NHS Shetland

Meeting:	Shetland NHS Board
Meeting date:	10 February 2026
Title:	iMatter 2025 Cycle- Update
Agenda reference:	Board Paper 2025/26/70
Responsible Executive/Non-Executive:	Lorraine Hall, Director of HR and Support Services
Report Author:	Kirsty Clark, iMatter Operational Lead Marianne Williamson, iMatter Admin Lead

1. Purpose

This is presented to the Board/Committee for:

- Awareness
- Discussion

This report relates to:

- Government policy/directive

This aligns to the following NHSScotland quality ambition(s):

- Safe
- Effective
- Person-centred

2. Report summary

2.1. Situation

The purpose of this report is to provide NHS Shetland Board with the main highlights of the 2025 iMatter cycle.

The following action is included under the 'Nuture' strand in the Staff Governance Action Plan 2025/26:

Following review of the 2024 cycle, the iMatter team have identified the following aims for 2025:

- *Maintain 60% response rate*

- *50% of Actions Plans completed before 29 July deadline*

- *Refresh communication and support for Action Planning, with focus on celebrating success*

- *Increase involvement of Executive Management Team in overall iMatter process*

- *Review success of electronic only distribution*

2.2. Background

iMatter is a national tool which has been designed to help individuals, teams and Health Boards understand and improve staff experience. Staff experience is defined as 'the extent to which employees feel motivated, supported and cared for at work. It is reflected in levels of engagement, motivation and productivity.

iMatter was rolled out across Health Boards from 2015.

There are three main phases in the iMatter cycle:

Team Confirmation	14 April-09 May 2025	Managers are asked to log into the Webropol system and confirm team members. This is also an opportunity for Directors and Team Leads to confirm that structures are correct.
Questionnaire	12 May- 02 June 2025	The questionnaire provides staff with a chance to share their personal experience, team dynamics and organisational feedback in real time. In 2025 the questionnaire was sent to 1662

		respondents in 115 teams across NHS Shetland and the Health and Social Care Partnership.
Action Planning	03 June- 29 July 2025	Team action plans are an important element of the iMatter experience, enabling teams to have a constructive conversation on how they can build upon positive ways of working and improving their team experience.

Electronic Distribution

We were informed by Webropol early 2025 that a mixed distribution (Paper/Electronic) would lead to differing timelines for Directorates. Over the last few years the number of paper responses requested has been low (20 in 2024 with a 55% response rate). NHS Orkney moved to electronic only distribution in 2024. Following discussion with the Chief Executive, Director of HR and Support Services and Employee Director it was agreed to trial electronic only distribution for this cycle.

We offered support to those departments who had paper applications in previous cycles.

An electronic only distribution allowed us to follow the same timeline for the whole organisation, helping us keep our communications clear. It removed two weeks from the timeline compared to 2024, meaning an additional two weeks were available before the school summer holidays for Action Planning.

2.3. Assessment

Headline analysis

NHS Shetland continues to demonstrate strong staff engagement, with consistently positive experiences reported in clarity, support, and respectful treatment. Improved action-plan completion reflects a growing commitment to continuous improvement, supported by high scores in patient services and team recommendation. Staff report high levels of confidence in patient services, with NHS Shetland highest geographic board score (82) for "happy for a friend/relative to access services".

NHS Shetland's response rate was 56%, a decrease of 4 percentage points from 2024 (60%). This is below the national average (57%) and reflects a drop in participation, mainly due to lower engagement from Shetland Islands Council employees (39% response rate). NHS Shetland's own staff maintained a strong response rate of 69%.

Key Performance Indicators

In autumn each year, the Scottish Government publishes a Health and Social Care Staff Experience Report (Appendix 5) which analyses iMatter data from across Scotland. The KPIs from NHS Shetland that will form part of this report are as follows: Below are the three KPIs

	NHS Shetland	NHS Shetland from last year	Scotland Average
Response Rate	56%	⬇	57%
Employee Engagement Index	78	➡	77
Action Plans Agreed	50%	⬆	56%

KPIs from each Directorate are attached as Appendix 1

Results

The overarching Board Report is attached as Appendix 2.

There are four categories of results:

Strive to celebrate	67-100	Monitor to further improve	51-66	Improve to monitor	34-50	Focus to improve	0-33

Our highest rated survey questions are:

Question	Shetland Score	Scotland Average
My direct manager is sufficiently approachable	88	88
I feel my direct line manager cares about my health and wellbeing	87	87
I am clear about my duties and responsibilities	87	88
I am treated with dignity and respect as an individual	86	85

There were no 'improve to monitor' or 'focus to improve' areas at organisational level but our lowest scoring questions were as follows:

Question	Shetland Score	Scotland Average
I am confident performance is managed well within my organisation	65	62
I have confidence and trust in Board members who are responsible for my organisation	64	60

I feel that board members who are responsible for my organisation are sufficiently visible	61	55
I feel sufficiently involved in decisions relating to my organisation	60	55

In 2024 these were also the lowest scoring components nationally.

EEI Score

The Employee Engagement Index (EEI) is calculated based on the number of responses for each point on the scale for component questions (Strongly Agree to Strongly Disagree) multiplied by its number value (6 to 1). These scores are added together and divided by the overall number of responses to give the score to show level of engagement.

Overall EEI	78

Between 2017 and 2025 the overall NHS Shetland EEI score has been either 78 or 79, indicating consistently high staff engagement. NHS Shetland's score of 78 is above the national average of 77.

EEI number for teams within NHS Shetland

EEI Threshold	67-100	51-66	34-50	0-33	No report	Total
Number of Teams	90	13	1	0	11	115
Percentage of Teams	78.3%	11.3%	0.9%	0.0%	10%	100%

It is encouraging that the majority of teams within NHS Shetland have an EEI score within the highest threshold.

Teams that are made up of less than 5 people require a 100% response rate to generate a report. The 11 teams who did not receive a report were all small teams. Teams can still enter an Action Plan without a Team Report.

The iMatter Team has, where possible, encouraged managers to amalgamate small teams to try and maximise the chance of receiving a team report to facilitate action planning. Moving into the 2026 cycle this is an area of focus.
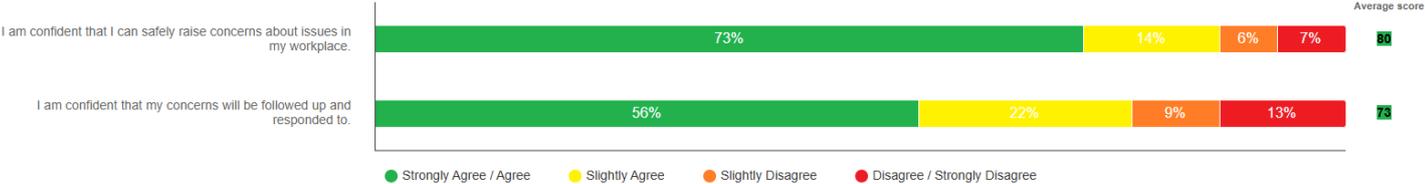
Raising Concerns

Two additional questions were first included in the 2023 questionnaire covering how staff feel about raising concerns. The results are not included within the EEI calculation of the Staff Governance strand scores. The questions are not compulsory within the questionnaire but 98.5% of respondents chose to answer.

The Raising Concerns results for NHS Shetland show a mixed picture when compared with national Scotland performance. Confidence in the ability to safely raise concerns (73%) remains strong, though slightly below the national figure of 79%. Confidence that concerns will be acted upon is notably lower locally, with only 56% agreeing compared to a national average of 73%. This 17-point difference highlights a significant area of focus for improvement.

2025

Thinking of your experience in the last 12 months please tell us if you agree or disagree with the following statements:

Number of respondents: 923

	Strongly Agree / Agree	Slightly Agree	Slightly Disagree	Disagree / Strongly Disagree	Average score
I am confident that I can safely raise concerns about issues in my workplace.	73%	14%	6%	7%	80
I am confident that my concerns will be followed up and responded to.	56%	22%	9%	13%	73

2024

Raising Concerns Report

NHS Shetland

Total number of respondents: 961

Thinking of your experience in the last 12 months please tell us if you agree or disagree with the following statements:
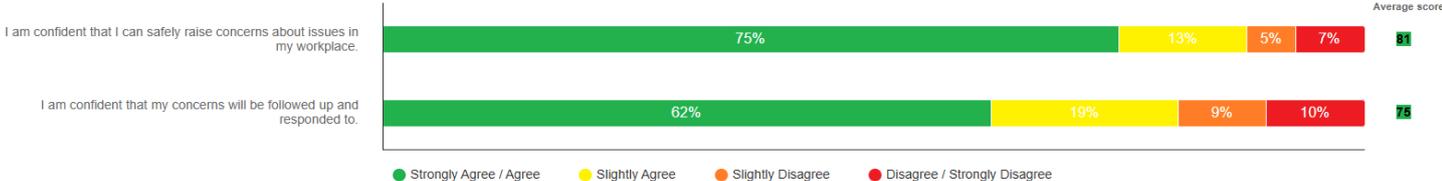
Number of respondents: 953

	Strongly Agree / Agree	Slightly Agree	Slightly Disagree	Disagree / Strongly Disagree	Average score
I am confident that I can safely raise concerns about issues in my workplace.	75%	13%	5%	7%	81
I am confident that my concerns will be followed up and responded to.	62%	19%	9%	10%	75

Action Planning

During the 2025 cycle the 8-week Action Planning period ran from Tuesday 03 June to 29 July. As mentioned previously, this meant that four weeks were available for Action Planning before the summer holidays.

In our communications regarding Action Planning, the iMatter team emphasised the importance of celebrating success and encouraged teams to *'think about one everyday action that makes a difference to your team'.*

Alongside the system generated emails, Executive Management Team were kept up to date with Action Planning figures within their Directorates. During the final weeks of the period, we reached out to individual managers to encourage completion and offer support.

 At the end of the 8-week period our completion figure was 50%, this is our highest rate to date, showing improvement in follow-through and team engagement with the process.

Managers can continue to enter Action Plans into the system but these will not be included in the nationally reported KPI.

2026 Cycle

As trialled in 2025, we will continue with an electronic only distribution in 2026. Early preparation work is underway with draft timeline confirmed with Scottish Government. We are in discussion with the Local Authority regarding the continued involvement of their exclusive teams in the process. As part of the preparation phase, Executive Directors will be written to and asked to review and confirm Directorate Structures.

The draft timeline is attached as Appendix 5.

2.3.1. Quality / patient care

When used appropriately, iMatter can be a powerful tool for continuous improvement that enhances patient care by enhancing staff experience.

2.3.2. Workforce

iMatter is a national tool utilised by all NHS Scotland Boards. Its purpose to aid individuals, teams, directorates and Health and Care Partnerships and Boards in understanding and enhancing staff experience

2.3.3. Financial

None identified.

2.3.4. Risk assessment/management

None identified.

2.3.5. Equality and Diversity, including health inequalities

An impact assessment has been completed by the Scottish Government.

Demographic information of respondents is collected at the questionnaire phase.

2.3.6. Other impacts

Facilitating and supporting the iMatter process each year is a significant piece of work. Both the Operational Lead and Administration Lead are part-time employees and iMatter reduces the capacity for other pieces of work.

2.3.7. Communication, involvement, engagement and consultation

The iMatter team have utilised all internal communication channels available within the Board.

- Dedicated iMatter inbox for queries and issues
- iMatter intranet page
- Regular emails to staff and managers- both system generated and from iMatter team

2.3.8. Route to the meeting

Regular updates have been provided to the Executive Management Team throughout the iMatter 2025 cycle.

Updates have also been provided to Area Partnership Forum and Staff Governance Committee.

2.4. Recommendation

- **Awareness** – For Members' information only.

- **Discussion** – Examine and consider the implications of a matter.

3. List of appendices

The following appendices are included with this report:

Appendix No 1- Directorate KPIs

Appendix No 2- Board Report 2025

Appendix No 3- Board Yearly Components Report 2022-2025

Appendix No 4- iMatter Health and Social Care Staff Experience Survey 2025

Appendix No 5- iMatter 2026 Timetable

Appendix 1- Directorate KPIs

HSCP (Mixed Teams)	
Response Rate	68%
EEI	81
Action Plans completed within 8 week period	5/5 teams completed

NHS Shetland (Chief Officer)	
Response Rate	72%
EEI	76
Action Plans completed within 8 week period	12/35 teams completed

Shetland Islands Council (Chief Officer)	
Response Rate	44%
EEI	80
Action Plans completed within 8 week period	8/18 teams completed

Acute and Specialist Services Directorate	
Response Rate	72%
EEI	76
Action Plans completed within 8 week period	11/27 teams completed

Chief Executive Directorate	
Response Rate	62%
EEI	78
Action Plans completed within 8 week period	5/12 teams completed

Finance Directorate	
Response Rate	92%
EEI	80
Action Plans completed within 8 week period	3/3 teams completed

HR and Support Services Directorate	
Response Rate	95%
EEI	82
Action Plans completed within 8 week period	7/7 teams completed

Medical Director	
Response Rate	52%
EEI	74
Action Plans completed within 8 week period	3/3 teams completed

Public Health Directorate	
Response Rate	87%
EEI	87
Action Plans completed within 8 week period	3/4 teams completed

NHS Shetland Board	
Response Rate	90%
EEI	81
Action Plans completed within 8 week period	1/1 teams completed

iMatter

Board Report 2025

NHS Shetland

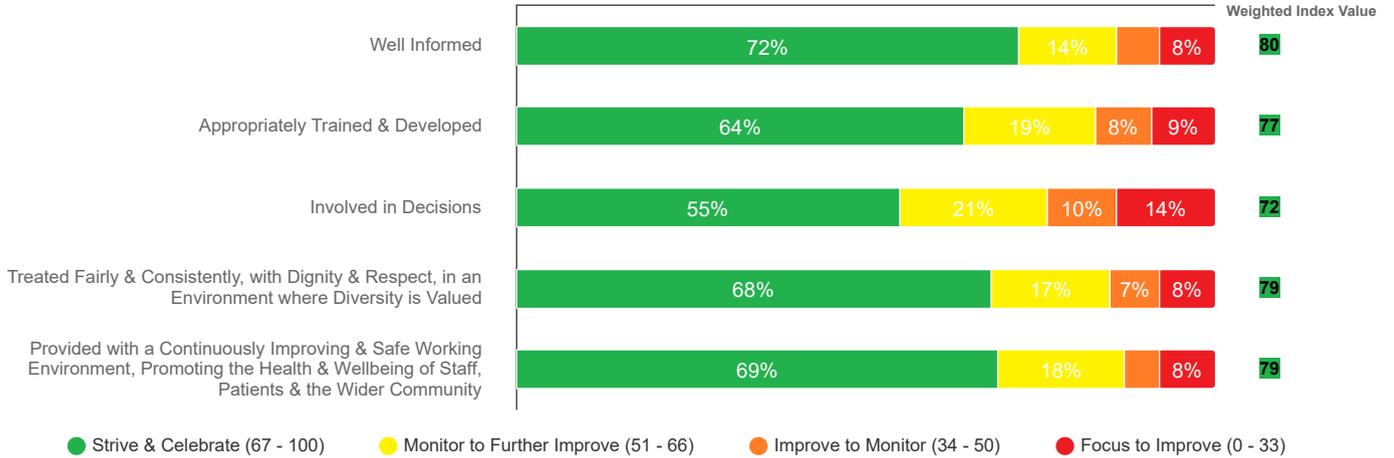## Total number of respondents: 937

Response rate

56%

Respondents: 937
Recipients: 1662

EEI

78
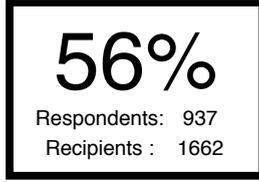
Employee Engagement Index

Staff Governance Standards - Strand Score Index

Weighted Index Value

Strand	Green	Yellow	Orange	Red	Weighted Index Value
Well Informed	72%	14%		8%	80
Appropriately Trained & Developed	64%	19%	8%	9%	77
Involved in Decisions	55%	21%	10%	14%	72
Treated Fairly & Consistently, with Dignity & Respect, in an Environment where Diversity is Valued	68%	17%	7%	8%	79
Provided with a Continuously Improving & Safe Working Environment, Promoting the Health & Wellbeing of Staff, Patients & the Wider Community	69%	18%		8%	79

● Strive & Celebrate (67 - 100) ● Monitor to Further Improve (51 - 66) ● Improve to Monitor (34 - 50) ● Focus to Improve (0 - 33)
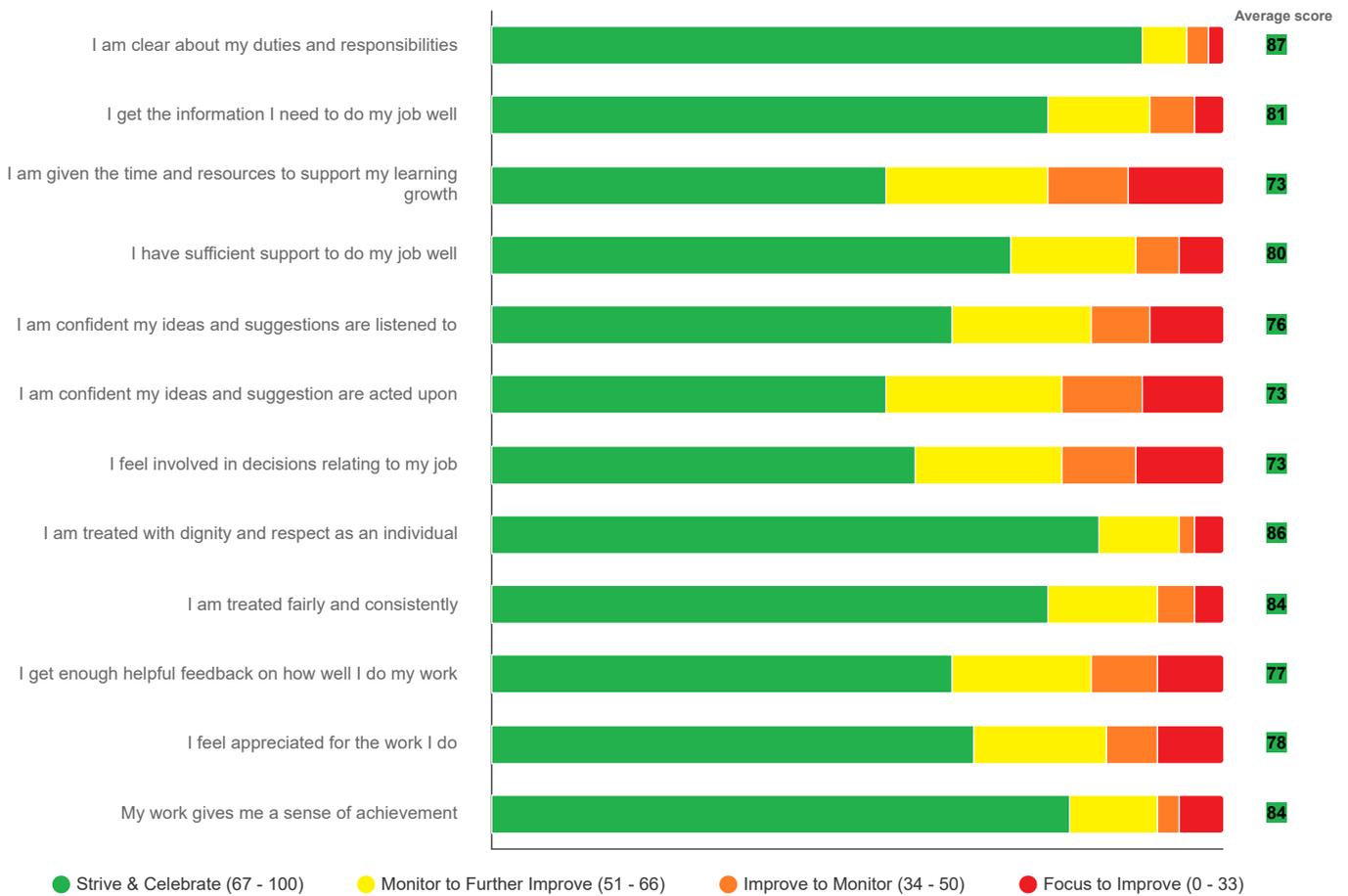
Calculating the Average Score

The number of responses for each point on the scale (Strongly Agree – Strongly Disagree) is multiplied by its number value (6-1) (see right). These scores are then added together and divided by the overall number of responses to the question.

