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NHS GRAMPIAN
Minute of the Staff Governance Committee
held on Wednesday 10 August 2022 at 2pm
via Microsoft Teams

Board Meeting
01.12.22
Open Session
Item 12.6

Present:

Mrs Joyce Duncan, Non-Executive Board Member (Chair)
Mr Dennis Robertson, Non-Executive Board Member
Ms Rachael Little, Employee Director
Mr Bert Donald, Whistleblowing Champion
Dr John Tomlinson, Interim Chair

In Attendance:

Mr Tom Power, Director of People and Culture
Mr Steven Lindsay, Full Time Partnership Representative
Ms Gerry Lawrie, Head of Workforce and Development
Ms Jane Ewen, Deputy for June Brown
Mrs Cheryl Rodriguez, Head of Occupational Health and Safety
Mr Jamie Donaldson, Health and Safety Partnership Representative
Professor Lynn Kilbride, RGU representative
Ms Sarah Duncan, Board Secretary
Mr Sandy Reid, Lead – People & Organisation, Aberdeen City (for agenda item 45/22)

Minute Taker: Mrs Diane Annand, Staff Governance Manager

Item	Subject	Action
42/22	Apologies Apologies were received from Mrs Rhona Atkinson, Non-Executive Board Member; Mr Philip Shipman, Acting Head of People and Change; Professor Caroline Hiscox, Chief Executive; Dr June Brown, Executive Nurse Director; and Professor Mohamed S. Abel-Fattah, Aberdeen University representative.	
43/22	a. Minute of meeting held on 25 May 2022 b. Minute of meeting held on 6 July 2022 Both Minutes were approved as an accurate record.	
44/22	Matters Arising a) Action Log Mrs Joyce Duncan provided an update for SGC2 action regarding the constitution, which had been approved by the Board, with a related paper on the agenda. SC3/SC16 action would now be closed as an update had been	

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	<p>provided on the interim template for meeting papers and future plans. SC17 would also be closed after the verbal update at Matters Arising.</p> <p>b) Oversight and assurance around Statutory and Mandatory training</p> <p>Mr Power informed the Committee that Mrs Joyce Duncan and himself had discussed the purpose and aims of the development workshop suggested at the last meeting. Within that discussion there was reflection on the role of the Committee; evolving assurance arrangements; and the role of those in managerial roles to take forward actions to address risk. The action plan to improve statutory and mandatory training compliance rates had been endorsed by the Chief Executive Team with work progressed through the wider SLT on how to improve the current climate and achieve the objectives in the Delivery Plan by 31 March 2023. On reflection a development workshop was not felt to be necessary however the ideas generated in the Committee meetings to help secure proactive compliance were valuable.</p> <p>A short life working group had been formed from the discussion at the wider SLT to take forward the action plan, providing quarterly updates on the delivery plan. Compliance with statutory and mandatory training would be reported through the Occupational Health, Wellbeing and Safety Committee on to this Committee through copies meeting minutes.</p> <p>Mr Power asked if the Committee was content with the route outlined. The Committee asked what will have changed or been implemented by March 2023 to improve compliance. Mr Power responded that a range of actions have been identified by the SLWG and these are being prioritised. Additionally it will be ensured that topics are clearly visible and there is a clear link to appraisal. As per the actions agreed by the Chief Executive Team, there will also be a prioritisation of topics linked to service pressures, with different mandatory training ranked dependent on service pressures. Mr Donaldson, member of the short life working group, suggested staff are asked to take a competency test first and if passed then no requirement to undertake the learning programme.</p> <p>The Committee gave an example of a learning programme where eLearning had to occur first followed by a face to face session, however a participant had feedback that the content was virtually the same. It was important there was a difference, or that participants understand why a face to face session is necessary.</p> <p>The Committee was assured by the process outlined and the progress made.</p>	
45/22	<p>Staff Governance Standard Assurance – Aberdeen City and Mental Health and Learning Disabilities</p> <p>Mr Reid attended the meeting to present to the Committee verbally the Aberdeen City and Mental Health and Learning Disabilities Staff Governance Standard Assurance report. Mr Reid informed that his role was Lead – People & Organisation, outlining that in his role he worked in partnership with Staff Side representatives and jointly chaired the Partnership Forum and the Joint Staff Forum with Laura McDonald. Ms</p>	

