

NHS GRAMPIANBoard Meeting Meeting of the Grampian Area Partnership Forum (GAPF) Thursday 18 August 2022 - 10am to 12noon Microsoft Teams

Approved 06.10.22 Open Session Item 11.07

Present:

Rachael Little, Elected Staff Side Chair/Employee Director (Co-Chair) – Chaired Mike Adams, UCATT

Paul Allen, Director of Infrastructure & Sustainability

Diane Annand, Staff Governance Manager

Lynn Boyd, Service & Development Manager, Aberdeenshire Health and Social Care

Partnership (deputy for Alex Pirrie)
Ian Cowe, Health and Safety Manager

Dianne Drysdale, Smarter Working Programme Manager

Joyce Duncan, Non-Executive Director, Chair of Staff Governance Committee

Jane Ewen, Nurse Director - Excellence & Innovation (deputy for June Brown)

Alistair Grant, RCN

Caroline Hiscox, Chief Executive

Gemma Hood, SOR

Stuart Humphreys, Director of Marketing and Corporate Communications

Sarah Irvine, Senior Finance Manager (deputy for Alan Sharp)

Gerry Lawrie, Head of Workforce & Development

Deirdre McIntyre, RCOP

Martin McKay, UNISON

Cameron Matthew, Divisional General Manager, Acute

Patricia Morgan, Service Manager, Health and Social Care Moray

Gavin Payne, General Manager of Facilities and Estates

Tom Power, Director of People & Culture

Cheryl Rodriguez, Head of Occupational Health and Safety

Sandy Reid, Lead - People & Organisation, Aberdeen City Health and Social Care Partnership

Kerry Ross, Deputy Business Manager, Mental Health and Learning Disabilities

Philip Shipman, Acting Head of People and Change

Alex Stephen, Director of Finance

Kathleen Tan, CSP

Karen Watson, Unite (deputy for Steven Lindsay)

Joan Anderson, Partnership Support Officer

In Attendance:

Elinor McCann, Catering Manager – for item 7a

Chantal Wood, Deputy General Manager, Facilities - for item 7a

Catriona Sutherland for item 7bi

Gail Thomson for item 8b

Fraser Bell, Interim Chief Operating Officer, Aberdeen City Health and Social Care

Partnership

	Subject	Action
1	Welcome and Apologies	
	Everyone was welcomed to the meeting and apologies were received from the following:	
	June Brown, Executive Nurse Director (deputy Jane Ewen) Susan Carr, Director of Allied Health Professionals & Public Protection Janet Christie, BAOT Adam Coldwells, Director of Strategy and Deputy Chief Executive (Co- Chair) Albert Donald, Non-Executive Director/Whistleblowing Champion Jamie Donaldson, Elected Staff Side Chair of Health & Safety Representatives Group Steven Lindsay, Unite (deputy Karen Watson) Alex Pirrie, Strategy and Transformation Manager, Aberdeenshire HSCP (deputy Lynn Boyd) Alan Sharp, Assistant Director of Finance (deputy Sarah Irvine)	
2	Minutes for Approval	
	Minute of the Previous Meeting held on 21 July 2022 was approved with one amendment as follows:	
	8c. Policies Sub-Group Annual Report	
	Second paragraph amend "2023" to "2022"	
3	Matters Arising - none	
4	Update from Caroline Hiscox	
	Caroline Hiscox said a few words to mark Rachael Little's last GAPF meeting from herself and on behalf of Adam Coldwells, Co-chair of GAPF.	
	Caroline had spoken to a number of colleagues shared a word cloud, below, which showed some of the attributes that Rachael had brought to the role:	



Martin McKay noted the unbelievable role Rachael carried out as Employee Director during the pandemic to keep Partnership working going in extreme circumstances.

- Provided with a continuously improving and safe working environment, promoting the health and wellbeing of staff, patients and the wider community
 - a. Derogations and the impact on staff

Rachael Little explained the concerns regarding the impact on staff following removal of the derogations in place for the pandemic.