6	Strongly Agree
5	Agree
4	Slightly Agree
3	Slightly Disagree
2	Disagree
1	Strongly Disagree

Thinking of your experience in the last 12 months please tell us if you agree or disagree with the following statements:
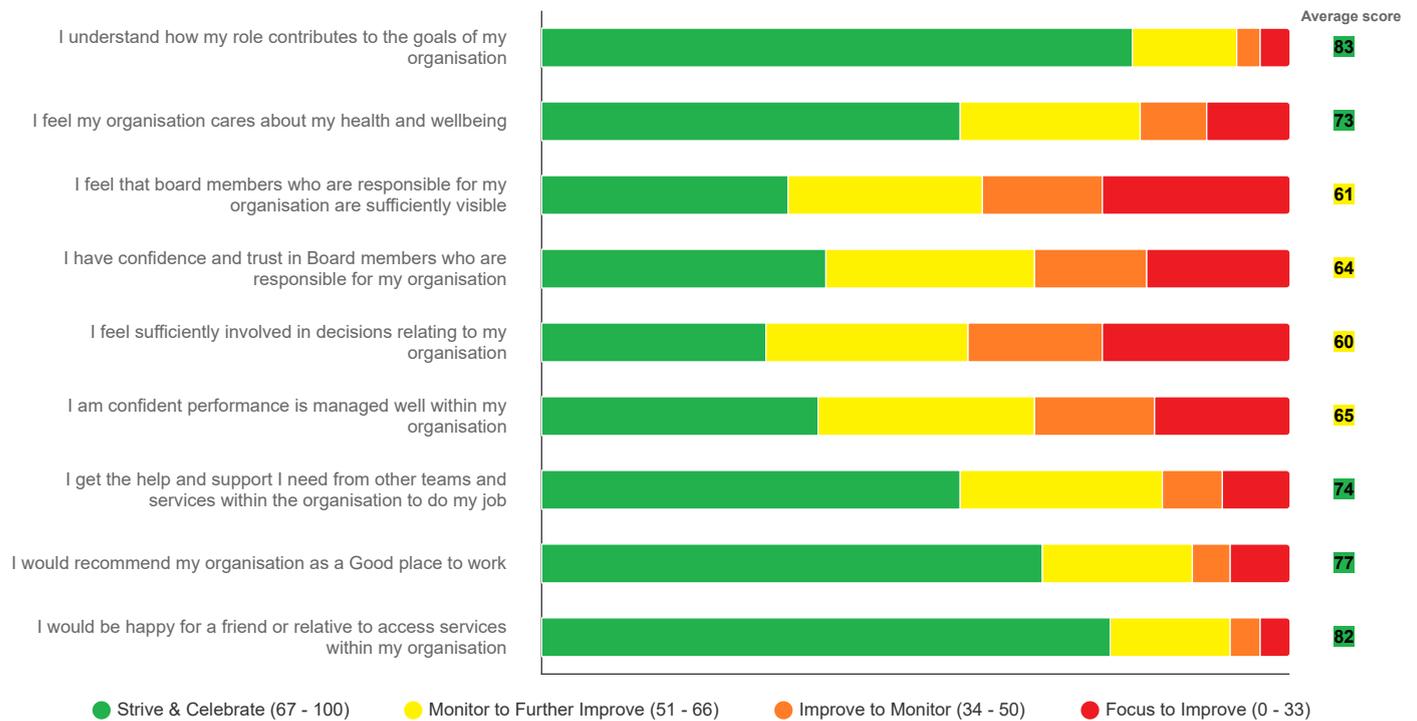
Number of respondents: 937

Average score

Statement	Score
I am clear about my duties and responsibilities	87
I get the information I need to do my job well	81
I am given the time and resources to support my learning growth	73
I have sufficient support to do my job well	80
I am confident my ideas and suggestions are listened to	76
I am confident my ideas and suggestion are acted upon	73
I feel involved in decisions relating to my job	73
I am treated with dignity and respect as an individual	86
I am treated fairly and consistently	84
I get enough helpful feedback on how well I do my work	77
I feel appreciated for the work I do	78
My work gives me a sense of achievement	84

● Strive & Celebrate (67 - 100)   ● Monitor to Further Improve (51 - 66)   ● Improve to Monitor (34 - 50)   ● Focus to Improve (0 - 33)

Thinking of your experience in the last 12 months please tell us if you agree or disagree with the following statements relating to your team and direct line manager:

Number of respondents: 937

Average score

Statement	Score
I feel my direct line manager cares about my health and well-being	87
My direct line manager is sufficiently approachable	88
I have confidence and trust in my direct line manager	84
I feel involved in decisions relating to my team	77
I am confident performance is managed well within my team	78
My team works well together	83
I would recommend my team as a good one to be a part of	84

● Strive & Celebrate (67 - 100)   ● Monitor to Further Improve (51 - 66)   ● Improve to Monitor (34 - 50)   ● Focus to Improve (0 - 33)

Thinking of your experience in the last 12 months please tell us if you agree or disagree with the following statements relating to your Organisation:

Number of respondents: 937

Statement	Average score
I understand how my role contributes to the goals of my organisation	83
I feel my organisation cares about my health and wellbeing	73
I feel that board members who are responsible for my organisation are sufficiently visible	61
I have confidence and trust in Board members who are responsible for my organisation	64
I feel sufficiently involved in decisions relating to my organisation	60
I am confident performance is managed well within my organisation	65
I get the help and support I need from other teams and services within the organisation to do my job	74
I would recommend my organisation as a Good place to work	77
I would be happy for a friend or relative to access services within my organisation	82

● Strive & Celebrate (67 - 100) ● Monitor to Further Improve (51 - 66) ● Improve to Monitor (34 - 50) ● Focus to Improve (0 - 33)

Please tell us how you feel about your overall experience of working for your organisation from a scale of 0 to 10 (where 0 = very poor and 10 = very good):

Number of respondents: 937

Very Good Experience... 10
9
8
7 → 7.3
6
5
4
3
2
1
Very Poor Experience... 0
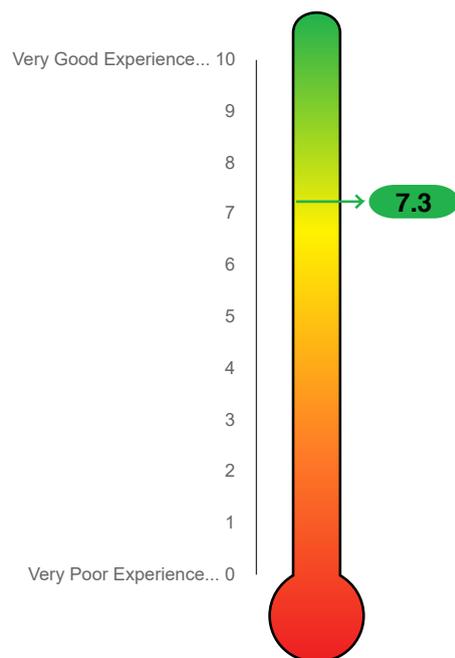
EEI number for teams within the same Board

EEI Threshold	(67-100)	(51-66)	(34-50)	(0-33)	No report	Total
Number of Teams	90	13	1	0	11	115
Percentage of Teams	78.3%	11.3%	0.9%	0.0%	10%	100%

Board Yearly Components Report

NHS Shetland

Total number of respondents: 937

iMatter Components

iMatter Questions	Staff Experience Employee Engagement Components	Average Response				
		2021	2022	2023	2024	2025
My direct line manager is sufficiently approachable	Visible and consistent leadership	86	88	89	87	88
I feel my direct line manager cares about my health and well-being	Assessing risk and monitoring work stress and workload	86	87	89	87	87
I am clear about my duties and responsibilities	Role Clarity	87	87	88	88	87
I am treated with dignity and respect as an individual	Valued as an individual	85	86	87	86	86
I would recommend my team as a good one to be a part of	Additional Question	84	85	86	85	84
I have confidence and trust in my direct line manager	Confidence and trust in management	84	85	87	85	84
I am treated fairly and consistently	Consistent application of employment policies and procedures	83	84	85	84	84
My work gives me a sense of achievement	Job satisfaction	84	85	85	84	84
My team works well together	Effective team working	83	84	85	84	83
I understand how my role contributes to the goals of my organisation	Sense of vision, purpose and values	84	85	85	85	83
I would be happy for a friend or relative to access services within my organisation	Additional Question	82	82	82	81	82
I get the information I need to do my job well	Clear, appropriate and timeously communication	81	81	83	82	81
I have sufficient support to do my job well	Access to time and resources	79	80	82	81	80
I am confident performance is managed well within my team	Performance management	78	79	81	79	78
I feel appreciated for the work I do	Recognition and reward	77	79	80	79	78
I would recommend my organisation as a Good place to work	Additional Question	78	78	78	78	77
I feel involved in decisions relating to my team	Empowered to influence	77	78	80	78	77
I get enough helpful feedback on how well I do my work	Performance development and review	77	78	80	78	77
I am confident my ideas and suggestions are listened to	Listened to and acted upon	77	79	80	78	76
I get the help and support I need from other teams and services within the organisation to do my job	Appropriate behaviours and supportive relationships	74	75	75	74	74
I feel involved in decisions relating to my job	Empowered to influence	73	75	76	75	73
I feel my organisation cares about my health and wellbeing	Health and wellbeing support	76	77	77	75	73
I am given the time and resources to support my learning growth	Learning & growth	70	72	75	73	73
I am confident my ideas and suggestion are acted upon	Listened to and acted upon	73	75	76	74	73
I am confident performance is managed well within my organisation	Performance management	67	66	68	67	65
I have confidence and trust in Board members who are responsible for my organisation	Confidence and trust in management	67	67	65	65	64
I feel that board members who are responsible for my organisation are sufficiently visible	Visible and consistent leadership	62	61	60	61	61
I feel sufficiently involved in decisions relating to my organisation	Partnership working	61	61	62	61	60

67 - 100	Strive & Celebrate	51 - 66	Monitor to Further Improve	34 - 50	Improve to Monitor	0 - 33	Focus to Improve

iMatter Health & Social Care Staff Experience Survey 2025

'Positive Staff Experience Supports Improved Care'

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Ministerial Foreword for Staff Experience Report 2025

Across our Health and Social Care sector, the commitment to delivering safe, effective, and person-centred care continues to be paramount. Recognising that staff experience is essential to individual wellbeing and a fundamental element in the overall quality of care we provide.

Since its inception 10 years ago, the iMatter Continuous Improvement Model has grown into a national tool, designed by staff, for staff—to capture lived experience, foster team-led action, and drive cultural change. iMatter continues to provide rich insights and trend data, enabling us to reflect on progress and identify areas for improvement.

Reflecting on the 10-year journey, it is clear it has not been without challenge. Yet, the resilience, compassion, and adaptability shown by our workforce has been nothing short of remarkable.

This year, although the national results show small movements, it is essential to reflect and understand results on a local level. That is why I expect all leaders to ensure they are listening and acting on the feedback from staff.

Over 119,000 staff continue to share their voices through iMatter, helping shape and drive local and national initiatives. Over the years, these have included the National Wellbeing Programme, the Ethnic Minority Forum, the Nursing and Midwifery Taskforce, and the Improving Wellbeing and Workforce Cultures work. These reflect our shared commitment to creating workplaces where everyone feels safe, valued, and heard.

The survey's structure, which is aligned to the five strands of the Staff Governance Standard, continues to support teams and Boards in fostering environments where staff feel well-informed; appropriately trained; involved in decisions; treated fairly; and supported in their health and wellbeing. The addition of questions around confidence to speak up has helped our understanding of the importance of psychological safety in the workplace.

As we move forward, the insights from iMatter will continue to inform key national priorities, including Operational Improvement Plan, the Service Renewal Framework, and the Population Health Framework.

Thank you to every individual who has contributed. By completing your survey, shaping an action plan, or leading change within your team, you are ensuring your voice and experience is heard and acted upon. Together, we will continue to build a culture of compassion, inclusion, and continuous improvement across Health and Social Care.

Neil Gray, Cabinet Secretary for Health and Social Care

Introduction

NHSScotland are committed to enhancing and improving staff experience for all.

The National Workforce Strategy for Health and Social Care, issued in 2022, sets out a vision of a sustainable, skilled workforce with attractive career choices where all are respected and valued for the work they do. The NHS Recovery Plan 2021-2026, which seeks to drive long term recovery and sustainability in the system, also reinforces the importance of positive staff experience in delivering positive patient outcomes.

It is therefore essential that staff at all levels are empowered to have their voices heard and valued, and staff views and actions contribute to continuous improvement in their teams and organisations.

The iMatter Continuous Improvement Tool was developed by NHSScotland staff with the aim of engaging all staff in a way that feels right for them. The focus is on team-based understanding of experience, but it also offers information at various levels within organisations to evidence and help improve staff experience. As such, it can provide clarity on where to focus efforts for maximum impact, which in turn leads to better care, better health, and better value.

Now in its tenth year, iMatter was initially rolled out over a three-year period from 2015 to 2017 to all staff across NHSScotland Health Boards. Since 2017 it has been embedded across 22 Health Boards and participating Health and Social Care Partnerships, with the exception of 2020, when a shorter pulse survey was run instead due to the pandemic.

The implementation of iMatter has enabled Health Boards and the Scottish Government to obtain a comprehensive picture of staff experience over the past 10 years, which has allowed us to identify areas of success and areas that require improvement. This helps inform delivery on the commitments of our Staff Governance Standard.

The work to measure and report staff experience within NHSScotland Health and Social Care for 2025 has remained consistent in that it is commissioned by the Scottish Government and carried out by Webropol Ltd, an independent company.

iMatter Process

The iMatter questionnaire gives staff the opportunity to feed back on their experience within their team and at organisational level each year. iMatter results are directly reported at all levels throughout an organisation. Once team results are delivered, teams are invited to collectively share responsibility for developing an action plan within an 8-week period and to review actions and progress made throughout the year. As an integral part of the iMatter process, teams come together to review the results and share thoughts and ideas in order to develop and implement Action Plans. See Appendix 1 for further details.

Data Collection

The iMatter process uses Webropol to distribute electronic and paper questionnaires to NHSScotland employees, as well as those employed by the Local Authority who work in a Health & Social Care Partnership (HSCPs) who choose to participate. In 2025, all 22 Health Boards and 25 HSCPs took part (see Appendix 2 for details). Access to the survey was provided via three options:

1. An email invitation with a link to the online survey (Email)
2. A paper survey printed and distributed to those without online access (Paper)
3. An invitation sent via SMS with a link to the online survey (SMS)

For 2025 all fieldwork was carried out from 12th May to 7th July 2025.

Questionnaire

The 2025 questionnaire remains unchanged, with minor wording changes to the introduction and the question relating to parental leave. The questionnaire consists of attitudinal questions relating to staff engagement, referred to in iMatter reporting as 'Components'. Each question has six responses: 'Strongly Agree', 'Agree', 'Slightly Agree', 'Slightly Disagree', 'Disagree', 'Strongly Disagree'. The questionnaire is included in Appendix 3.

Calculation of scores for each question and the EEI

The aggregated scores for each question are placed into one of four categories for reporting:
Example: Thinking of your experience in the last 12 months please tell us if you agree or disagree with the following statements:

Question Response	Score	Category for Reporting
Strongly Agree	6	67 – 100 Strive & Celebrate
Agree	5	67 – 100 Strive & Celebrate
Slightly Agree	4	51 – 66 Monitor to Improve
Slightly Disagree	3	34 – 50 Improve to Monitor
Disagree	2	0 – 33 Focus to Improve
Strongly Disagree	1	0 – 33 Focus to Improve

To calculate the average score for each question, the number of responses for each point on the scale (Strongly Agree to Strongly Disagree) is multiplied by the number value (6 to 1) (see above). These scores are then added together and divided by the overall number of responses to the question. The average score calculated is then divided by 6 (the highest possible score) and multiplied by 100 to give the reported score.

The Employee Engagement Index (EEI) is calculated based on the number of responses for each point on the scale for component questions[1] (Strongly Agree to Strongly Disagree) multiplied by its number value (6 to 1). These scores are added together and divided by the overall number of responses to give the score to show level of engagement.

The questionnaire also measures overall experience, on a 10-point scale from very good to very poor. The report shows the mean score where again, higher scores are better.

Classifying Boards

Boards can be broadly allocated to one of three groups:
- Geographic Boards: those that provide frontline healthcare services for their respective geographical areas.
- National Boards (Support): those that provide support services to the organisation at a national level.
- National Boards (Patient-facing): those that provide specialist patient-facing services.

Colour-coding as illustrated is used throughout the report to highlight the different types of Boards. An overview of each Board and a link to its website is included in Appendix 4.

Geographic Boards (Patient-facing)

NHS Ayrshire & Arran
NHS Borders
NHS Dumfries & Galloway
NHS Fife
NHS Forth Valley
NHS Grampian
NHS Greater Glasgow and Clyde
NHS Highland
NHS Lanarkshire
NHS Lothian
NHS Orkney
NHS Shetland
NHS Tayside
NHS Western Isles

National Boards (Patient-facing)

NHS 24
NHS Golden Jubilee
Scottish Ambulance Service
The State Hospital

National Boards (Support)

Healthcare Improvement Scotland
NHS Education for Scotland
National Services Scotland
Public Health Scotland

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[1] Components included are My Experience as an Individual, My Team/My Direct Line Manager, My Organisation in the questionnaire. See Appendix 3 for details.

Response Rate Threshold

The previous response rate requirement of 60% for teams of 5 or more to receive an EEI report was removed in 2021. The 100% response rate for teams of 4 or less to generate a report remains a requirement for 2025. This is to provide anonymity and the higher the response rate, the more realistic the feedback of how staff feel about working in their team.

iMatter Report 2025

This report provides detailed information and analysis of the iMatter responses for 2025. It also contains comparisons to previous years where appropriate. The Everyone Matters Pulse Survey (EMPS) carried out in 2020 focused on well-being and included only a small number of iMatter metrics. As the different questionnaire content may influence the way in which staff answered individual questions, the data is not included within the main historic iMatter comparisons in this report.

The findings from this report will be used by a range of stakeholders, including:
- Individual organisations (Health Boards and local authorities)
- The Scottish Government
- Partnership Groups such as the Scottish Workforce and Staff Governance Committee (SWAG), and the Scottish Partnership Forum (SPF)

This report is supported by the Health and Social Care Staff Experience Survey 2025: iMatter Data File (http://www.gov.scot/ISBN/9781806433674/documents) containing more detailed data.

Team Stories

The iMatter process is supported by Team Stories, that provide best practice examples of how to address challenges and provide inspiration and ideas for other teams and for the organisation as a whole. Illustrations from Team Stories are included through the report. Appendix 5 has a full list of Team Stories submitted this year.

Board Feedback

Where results are of particular note, for example very high or very low scores, or scores that have changed considerably from 2024, Boards have been asked to provide comments. Feedback is typically around why the scores are as they are and any specific actions that have been put in place to address past or current areas of movement. This feedback is included within the report, either directly or in a summarised format.

Statistical Analysis

Significance testing has been carried out on the data, to explore the extent to which differences in scores between different groups (e.g. Boards, Staff Groupings etc.) are statistically significant. Correlation analysis has also been carried out, to understand the relationship between the individual measures included within iMatter. An overview of the analysis done is in Appendix 6 and summaries of the data are included in the iMatter 2025 Data file.

Whole Number Reporting

As with previous years, all iMatter 2025 results are reported to the nearest whole numbers i.e. without any decimal places shown. This is the case for both Board level and national reporting and applies to the presentation of the various scores and index values calculated from the individual survey responses. Whilst this approach does potentially mask some significant movements in the total Health and Social Care dataset and within some of the larger Boards, reporting whole numbers only ensures focus is on those movements that are the most substantial. This year there

is also evidence that while the reported movement, for example, in the overall EEI score is reported as one whole point, the actual movement may be considerably less, though as will be seen in this report that small movement is still statistically significant. In other incidences the actual movement may be greater than the reported one point. It should also be noted that not all differences highlighted in the report are statistically significant.

The only exception to the whole number reporting is the Overall Experience question which is scored on an 11-point scale (from 0 to 10) and is reported to one decimal place.

Whole number reporting has been agreed in partnership by Scottish Workforce and Staff Governance Committee (SWAG).

Reporting Movements and Differences

Throughout the report movements from previous years are reported based on whole numbers. Differences between Boards within the 2025 data are also commented on. For data reported as percentages the movement of difference is shown as percentage points and is abbreviated throughout the report to "pp" for a single percentage point or "pps" for multiple percentage points. Similarly, if the movement or difference being reported is in an index score such as the EEI or individual component scores, it is shown in points and is abbreviated throughout the report to 'pt' for a single point or "pts" for multiple points.

