our staff's experience of working in NHS Grampian.

2.3.1 Priorities for improving staff experience and engagement

Based on the analysis of the iMatter 2025 data, the following recommendations have been prioritised to improve staff experience and engagement across NHSG:

1. Adopting a different approach to Board visibility, presence, listening to staff and staying connected to the front line and what matters to people
2. Prioritising, via our organisational Culture Programme, three improvements staff clearly want to see: leadership investment/development, staff health and wellbeing, and equality.
3. Ensuring how decisions are made in the organisation and who is involved in decision-making is clear and that there is transparency of decision-making, with meaningful staff involvement in decisions that affect them

4. A renewed focus on ensuring all staff receive an annual appraisal and that statutory and mandatory training is prioritised and rates improved in both of these vital areas
5. Further strengthen the iMatter action planning cycle by focusing on evidence teams and services are acting on feedback and making meaningful changes.

2.3.2 Quality / Patient Care

Direct correlation between staff experience and patient care as evidenced by Michael West's report into NHS Staff Management and Health Service Quality.

2.3.3 Workforce

Taking steps to improve staff experience supports our commitment to staff, who we want to work in a continuously improving and safe working environment which is free from prejudice or discrimination. It also sends a strong message to prospective employees that NHS Grampian treats its staff fairly and equitably.

2.3.4 Financial

There are no financial impact arising from the recommendations.

2.3.5 Risk Assessment / Management

By improving staff experience, this will assist mitigate the risks of:

3125: Deteriorating Workforce Engagement

2.3.6 Equality and Diversity, including health inequalities

The content of this paper provides an update only and an Integrated Impact Assessment is therefore not required.

2.3.7 Other impacts

No other relevant impacts

2.3.8 Communication, involvement, engagement and consultation

There is no requirement to engage external stakeholders

2.3.9 Route to the Meeting

This has been previously considered by the following committee and meeting as part of its development. Their feedback has informed the development of the content presented in this report.

- Chief Executive Team, 25th November 2025
- Staff Governance Committee, 4th December 2025

2.4 Recommendation(s)

The Board is asked to:

- **Assurance** –review and scrutinise the information provided in this paper and confirm that it provides assurance that the policies and processes necessary are in place and are robust
- **Endorsement** – endorse the priorities for improving future staff experience

2 Appendix

The following appendix is included with this report:

- Appendix 1 – iMatter Board Report