Martin McKay reported on communications from staff on the extreme clinical conditions and circumstances requiring corridor care, waiting times at front door and changing experiences of staff. Staff were experiencing and reporting seeing things they had not seen before in their working environment with care in corridors. He noted the pressure already on staff and the system whilst still in pandemic response, plus winter was not far away. The impact the pressures had on staff and how they deal with this could not be underestimated. He asked for the mental health and wellbeing of all staff, not just clinical staff, to be highlighted and recognised.

Other comments received:

- Need for a considered way forward for a better outcome taking into account the challenges in the workforce and workplace, tired staff and low resilience
- Staff health and wellbeing was a top priority for health and social care system wide and it was hoped this would be kept at the top of the agenda and continue discussion and inclusivity of all staff
- Information from the National HR Directors Group advocating to Scottish Government to continue to commit investment in health and wellbeing, particularly counselling services.

- This was a process of recovery and should not be left to individual Boards but followed up nationally
- Each person had a responsibility to check on others and ensure they had someone to speak to – be a listening and caring organisation
- Occupational Health Service (OHS) and other counselling services waiting time was about six weeks for one to one counselling. While people were waiting for counselling services they had a touch point from the Wellbeing Team
- NHS Grampian Occupational Health, Safety and Wellbeing Committee also discuss new approaches and new ways of supporting staff
- Concerns that there was less uptake for psychological services from social care and lower paid staff. Need to focus on those staff to ensure their needs were met. How to access services to be shared with all staff
- Be mindful of how things are put across to people, ask rather than tell staff, be aware of having a good culture with staff
- Recognise the challenges for many student experiences over the years of the pandemic
- We Care Team success going out to teams to deliver resource packs and have conversations. This was resource intensive but received good feedback. Wish to do similar with the culture programme. GAPF and Sector Partnership Forums could signpost and assist in this. Opportunity to work more in teams to get over the issues of access to all the team not just certain parts of teams. Ease of access to information and support and resources and outreach work important to sustain
- Ensure high on the agenda at this and all meetings to ensure staff wellbeing is prioritised

Rachael Little thanked everyone for their contributions and asked that members highlight when they wish this item to be included in a future agenda.

b. Health and Safety Executive (HSE) Visit 5.8.22 Update

Ian Cowe thanked Rachael Little from the Health and Safety Team and the Health and Safety Expert Group.

Ian Cowe reported significant progress had been undertaken on the actions to address improvement notices and notice of contravention from the HSE, particularly around engagement with staff groups. The short life working group continued to meet. HSE had met with us twice via Teams to discuss the action plan and they noted appreciation with the updates received

There were three action plans below the main action plan – Health and Safety Team, ARI and Facilities.

Medical, nursing and domestic staff working in the areas named in the notices and notice of contravention will all receive face-to-face violence and aggression training.

HSE noted that they would not expect all the training to be complete for end October 2022 but did wish to see significant progress and receive reports on the percentage of staff trained.

Thanks was given to Emma Stephen, Health and Safety Advisor and Susan Simpson, Health and Safety Specialist for all their hard work, especially around recruitment of more people to the Health and Safety Team.

The inconsistent use of lone working devices was highlighted by the HSE. A Protocol had been drafted and was with Maintenance and Technical Services for their input. This protocol would explain the process of risk assessments and how to access and maintain personal alarms, etc.

The Health and Safety Team were support areas named in the notices to update their risk assessments for violence and aggression.

Linda McKerron had written guidance on how to ensure staff lists are up to date and this would be shared in the Daily Brief. A draft organizational monitoring programme for health and safety would be submitted to the Health and Safety Expert Group for approval. This would include prevention and management of violence and aggression (PMVA).

The Violence and Aggression Team had requested more categories to record near misses in Datix. This was awaited.

A review of the Security Team had been completed and risk assessments were being updated.

Rachael Little reported that the HSE had welcomed the Partnership involvement in the process."

Treated Fairly and Consistently, with Dignity and Respect, in an environment where Diversity is Valued

a. Deactivating the Management of the Workforce during and after Major Incidents including Pandemic Policy working group

Diane Annand reported that following the last GAPF meeting an article had been in the Daily Brief asking people to self-declare if they were still on deployment. One response was received who the working group was already aware of, however, it had been a useful exercise to try and capture anyone missed from the Portfolio/Sector exercise undertaken.