Profile of Staff Completing the iMatter Survey

Staff are asked to confirm if they are NHSScotland or Local Authority staff and the staff grouping they are in.

Additionally, since 2021 demographic questions have been included within iMatter. These questions are optional, however a high number of respondents complete these questions. Further details of demographics and staff groupings are included within the iMatter 2025 Data file[2].

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iMatter 2025 National Key Performance Indicators (KPIs)

Response Rate

Overall Response Rate	**57%**
Questionnaires Issued:	**207,397**
Responses Received:	**119,173**

The response rate is calculated as the percentage of questionnaires issued that have been completed and returned within the allowable time.

In total 207,397 questionnaires were issued, 607 more than in 2024. A total of 119,173 usable responses were received, 361 less than in 2024.

The 2025 response rate is 57%, a decrease of 1 percentage point from 2024.

Employee Engagement Index Score (EEI)

Employee Engagement Index (EEI) Score	**77**

The Employee Engagement Index (EEI) is calculated based on the number of responses for each point on the scale for component questions[3] (Strongly Agree to Strongly Disagree) multiplied by its number value (6 to 1). These scores are added together and divided by the overall number of responses to give the score to show level of engagement.

The reported 2025 EEI Score for Health and Social Care is 77, an increase of one point (pt) from 2024. However, it is noted that the actual improvement to 3 decimal places is only 0.142 (from 76.426 in 2024 to 76.568 in 2025.) This is a statistically significant improvement.

Action Plans Agreed

Action Plans Agreed:	**56%** within the 8-week deadline

Each team is invited to complete a continuous improvement Action Plan. 56% of teams had an agreed Action Plan in place within 8 weeks of receiving their team's iMatter results.

This is unchanged from 2024.

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[3] Components included are My Experience as an Individual, My Team/My Direct Line Manager, My Organisation in the questionnaire. See Appendix 3 for details.

iMatter KPIs Over Time

The following table summarises the national iMatter Key Performance Indicators (KPIs).

- The 2025 response rate is 1 percentage point (pp) lower than 2024 but remains higher than 2021 and 2022 levels.
- The overall EEI score of 77 for Health and Social Care is 1 point (pt) lower than the 2024 EEI, returning to the 2023 score.
- 56% of all teams completed Action Plans in 2025 within 8 weeks, the same proportion as in 2024.

Year	Response Rate	Movement from Previous Year	EEI	Movement from Previous Year	Action Plan Completion	Movement from Previous Year
2025	57%	-1	77	+1	56%	0
2024	58%	-1	76	-1	56%	+1
2023	59%	+4	77	+1	55%	+8
2022	55%	-1	76	+1	47%	+5
2021	56%	-6	75	-1	42%[4]	-16
2019	62%	+3	76	+1	58%	+2
2018	59%	-4	No Report[5]	N/A	56%	+13
2017	63%	-	75	-	43%	-

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[4] Timing for Action Plan completion reduced from 12 weeks to 8 weeks.
[5] Previously when the response rate did not reach the 60% threshold no report was issued.

iMatter 2025 KPIs for Individual Boards

The table following summarises the iMatter KPIs for each individual Board.

Board KPIs	Response Rate	EEI	Action Plans Agreed
Health and Social Care	**57%**	**77**	**56%**
National Boards (Patient-facing)			
NHS Golden Jubilee	59%	75	66%
NHS 24	82%	79	95%
Scottish Ambulance Service	55%	67	68%
The State Hospital	66%	74	77%
National Boards (Support)			
Healthcare Improvement Scotland	89%	78	90%
National Services Scotland	77%	78	91%
NHS Education for Scotland	90%	84	90%
Public Health Scotland	87%	79	82%
Geographic Boards			
NHS Ayrshire & Arran	55%	78	51%
NHS Borders	55%	77	61%
NHS Dumfries & Galloway	61%	75	40%
NHS Fife	62%	76	43%
NHS Forth Valley	57%	77	58%
NHS Grampian	59%	76	58%
NHS Greater Glasgow and Clyde	54%	76	58%
NHS Highland	52%	76	25%
NHS Lanarkshire	60%	78	67%
NHS Lothian	57%	78	58%
NHS Orkney	69%	76	66%
NHS Shetland	56%	78	50%
NHS Tayside	53%	77	42%
NHS Western Isles	70%	74	66%

A Team Story from NHS Lanarkshire provides a clear and compelling summary of the value of iMatter:

NHS Lanarkshire Infection Prevention and Control Team

"Overall, iMatter has had a positive impact on the team by promoting constructive communication and giving staff a platform to provide valuable feedback. It has provided helpful insight into what we are doing well as a team and highlighted areas for improvement. The process has also enhanced collaboration and helped focus efforts on continuous development. We recognise that this will be an ongoing, continuous process to ensure sustained progress and growth."

Response Rates

Introduction

The response rate shows the number of recipients issued with the questionnaire and the number of respondents as an overall percentage.

In total 207,397 questionnaires were issued, the highest number to date for iMatter, and 119,173 usable responses were received. This equates to an overall response rate of 57%.

Board Response Rates

Response rates across individual Boards range between 52% to 90%.

Board	2021	2022	2023	2024	2025	Response Rate Movement 2024 to 2025 (pp)
Health and Social Care	**56%**	**55%**	**59%**	**58%**	**57%**	**-1**
National Boards (Patient-facing)						
NHS Golden Jubilee	67%	61%	65%	58%	59%	+1
NHS 24	57%	65%	70%	76%	82%	+6
Scottish Ambulance Service	60%	52%	56%	59%	55%	-4
The State Hospital	69%	72%	72%	72%	66%	-6
National Boards (Support)						
Healthcare Improvement Scotland	91%	91%	92%	90%	89%	-1
National Services Scotland	74%	75%	78%	80%	77%	-3
NHS Education for Scotland	92%	88%	88%	87%	90%	+3
Public Health Scotland	86%	75%	79%	87%	87%	0
Geographic Boards						
NHS Ayrshire & Arran	53%	53%	58%	56%	55%	-1
NHS Borders	52%	52%	55%	57%	55%	-2
NHS Dumfries & Galloway	55%	60%	65%	62%	61%	-1
NHS Fife	59%	60%	66%	64%	62%	-2
NHS Forth Valley	54%	56%	61%	58%	57%	-1
NHS Grampian	57%	57%	62%	60%	59%	-1
NHS Greater Glasgow and Clyde	51%	52%	54%	53%	54%	+1
NHS Highland	51%	47%	50%	53%	52%	-1
NHS Lanarkshire	56%	55%	58%	58%	60%	+2
NHS Lothian	53%	54%	58%	57%	57%	0
NHS Orkney	65%	58%	59%	69%	69%	0
NHS Shetland	60%	55%	60%	60%	56%	-4
NHS Tayside	60%	58%	58%	56%	53%	-3
NHS Western Isles	58%	62%	64%	62%	70%	+8

There are some large movements, both positive and negative, in response rates in 2025 compared to 2024.

Among the Geographic Boards the greatest improvement is NHS Western Isles, where the response rate has increased 8 pps from 62% in 2024 to 70% in 2025. It is now the highest response rate from a Geographic Board.

Feedback from the Board attribute the sustained improvement in response rate (up 18% overall from 2018) to activities that boost engagement in the iMatter process:

NHS Western Isles Board Feedback

"Senior leaders have continually reinforced the message that iMatter is not a one-off survey but a vital part of our organisational culture, rooted in listening, hearing and acting. Particular emphasis has been placed on "closing the loop," ensuring that feedback leads to meaningful team discussions and jointly agreed action plans, which has helped build trust and ownership. The rise in completed action plans in recent years appears to correlate strongly with improved response rates, suggesting that when staff see their input being acted upon, they are more likely to engage again. While iMatter has also been referenced in job descriptions to reinforce its importance, the primary driver has been authentic, visible engagement and a commitment to embedding staff voice into everyday practice. Overall, we have seen the benefit from prioritising genuine messaging from leaders, supporting full survey engagement including action planning, operational support from HR and visibly demonstrating that staff feedback leads to tangible improvements."

The largest decline among the Geographic Boards is NHS Shetland down 4 pps from 60% to 56%. NHS Shetland provided feedback on why they believe the response rate has declined:

NHS Shetland Board Feedback

"Our analysis of the 2025 iMatter data shows a mixed picture. NHS Shetland has maintained a strong response rate of 69%, reflecting sustained engagement with the tool. However, we have observed a decline in the overall response rate, primarily due to a reduction in participation from Shetland Islands Council employees, whose response rate now stands at 39%. Feedback suggests that some Council employees perceive iMatter as less aligned with the broader range of engagement initiatives already in place within their organisation."

NHS Tayside has declined 3 pps from 56% to 53%, compounding a longer term decline (65% in 2017) NHS Highland has the lowest response rate (52%).

Among the National Support Boards, National Services Scotland has declined 3 pps to 77%. NHS Education for Scotland (NES) has increased 3 pps to 90%, making it the Board with the overall highest response rate.

Among the National Patient-facing Boards, NHS 24 have improved their response rate by 6 pps from 76% in 2024 to 82% in 2025. This continues improvements seen since 2021 when NHS 24 response rate was 57%. NHS 24 identify several factors that have contributed to this increase:

NHS 24 Board feedback

The following actions were noted as improving response rates:

Leadership Development Programme (LDP) – This programme has enhanced leadership skills and fostered more engaging work environment. This has led to higher levels of employee engagement and satisfaction, encouraging more staff to participate in the iMatter survey. The LDP's emphasis on psychological safety and a positive work culture has made employees feel more valued and respected, further boosting their willingness to provide honest feedback.

Delivery of NHS 24's Management Essentials Programme (MEP) – This is a comprehensive programme that equips managers with essential skills including Communication and Emotional

Intelligence, emphasising the pivotal role of managers in fostering a positive and engaging work environment.

Tracking response rates – Data is monitored and shared twice weekly with the Director of Workforce, reminders are sent to managers, and managers are empowered to lead team confirmation, monitor response rates and facilitate action planning.

Having a comprehensive communication plan – This includes but is not limited to; *"You Said, We Did"* content; introduction of iMatter local drop-in sessions; iMatter feature in Directorate development days; and iMatter resources page on NHS 24's intranet.

A move towards a more performance-oriented culture – This includes the use of iMatter data in local annual KPIs and the creation of a Culture Dashboard to monitor both the directorate and overall organisation positions in these indicators.

Our Culture Matters Programme – As part of this programme each directorate has an annual Culture and Wellbeing Action Plan in place; iMatter engagement is promoted through this channel. Staff Experience Groups promote iMatter and examples of *"You Said, We Did"* actions. A representative from the Workforce directorate attends every Regional Partnership Forum meeting wherein iMatter can be promoted further.

In contrast, The State Hospital has declined 6 pps and is now at its lowest ever response rate of 66%. Feedback from The State Hospital includes information on steps being taken to address concerns around survey fatigue and overload:

The State Hospital Board Feedback
"We are actively looking at our model of two-way communication and how we can improve direct and meaningful engagement with staff. This also links to our leadership and managerial development programme and extending their capabilities and with a focus on workplace safety, both physically and psychologically. The focus on 'Employee Voice' links through a number of areas currently in terms of clinical performance and safety, equalities, speak up and improvement programmes.

We are also trying to coordinate and control the surveys we send out, whilst increasing other new ways to interact with our teams. i.e. through communal areas, canteen and even attend team meetings."

The Scottish Ambulance Service response rate has declined 4 pps to 55%. Operational pressures are identified by the Board as a barrier to taking part, but actions have been implemented to improve engagement in iMatter and therefore response rate:

Scottish Ambulance Service Board Feedback
"We continue to reinforce the benefits of completing the survey and the value of staff voice in shaping change, recognising that some colleagues remain sceptical about its impact. This is being supported through clearer communication, stronger accountability for action planning, and by highlighting tangible examples where iMatter has led to positive change."

A Team Story from NHS 24 reflects on actions taken within the team to improve engagement:

NHS 24 ICT Directorate
"Over the past year, the ICT Directorate at NHS 24 has made significant strides in fostering a positive culture of communication, recognition, and continuous development, guided by iMatter survey feedback. This commitment is reflected in a remarkable 96% response rate in the latest iMatter results.

Key achievements include the formation of a Communications Champion Group with representatives from every team, which launched a quarterly ICT Directorate Newsletter. This publication celebrates new starters, achievements, and shared interests, strengthening staff connection to NHS 24 values and enhancing belonging across the Directorate."

Further details of response rates are included in Appendix 7 and in the iMatter 2025 Data file[6]

Employee Engagement Index (EEI)

Introduction

The Employee Engagement Index (EEI) is calculated based on the number of responses for each point on the scale for component questions (Strongly Agree to Strongly Disagree) multiplied by its number value (6 to 1). These scores are added together and divided by the overall number of responses to give the score to show level of engagement.

Board EEI Scores

EEI Score	2021	2022	2023	2024	2025	Movement 2024 to 2025
Health and Social Care	**75**	**76**	**77**	**76**	**77**	**+1**
National Boards (Patient-facing)						
NHS Golden Jubilee	72	74	76	77	75	-2
NHS 24	75	76	74	77	79	+2
Scottish Ambulance Service	65	67	67	66	67	+1
The State Hospital	74	75	75	75	74	-1
National Boards (Support)						
Healthcare Improvement Scotland	81	82	80	75	78	+3
NHS Education for Scotland	84	85	85	84	84	0
National Services Scotland	78	78	78	77	78	+1
Public Health Scotland	77	75	76	79	79	0
Geographic Boards						
NHS Ayrshire & Arran	75	77	78	78	78	0
NHS Borders	74	75	77	76	77	+1
NHS Dumfries & Galloway	72	75	75	75	75	0
NHS Fife	75	75	77	76	76	0
NHS Forth Valley	73	76	76	76	77	+1
NHS Grampian	76	76	78	77	76	-1
NHS Greater Glasgow and Clyde	74	75	76	76	76	0
NHS Highland	73	75	76	76	76	0
NHS Lanarkshire	77	78	78	78	78	0
NHS Lothian	76	76	77	77	78	+1
NHS Orkney	70	72	74	75	76	+1
NHS Shetland	78	79	79	78	78	0
NHS Tayside	74	76	77	77	77	0
NHS Western Isles	76	74	77	75	74	-1

EEI scores for individual Boards range from 84 for NHS Education for Scotland to 67 for the Scottish Ambulance Service.

The largest improvement has been achieved in Healthcare Improvement Scotland up 3 pts from 75 in 2024 to 78 in 2025. This is a partial reversal of the decline of 5 pts seen from 2023 to 2024.

Throughout this report, there are many large improvements seen in scores for Healthcare Improvement Scotland and feedback from the Board acknowledges the considerable period of organisational change they have been through. They provide details of the actions that are being taken to improve staff experience and therefore iMatter scores:

Healthcare Improvement Scotland Board Feedback
"As an improvement organisation, we fully understand that this insight from staff presents a valuable opportunity for reflection, learning and action. We therefore committed to rebuilding people's confidence and engagement, recognising that clear investment of time, effort and energy was required.

An iMatter Action Plan was developed and agreed in partnership at a cross-organisational level, with progress overseen by our iMatter Steering Group. A total of nine high-level actions were agreed in partnership, promoting collective ownership of the results and addressing our areas for improvement from multiple angles.

Importantly, our response to iMatter results complemented other relational and culture-building work already underway within HIS, namely; HIS Campus; staff wellbeing and equalities commissioning of Core strengths / SDI at an organisational scale; commissioning of consultancy support for Directorates implementing major change; commissioning of learning opportunities to support management development across HIS; the growth of a One Team ethos, and a planned shift towards clearer, shared cultural characteristics known as the *4Ps; Performance, Partnership Working, Personal Commitment and Personal Governance."

The only other movements of more than 1 pt are NHS 24 which has increased by 2 pts and NHS Golden Jubilee that has decreased by 2 pts.

EEI Score Distribution across Teams

Over three-quarters of teams (79%) achieve a 'Strive and Celebrate' EEI score. There remain a small minority of teams (21 teams in total) that have an EEI score of 33 or less.

EEI Score	Number of Teams	Percentage of Teams
Strive & Celebrate (67-100)	12,528	79%
Monitor to Further Improve (51-66)	1,609	10%
Improve to Monitor (34-50)	161	1%
Focus to Improve (0-33)	21	<1%
No Report	1,607	10%
Total Health and Social Care	15,926	100%

Note: Teams with 4 or less staff and a response rate of below 100% did not receive a report.

No Report

1,607 Teams (10%) did not receive a report. These are all teams with less than 5 members, where the required response rate of 100% has not been reached. Further details of the proportion of small teams receiving reports are included in Appendix 7.

Boards that have a high proportion of teams without an EEI report may either be due to a large number of small teams, a relatively low response rate or a combination of both:
- Despite NHS 24 having the highest proportion of small teams receiving a report (87%), it has the largest proportion of teams without an EEI score (12%) among the National Boards. This is because NHS 24 has a high level of small teams (45%) where a response rate of 100% is needed, second only to NHS Education for Scotland (47%).

- Among the Geographic Boards 15% of teams in NHS Lothian and 13% of teams in NHS Tayside did not receive an EEI report this year.
- Across the Geographic Boards the proportion of small teams varies from 10% in NHS Western Isles to 27% in NHS Orkney. The proportion of small teams receiving a report varies from 35% in NHS Forth Valley to 62% in NHS Fife.

The following table shows the percentage of Teams in each Board that achieve each EEI score.

EEI Score Percentage of Teams	Strive & Celebrate (67-100)	Monitor to Further Improve (51-66)	Improve to Monitor (34-50)	Focus to Improve (0-33)	No Report
Health and Social Care	79%	10%	1%	<1%	10%
National Boards (Patient-facing)					
NHS Golden Jubilee	70%	15%	4%	0%	11%
NHS 24	88%	6%	1%	0%	6%
Scottish Ambulance Service	53%	35%	4%	0%	8%
The State Hospital	82%	11%	0%	0%	8%
National Boards (Support)					
Healthcare Improvement Scotland	86%	7%	0%	0%	7%
NHS Education for Scotland	90%	2%	0%	0%	7%
NHS National Services Scotland	90%	6%	1%	0%	4%
Public Health Scotland	96%	1%	0%	0%	2%
Geographic Boards					
NHS Ayrshire & Arran	78%	10%	1%	<1%	12%
NHS Borders	77%	11%	1%	0%	11%
NHS Dumfries & Galloway	80%	12%	2%	<1%	7%
NHS Fife	79%	11%	1%	0%	9%
NHS Forth Valley	83%	10%	1%	<1%	6%
NHS Grampian	82%	9%	1%	<1%	8%
NHS Greater Glasgow and Clyde	78%	11%	1%	<1%	10%
NHS Highland	77%	10%	1%	<1%	11%
NHS Lanarkshire	84%	9%	1%	<1%	6%
NHS Lothian	77%	7%	1%	0%	15%
NHS Orkney	78%	12%	0%	0%	10%
NHS Shetland	78%	11%	0%	0%	10%
NHS Tayside	75%	10%	2%	<1%	13%
NHS Western Isles	78%	15%	1%	0%	5%

Across the Boards, between 70% and 90% of teams score typically 67 or above (Strive and Celebrate).

The exceptions to this are Scottish Ambulance Service where 53% of teams score in this range, and Public Health Scotland, where 96% of teams score 67 or above.

Survey Questions – National Summary of Results

The table shows the breakdown of questions that are asked and the National score for this year.

Health and Social Care	iMatter 2025
My Experience as an Individual	Score
I am clear about my duties and responsibilities	88
I get the information I need to do my job well	82
I am given the time and resources to support my learning growth	75
I have sufficient support to do my job well	80
I am confident my ideas and suggestions are listened to	77
I am confident my ideas and suggestion are acted upon	73
I feel involved in decisions relating to my job	72
I am treated with dignity and respect as an individual	85
I am treated fairly and consistently	83
I get enough helpful feedback on how well I do my work	76
I feel appreciated for the work I do	76
My work gives me a sense of achievement	82
My Team/My Line Manager	Score
I feel my direct line manager cares about my health and well-being	87
My direct line manager is sufficiently approachable	89
I have confidence and trust in my direct line manager	86
I feel involved in decisions relating to my team	77
I am confident performance is managed well within my team	79
My team works well together	83
I would recommend my team as a good one to be a part of	85
My Organisation	Score
I understand how my role contributes to the goals of my organisation	83
I feel my organisation cares about my health and wellbeing	71
I feel that board members who are responsible for my organisation are sufficiently visible	56
I have confidence and trust in Board members who are responsible for my organisation	60
I feel sufficiently involved in decisions relating to my organisation	55
I am confident performance is managed well within my organisation	62
I get the help and support I need from other teams and services within the organisation to do my job	71
I would recommend my organisation as a good place to work	75
I would be happy for a friend or relative to access services within my organisation	77
Raising Concerns[7]	
I am confident that I can safely raise concerns about issues in my workplace	79
I am confident that my concerns will be followed up and responded to	73

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[7] New questions added in 2023

The following table shows all the components ranked in order of score, high to low. The highest scoring areas are those that relate to the clarity staff have about their role and the relationship staff have with their line manager. The lowest scoring components are those that relate to confidence in and visibility of board members, as well as being involved in decisions and how performance is managed.

Health & Social Care Rank Order	iMatter 2025
My direct line manager is sufficiently approachable	89
I am clear about my duties and responsibilities	88
I feel my direct line manager cares about my health and well-being	87
I have confidence and trust in my direct line manager	86
I am treated with dignity and respect as an individual	85
I would recommend my team as a good one to be a part of	85
I am treated fairly and consistently	83
My team works well together	83
I understand how my role contributes to the goals of my organisation	83
I get the information I need to do my job well	82
My work gives me a sense of achievement	82
I have sufficient support to do my job well	80
I am confident performance is managed well within my team	79
I am confident my ideas and suggestions are listened to	77
I feel involved in decisions relating to my team	77
I would be happy for a friend or relative to access services within my organisation	77
I get enough helpful feedback on how well I do my work	76
I feel appreciated for the work I do	76
I am given the time and resources to support my learning growth	75
I would recommend my organisation as a good place to work	75
I am confident my ideas and suggestion are acted upon	73
I feel involved in decisions relating to my job	72
I feel my organisation cares about my health and wellbeing	71
I get the help and support I need from other teams and services within the organisation to do my job	71
I am confident performance is managed well within my organisation	62
I have confidence and trust in Board members who are responsible for my organisation	60
I feel that board members who are responsible for my organisation are sufficiently visible	56
I feel sufficiently involved in decisions relating to my organisation	55

Experience as an Individual

Results are aggregated for each question presented under the heading 'As an Individual'.

There had been very little movement overall in 'Experience as an Individual' scores from 2024.

'*I am given the time and resources to support my learning growth*' has improved by 1 pt from 74 to 75. The need to involve staff and to act on their suggestions remain priorities for improvement.

Experience as an Individual	2021	2022	2023	2024	2025	Movement 2024 to 2025
I am clear about my duties and responsibilities	86	87	88	88	88	0
I am treated with dignity and respect as an individual	83	84	85	85	85	0
I am treated fairly and consistently	81	82	83	83	83	0
My work gives me a sense of achievement	79	81	82	82	82	0
I get the information I need to do my job well	79	81	82	82	82	0
I have sufficient support to do my job well	76	78	80	80	80	0
I am confident my ideas and suggestions are listened to	74	76	77	77	77	0
I feel appreciated for the work I do	73	75	77	76	76	0
I get enough helpful feedback on how well I do my work	73	74	76	76	76	0
I am given the time and resources to support my learning growth	70	72	74	74	75	+1
I am confident my ideas and suggestion are acted upon	70	72	73	73	73	0
I feel involved in decisions relating to my job	70	71	73	72	72	0

The distribution of responses illustrates the areas of success and those requiring the most focus for improvement.

96% of staff agree that they are clear about their duties and responsibilities and 92% agree that they are treated with dignity and respect. 24% of staff responded that they do not agree that they feel involved in decisions relating to their job and 21% do not agree that they feel confident that their ideas and suggestion are acted upon.

Experience as an Individual	Strive & Celebrate	Monitor to Further Improve	Improve to Monitor	Focus to Improve
I am clear about my duties and responsibilities	90%	6%	2%	2%
I get the information I need to do my job well	76%	15%	5%	4%
I am given the time and resources to support my learning growth	59%	21%	9%	11%
I have sufficient support to do my job well	72%	16%	6%	6%
I am confident my ideas and suggestions are listened to	64%	20%	7%	10%
I am confident my ideas and suggestion are acted upon	54%	25%	10%	11%
I feel involved in decisions relating to my job	54%	22%	10%	14%
I am treated with dignity and respect as an individual	82%	10%	4%	5%
I am treated fairly and consistently	77%	12%	5%	6%
I get enough helpful feedback on how well I do my work	63%	18%	8%	11%
I feel appreciated for the work I do	63%	19%	7%	11%
My work gives me a sense of achievement	74%	16%	4%	6%

Boards

Full Board data is included in the iMatter 2025 Data file[8].

While the overall Health & Social Care scores have moved very little from last year, there are some large movements in individual Boards.

Healthcare Improvement Scotland has made some considerable progress in reversing the decline in scores reported last year. All 'Experience as an Individual' component scores have increased in 2025. The largest of these being 'I feel involved in decisions relating to my job' that has increased by 6 pts, returning it to just 1 pt below the 2023 score.

Components that have increased by 3 pts in Healthcare Improvement Scotland are:

- I am given the time and resources to support my learning growth
- I have sufficient support to do my job well
- I am confident my ideas and suggestion are acted upon
- I am treated with dignity and respect as an individual
- I get enough helpful feedback on how well I do my work
- I feel appreciated for the work I do
- My work gives me a sense of achievement.

Other Boards that have achieved improvements of 3 pts in individual components are:

- NHS 24: 'I am given the time and resources to support my learning growth'
- Scottish Ambulance Service: 'I have sufficient support to do my job well'

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[8] iMatter 2025 Data File tabs: 'SGS Components' and 'Significance Testing Boards'

NHS 24 identify a series of actions that have contributed to this improvement:

NHS 24 Board Feedback
This improvement reflects a coordinated and sustained effort across NHS 24, these include:
- Targeted action planning - Teams committed to block out 1.5 hours per month for Continuous Professional Development.
- "Our Culture Matters" and "Our Wellbeing Matters" strategies, alongside Culture and Values Workshops, helped embed a values-led culture that prioritises staff development.
- Frontline colleagues have protected learning time built into their rotas.
- Investment into a 12-month induction programme for new starts.
- Significant investment in training on new digital systems, and project management skills invested to manage large programmes of transformation work.
- Continued development opportunities for staff such as MEP and LDP.
- Initiatives focused on neurodiversity helped create an inclusive environment that supports diverse learning needs.
- The Mentor24 program offered mentorship opportunities, fostering personal and professional growth.
- The ODLL roadshows raised awareness about learning and development resources available to staff.
- Internal consultancy services provided tailored support to teams and individuals, enhancing their learning and growth.
- A review of NHS 24's bursary scheme and targeted comms plan saw a record number of applications in May 2025.
- Oversight of all bursary and external learning applications provided by Establishment Control Group, to ensure a level of fairness across the organisation.
- MEP and LDP emphasised the role of managers in supporting learning and growth. Increased Executive team visibility on these programmes reinforced this.
- The introduction of digital learning tools and digital buddies has provided flexible, accessible learning.
- Digital upskilling sessions have provided staff with the necessary digital skills and tools, making learning more accessible and flexible.
- The Kind Network has fostered a supportive community, encouraging personal and professional growth through shared digital upskilling resources.
- National wellbeing resources have ensured that staff have time and resources to focus on their mental health which is crucial for their overall development."

In feedback from the Board, Scottish Ambulance Service identify several actions that have been effectively implemented:

Scottish Ambulance Service Board Feedback
"This improvement may reflect a number of organisational efforts over the past year, including:

- Increased engagement with the appraisal process, with a stronger emphasis on meaningful conversations about objectives, support, and development.
- Improved compliance with mandatory and statutory training, alongside wider access to development opportunities.
- Continued delivery of Healthy Culture Weeks, providing a wide suite of learning and engagement opportunities linked to staff wellbeing and culture.
- Ongoing CPD "Time to Learn" sessions throughout the year, offering practical development tools for colleagues across roles and levels.

- Ongoing leadership development to support leaders and managers in creating the conditions for staff to feel equipped and supported in their roles."

In contrast, The State Hospital has seen declines in all but one of the Experience as an Individual Components (I have sufficient support to do my job well). The largest decline is in 'I get enough helpful feedback on how well I do my work' which has dropped 4 pts. Five components have declined 3 pts:

- 'I am given the time and resources to support my learning growth'
- 'I am confident my ideas and suggestions are listened to'
- 'I feel involved in decisions relating to my job'
- 'I am treated fairly and consistently'
- 'I feel appreciated for the work I do'

NHS Golden Jubilee has seen a decline in all components in this section, typically by one or two points. 'I get enough helpful feedback on how well I do my work' has declined by 3 pts from 2024.

Several Team Stories illustrate a range of actions being taken to improve staff experiences as individuals.

NHS Grampian illustrates how the use of Feedback Books to record positive feedback is beneficial for individuals and for the team.

NHS Grampian, City MHLD & SMS Support Admin Team
"Our iMatter report and the meeting that followed really highlighted that we wanted to strengthen our team relationships. So, we set up a Microsoft Teams Channel for us, making sure it had a dedicated 'social chat' area. We wanted to replicate those informal office conversations, even though we're often working remotely.

We also started a monthly, one-hour in-person team lunch, which has been great for physically spending time together. And something we've found incredibly meaningful is our feedback books. Each of us has a book where we record positive feedback. During our team lunches, we pass them around with a specific prompt, like 'What I admire about [name] is,' or 'In 2024, I'm thankful to [name] for,' or 'An attribute [name] brings to the team is.' It's given us a really special way to genuinely show our appreciation for one another and provides us with something positive to reflect back on at times when we maybe aren't having such a good day."

A story from NHS 24 shows commitment to ensuring a successful recruitment process that focuses on settling new staff in the organisation immediately:

NHS 24 Workforce Directorate

"A major milestone was the rollout of a refreshed recruitment process across all skillsets, aligned with our Values and Behaviours framework. This ensures new colleagues feel welcomed and set up for success from day one, building culturally aligned teams from the outset.

To support managers, we launched the Hiring Manager Hub—a central resource that simplifies recruitment and boosts confidence in hiring practices.

Focused efforts to reduce attrition and meet establishment targets have created a more stable environment. Our National and Regional Attrition groups, backed by clear action plans, have helped staff feel supported and encouraged to grow."

A Team Story from NHS Lanarkshire focuses on three areas, one of which is "Role Clarity and Development":

NHS Lanarkshire Infection Prevention and Control Team

"Role Clarity and Development: Organise structured sessions to clearly define the responsibilities, expectations, and boundaries associated with each team member's role. Implement a mentorship or buddy system to provide ongoing support. Establish measurable objectives to be regularly reviewed during individual one-to-one meetings."

Staff Groupings

Local Authority staff are more positive about many aspects of their experience as an individual with 5 components being 2 pts higher.

Experience as an Individual	NHSScotland	Local Authority	Difference
I am clear about my duties and responsibilities	88	88	0
I get the information I need to do my job well	82	82	0
I am given the time and resources to support my learning growth	75	77	2
I have sufficient support to do my job well	80	82	2
I am confident my ideas and suggestions are listened to	77	77	0
I am confident my ideas and suggestion are acted upon	73	74	1
I feel involved in decisions relating to my job	72	72	0
I am treated with dignity and respect as an individual	85	86	1
I am treated fairly and consistently	83	84	1
I get enough helpful feedback on how well I do my work	76	78	2
I feel appreciated for the work I do	76	78	2
My work gives me a sense of achievement	82	84	2

Details of scores for each of the individual Staff Groupings within NHSScotland and Local Authority are included in the iMatter 2025 Data file[9]. This shows that typically Local Authority Senior Managers score highest and Ambulance Services score lowest.

My Team / My Direct Line Manager

Results are aggregated for each question presented under the heading 'My Team / My Direct Line Manager'.

'My direct line manager is approachable' is the highest score (89) and has increased by 1 pt from 2025. 'I feel involved in decisions relating to my team' scoring lowest (77). 'My team works well together' has declined by 1 pt from last year.

My Team/My Direct Line Manager	2021	2022	2023	2024	2025	Movement – 2024 to 2025
My direct line manager is sufficiently approachable	87	88	88	88	89	+1
I feel my direct line manager cares about my health and well-being	84	86	87	87	87	0
I have confidence and trust in my direct line manager	84	85	86	86	86	0
I would recommend my team as a good one to be a part of	83	84	85	85	85	0
My team works well together	82	83	84	84	83	-1
I am confident performance is managed well within my team	77	78	79	79	79	0
I feel involved in decisions relating to my team	75	76	77	77	77	0

94% of staff agree that their line manager is approachable and 92% agree that their direct line manager cares about their health and wellbeing. 92% also agree that they would recommend their team.

18% of staff did not agree that they felt involved in decisions and 16% did not agree that they are confident that performance is well-managed.

My Team/My Direct Line Manager	Strive & Celebrate	Monitor to Further Improve	Improve to Monitor	Focus to Improve
I feel my direct line manager cares about my health and wellbeing	83%	9%	3%	5%
My direct line manager is sufficiently approachable	86%	8%	3%	4%
I have confidence and trust in my direct line manager	81%	10%	4%	5%
I feel involved in decisions relating to my team	63%	19%	8%	10%
I am confident performance is managed well within my team	68%	17%	7%	9%
My team works well together	77%	14%	5%	5%
I would recommend my team as a good one to be a part of	79%	13%	4%	5%

Boards

Full Board data is included in the iMatter 2025 Data file[10].

Again, whilst the overall Health and Social Care scores have changed little from 2024, many individual Boards have larger movements in their reported scores.

The largest single improvement is in Healthcare Improvement Scotland where 'I feel involved in decisions relating to my team' has increased by 3 pts, going some way to reversing the decline of 5 pts seen from 2024.

All components in MyTeam/My Direct Line Manager have declined in the State Hospital. The biggest decline is 3 pts in 'I feel involved in decisions relating to my team', the same drop as seen in the equivalent individual component (I feel involved in decisions relating to my job).

NHS Golden Jubilee has a reported decline in all components, reversing the improvement that was seen in 2024 from 2023. The Board provides insight into some of the current challenges and how they are being addressed:

NHS Golden Jubilee Board Feedback
"Operational pressures: over the past year, some teams have experienced increased service demands and staffing challenges, which may have impacted on the capacity of line managers to engage as consistently in wellbeing conversations.

Managerial transitions: a number of teams have undergone leadership changes, and in some cases, new or interim managers may still be building trust and familiarity with their teams.

Board-wide Culture Programme: The implementation of our culture programme may have contributed to the shift in score, not necessarily as a negative outcome, but as a reflection of increased awareness and expectations. The programme has encouraged open dialogue around values, behaviours, wellbeing and leadership and as a result staff may be more attuned to what good support looks like from a line manager and more confident in identifying where it may be lacking or inconsistent."

NHS Western Isles has also seen all components in My Team/My Direct Line Manager decline by one or two points.

An illustration of how to address communications within teams is provided through this Team Story from NHS Grampian.

NHS Grampian, Cardiovascular & Clinical Research Team
"The area for improvement for our team that we identified through iMatter was in communication. We are a team of approximately 18 clinical research nurses located in two different NHS Grampian hospital sites, so we wanted to be able to improve how we worked as a team. As a result we introduced a quarterly face to face team meeting, which usually lasts around 2-3 hours.

We have found that this has greatly improved relationships across the team. Colleagues are more supportive of each other, and we are able to share best practice and learn from each other. We reviewed the progress of this action and as a result alternated the days that we held the meeting on so that more staff were able to attend. We have found this to be a really positive action that

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[10] iMatter 2025 Data File tabs: 'SGS Components' and 'Significance Testing Boards'

has made a difference to how we experience our time at work."

NHS 24 have introduced two flagship programmes to support Leaders across the organisation, with details provided through a team story:

NHS 24 Leadership Team
"These six-month hybrid programmes combine coaching, psychometric profiling, and workshops on emotional intelligence, psychological safety, and strategic leadership. Neurodiversity awareness sessions and protected learning time have further supported inclusive practice.

A key success has been increased Board visibility, with EMT members introducing the programmes and attending final celebration events—reinforcing their strategic importance and alignment with NHS 24's leadership vision.

Governance is robust, with regular reporting to the Staff Governance Committee. KPIs around attendance, completion, and evaluation are consistently met, with a 91% effectiveness rating and 100% cohort completion.

Leaders report improved confidence, better team conversations, and stronger decision-making. iMatter scores have risen in areas such as "visibility of leaders" and "support for learning and growth.""

A Team Story from NHS 24 focuses on addressing two key challenges:

NHS 24 Transformation, Strategy, Planning and Performance Directorate
"Building Team Togetherness: To build togetherness, we introduced the Birthday Cluster, where each team member celebrates a colleague's birthday, creating moments of joy and connection. We also launched Team Passports to help us understand each other's communication styles, and initiated monthly In-Office Days, a social WhatsApp group and activities like a book club and step challenge.
Improving Communication and Feedback: To improve communication and feedback, we created Spotlight Sessions – a space for team members to share work and learn from each other. We're also shaping a two-way feedback process to foster constructive exchange between colleagues and managers."

A Team Story from NHS Lanarkshire recognises the need to celebrate successes more often:

NHS Lanarkshire Learning & Organisational Development Team
"This year, we recognised the need to celebrate our successes more often. We also realised that we don't always know the details of what colleagues are working on, so we agreed to:
- Build in time at team meetings for everyone to share updates
- Highlight and celebrate achievements during these sessions
Progress against our action plan will be reviewed at our six and twelve month meetings."

Staff Groupings

Local Authority staff score higher than NHSScotland staff on all Line Manager/Team components. The largest difference (3 pts) is in confidence that performance is well managed within the team.

My Team/My Direct Line Manager	NHSScotland	Local Authority	Difference
I feel my direct line manager cares about my health and wellbeing	87	88	1
My direct line manager is sufficiently approachable	88	89	1
I have confidence and trust in my direct line manager	86	87	1
I feel involved in decisions relating to my team	77	78	1
I am confident performance is managed well within my team	78	81	3
My team works well together	83	85	2
I would recommend my team as a good one to be a part of	85	86	1

Details of scores for each of the individual Staff Groupings within NHSScotland and Local Authority are included in the iMatter 2025 Data file[11]. Within Local Authority Staff Groupings Older People Services rate lowest on all measures and Strategic Development typically rate highest. Among NHSScotland staff Ambulance Services rate lowest and Senior managers rate highest.

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[11] iMatter 2025 Data File 'Staff Groupings Scores' tab

My Organisation

Results are aggregated for each question presented under the heading 'My Organisation', where Organisation refers to and includes both the relevant NHS Board and Health & Social Care Partnership(s).

Recommendation of the organisation has increased by 1 pt in 2025. The lowest scores across all components are 'I feel involved in decisions relating to my organisation' (55) and are in 'I feel Board Members responsible for the wider organisation are sufficiently visible'[13] (56).

My Organisation	2021	2022	2023	2024	2025	Movement – 2024 to 2025
I understand how my role contributes to the goals of my organisation	82	83	83	83	83	0
I would be happy for a friend or relative to access services within my organisation	77	77	78	77	77	0
I would recommend my organisation as a good place to work	73	74	75	74	75	+1
I feel my organisation cares about my health and wellbeing	70	71	72	71	71	0
I get the help and support I need from other teams and services within the organisation to do my job	70	70	71	71	71	0
I am confident performance is managed well within my organisation	62	63	63	62	62	0
I have confidence and trust in senior managers/Board Members responsible for the wider organisation[12]	61	61	61	60	60	0
I feel senior managers/Board Members responsible for the wider organisation are sufficiently visible[13]	55	55	56	55	56	+1
I feel sufficiently involved in decisions relating to my organisation	55	55	56	55	55	0

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[12] [13] Question Wording Changed in 2021 from 'senior managers' to 'Board Members'

93% of staff agree that they understand how their role contributes to the goals of the organisation Over half (53%) of staff do not agree that they feel sufficiently involved in decisions relating to their organisation and half (51%) do not agree that they feel that board members who are responsible for their organisation are sufficiently visible.

My Organisation	Strive & Celebrate	Monitor to Further Improve	Improve to Monitor	Focus to Improve
I understand how my role contributes to the goals of my organisation	79%	14%	3%	4%
I feel my organisation cares about my health and wellbeing	51%	26%	10%	14%
I feel that board members who are responsible for my organisation are sufficiently visible	27%	23%	17%	34%
I have confidence and trust in Board members who are responsible for my organisation	29%	30%	16%	25%
I feel sufficiently involved in decisions relating to my organisation	23%	25%	19%	34%
I am confident performance is managed well within my organisation	34%	28%	16%	23%
I get the help and support I need from others within the organisation to do my job	51%	28%	10%	11%
I would recommend my organisation as a good place to work	59%	25%	8%	9%
I would be happy for a friend or relative to access services within my organisation	65%	22%	6%	7%

Boards

Full Board data is included in the iMatter 2025 Data file[13].