The working group had finalised a recommendation paper on deactivation for submission to Caroline Hiscox, Tom Power, Rachael Little and Steven Lindsay however this would require amendment to include the information just received from Moray.

A revised Scottish Government circular had been received on the removal of temporary Covid policies with a question and answer now included. The GAPF T&C's Sub-group was progressing a local Q&A to explain the changes as of 1 September 2022 with regard to the application of Covid leave, which would be shared with staff before end August.

There had already been two articles in the Daily Brief to clarify changes at 30 June 2022 and pending changes from 1 September 2022. Unfortunately it had been brought to the attention of the T&C's Sub-group that the article had caused confusion with some interpreting that Covid leave had ended in June 2022 with absences being recorded as sick leave. The next communication in Daily Brief would explain there had been no change and that status quo remains until 1 September 2022.

Rachael Little noted that it had been very difficult going into the pandemic response but even more difficult trying to come out of it and trying to understand the number of circulars and the impact on staff.

Diane Annand noted the importance of GAPF Sub-Groups to have discussions on the possible misinterpretations to ensure these could be rectified as soon as possible.

7 Involved in Decisions

- a. Facilities Catering Services
- * Elinor McCann and Chantal Wood shared a presentation on the Facilities Catering Services (attached) and asked for ideas from the group on the way forward.

The following comments were received:

- A GAPF workshop or support group to explore more options and gather ideas and suggestions
- GAPF involved in assistance with education and understanding of staff as to why decisions are taken
- GAPF assurance that staff have been fully involved. Regarding catering services, managers handled changes exactly as expected from Partnership point of view
- Before the pandemic an impact on take up of NHS catering services due to private retail outlets
- If catering services were not used they could not remain viable and would close
- A lot of hard work had gone into catering services. Catering colleagues were commended for this.

- Catering van to visit different sights was suggested
- Catering colleagues required the support of GAPF to make difficult decisions

Chantal Wood and Elinor McCann would consider whether having a GAPF workshop or a support group would be beneficial.

- b. Policies for approval
 - i. Health and Care Professions Registration Policy

Catriona Sutherland explained that the policy had been reviewed in light of Scottish Workforce and Governance Committee (SWAG) letters to ensure a consistent approach across NHS Scotland. The policy had also been updated to reflect Once for Scotland policies and changes due to electronic Employee Support System (eESS). The policy had been through the policies review process.

GAPF approved the Health and Care Professions Registration Policy.

- ii. Shared Parental Leave (Birth) Policy
- iii. Shared Parental Leave (Adoption) Policy

Diane Annand introduced shared parental leave, not to be confused with parental leave and paternity leave, both of which still remained in place. There was a NHS Scotland policy however it covered both birth and adoption in the same policy which made it more complex to understand. Before the pandemic GAPF had given approval to develop local policies to split birth and adoption shared parental leave as it would make it easier for staff to follow as they would interested in just one of the options.

GAPF approved the Shared Parental Leave (Birth) Policy and the Shared Parental Leave (Adoption) Policy.

All three policies would be available on HR Policies intranet page and the P for Policies site. Implementation was one month from approval date.

Diane Annand acknowledged the contribution by Rachael Little to all three GAPF Sub-Groups and her influence and ability to help move on topics. This was deeply appreciated by all the sub-groups.

8 Well Informed

a. Finance Update

* Sarah Irvine shared a presentation giving an overview of the financial situation (attached) and explained the key points on the slides. The board is facing a challenging financial position in 22/23 and Sarah shared the factors influencing this and outlined actions for all to consider to try and manage the financial position.

The group discussed the presentation and the following comments were made:

- Thanks for a clear, understandable financial report
- It was highlighted that important to acknowledge the projected overspend rather than setting unrealistic targets which can't be met. However work needed to continue to get as close to target as possible
- Next financial year would be more challenging still.
- It is vital to be mindful of the impact on staff and service provision when considering proposals
- Nursing staffing 144 over-establishment, however this felt like a
 disparity given the significant spend seen on £2.6m on agency
 nurses. Can the nursing funded establishment be correct? Need
 to consider how can understand the link between the figures
 reported and the number of vacancies.
- With a number of people working from home, the requirement for building space needs to be considered over the next 6-12 months and this was being taken forward by the Smarter Working Programme.
- Any decisions on savings to be done with consideration to staff governance and clinical governance and no savings should impact on patient or clinical care to patients. Staff already under immense pressure however need to discuss with staff on the ground about what services could be stopped or changed as these are the people who know.
- The issue of NRAC funding was raised with GAPF colleagues highlighting the importance of continuing dialogue with the Scottish Government to ensure equitable funding for the Grampian population.
- Any future changes would be done in line with staff and clinical governance as well as taking account of the environmental agenda and strategic plan.