While overall there has been little change in Health and Social Care 'My Organisation' scores, there are some large movements within individual Boards.

NHS Borders has improved all components with the largest being in:

- 'I feel that board members who are responsible for my organisation are sufficiently visible' with an increase of 6 points
- 'I have confidence and trust in Board members who are responsible for my organisation' increasing 4 points from 2024 to 2025
- 'I feel sufficiently involved in decisions relating to my organisation', 'I am confident performance is managed well within my organisation' and 'I would be happy for a friend or relative to access services within my organisation' have all increased by 3 points.

Feeback from NHS Borders reflects that their new Chief Executive communication approach includes a weekly update and is more visible to staff.

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[13] iMatter 2025 Data File tabs: 'SGS Components' and 'Significance Testing Boards'

Healthcare Improvement Scotland has also achieved considerable improvements in all components of My Organisation:

- The largest increase, of 6 pts, is in 'I have confidence and trust in Board members who are responsible for my organisation, with 'I feel sufficiently involved in decisions relating to my organisation' improving by 5 pts
- 'I would recommend my organisation as a good place to work' has also increased by 5 pts
- 'I feel my organisation cares about my health and wellbeing', 'I am confident performance is managed well within my organisation' and 'I get the help and support I need from other teams and services within the organisation to do my job' have all improved by 4 pts over 2024.

NHS Education for Scotland has increased their score for visibility of Board Members by 3 pts. They identify four key actions that have driven that improvement:

NHS Education for Scotland Board Feedback

"1. Intranet news story on getting to know the NES Board and the Board Secretary role.
2. Getting to know the Board update videos issued following Board meetings that are designed to give staff an insight into the make-up of the Board, key discussion points from meetings and the role of Non-Executive's on NES Committees.
3. Board member attendance at webinars across the organisation including Chief Executive updates where their attendance was acknowledged to highlight their involvement.
4. Employee Director highlighting at webinars/meetings that her role is a non-Executive Board member."

NHS 24 also increased their score for visibility of Board members by 3 pts. Their feedback identifies various actions that have been taken to increase visibility of both Board members and other senior staff:

NHS 24 Board Feedback

"A positive shift in the perception of the board's presence and engagement within NHS 24. This can be attributed to several factors including:

- Active involvement in MEP and LDP welcome sessions and 'celebrating success' final event sessions.
- CEO and Directors attended staff experience sessions to hear staff feedback, answer questions and promote wellbeing initiatives.
- Meet Your Director sessions were roll out across NHS 24.
- 'Meet the Team' sections created on the intranet with photos and introductions to senior colleagues along with brief description of the relevant team and their responsibilities.
- Executive team members attended Directorate team meetings.
- Executive team members doing 'walk rounds' in centres.
- The Empowerment framework was introduced to clarify roles and responsibilities, fostering trust and engagement with senior leadership.
- Staff Governance development sessions provided an opportunity for staff to showcase their work.
- Opportunity for staff members to observe committee meetings.
- Board members visited centres to meet with staff, hear about their experiences, the challenges they face, and answer questions about the Board."

The largest declines in scores within My Organisation are in The State Hospital and NHS Grampian.

In The State Hospital 'I would be happy for a friend or relative to access services within my organisation' is 4 pts lower than in 2024 and 'I feel my organisation cares about my health and wellbeing' is 3 pts lower.

NHS Grampian has a reported decline in all components within My Organisation with 'I feel my organisation cares about my health and wellbeing', 'I have confidence and trust in Board members who are responsible for my organisation' and 'I am confident performance is managed well within my organisation' all dropping by 3 pts from 2024.

Feedback from NHS Grampian notes variations across the organisation, with Aberdeenshire reporting the biggest decline (-7 pts). However, actions are in place to address the decline:

NHS Grampian Board Feedback
"The Interim Chief Officer has been working hard to improve culture with teams and services, and is beginning to see early signs of change which are expected to be reflected in improvements in next year's iMatter score for Aberdeenshire, and for NHS Grampian as a whole."

A Team Story from NHS 24 highlights ways in which visibility of senior staff is being increased:

NHS 24 Service Delivery Directorate
"Leadership at the operational level is a key strength, with direct line managers viewed as approachable, trustworthy, and caring. While senior leadership visibility is an area for growth, initiatives such as centre visits, walkarounds, and online engagement are underway to enhance board presence. All engagement sessions are now communicated in advance to maximise staff participation."

Staff Groupings

Local Authority staff are more confident that performance is managed well within their organisation than NHSScotland staff with a difference of 4 pts between the two scores. Local Authority staff also score 3 pts higher than NHSScotland staff for feeling their organisation cares about their health and wellbeing.

My Organisation	NHSScotland	Local Authority	Difference
I understand how my role contributes to the goals of my organisation	83	84	1
I feel my organisation cares about my health and wellbeing	70	73	3
I feel that board members who are responsible for my organisation are sufficiently visible	56	56	0
I have confidence and trust in Board members who are responsible for my organisation	60	60	0
I feel sufficiently involved in decisions relating to my organisation	55	57	2
I am confident performance is managed well within my organisation	62	66	4
I get the help and support I need from other teams and services within the organisation to do my job	71	73	2
I would recommend my organisation as a good place to work	74	76	2
I would be happy for a friend or relative to access services within my organisation	77	78	1

Details of scores for each of the individual Staff Groupings within NHSScotland and Local Authority are included within the iMatter 2025 Data files[14]. Within NHSScotland staff, Ambulance Services score lowest and Senior Managers highest on most components. Among Local Authority staff scores are quite consistent across Staff Groupings, though Senior Managers, Business Services and Strategic Development tending to score higher than other Staff Groupings.

Staff Governance Standard – Strand Scores

Staff Governance is a key component of the NHSScotland governance framework used to monitor and manage the performance of NHS Scotland organisations. Staff Governance considers both how *effectively* staff are managed and how staff *feel* they are managed. The standard was underpinned in legislation in 2004 and its component strands as shown below continue to be monitored, both locally and nationally.

Staff Governance Standard – Scores
The strands of the Staff Governance Standard were mapped against the 20 components forming part of the Staff Experience Framework (see Appendix 8). The 28 questions were then mapped to the 20 components of the Staff Governance Standard to provide a measure of Employee Engagement (see Appendix 9).

Weighted Index Values	Well informed	Appropriately trained and developed	Involved in decisions	Treated fairly & consistently, with dignity & respect, in an environment where diversity is valued	Provided with a continuously improving & safe working environment, promoting health & wellbeing of staff, patients & the wider community
2021	78	73	70	77	76
2022	79	75	71	78	77
2023	79	77	72	79	78
2024	79	77	71	79	78
2025	79	77	71	78	78
Movement 2024 to 2025	0	0	0	-1	0

The only Staff Governance Standard Strand to change from 2024 to 2025 is 'Treated fairly & consistently, with dignity & respect, in an environment where diversity is valued', which has declined by 1 pt, returning to the 2022 score of 78.

Board Scores

There are considerable differences across the Boards particularly for 'Appropriately trained and developed' and 'Involved in decisions'.

Staff Governance Standard Weighted Index Values	Highest Board Score Achieved	Lowest Board Score Achieved	Range: Highest to Lowest Score
Well informed	85	74	11
Appropriately trained and developed	85	63	22
Involved in decisions	81	60	21
Treated fairly & consistently, with dignity & respect, in an environment where diversity is valued	86	69	17
Provided with a continuously improving & safe working environment, promoting health & wellbeing of staff, patients & the wider community	85	69	16

Strand scores for each Board for 2025 and movement from 2024 are included in the iMatter 2025 Data file[15].

A Team Story from NHS Grampian, demonstrates actions being taken to recognise and understand individuals in order that they can be treated fairly and respectfully:

NHS Grampian, Aberdeen City Health & Social Care Mental Health & Learning Disabilities Team

"The pandemic really shifted us to working virtually, mostly on Microsoft Teams. Because of that, iMatter helped us see that we felt pretty disconnected, and we really wanted to change that. So, during our team meeting to discuss the iMatter report, we decided our action would be to build awareness of everyone's different styles and strengths within the team.

We actually had someone come in and use the Jigsaw Personality tool with us. Now, we each have a much greater awareness of each other's strengths, and we feel much better equipped to support one another. Following that, we even started holding monthly in-person, face-to-face meetings, which we also find incredibly helpful for supporting each other and sharing information."

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[15] iMatter 2025 Data File tabs: 'SGS Components' and 'Significance Testing Boards'

A Team Story from The State Hospital highlighted 3 areas for development actions, addressing challenges that they, and many other teams face around communications, role clarity and wellbeing:

The State Hospital, **AHP Team, Nursing, AHP & Operations**
"Improving Communication & Feedback: Feed-back mechanisms are now being integrated into Hub meetings and supervision agendas. The team is actively scoping what "communication that matters" looks like for them, ensuring that every voice is heard and valued.

Clarifying Role Remits: Professional Leads are working to define their roles more clearly within the team. Peer support meetings for Band 5 and 6 staff are being explored to foster mentorship and shared learning.

Prioritising Health & Wellbeing: Monthly AHP lunches and the initiatives led by the "Wellbeing Warriors" continue to promote a culture of care. These informal gatherings and wellbeing champions help sustain morale and connection across disciplines.

Wellbeing Warriors: The AHP "Wellbeing Warriors" launched a quality improvement initiative after recognising wellbeing as a key shared value. Although the initial project has concluded, ongoing efforts continue through regular check-ins, structured feedback within AHP frameworks, and the use of 'appreciation cups' to foster a culture of recognition and support."

Recommendation

Within the iMatter questionnaire there are two statements that relate to recommendation:
- I would recommend my organisation as a good place to work
- I would recommend my team as a good one to be a part of

Recommendation of 'my team' is considerably higher than the recommendation of 'my organisation'. 'My team' recommendation remains high at 85, unchanged from 2024. 'My organisation' recommendation has increased by 1 pt, returning to the 2023 score of 75.

Recommendation	2021	2022	2023	2024	2025	Movement 2024 to 2025
I would recommend my organisation as a good place to work	73	74	75	74	75	+1
I would recommend my team as a good one to be a part of	83	84	85	85	85	0

A minority of staff would be unlikely to recommend their team (11%) and a slightly larger proportion (17%) would be unlikely to recommend their organisation.

Recommendation	Strive & Celebrate	Monitor to Further Improve	Improve to Monitor	Focus to Improve
I would recommend my team as a good one to be a part of	79%	13%	4%	5%
I would recommend my organisation as a good place to work	59%	25%	8%	9%

Boards

For recommendation of the organisation as a good place to work there is a broad range of scores across the Boards. For recommendation of their team the range is much smaller. The Board with the highest score for both measures is NHS Education for Scotland (85 and 91 respectively). The Board with the lowest score for both is Scottish Ambulance Service (66 and 79 respectively), though both measures have increased by 1 pt from 2024.

Recommendation	I would recommend my organisation as a good place to work			I would recommend my team as a good one to be a part of		
	2024	2025	Movement from 2024	2024	2025	Movement from 2024
Health and Social Care	**74**	**75**	**+1**	**85**	**85**	**0**
National Boards (Patient-facing)						
NHS Golden Jubilee	78	77	-1	84	83	-1
NHS 24	75	77	+2	87	88	+1
Scottish Ambulance Service	65	66	+1	78	79	+1
The State Hospital	72	70	-2	84	83	-1
National Boards (Support)						
Healthcare Improvement Scotland	72	77	+5	84	84	0
NHS Education for Scotland	84	85	+1	91	91	0
NHS National Services Scotland	77	78	+1	85	85	0
Public Health Scotland	79	80	+1	86	86	0
Geographic Boards						
NHS Ayrshire & Arran	77	76	-1	86	85	-1
NHS Borders	72	74	+2	84	84	0
NHS Dumfries & Galloway	74	72	-2	83	83	0
NHS Fife	75	74	-1	84	84	0
NHS Forth Valley	73	73	0	85	85	0
NHS Grampian	75	73	-2	85	84	-1
NHS Greater Glasgow and Clyde	74	74	0	84	84	0
NHS Highland	73	73	0	84	84	0
NHS Lanarkshire	75	76	+1	86	86	0
NHS Lothian	74	75	+1	85	85	0
NHS Orkney	71	72	+1	82	83	+1
NHS Shetland	78	77	-1	85	84	-1
NHS Tayside	75	75	0	85	84	-1
NHS Western Isles	73	72	-1	83	82	-1

Notable movements in the scores for recommending the organisation as a good place to work are:

- Healthcare Improvement Scotland has improved by 5 pts, addressing in part the 9 pts drop reported in 2024.
- NHS Grampian is down 2 pts in 2025 adding to the 2 pts drop seen in 2024.
- NHS 24 is building again on the increase last year and is now up a total of 6 pts from 2023.
- NHS Western Isles is down 1 pt compounding the decline of 3 pts seen last year.
- NHS Borders up 2 pts reversing last year's decline of 2 pts.

Recommendation of their team among staff at The State Hospital has declined by 1 pt adding to the 2 pts drop seen last year.

National Boards (support) have all remained unchanged from 2024 for Recommendation of their team.

Recommendation of their team scores have not moved for most of the Geographic Boards. Of the 6 that have moved the change is only 1 point either up or down.

Staff Groupings

Recommendation of team and organisation varies across staff groupings, with Ambulance Services least positive on both measures and Senior Managers most positive. Typically, there is a 10-point gap between recommendation of team and organisation, with team always the higher of the two. Ambulance Services have a gap of 13, suggesting their team recommendation is relatively higher than their recommendation of the organisation. In contrast, Senior Managers and Support Services have a smaller gap between the two scores, suggesting that their recommendation of the organisation is relatively higher.

Staff Groupings	I would recommend my organisation as a good place to work	I would recommend my team as a good one to be a part of	Difference between team and organisation recommendation
Health & Social Care	**75**	**85**	**10**
NHSScotland Employees	74	85	11
Administrative Services	77	85	8
Allied Health Profession	74	86	12
Ambulance Services	65	78	13
Health Science Services	72	80	8
Medical & Dental	72	84	12
Medical & Dental Support	77	84	7
Nursing & Midwifery	74	86	12
Other Therapeutic	76	85	9
Personal & Social Care	77	84	7
Senior Managers	80	87	7
Support Services	75	81	6
Local Authority Employees	**76**	**86**	**10**
Adult Services	76	86	10
Business Services	78	87	9
Children's Services	77	88	11
Criminal Justice	78	87	9
Older People Services	75	85	10
Senior Managers	81	85	4
Strategic Development	78	88	10

Patient Services

Illustrating the link between iMatter and patient care, the survey asks staff if they 'would be happy for a friend or relative to access services within my organisation'. This measure for Health and Social Care has remained unchanged from last year and is consistent with 2021 and 2022 as well.

Patient Services	2021	2022	2023	2024	2025	Movement 2024 to 2025
I would be happy for a friend or relative to access services within my organisation	77	77	78	77	77	0

13% of staff do not agree that they would be happy for friends or relatives to access patient services.

Patient Services	Strive & Celebrate	Monitor to Further Improve	Improve to Monitor	Focus to Improve
I would be happy for a friend or relative to access services within my organisation	65%	22%	6%	7%

Boards

I would be happy for a friend or relative to access services within my organisation	2024	2025	Movement 2024 to 2025
Health and Social Care	**77**	**77**	**0**
National Boards (Patient-facing)			
NHS Golden Jubilee	83	82	-1
NHS 24	81	83	+2
Scottish Ambulance Service	70	71	+1
The State Hospital	70	66	-4
National Boards (Support)			
Healthcare Improvement Scotland	75	78	+3
NHS Education for Scotland	86	86	0
NHS National Services Scotland	79	80	+1
Public Health Scotland	81	82	+1
Geographic Boards			
NHS Ayrshire & Arran	77	77	0
NHS Borders	73	76	+3
NHS Dumfries & Galloway	75	75	0
NHS Fife	77	76	-1
NHS Forth Valley	73	74	+1
NHS Grampian	77	75	-2
NHS Greater Glasgow and Clyde	76	77	+1
NHS Highland	75	76	+1
NHS Lanarkshire	77	78	+1
NHS Lothian	77	78	+1
NHS Orkney	74	76	+2
NHS Shetland	81	82	+1
NHS Tayside	78	78	0
NHS Western Isles	77	78	+1

The largest movement is in The State Hospital with a drop of 4 points from last year, to what is the lowest score (66) across all Boards.

Healthcare Improvement Scotland and NHS Borders have both increased their scores by 3 points.

NHS Shetland is the highest scoring Geographic Board at 82 points, up one point from 2024.

Staff Groupings

Two staff groupings; Ambulance Services and Medical and Dental, have increased by 2 pts for this measure, while Business Services have decreased by 2 pts. The highest scores are among Senior Managers in Local Authorities and NHSScotland.

I would be happy for a friend or relative to access services within my organisation	2024	2025	Movement 2024 to 2025
Health & Social Care	**77**	**77**	**0**
NHS Scotland Employees	**77**	**77**	**0**
Administrative Services	79	79	0
Allied Health Profession	75	76	+1
Ambulance Services	69	71	+2
Health Science Services	75	76	+1
Medical & Dental	75	77	+2
Medical & Dental Support	80	81	+1
Nursing & Midwifery	76	76	0
Other Therapeutic	77	77	0
Personal & Social Care	78	79	+1
Senior Managers	81	82	+1
Support Services	76	77	+1
Local Authority Employees	**78**	**78**	**0**
Adult Services	78	78	0
Business Services	81	79	-2
Children's Services	76	77	+1
Criminal Justice	77	77	0
Older People Services	78	77	-1
Senior Managers	83	83	0
Strategic Development	80	80	0

Raising Concerns

Two additional questions were first included in the 2023 questionnaire covering how staff feel about raising concerns. These questions are not included within the EEI calculation of the Staff Governance Strand Scores.

The questions were not compulsory within the questionnaire, however in line with the two previous years, 98% of staff completing the iMatter questionnaire answered these questions in 2025.

Response Rate	Respondents completing iMatter survey	I am confident that I can safely raise concerns about issues in my workplace	I am confident that my concerns will be followed up and responded to
2023 Number of respondents	118,376	116,317	116,041
2023 Percentage	-	98%	98%
2024 Number of respondents	119,534	117,618	117,390
2024 Percentage	-	98%	98%
2025 Number of respondents	119,173	117,351	117,149
2025 Percentage	-	98%	98%

The scores have been calculated using the same method as used for iMatter score calculations. Both measures for Health and Social Care are unchanged from last year.

Raising Concerns	2023	2024	2025	Movement 2024 to 2025
I am confident that I can safely raise concerns about issues in my workplace	79	79	79	0
I am confident that my concerns will be followed up and responded to	74	73	73	0

It remains concerning that 14% of all Heath and Social Care staff are not confident in raising concerns and 21% are not confident that their concerns will be followed up and responded to.

Raising Concerns	Strongly Agree/ Agree	Slightly Agree	Slightly Disagree	Disagree/ Disagree Strongly
I am confident that I can safely raise concerns about issues in my workplace	71%	16%	6%	8%
I am confident that my concerns will be followed up and responded to	57%	22%	9%	12%

Boards

There is variation in scores across the Boards. NHS Education for Scotland has the highest scores for both measures and Scottish Ambulance Service the lowest.

The largest improvement is in Healthcare Improvement Scotland where both scores have increased by 4 points from last year, leading to a partial recovery from the drops seen last year. NHS 24 has also improved both scores with 'confidence to safely raise concerns' up 2 pts and 'confident that concerns with be followed up on' is up 2 pts. Again, this builds on improvements of 2 and 3 pts respectively seen from 2023 to 2024.

NHS 24 has seen improvements again this year having seen the two measures increase by 2 pts from 2024.

The State Hospital has a reported drop of 4 pts in feeling safe raising concerns and a 2 pts drop in confidence that concerns will be followed up.

Across the Geographic Boards, there is little movement with only two reporting a decrease of 2 pts:

- NHS Western Isles: I am confident that I can safely raise concerns about issues in my workplace
- NHS Shetland: I am confident that my concerns will be followed up and responded to.

Concerns	I am confident that I can safely raise concerns about issues in my workplace			I am confident that my concerns will be followed up and responded to		
Boards	2024	2025	Movement from 2024	2024	2025	Movement from 2024
Health and Social Care	**79**	**79**	**0**	**73**	**73**	**0**
National Boards (Patient-facing)						
NHS 24	76	78	+2	71	73	+2
NHS Golden Jubilee	77	75	-2	71	69	-2
Scottish Ambulance Service	69	70	+1	60	61	+1
The State Hospital	74	70	-4	67	65	-2
National Boards (Support)						
Healthcare Improvement Scotland	74	78	+4	68	72	+4
NHS Education for Scotland	85	85	0	81	81	0
NHS National Services Scotland	79	80	+1	74	74	0
Public Health Scotland	81	81	0	74	74	0
Geographic Boards						
NHS Ayrshire & Arran	80	80	0	75	75	0
NHS Borders	79	79	0	72	73	+1
NHS Dumfries & Galloway	77	77	0	71	70	-1
NHS Fife	80	79	-1	74	74	0
NHS Forth Valley	78	79	+1	72	73	+1
NHS Grampian	79	79	0	74	73	-1
NHS Greater Glasgow and Clyde	79	79	0	73	73	0
NHS Highland	78	78	0	71	71	0
NHS Lanarkshire	81	81	0	75	76	+1
NHS Lothian	80	80	0	74	75	+1
NHS Orkney	74	74	0	66	67	+1
NHS Shetland	81	80	-1	75	73	-2
NHS Tayside	80	80	0	74	74	0
NHS Western Isles	76	74	-2	69	68	-1

Staff Groupings

There are considerable differences across staff groupings, ranging from 69 to 84 for confidence in raising concerns and from 60 to 81 for confidence that concerns will be followed up and responded to.

Senior Managers in NHSScotland and Local Authorities score highest for both measures, though the score for confidence to raise concerns has dropped by 3 pts and confidence that concerns will be followed up by 2 pts, among Local Authority Senior Managers.

Concerns	I am confident that I can safely raise concerns about issues in my workplace			I am confident that my concerns will be followed up and responded to		
Staff Groupings	2024	2025	Movement 2024 to 2025	2024	2025	Movement 2024 to 2025
Health & Social Care	**79**	**79**	**0**	**73**	**73**	**0**
NHS Scotland Employees	**79**	**79**	0	**72**	**73**	**+1**
Administrative Services	80	80	0	74	74	0
Allied Health Profession	79	80	+1	73	74	+1
Ambulance Services	68	69	+1	59	60	+1
Health Science Services	76	76	0	68	68	0
Medical & Dental	77	78	+1	70	71	+1
Medical & Dental Support	78	79	+1	74	73	-1
Nursing & Midwifery	79	79	0	73	73	0
Other Therapeutic	80	81	+1	74	74	0
Personal & Social Care	82	81	-1	77	76	-1
Senior Managers	85	84	-1	79	79	0
Support Services	77	77	0	71	71	0
Local Authority Employees	**82**	**81**	**-1**	**77**	**76**	**-1**
Adult Services	82	81	-1	77	77	0
Business Services	83	82	-1	79	78	-1
Children's Services	81	82	+1	76	77	+1
Criminal Justice	80	81	+1	74	77	+3
Older People Services	81	82	+1	76	76	0
Senior Managers	87	84	-3	83	81	-2
Strategic Development	84	84	0	80	79	-1

Overall Experience

The overall experience question remained at 7.0 again this year.

Year	Please tell us how you feel about your overall experience of working for your organisation from a scale of 0 to 10 Mean Score	Movement from Previous iMatter Survey (points)
2025	7.0	0
2024	7.0	0
2023	7.0	+0.1
2022	6.9	+0.1
2021	6.8	-0.1
2019	6.9	+0.1
2018	6.8	N/A

Almost a quarter of respondents (24%) score their overall experience 9 or 10 out of 10. 10% of respondents rate their experience as 4 or less out of 10.

There is a small increase in the percentage of staff scoring 10 from last year, with a reduction in those scoring 4, but these movements are not enough to affect the overall mean score.

Score	Percentage of staff 2024	Percentage of staff 2025	Movement 2024 to 2025
0 Very Poor Experience	1%	1%	0
1	1%	1%	0
2	1%	1%	0
3	3%	3%	0
4	5%	4%	-1
5	12%	12%	0
6	12%	12%	0
7	22%	22%	0
8	20%	20%	0
9	11%	11%	0
10 Very Good Experience	12%	13%	+1

Overall Experience within Boards

While Overall Experience hasn't changed from last year for Health and Social Care, there are some notable movements at Board level as shown in the table following.

Overall Experience	2021	2022	2023	2024	2025	Movement 2024 to 2025
Health and Social Care	**6.8**	**6.9**	**7.0**	**7.0**	**7.0**	**0**
National Boards (Patient-facing)						
NHS Golden Jubilee	6.5	6.8	7.1	7.2	7.1	-0.1
NHS 24	6.7	6.9	6.6	7.0	7.3	+0.3
Scottish Ambulance Service	5.9	6.1	6.2	6.0	6.1	+0.1
The State Hospital	6.4	6.6	6.7	6.9	6.5	-0.4
National Boards (Support)						
Healthcare Improvement Scotland	7.6	7.8	7.5	6.6	7.1	+0.5
NHS Education for Scotland	8.1	8.3	8.2	7.9	8.0	+0.1
NHS National Services Scotland	7.4	7.4	7.4	7.2	7.3	+0.1
Public Health Scotland	7.0	6.8	6.9	7.3	7.4	+0.1
Geographic Boards						
NHS Ayrshire & Arran	6.9	7.0	7.2	7.2	7.2	0
NHS Borders	6.5	6.7	6.9	6.7	6.9	+0.2
NHS Dumfries & Galloway	6.5	6.8	6.9	6.8	6.7	-0.1
NHS Fife	6.8	6.8	7.0	7.0	6.9	-0.1
NHS Forth Valley	6.6	6.8	6.8	6.8	6.9	+0.1
NHS Grampian	7.0	7.0	7.2	7.1	6.9	-0.2
NHS Greater Glasgow and Clyde	6.7	6.8	7.0	6.9	7.0	+0.1
NHS Highland	6.6	6.8	6.8	6.8	6.8	0
NHS Lanarkshire	6.9	7.0	7.1	7.1	7.2	+0.1
NHS Lothian	6.8	6.8	7.0	6.9	7.0	+0.1
NHS Orkney	6.2	6.4	6.4	6.5	6.7	+0.2
NHS Shetland	7.2	7.3	7.4	7.3	7.3	0
NHS Tayside	6.7	7.0	7.0	7.0	7.0	0
NHS Western Isles	6.9	6.7	7.1	6.8	6.6	-0.2

Healthcare Improvement Scotland has improved by 0.5 this year, reversing some of the decline seen last year. NHS 24 have increased their score again this year and is now at 7.3, considerably above the overall Health and Social Care score.

Reflecting declines in other measures, The State Hospital has declined by 0.4 this year. Feedback from the Board provides explanation of why scores have declined and outlines actions being taken to improve staff experience:

The State Hospital Board Feedback
"This [the decline in scores] may reflect broader cultural and operational challenges, including:
Lack of visible action following previous feedback, leading to reduced trust and engagement.
Limited involvement in decision-making, reducing staff perception of their voice being valued.
Operational and staffing pressures, which continue to impact wellbeing and the sense of being supported or heard.

Change fatigue, particularly where initiatives feel top-down or insufficiently embedded.
Leadership capacity, with many managers and leaders under significant pressure, often without the time or space to lead effectively due to persistent resourcing demands.

Development needs, where further support and upskilling would help managers more confidently engage teams, communicate priorities, and foster a culture of listening and empowerment.
We recognise these are not isolated issues and are working to address them through ongoing leadership development, structured engagement, and a culture change programme that is being used to drive meaningful change"

The Geographic Boards have reported no change or only a small movement from last year in the Overall Experience rating. The decline of 0.2 in NHS Western Isles means it is now the lowest score (6.6) of all Geographic Boards. NHS Borders has increased by 0.2 from 2024 to 6.9 and is now 0.4 higher than in 2021. NHS Orkney also improved by 0.2 in 2025 to 6.7 and is now 0.5 higher than in 2021.

Overall Experience within Staff Groupings

While the Overall Experience score has not changed, the NHSScotland staff score has improved by 0.1 and the Local Authority staff score has declined by 0.1. The biggest movements are among Local Authority Strategic Development staff whose score has declined by 0.2 and NHS Medical and Dental that has increased by 0.2.

Overall Experience (Mean Score)	2021	2022	2023	2024	2025	Difference 2024 to 2025
Health & Social Care	**6.8**	**6.9**	**7.0**	**7.0**	**7.0**	**0**
NHS Scotland Employees	**6.8**	**6.9**	**7.0**	**6.9**	**7.0**	**+0.1**
Administrative Services	7.2	7.3	7.4	7.3	7.3	0
Allied Health Profession	6.8	6.9	6.9	6.9	6.9	0
Ambulance Services	5.8	6.1	6.1	5.9	6.0	+0.1
Health Science Services	6.8	6.8	6.8	6.7	6.7	0
Medical & Dental	6.6	6.6	6.7	6.6	6.8	+0.2
Medical & Dental Support	6.9	7.0	7.1	7.2	7.2	0
Nursing & Midwifery	6.4	6.6	6.8	6.8	6.8	0
Other Therapeutic	7.0	7.0	7.0	7.0	7.0	0
Personal & Social Care	7.3	7.3	7.3	7.4	7.3	-0.1
Senior Managers	7.4	7.5	7.5	7.4	7.5	+0.1
Support Services	7.0	7.0	7.1	7.0	7.1	+0.1
Local Authority Employees	**6.9**	**7.1**	**7.2**	**7.3**	**7.2**	**-0.1**
Adult Services	6.9	7.0	7.2	7.3	7.2	-0.1
Business Services	7.4	7.5	7.6	7.5	7.4	-0.1
Children's Services	7.1	7.0	7.2	7.2	7.3	+0.1
Criminal Justice	7.1	7.3	7.4	7.3	7.3	0
Older People Services	6.8	6.9	7.2	7.2	7.1	-0.1
Senior Managers	7.3	7.6	7.9	7.6	7.5	-0.1
Strategic Development	7.3	7.5	7.7	7.6	7.4	-0.2

Demographic Profile

Demographic questions were first introduced in 2021. The profile of respondents taking part in iMatter in 2025 is very similar to 2024. Following increases in the proportion of respondents choosing not to answer some or all of the demographic questions seen in 2024, the proportions are quite similar this year.

What was your age at your last birthday?	2024	2025
Under 25 years	3%	3%
25 - 34 years	15%	15%
35 - 44 years	20%	20%
45 - 54 years	23%	22%
55 - 64	19%	19%
65 years and over	2%	2%
No Answer Given	19%	19%

What is your sex?	2024	2025
Female	72%	73%
Male	18%	18%
No Answer Given	11%	10%

Do you consider yourself to be trans, or have a trans history?	2024	2025
No	90%	90%
Yes	1%	<1%
No Answer Given	9%	10%

What is your legal marital or registered civil partnership status?	2024	2025
Never married and never registered in a civil partnership	27%	26%
Married	49%	49%
In a registered civil partnership	1%	1%
Separated, but still legally married	2%	2%
Separated, but still legally in a civil partnership	<1%	<1%
Divorced	7%	8%
Formerly in a civil partnership which is now legally dissolved	<1%	<1%
Widowed	1%	1%
Surviving partner from a civil partnership	<1%	<1%
No Answer Given	11%	12%

Which of the following best describes your sexual orientation?	2024	2025
Straight/Heterosexual	85%	84%
Gay or Lesbian	2%	2%
Bisexual	2%	2%
Prefer to self-describe	1%	1%
No Answer Given	10%	11%

The Equality Act 2010 describes a disabled person as: '...anyone who has a physical, sensory or mental impairment, which has a substantial and long-term adverse effect on their ability to carry out normal day-to-day activities'. **Do you consider yourself to be disabled within the definition of the Equality Act 2010?**	2024	2025
Yes	7%	7%
No	85%	84%
No Answer Given	8%	9%

Do you have any of the following, which have lasted, or are expected to last, at least 12 months?	2024	2025
Deafness or partial hearing loss	3%	3%
Blindness or partial sight loss	1%	1%
Full or partial loss of voice or difficulty speaking (a condition which requires you to use equipment to speak)	<1%	<1%
Learning disability (a condition that you have had since childhood that affects the way you learn, understand information and communicate)	1%	1%
Learning difficulty (a specific learning condition that affects the way you learn and process information)	2%	2%
Developmental disorder (a condition that you have had since childhood which affects motor, cognitive, social and emotional skills, and speech and language)	1%	1%
Physical disability (a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, lifting or carrying)	3%	3%
Mental health condition (a condition that affects your emotional, physical and mental wellbeing)	7%	7%
Long-term illness, disease or condition (a condition, not listed above, that you may have for life, which may be managed with treatment or medication)	11%	12%
Other condition	3%	3%
No condition	56%	55%
No Answer Given	13%	12%

Have you been on maternity/parental or shared parental leave in the last 12 months?	2024	2025
Yes	3%	3%
No	87%	87%
No answer Given	10%	10%

What religion, religious denomination or body do you belong to?	2024	2025
None	52%	51%
Church of Scotland	17%	17%
Roman Catholic	13%	14%
Other Christian	5%	5%
Muslim	1%	1%
Hindu	<1%	1%
Buddhist	<1%	<1%
Sikh	<1%	<1%
Jewish	<1%	<1%
Pagan	<1%	<1%
Another religion or body	1%	1%
No Answer Given	10%	11%

What is your ethnic group?	2024	2025
White	85%	84%
Mixed or multiple ethnic groups	1%	1%
Asian, Scottish Asian or British Asian	2%	3%
African, Scottish African or British African	1%	2%
Caribbean or Black	<1%	<1%
Other ethnic group	1%	1%
No Answer Given	10%	10%

iMatter scores across demographic characteristics

This section provides an overview of how iMatter scores differ across various demographic characteristics. The analysis looks at individual characteristics rather than combining multiple characteristics. This means that the relationship between a characteristic and the score may not always be direct. For example, females may score higher than males for a particular component, but the driver of that difference may be other characteristics or circumstance such as the job they do, their average age or other characteristics not explored in iMatter.

Sex

Those who identify as female, typically score each component 1 or 2 pts higher than males, which is reflected in the Overall Experience scores of 7.1 for females and 7.0 for males.

Disability

Staff who have disabilities typically score 3 pts lower than those who do not. There are several measures where that difference increases to 5 pts. These mainly relate to being involved, heard and treated fairly.

Disability	With Disability	Without Disability
I am confident that I can safely raise concerns about issues in my workplace	75	80
I am confident that my concerns will be followed up and responded to	69	74
I have confidence and trust in Board members who are responsible for my organisation	56	61
I feel that board members who are responsible for my organisation are sufficiently visible	52	57
I am confident my ideas and suggestions are listened to	73	78
I am confident my ideas and suggestion are acted upon	69	74
I am treated fairly and consistently	79	84
I feel involved in decisions relating to my job	68	73

These differences in opinion then lead to a variation in Overall Experience. Those with disabilities score 6.6 and those without score 7.1, a difference of 0.5

Ethnicity

There are large differences in the scores given by the various ethnic groups. On average, staff who are African, Scottish African or British African score highest, followed closely by those who are Asian, Scottish Asian or British Asian. Third highest scores on average are reported by those who are Caribbean or Black. Those who are White, Mixed, multiple or other ethnic groups score lowest.

Overall Experience differs by 1 pt from the highest (African, Scottish African or British African) at 8.0 to the lowest (Mixed or multiple ethnic groups) at 6.9.

The largest differences are in the My Organisation components, where confidence and trust in the organisation differs greatly across the various ethnicities.

My Organisation	White	Mixed or multiple ethnic groups	Asian, Scottish Asian or British Asian	African, Scottish African or British African	Caribbean or Black	Other ethnic group
I understand how my role contributes to the goals of my organisation	83	83	86	91	87	84
I feel my organisation cares about my health and wellbeing	71	70	80	83	76	73
I feel that board members who are responsible for my organisation are sufficiently visible	56	56	69	70	60	62
I have confidence and trust in Board members who are responsible for my organisation	60	59	73	76	65	65
I feel sufficiently involved in decisions relating to my organisation	55	55	67	67	57	59
I am confident performance is managed well within my organisation	62	62	74	77	67	67
I get the help and support I need from other teams and services within the organisation to do my job	72	71	78	82	73	72
I would recommend my organisation as a good place to work	75	74	82	86	79	76
I would be happy for a friend or relative to access services within my organisation	77	77	82	87	80	78

The smallest variations across ethnic groups are typically in My Team/Line Manager, with differences of no more than 4 pts for any of the components.

My Team/Line Manager	White	Mixed or multiple ethnic groups	Asian, Scottish Asian or British Asian	African, Scottish African or British African	Caribbean or Black	Other ethnic group
I feel my direct line manager cares about my health and wellbeing	87	86	88	88	85	84
My team works well together	84	83	85	86	84	82
I would recommend my team as a good one to be a part of	85	84	86	87	86	83
I get enough helpful feedback on how well I do my work	77	77	81	80	77	77

Age

The highest scores are typically given by staff aged under 25 years and those who are 65 years and over. This pattern is illustrated by the overall experience mean scores shown in the table following

An exception to this is the extent to which staff are confident that their suggestions will be listened to and acted on, where it is those aged 35 – 54 years who are the most positive on both measures:

Age	Overall Experience	I am confident my ideas and suggestions are listened to	I am confident my ideas and suggestion are acted upon
Under 25	7.3	77	74
25-34	7.0	77	74
35-44	7.1	79	75
45-54	7.1	78	75
55-64	7.2	78	73
65 and over	7.6	77	73

Action Plans

Action Plans are a vital part of the iMatter process, where staff feedback is reviewed and actions are agreed to address staff concerns and opportunities for improvement.

Action Plan Completion

Overall, there is no change in the proportion of teams that have completed Action Plans (56%) within 8 weeks or receiving their iMatter report. However, across the Boards there are several that have changed considerably.

Teams completing an Action Plan	2021	2022	2023	2024	2025	Movement 2024 to 2025
Health and Social Care	**42%**	**47%**	**55%**	**56%**	**56%**	**0**
National Boards (Patient-Facing)						
NHS Golden Jubilee	74%	59%	72%	56%	66%	+10
NHS 24	58%	56%	62%	92%	95%	+3
Scottish Ambulance Service	41%	62%	71%	65%	68%	+3
The State Hospital	59%	65%	53%	47%	77%	+30
National Boards (Support)						
Healthcare Improvement Scotland	44%	61%	53%	75%	90%	+15
NHS Education for Scotland	83%	80%	83%	87%	90%	+3
Public Health Scotland	55%	85%	63%	88%	82%	-6
NHS National Services Scotland	90%	90%	94%	99%	91%	-8
Geographic Boards						
NHS Ayrshire & Arran	40%	49%	59%	57%	51%	-6
NHS Borders	48%	44%	53%	56%	61%	+5
NHS Dumfries & Galloway	20%	30%	44%	55%	40%	-15
NHS Fife	52%	49%	67%	65%	43%	-22
NHS Forth Valley	58%	58%	61%	61%	58%	-3
NHS Grampian	37%	41%	46%	45%	58%	+13
NHS Greater Glasgow and Clyde	49%	49%	55%	56%	58%	+2
NHS Highland	10%	30%	28%	31%	25%	-6
NHS Lanarkshire	50%	50%	66%	65%	67%	+2
NHS Lothian	15%	42%	50%	54%	58%	+4
NHS Orkney	55%	39%	58%	69%	66%	-3
NHS Shetland	36%	27%	41%	43%	50%	+7
NHS Tayside	54%	42%	47%	45%	42%	-3
NHS Western Isles	31%	31%	59%	66%	66%	0

The largest improvement is The State Hospital with a 30 pps increase in the proportion of teams completing Action Plans (77% in 2025). Healthcare Improvement Scotland has improved by 15 pps to 90% and NHS Grampian by 13 pps to 58%.

The State Hospital adopted a targeting and supportive approach to Action Planning:

The State Hospital Board Feedback

"Targeted, Facilitated Support for Priority Teams: We identified teams with "yellow" iMatter reports and those with no reports, offering them direct, facilitated support to develop and complete their action plans. This hands-on approach was well received, with the majority of teams engaging positively and submitting an action plan.

Emphasis on Team Development Linked to iMatter: We placed a strong emphasis on team development, explicitly linking action planning to iMatter results. By using a variety of support methods—such as workshops, coaching, and resource materials—we helped teams enhance both their effectiveness and their overall experience.