All suggestions on possible ways to save money to be sent to finance colleagues.

This discussion would continue at future meetings.

b. Baird Family Hospital and ANCHOR Centre Update

Gail Thomson came along to the meeting to update on the Baird Family Hospital and the ANCHOR Centre progress. These two projects were a priority for NHS Scotland and NHS Grampian.

The ANCHOR Centre was due to be complete in September 2023 and the Baird Family Hospital was due to be complete in March 2024. At the peak of construction there would be up to 500 construction staff on Foresterhill site.

The work on the link bridge linking Baird Family Hospital to the Royal Aberdeen Children's Hospital (RACH) and Aberdeen Royal Infirmary (ARI) had gone smoothly due to good communication with those on site.

The current one way system beside the ANCHOR Centre, allowing construction work, would continue until October 2022. No complaints had been received regarding this change.

Early 2023 work would be done which would affect Foresterhill Road but this would not lead to road closures. Communication to everyone would be shared in advance.

Site visits had begun and would continue for clinical teams in small numbers of 3-4 at a time. These site visits will be limited in nature and controlled as the site is in the legal possession of GRAHAM Construction.

September 2022 would see the project one year before opening the ANCHOR Centre and it was planned to raise awareness of this particularly through social media.

Staff and patient engagement continuing. Face to face drop in sessions to begin soon.

Some of the Project Team had visited Orkney and Shetland the previous week to keep up with communications regarding the facilities people would use when they had to travel to Aberdeen as part of their care.

Patient engagement influenced decisions and the project continues to use patient groups and patient engagement for feedback on the internal design of the buildings.

Fundraising campaigns were progressing well with the Friends of ANCHOR and The Archie Foundation both raising £2m each. Gail did you also say the Aberdeen University were raising funding for teaching? Yes that's right.

Work beginning to discuss with management and clinical teams what engagement was required with teams to prepare for handing over the building.

	The Board Report updating on previous meetings had been shared. A report would be prepared for the next NHS Grampian Board meeting on the agenda items discussed.	
13	Communications messages to the Organisation	
	Alistair Grant had discussed this item with Cheryl Rodriguez and Philip Shipman prior to the meeting and would continue these discussions and take back to a future GAPF meeting when appropriate to do so.	
	Specialist health assessments for Dyslexia:	
12	Any Other Competent Business	
11	Appropriately Trained and Developed – no items	
	No comments received on the reports submitted.	
10	Sector Partnership Reports – Items for Escalation	
	No major clashes with dates for meetings 2023 had been highlighted. Therefore the dates proposed at last meeting were approved. Joan Anderson would circulate MS Teams invitations.	
9	Dates of Meetings 2023	
	Rachael Little presented the report which had been previously shared with the group. She explained that the GAPF Endowment Sub-Group were aligning the process with NHS Endowment Committee to improve the customer experience. This involved progressing work on equity of access of the bids and aspects of fairer duty Scotland as discussed at last report to GAPF. Rachael wished everyone to know that any member of NHS Grampian staff could apply for GAPF Endowment funding and should be no barriers to this.	
	c. GAPF Endowment Sub-Group Annual Report	
	The NHS Scotland Assure process is about to commence for The ANCHOR Centre in September 2022 and will particularly focus on technical compliance.	
	Progressing the projects was a huge task and the capacity of the project team to take forward all the work required would be monitored.	

14 Date of next meeting

The next meeting of the group to be held at 10am to 12noon on **Thursday 15 September 2022** via Microsoft Teams.

Agenda items to be sent to gram.partnership@nhs.scot by 7 September 2022

Sector Partnership Forum Reports to be submitted by 7 September 2022

Joan Anderson - gram.partnership@nhs.scot