Strategic Engagement during OD Strategy Development: The engagement activities undertaken while building our new OD Strategy reinforced the importance of improving experiences at every level—individual, team, and organisational. We made clear commitments about what we would do, which helped build trust and align everyone around shared goals.

Balanced, Direct Communication with Managers: We communicated directly with all managers, ensuring they understood the importance of action planning without overwhelming them with excessive messages. This careful balance helped maintain engagement and avoid "communication fatigue."

Executive Team Advocacy: We also engaged the Executive Team, who actively supported both us and their own teams in completing action plans. Their visible backing added weight to the initiative and encouraged broader participation."

NHS Grampian provide details of actions successfully taken to increase the proportion of teams completing Action Plans.

NHS Grampian Board Feedback

"We implemented a multifaceted approach to drive improvement:

Senior Leadership Buy-in: We significantly increased communication from senior leadership to emphasise the importance of action planning. Our Chief Executive and Employee Director jointly sent an email to every iMatter team lead to highlight the importance of the process and encourage renewed enthusiasm. This commitment was further reinforced by senior leaders making the completion of action plans an objective in their annual appraisals, demonstrating a top-down commitment to the process.

 Process and System Improvements: We developed new, short, and impactful Action Planning sessions to help team leaders successfully navigate the process. We also undertook a comprehensive data review on our Webropol system, identifying and removing non-existent teams that were skewing the completion data.

 Targeted Communication and Recognition: Frequent reminders were communicated to teams ahead of deadlines to encourage timely completion. We also highlighted a positive case study in our daily brief, featuring a team that had successfully used action planning to improve their staff experience. This shared story provided a tangible example of the benefits and served to inspire other teams.

These combined efforts have been instrumental in fostering a more focused and engaged approach to action planning within NHS Grampian, leading to the positive increase in completion rates."

NHS Golden Jubilee increased Action Plan completion by 10 pps in 2025, primarily through clarifying expectations of what an action plan should be:

NHS Golden Jubilee Board Feedback
"We partly attribute this to targeted efforts to address a barrier around a lack of certainty as to what constituted an acceptable or meaningful action. As part of our Culture Programme we introduced new feedback models to the organisation and saw an opportunity to leverage action planning to support this aspect of the Culture Programme. We encouraged teams to consider embedding and normalising feedback at a local level as a potential action. This approach was promoted through a range of communication channels, and we provided practical resources to help managers facilitate these conversations with their teams.

In addition, we encouraged Senior Managers with sub-reporting access in Webropol to monitor action plan completion within their areas. This enabled more effective local oversight and support, helping to drive engagement and accountability across the organisation."

The largest decline is in NHS Fife where only 43% of teams completed an Action Plan compared to 65% in 2024. NHS Dumfries and Galloway now has only 40% of teams completing Action Plans, down from 55% in 2024. NHS Highland continues to have the lowest proportion of teams completing Action Plans (25%), down 6 pps from 2024.

NHS Fife note that various constraints have impacted Action Plan completion within the 8-week window, but demonstrates a commitment to continued improvement and engagement:

NHS Fife Board Feedback
"It is likely that the decline in Action Plan completion reflects a combination of pressures this year, including constrained central iMatter capacity, a strategic focus on financial recovery, and the prioritisation of frontline service delivery.

Although completion rates have reached 43%, as captured within the 8-week timeframe, we will continue to encourage and support these key conversations with teams throughout the remainder of the year. Our commitment to staff experience and engagement, with meaningful action remains resolute, with work underway to strengthen support and responsiveness going forward."

NHS Dumfries and Galloway express disappointment at the decline in Action Plan completion rate, however, they point to various actions being put in place that are expected to have a positive impact going forward:

NHS Dumfries and Galloway Board Feedback
"Despite the challenges, there are positive developments that will support improvement in future cycles. A new wellbeing portal has been launched alongside a programme of wellbeing webinars and events, providing accessible resources and strengthening staff support via our ODL microsite. The introduction of the behavioural framework this year will help teams translate survey findings into clear expectations and behaviours, improving the quality and focus of action planning. Senior leadership is now directly involved in induction, addressing one of the lowest scoring areas in previous rounds and reinforcing leadership visibility from the outset. As for benchmarking, other

boards have demonstrated that targeted communications, protected time for managers, and a focus on identifying a small number of realistic, high-impact actions are effective in raising completion rates, and these approaches are now being incorporated locally."

Action Plan Content
Action Plans contain four sections:
1. What we (the team) do well
2. Areas for improvement
3. Desired outcome from actions to be taken
4. Action

Analysis carried out using AI tools[16] provides a clear summary of the main themes contained within the Action Plans.

What we do well
This section enables teams to acknowledge their strengths and successes. The most often mentioned topics are:

Team Cohesion and Support: A prominent focus on strong teamwork, with staff emphasising mutual support and collaboration, especially during challenging times.

Effective Communication: Clear and open communication is consistently highlighted as essential for operational success, with many noting improvements in communication strategies and feedback mechanisms.

Respect and Dignity: Responses reflect a strong culture of respect, where staff feel valued and treated fairly, contributing to a positive work environment.

Approachable Leadership: The consensus generally is that line managers are supportive and approachable, fostering trust and a sense of security among team members.

Clarity of Roles and Responsibilities: Staff express a clear understanding of their roles, supporting performance and job satisfaction.

Wellbeing Support: A strong emphasis is placed on staff health and wellbeing, with initiatives in place to support mental health among employees.

Professional Development: Many Action Plans underline the importance of opportunities for training and continuous learning, indicating a commitment to professional growth.

Patient-Centred Care: Teams are dedicated to providing high-quality patient care, with a focus on collaboration across various services.

Overall, the topics included in 'What we do will' illustrates staff commitment to collaboration, communication, and mutual respect. There are shared goals of delivering high standards of patient care and maintaining a positive organisational culture.

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[16] **AI Text Analysis** uses language detection and sentiment polarity to analyse content of Action Plans, providing an overview of the most prevalent strengths, areas for improvement and planned actions. The process includes identification of recurring topics and themes, analysis of key phrases and summarisation of outputs.

Areas for Improvement

This section of the Action Plans explores aspects that the team feels could be improved on. Across all the Action Plans submitted, the most referenced areas for improvement are:

Communication: There is a widespread call for enhanced communication within teams and from leadership. Staff are seeking clearer, more transparent updates concerning organisational changes and decisions that impact their roles.

Involvement in Decision-Making: Many staff express a strong desire for greater involvement in decision-making processes. A recurrent sentiment is feeling disconnected from important discussions, leading to a lack of engagement.

Training and Development: Many Action Plans emphasise the need for more structured training and ongoing professional development opportunities to enable staff to grow in their roles.

Health and Wellbeing: Staff wellbeing is a significant concern in many teams. There is a perceived need for organisational support systems that both promote mental and physical wellness and address workload management concerns.

Visibility of Leadership: There is a perceived lack of visibility and engagement from senior management, which impacts trust and confidence in the organisation's direction.

Recognition and Feedback: Staff express a desire for more consistent recognition of their contributions and achievements, which is important for maintaining morale and encouraging engagement.

Team Cohesion: While team dynamics are mostly viewed positively, there is a recognition of the need to foster better collaboration across departments to enhance workplace satisfaction.

Overall, the main themes identified as areas for improvement, reflect the scores seen in iMatter and include communication, involvement, recognition.

Desired Outcomes

In this section of the Action Plan, teams identify what results they would like to see come as a result of implementing the Action Plan. Main outcomes include:

Communication: Action Plans often highlight the need for better communication channels that allow for timely and clear updates regarding organisational changes, decisions, and opportunities for feedback.

Staff Involvement: There is a strong consensus on the importance of having staff engaged in decision-making processes and for their ideas and feedback to be recognised and valued.

Training and Development: Many participants express a need for structured training opportunities and adequate resources for professional development, emphasising the importance of ongoing learning in their roles.

Team Cohesion: The Action Plans highlight the importance of encouraging a collaborative and supportive team environment where staff feel appreciated and connected.

Wellbeing and Support: Staff express a need for adequate resources related to mental health and overall wellbeing to enhance job satisfaction and productivity.

Overall, the desired outcomes included in Action Plans illustrate a strong commitment to enhancing workplace dynamics via better communication, staff empowerment and a focus on professional development and wellbeing.

Action

Each Action Plan includes specific actions that are to be taken by the team. The main areas focused on across the Action Plans are:

Communication Enhancement: Various actions are put forward around improved communication methods, including structured team meetings, digital communication tools, and transparent feedback mechanisms to keep all staff informed and engaged.

Staff Engagement in Decision-Making: Many Action Plans advocate for involving staff in decisions that impact their work, emphasising the necessity of feedback channels such as suggestion boxes and regular check-ins to ensure all voices are considered.

Professional Development: A common focus on continuous training opportunities and structured learning pathways highlights the importance of developing staff skills and competencies in a supportive environment.

Wellbeing Initiatives: Regular check-ins and strategies to promote mental health are planned, illustrating a commitment to support staff wellbeing alongside professional responsibilities.

Team Building and Recognition: Proposals aimed at fostering team cohesion and celebrating achievements are prevalent, illustrating the importance of morale and teamwork in enhancing overall effectiveness and well-being across the organisation. A good example of this is the creation of a 'Wall of Fame' to celebrate positive contributions.

Overall, planned actions demonstrate commitment to create supportive, communicative, and development-driven workplace culture where staff engagement remains a top priority.

Appendix 1: iMatter Survey Method

The process for distributing the iMatter questionnaire begins with a team confirmation period. Managers (at individual team level) were required to confirm their teams to ensure accuracy and that respondent information is updated. This was conducted for a period of 4 weeks where managers are required to remove any staff who have left the team, exclude staff who will not be available during the questionnaire stage and add any new staff that have joined the team.

Once this process was completed, the online questionnaire was issued to all recipients with an email or mobile telephone number entered on the system and remained open for a period of 3 weeks. The paper version was also available to be printed and distributed on the same day, with the deadline to receive paper copies set for 1 week after the questionnaire closing date. All paper responses received within the deadline were also input within 1 week of the receipt deadline. Reminders were issued each week over the 3-week period.

Week Numbers 1 – 4
Managers confirm team details to ensure accurate respondent information:
- remove staff who have left
- exclude staff who will not be available during fieldwork
- add new staff

Week Numbers 5 – 7
Fieldwork window:
- email electronic questionnaire/print & distribute paper version/send SMS invitations
- reminders issued each week to non-responders

Week Number 8
Additional week for Webropol Ltd to receive paper responses

Week Number 9
All response data input to system

The iMatter questionnaire and data collection process was undertaken by Webropol Ltd, an independent company, to ensure full anonymity for the respondents. All processes have been fully assessed to ensure compliance with General Data Protection Regulation (GDPR) Principles. In order to keep the reports within small teams of 4 or less anonymous, the response rate for team reports to be published must be 100%. The reports are published at team level and available to that team only. The response data contained in team reports informs reports at both Directorate and Organisational level and sub-directorate level where appropriate.

Appendix 2: Health & Social Care Partnership Staff Participating in iMatter 2025

Health Board	H & SCP	Number of social care staff	Number of health care staff
NHS Ayrshire & Arran	HSCP East	1,476	1,216
NHS Ayrshire & Arran	HSCP North	2,021	1,879
NHS Ayrshire & Arran	HSCP South	1,017	890
NHS Borders[17]	NHS Borders HSCP Directorate	0	1,223
NHS Borders	SBC HSCP SC-SW Directorate - Social Care	663	0
NHS Dumfries & Galloway	Community HSCP	847	3,861
NHS Fife	Fife HSCP	2,355	3,831
NHS Forth Valley	Falkirk HSCP	118	1,113
NHS Forth Valley	Clackmannan and Stirling HSCP	213	1,131
NHS Greater Glasgow & Clyde	Inverclyde	1,087	529
NHS Greater Glasgow & Clyde	Renfrewshire	935	1,036
NHS Greater Glasgow & Clyde	West Dunbartonshire	1,318	852
NHS Greater Glasgow & Clyde	East Dunbartonshire	560	382
NHS Greater Glasgow & Clyde	East Renfrewshire	607	425
NHS Greater Glasgow & Clyde	Glasgow City	7,212	5,222
NHS Grampian	Moray	1,218	923
NHS Grampian	Aberdeenshire	2,279	1,728
NHS Grampian	Aberdeen	1,411	1,862
NHS Lanarkshire	North HSCP	949	3,156
NHS Lanarkshire	South HSCP	695	2,138
NHS Lothian	East Lothian	498	1,267
NHS Lothian	Edinburgh City	1,637	1,778
NHS Lothian	Midlothian	402	801
NHS Lothian	West Lothian	782	1,017
NHS Shetland	Shetland HSCP[18]	756	328
Total	**Total**	**31,056**	**38,588**

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[17] The way that Borders report the split is different due to directorate and hierarchy split so staff do not have the same split as other Board HSCP's.

[18] This is made up of staff from NHS Shetland (Health Care) and Shetland Islands Council (Social Care) who sit under the Director of Community Health and Social Care.

Appendix 3: iMatter 2025 Questionnaire

NHS Scotland (and participating Health and Social Care Partnerships) are committed to improving the experience of those we provide care for through enhancing our "Staff Experience". The iMatter Staff Experience Continuous Improvement Model aims to deliver ways of engaging staff which feel right for you at every level and introduce new opportunities where you can feedback your experiences, in your teams, in a real-time basis.

The questionnaire should take no longer than 10 minutes to complete. Please answer as fully as possible by clicking the relevant buttons for each option. The "About You" questions are optional, but all others need to be answered in order to submit your response. If you are completing the questionnaire online you must select the submit button at the end of the questionnaire.

This is an anonymous survey, all answers collected will be treated with the utmost confidentiality. The data privacy notice for iMatter can be found at https://www.imatter.scot/resources/privacy/ or by clicking here.

You will receive your team result and will be encouraged to take the opportunity to develop actions plans and solutions for continuous improvement as well as to share your successes through the Staff experience stories. If you are in a single person team, please discuss how team results are being managed with your direct line manager.

Thank you for your time and participation.

Please answer each question using one tick

For the purpose of this questionnaire, My/I refers to you and your experience as an individual.

Thinking of your experience in the 12 months please tell us if you agree or disagree with the following statements:

Strongly Agree
Agree
Slightly Agree
Slightly Disagree
Disagree
Strongly Disagree

I am clear about my duties and responsibilities
I get the information I need to do my job well
I am given the time and resources to support my learning growth
I have sufficient support to do my job well
I am confident my ideas and suggestions are listened to
I am confident my ideas and suggestion are acted upon
I feel involved in decisions relating to my job
I am treated with dignity & respect as an individual
I am treated fairly and consistently
I get enough helpful feedback on how well I do my work
I feel appreciated for the work I do
My work gives me a sense of achievement

My Team/My Direct Line Manager   Please answer each question using one tick

For the purposes of this questionnaire, Direct Line Manager refers to the person who has overall responsibility for your team, this person has been named in the cover email.

Thinking of your experience in the last 12 months please tell us if you agree or disagree with the following statements relating to your team and direct line manager:

Strongly Agree
Agree
Slightly Agree
Slightly Disagree
Disagree
Strongly Disagree

I feel my direct line manager cares about my health & well-being
My direct line manager is sufficiently approachable
I have confidence & trust in my direct line manager
I feel involved in decisions relating to my team
I am confident performance is managed well within my team
My team works well together
I would recommend my team as a good one to be a part of

My Organisation   Please answer each question using one tick.
- My Organisation refers to the NHS Board/Heath & Social Care Partnership you are part of.
- Board/Health & Social Care Partnership members refers to:
- Directors/Chief Officer, Executives
- Non-Executives & the Chief Executive of your NHS Board/HSCP (the people who make the high level decisions in your organisation)

Thinking of your experience in the last 12 months please tell us if you agree or disagree with the following statements relating to your Organisation:

Strongly Agree
Agree
Slightly Agree
Slightly Disagree
Disagree
Strongly Disagree

I understand how my role contributes to the goals of my organisation
I feel my organisation cares about my health & wellbeing
I feel that board members who are responsible for my organisation are sufficiently visible
I have confidence & trust in Board members who are responsible for my organisation
I feel sufficiently involved in decisions relating to my organisation
I am confident performance is managed well within my organisation
I get the help & support I need from other teams and services within the organisation to do my job
I would recommend my organisation as a good place to work
I would be happy for a friend or relative to access services within my organisation

Please tell us how you feel about your overall experience of working for your organisation from a scale of 0 to 10 (where 0 = very poor and 10 = very good): *

Overall working within my organisation is a…….
0 Very Poor Experience
1
2
3
4
5
6
7
8
9
10 Very Good Experience

Raising Concerns

We are including the following statements in order to understand how staff feel about raising concerns in the workplace. It is **not** mandatory to respond to these statements, but it will help us to improve the experience staff have at work.

These will be reported at Directorate and Board level only, not individual team level and we will not look at any groups with less than 10 people in them.   This is to make sure your response cannot be attributed to you.

Thinking of your experience in the last 12 months please tell us if you agree or disagree with the following statements:

- I am confident that I can safely raise concerns about issues in my workplace.
- I am confident that my concerns will be followed up and responded to.

About You
We are asking the following questions in order that we can understand more about the profile of staff taking part in iMatter. It is NOT mandatory to answer these questions, but it will help us greatly if you do. The answers to these questions will be used in the following ways:
- To profile staff at a National, Board, Staff Grouping level
- To explore the relationship between staff profile and staff experience

Your anonymity is important to us and so we will not look at any groups with less than 10 people in them.
Please refer to Privacy Notice for information on how this data may be used.

Staff Grouping
Which staff group do you belong to? (please select the group that reflects your main role)
        NHSScotland Employees
        Local Authority Employees

Which staff group do you belong to? (NHSScotland staff only)
  Administrative Services (Finance, HR, IT, call handler, office and patient services
  Allied Health Profession
  Ambulance Services
  Health Science Services
  Medical and Dental
  Medical and Dental Support (physicians assistant, theatre services, operating dept, dental technician, hygienist, dental and orthodontist therapist, oral health)
  Nursing and Midwifery
  Other Therapeutic (Optometry, pharmacy, psychology, genetic counselling.)
  Personal and Social Care
  Senior Managers (Executive grades, senior manager pay band)
  Support Services (Catering, domestic, portering, estates and facilities, security, laundry, transport, sterile services.)

Which staff group do you belong to? (local authority staff only)
  Adult Services
  Business Services (Business Improvement, Support Services, Information Systems, Finance and Administration)
  Children's Services
  Criminal Justice
  Older People Services
  Senior Managers
  Strategic Development

As employers we are committed to ensuring all staff are treated fairly. It is important therefore for us to understand how the pandemic has impacted everyone in our organisations. This section helps your employer to look for any trends or patterns which might be cause for concern. Your response will not be tracked back to you. You can choose to answer all of these questions or only some of them.

What was your age at your last birthday?

What is your sex?
  Male
  Female

Do you consider yourself to be trans, or have a trans history?
Trans is a term used to describe people whose gender is not the same as the sex they were registered at birth
  No
  Yes, please describe your trans status (for example, non-binary trans man, trans woman

What is your legal marital or registered civil partnership status?
  Never married and never registered in a civil partnership
  Married
  In a registered civil partnership
  Separated, but still legally married
  Separated, but still legally in a civil partnership
  Divorced
  Formerly in a civil partnership which is now legally dissolved

Widowed

Surviving partner from a civil partnership

Which of the following best describes your sexual orientation?

Straight/Heterosexual

Gay or Lesbian

Bisexual

Prefer to self-describe, please write in:

Disability: The Equality Act 2010 describes a disabled person as: '...anyone who has a physical, sensory or mental impairment, which has a substantial and long term adverse effect on their ability to carry out normal day-to-day activities'.

Do you consider yourself to be disabled within the definition of the Equality Act 2010?

Yes

No

Do you have any of the following, which have lasted, or are expected to last, at least 12 months?

Deafness or partial hearing loss

Blindness or partial sight loss

Full or partial loss of voice or difficulty speaking (a condition which requires you to use equipment to speak)

Learning disability (a condition that you have had since childhood that affects the way you learn, understand information and communicate)

Learning difficulty (a specific learning condition that affects the way you learn and process information)

Developmental disorder (a condition that you have had since childhood which affects motor, cognitive, social and

emotional skills, and speech and language)

Physical disability (a condition that substantially limits one or more basic physical activities such as walking, climbing stairs, lifting or carrying

Mental health condition (a condition that affects your emotional, physical and mental wellbeing)

Long-term illness, disease or condition (a condition, not listed above, that you may have for life, which may be managed with treatment or medication)

Other condition, please write in:

No condition

Have you been on maternity/parental (including shared parental or adoption leave) in the past 12 months?

Yes

No

What religion, religious denomination or body do you belong to?

None

Church of Scotland

Roman Catholic

Other Christian, please write in:

Muslim, write in denomination:

Hindu

Buddhist

Sikh
Jewish
Pagan
Another religion or body, please write in:

What is your ethnic group?
White
Mixed or multiple ethnic group
Asian, Scottish Asian or British Asian
African, Scottish African or British African
Caribbean or Black
Other ethnic group

White
Scottish
Other British
Irish
Polish
Gypsy / Traveller
Roma
Showman / Showwoman
Other white ethnic group, please write in:

Mixed or multiple ethnic groups
Any mixed or multiple ethnic groups, please write in:

Asian, Scottish Asian or British Asian
Pakistani, Scottish Pakistani or British Pakistani
Indian, Scottish Indian or British Indian
Bangladeshi, Scottish Bangladeshi or British Bangladeshi
Chinese, Scottish Chinese or British Chinese
Other, please write in:

African, Scottish Africa or British African
Please write in (for example, NIGERIAN, SOMALI):

Caribbean or Black
Please write in (for example, SCOTTISH CARIBBEAN, BLACK SCOTTISH):

Other ethnic group
Arab, Scottish Arab or British Arab
Other, please write in (for example, SIKH, JEWISH):

Appendix 4: Board Descriptions

National Boards each have very different remits and structures, some are patient-facing while others provide support services. These short descriptions are provided as an overview of each Board along with a link to their website where further information can be found:

NHS Golden Jubilee
"NHS Golden Jubilee has a national portfolio which includes the Golden Jubilee University National Hospital, NHS Scotland Academy, national Centre for Sustainable Delivery, Golden Jubilee Research Institute and Golden Jubilee Conference Hotel. Set in a modern, purpose built environment the facility combines a top quality hospital with hotel, and conference facilities and centres for research, clinical skills and innovation. This integrated approach, with a focus on continuous learning and strong links to academia and industry, creates a crucible for innovation and a vibrant network for the spread of learning and best practice."
Visit the NHS Golden Jubilee website for more information.
https://www.nhsgoldenjubilee.co.uk/

Scottish Ambulance Service
"The Scottish Ambulance Service is on the frontline of the NHS, despatching immediate medical assistance or clinical advice to over 5 million people across Scotland. Our aim is to offer the highest level of care to our patients as we preserve life and promote recovery, with our skilled workforce bringing care and compassion to those who need it most.
We provide ambulance care to patients who need support to reach their healthcare appointment, or for their admission to and discharge from hospital, due to their medical or clinical needs. We also transfer some of Scotland's most serious patients who need specialist care."
Visit the Scottish Ambulance Service's website for more information.
https://www.scottishambulance.com/

NHS 24
"NHS 24 is one of Scotland's 7 special health boards. We're Scotland's provider of digital health and care services. These are delivered by phone and through a range of digital channels including online platforms."
Their services include:

- 111: Urgent care if you think you need A&E but it's not life or limb threatening, support if you're in mental health distress, and advice if your GP, pharmacy or dental practice is closed.
- NHS inform: Quality-assured health and care information including symptom checkers, Scotland's Service Directory, and mental health advice and resources.
- Breathing Space: a free and confidential phone and webchat service for anyone in Scotland over the age of 16 experiencing low mood, depression, or anxiety.
- Care Information Scotland: a phone, webchat, and website service providing information about care services for people living in Scotland.
- Quit Your Way Scotland: an advice and support service for anyone trying to stop smoking in Scotland
- Living Life: a phone service that offers support to people in Scotland who are experiencing low mood, mild to moderate depression or symptoms of anxiety through cognitive behavioural therapy (CBT).
- NHS 24 Online App: provides health and care advice through chatbot, find service functions and push notifications (free on both iOS and Android)."

Visit the NHS 24 website for more information.
https://www.nhs24.scot/

NHS Education for Scotland
"NHS Education for Scotland (NES) is the national health board with statutory functions for providing, co-ordinating, developing, funding and advising on education, training and workforce development for the NHS and in partnership with SSSC for social care staff. It is a national organisation with a significant regional presence in Scotland.

NES is a leader in educational design, delivery and quality assurance. Utilising the very best in technology enabled learning, organisational and leadership development, workforce and learning analytics and digital development, across the entire health and social care workforce and in every community in Scotland, NES will help to facilitate staff to be supported, skilled, capable, digitally enabled and motivated to deliver improved outcomes.

NES leads national programmes such as the NHS Scotland Academy and NHS Scotland Youth Academy (with NHS Golden Jubilee), the National Centre for Remote and Rural Health and Care, and the Centre for Workforce Supply. NES also leads national level quality improvement development programmes and is leading on the development of the national digital platform and a wide range of digital technology solutions."

Visit the NHS Education for Scotland website for more information.
https://www.nes.scot.nhs.uk/about-us/

Healthcare Improvement Scotland
"The purpose of Healthcare Improvement Scotland is to enable the people of Scotland to experience the best quality of health and social care.
The areas where we can make the most impact and focus our efforts are:
- enabling people to make informed choices about their care and treatment
- helping health and social care organisations to improve their services
- providing evidence and sharing knowledge with services to help them improve
- enabling people to get the best out of the services they use
- providing quality assurance that gives people confidence in NHS services
- making the best use of resources to add value to the care people receive

Our broad work programme supports health and social care services to improve. This includes the regulation of independent hospitals and clinics."

Visit the Healthcare Improvement Scotland website for more information.
https://www.healthcareimprovementscotland.scot/about-us/

NHS National Services Scotland
"We provide services and advice to the NHS and wider public sector.
NSS supports customers to deliver their services more efficiently and effectively. We offer shared services on a national scale using best-in-class systems and standards. Our aim is to help our customers save money and free up resources so they can be re-invested into essential services.
We also provide consultancy and support to help public bodies join up health and social care.
We aim to achieve this through four strategic objectives:
- put customers at the heart of everything we do
- increase our service value
- improve the way we do things
- ensure that we're a great place to work."

Visit the NHS National Services Scotland website for more information.
https://www.nss.nhs.scot/how-nss-works/about-nss/our-aims/

The State Hospital

"Although The State Hospital shares the same values, aims and challenges as the rest of the NHS in Scotland, it is unique because it has the dual responsibility of caring for very ill, detained patients as well as protecting them, the public and staff from harm.

The State Hospital is one of four high secure hospitals in the UK. Located in South Lanarkshire in central Scotland, it is a national service for Scotland and Northern Ireland and one part of the pathway of care that should be available for those with secure care needs. The principal aim is to rehabilitate patients, ensuring safe transfer to appropriate lower levels of security."

Visit The State Hospital website for more information. https://www.tsh.scot.nhs.uk/about-us/

Public Health Scotland

"Public Health Scotland is Scotland's lead national body for improving and protecting the health and wellbeing of all of Scotland's people.

Our vision is for a Scotland where everybody thrives. Focusing on prevention and early intervention, we aim to increase healthy life expectancy and reduce premature mortality by responding to the wider determinants that impact on people's health and wellbeing. To do this, we use data, intelligence and a place-based approach to lead and deliver Scotland's public health priorities.

We are jointly sponsored by COSLA and the Scottish Government and collaborate across the public and third sectors. We provide advice and support to local government and authorities in a professionally independent manner.

Our values of respect, collaboration, innovation, excellence and integrity are at the heart of our work."

Visit the Public Health Scotland website for more information.

https://www.publichealthscotland.scot/about-us/who-we-are/our-vision-and-values/

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Appendix 5: Team Stories

All team stories can be seen at [Team Stories](https://www.imatter.scot/team-stories/) or visit https://www.imatter.scot/team-stories/

Organisation	Team Story
NHS 24	Workforce Directorate: Strengthening NHS 24 Foundations: Collaboration and Success
NHS 24	Leadership: Leadership Development and Psychological Safety at NHS 24
NHS 24	ICT Directorate: Fostering Growth and Engagement in the ICT Directorate
NHS 24	Service Delivery Directorate: Service Delivery 2025 – developing a culture of care and continuous improvement
NHS 24	Transformation, Strategy, Planning and Performance Directorate: Turning shared values into everyday actions - connection, communication and wellbeing.
The State Hospital	Nursing, AHP & Operations: AHP Unplugged: Real Voices, Real Vision
NHS Grampian	City MHLD & SMS Support Admin Team
NHS Grampian	Aberdeen City Health & Social Care Mental Health & Learning Disabilities Team
NHS Grampian	Cardiovascular & Clinical Research Team
NHS Lanarkshire	Learning & Organisational Development: Small but Mighty
NHS Lanarkshire	Infection Prevention and Control Team

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Appendix 6: Statistical Notes

Significance Testing
Significance testing has been carried out on the iMatter data, to assess whether year to year movements in results are likely to be 'true', rather than 'chance'. Specifically, a series of t-tests have been used to examine the size of change needed to give us a very high level of confidence that a 'true' change has happened. The key element here is the number of responses – the larger the number of responses, the smaller the minimum change that can be deemed statistically significant (meaning that the change is highly likely to be 'true'). Additionally, it should be noted that significance test results will vary by question as the variability in responses given impacts whether the differences are significant or not.

Significance testing and the example percentage point changes below assume a random sample of different people every year. In reality, this is unlikely to hold for 2 main reasons.
1. Those who complete the survey may hold characteristics different to the health staff group as a whole, reducing randomness. This leads to results being more likely to be displayed as significant than in reality, and larger movement needed for a significant change.
2. Individuals are also likely to complete in the survey in more than one year, reducing independence. This has the opposite effect leading to results less likely to be displayed as significant than in reality, and smaller movements needed for a significant change.

Overall Health and Social Care Level Data
- A change of 0.3, or even 0.2 at times, is significant across Health and Social Care as a whole. This generally means where reported scores have changed in 2025 from 2024, it is likely to be a 'true' change.

Board Level Data
The number of respondents (the achieved sample size) is key to the level of movement year on year that is significant. Therefore, for individual Boards, in general, significant movements are:
- Boards with less than 800 responses per year: movements of 3 points are generally significant
- Boards with between 800 and 2,800 responses per year: movements of 2 points are generally significant
- Boards with over 2,800 responses per year: movements of 1 point are generally significant

Movements of 3 points are significant
Healthcare Improvement Scotland
NHS Western Isles
The State Hospital
NHS Orkney

Movements of 2 points are significant
NHS Shetland
NHS 24
NHS Golden Jubilee
NHS Borders
Public Health Scotland
NHS Education for Scotland
NHS National Services Scotland

Movements of 1 point are significant
NHS Tayside
NHS Grampian
NHS Lothian
NHS Greater Glasgow and Clyde
Scottish Ambulance Service
NHS Forth Valley
NHS Highland
NHS Fife
NHS Ayrshire & Arran
NHS Lanarkshire
NHS Dumfries & Galloway

Full details of the significance testing can be found in the iMatter 2025 Data File[19]. As can be seen with the National data there are incidences where significant movements are not evident in data reported at whole integer level only.

Note: where response rate is particularly high the extent of movement that is significant will be lower than those shown here.

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[19] iMatter 2024 Data File 'Significance Testing' tab

Appendix 7: Response Volumes by Method

Emailed Surveys	Volume issued	Usable Responses	Response Rate
2017	141,990	96,631	68%
2018	149,557	95,693	64%
2019	153,989	102,099	66%
2021	171,801	102,514	60%
2022	177,197	104,216	59%
2023	183,935	113,247	62%
2024	189,281	114,188	60%
2025	190,920	113,822	60%

Paper Surveys	Volume issued	Usable Responses	Response Rate
2017	30,597	11,599	38%
2018	28,062	8,561	31%
2019	25,464	9,413	37%
2021	18,965	3,842	20%
2022	15,516	3,047	20%
2023	12,702	3,060	24%
2024	11,969	2,984	25%
2025	10,350	2,579	25%

SMS Invites	Volume issued	Usable Responses	Response Rate
2017	N/A	N/A	N/A
2018	N/A	N/A	N/A
2019	N/A	N/A	N/A
2021	3,676	1,810	49%
2022	7,059	2,987	42%
2023	5,108	2,069	41%
2024	5,540	2,362	43%
2025	6,127	2,772	45%

Method Effect on Response Rates

In order to ensure that all staff have the opportunity to take part in iMatter, paper questionnaires are distributed to those without access to the online survey either by email or SMS.

All Boards sent email invitations. 16 Boards sent SMS invitations and 14 used paper surveys. Five Boards only sent emails. They were Healthcare Improvement Scotland, NHS Education for Scotland, Public Health Scotland, NHS 24 and NHS Orkney.

In 2025 92% of surveys were issued via email, the same as in 2024. 5% were issued on paper, a reduction of 1 pp from 2024 and 3% were issued via SMS. The share of the responses received is 96% from email, 2% paper and 2% from SMS, reflecting the highest response rate being achieved via the email survey.

Health and Social Care 2025	Volume issued	% of Volume Issued	Usable Response Volume	% of Responses Received	Response Rate by Method
Email	190,920	92%	113,822	96%	60%
Paper	10,350	5%	2,579	2%	25%
SMS	6,127	3%	2,772	2%	45%
Total	**207,397**	-	**119,173**	-	**57%**

Full details of response rates by method for each Board are included within the iMatter 2025 Data file[20].

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Unusable Responses

A prerequisite of iMatter is that the core iMatter questions are answered (staff grouping, raising concerns and demographic questions are optional). If there are any errors on the questionnaire, then it is not processed.

On the online survey unusable responses included:
- 3,048 staff who opened the link, started the survey but did not finish it
- 1,191 staff answered all the mandatory questions, but did not submit their survey

On the paper questionnaire it is not possible to monitor responses as they are being completed, and so it is only when returned questionnaires are processed that incomplete or incorrectly completed responses are identified.

Of the 10,350 paper surveys issued, 2,579 (25%) were input and a total of 337 (3%) were rejected. This is a notable improvement from 2024 when 7% were rejected. The improvement is particularly driven by a reduction in the volume of partial responses. Of the partial responses, 52% did not answer the Overall Experience question.

Health and Social Care 2024	Volume	% of paper surveys sent
Paper Surveys Sent	10,350	-
Responses Processed	2,579	25%
Responses Rejected	337	3%
Reasons for Rejection	Volume	% of paper surveys sent
Partial Response	217	2%
Completion Errors	45	<1%
Duplicate	16	<1%
Past Deadline	59	1%

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Small Teams

The tables following shows the proportion of teams with 4 or less people in for each Board. In order to receive an EEI report, these teams need to achieve a response rate of 100%.

Health & Social Care 2025	Number of Teams			Small Teams receiving report	
Board	Total	Small Teams	% of all Teams	No. of Small Teams	% of Small Teams
National Boards (Patient-facing)					
NHS 24	325	146	45%	127	87%
NHS Golden Jubilee	198	47	24%	30	64%
Scottish Ambulance Service	407	92	23%	61	66%
The State Hospital	65	21	32%	16	76%
National Boards (Support)					
Healthcare Improvement Scotland	59	11	19%	7	64%
NHS Education for Scotland	214	100	47%	84	84%
NHS National Services Scotland	326	76	23%	64	84%
Public Health Scotland	82	11	13%	9	82%
Geographic Boards					
NHS Ayrshire & Arran	1167	221	19%	102	46%
NHS Borders	328	68	21%	34	50%
NHS Dumfries & Galloway	294	46	16%	26	57%
NHS Fife	952	228	24%	141	62%
NHS Forth Valley	602	142	24%	50	35%
NHS Grampian	1374	243	18%	141	58%
NHS Greater Glasgow & Clyde	3457	641	19%	345	54%
NHS Highland	814	142	17%	55	39%
NHS Lanarkshire	1173	149	13%	89	60%
NHS Lothian	2460	611	25%	324	53%
NHS Orkney	86	23	27%	14	61%
NHS Shetland	115	27	23%	16	59%
NHS Tayside	1417	325	23%	164	50%
NHS Western Isles	73	7	10%	4	57%

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Appendix 8: Staff Experience Framework

Health Care Quality Strategy 2010 3 Quality Ambitions		Person Centred Safe Effective	
MacLeod Enablers/ Healthy Working Lives	Staff Governance Standards	Staff Experience Components	KSF* Core Dimension
Leadership	Well informed	Visible & consistent leadership	C1
		Sense of vision, purpose and values	C1
		Role clarity	C2
		Clear, appropriate and timeously communication	C1
Engaging Managers	Appropriately trained & developed	Learning and growth	C2
		Performance development and review	C2
		Access to time and resources	C2
		Recognition and rewards	C2
Employee Voice	Involved in decisions	Confidence and trust in management	C6
		Listened to and acted upon	C4
		Partnership working	C4
		Empowered to influence	C4
Integrity to the Values and Purpose	Treated fairly & consistently with dignity & respect, in an environment where diversity is valued	Valued as an individual	C6
		Effective team working	C5
		Consistent application of employment policy and procedures	C6
		Performance management	C5
Health and Wellbeing	Provided with a continuously improving & safe working environment, promoting the health and wellbeing of staff, patients and the wider community	Appropriate behaviours and supportive relationships	C6
		Job satisfaction	C5
		Assessing risk and monitoring work stress and workload	C3
		Health & wellbeing support	C3

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Appendix 9: Mapping Staff Governance Standard

iMatter Staff Experience Component	iMatter Questions	KSF*
SG1: Well Informed		
Visible & Consistent Leadership	My direct line manager is sufficiently approachable. I feel Board Members who are responsible for the wider organisation and are sufficiently visible.	C1
Sense of Vision, Purpose & Values	I understand how my role contributes to the goals of the organisation.	C1
Role Clarity	I am clear what my duties and responsibilities are.	C2
Clear, Appropriate & Timeously Communication	I get the information I need to do my job well.	C1
SG2: Appropriately Trained and Developed		
Learning & Growth	I am given the time and resources to support my learning and growth.	C2
Performance Development & Review	I get enough helpful feedback on how well I do my work.	C2
Access to Time & Resources	I have sufficient support to do my job well.	C2
Recognition & Rewards	I feel appreciated for the work I do.	C2
SG3: Involved in decisions		
Confidence & Trust in Management	I have confidence and trust in my direct line manager. I have confidence and trust in Board Members responsible for the wider organisation.	C6
Listened to & Acted Upon	I am confident my ideas and suggestions are listened to. I am confident my ideas and suggestions are acted upon.	C4
Partnership Working	I feel involved in decisions relating to my organisation.	C4
Empowered to Influence	I feel involved in decisions relating to my job. I feel involved in decisions relating to my team.	C4

SG4: Treated Fairly & Consistently, with Dignity & Respect, in an Environment where Diversity is Valued		
Valued as an Individual	I am treated with dignity and respect as an individual.	C8
Effective Team Working	My team works well together.	C5
Consistent Application of Employment Policy & Procedures	I am treated fairly and consistently.	C6
Performance Management	I am confident performance is managed well within my team. I am confident performance is managed well within my organisation.	C5
SG5: Provided with a Continuously Improving and Safe Working Environment, Promoting the Health and Wellbeing of Staff, Patients and the Wider Community		
Appropriate Behaviours & Supportive Relationships	I get the help and support I need from other teams and services within the organisation to do my job.	C6
Job Satisfaction	My work gives me a sense of achievement.	C5
Assessing Risk & Monitoring Work Stress & Workload	I feel my direct line manager cares about my health & wellbeing.	C3
Health & Wellbeing Support	I feel my organisation cares about my health & wellbeing.	C3

* KSF – Agenda for Change Knowledge Skills Framework

Scottish Government
Riaghaltas na h-Alba

iMatter 2026 Timetable

Board	Directorate Structure to Webropol	Team Confirmation opens (10am)	Team Confirmation ends (5pm)	Questionnaire sent out (11am)	Questionnaire closes (5pm)	Reports published/Action Planning opens	Action planning-reminder 1 (system generated)	Action planning-reminder 2 (system generated)	Action Planning 8 week deadline* (12noon)
NHS Shetland	30 March	13 April	08 May	11 May	01 June	02 June	16 June	30 June	28 July
NHS Shetland HSCP	30 March	13 April	08 May	11 May	01 June	02 June	16 June	30 June	28 July

	Directorate Confirmation
	Team Confirmation
	Questionnaire
	Action Planning

*Teams can continue to enter action plans into the portal after this date but they will not be included in the national reporting figures.