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McDonald or a representative from Mental Health and Learning Disabilities were unable to attend today. Mr Reid outlined the following:

- Through the pandemic all the partnership forums continued to meet as it was a good vehicle to raise issues in.
- Well informed – Staff Side representation attends the daily operational team meeting, fully involved and contributing to the discussion. There were also Staff Side representative's outwith meetings and there is direct access to the Chief Officer.
- Appropriately trained – the compliance with statutory and mandatory training was published within the City Vaccination Team to encourage improvement. The service closed for one week day for a learning day.
- Involved in decisions – from the work done it would be expected that if staff were not involved this would be raised.
- Treated fairly and consistently – any organisational change in the partnership follows the NHS Grampian Organisational Change Policy as it was adopted by the Aberdeen City Council. All staff are fully involved to ensure everyone is treated fairly.
- Safer workplaces – report of good compliance in the vaccination centre and the Health Village.
- Health and wellbeing – provide free opportunities to support wellbeing e.g. pedicures, tea and coffee in work time. This is to challenge the thinking of staff that they are too busy to look after their wellbeing.
- Staff Side representatives have a concern on the lack of management representatives on the joint staff forum and local partnership forum.

Ms Little stated that the feedback she received was that there was the opportunity to raise issues however there were capacity issues as there was the need to involve other management representatives to share the responsibility with Mr Reid. Mr Power commented that Mr Reid promoted a positive work experience, thanked staff for good work and encouraged people to come and work with the partnership very well on Twitter.

Mr Power asked how sharing the statutory and mandatory training statistics was received and how much the iMatter and BPA data is used. Mr Reid responded that a nursing BPA feedback session had been challenging but the key was making good use of the information. The statutory and mandatory training information was kept confidential with the Vaccination Team so it was published in safe space which helped raise the profile and highlighted the importance of utilising any down time to keep up-to-date.

Ms Ewen had received feedback directly on the benefit to staff of accessing complimentary therapies and commended the progress with statutory and mandatory training.

The Committee asked what progress had been made to ensure staff were well informed about the whistleblowing standards. The Committee commented that whistleblowing training levels were very low therefore this could be included in any learning occurring in down time. Mr Reid responded that the partnership had supported the standards by providing

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	<p>two investigators. There had however been no reminders about the whistleblowing policy at the daily operational team meeting however Mr Reid committed to promote the standards. The Committee thanked Mr Reid for his honesty; raising awareness was key so staff were confident to raise a concern. Mr Reid offered the opportunity for someone to attend the daily meeting at noon to provide a reminder. Mr Donald stated he was happy to attend but the offer to provide input to teams had always existed. The standards could also be promoted at the joint staff forum.</p> <p>The Committee thanked Mr Reid for his input, noting the requirement for a more formal input in the future through completion of the provided template.</p>	
<p>46/22</p>	<p>Committee Terms of Reference</p> <p>Mrs Joyce Duncan referred to the distributed Terms of Reference which has been agreed by the Board, highlighting the need for the Committee to produce a forward planner of business and a matrix showing how many matters relevant to each term of reference have been considered over the course of a full cycle of the Board’s Delivery Plan, to ensure balance in the Committee’s workplan and that its full remit is being covered.</p> <p>Mr Power highlighted some areas of the Terms of Reference that on reflection may need to be reworded:</p> <ul style="list-style-type: none"> • Everyone Matters:2020 Workforce Vision was now obsolete, superseded by the Health and Social Care Workforce Strategy • The three oversight groups included in the Staff Governance Committee Structures and Relationships chart were not then referred to in section 4 relationship to other committees and assurance map • Will it be viable within the length of a meeting to focus on a separate domain of the Staff Governance Standard at each meeting plus a Portfolio/Sector attending plus focus on the delivery plan? <p>Mr Power explained that the Mrs Joyce Duncan as Chair and himself as Executive Lead had to propose which priorities the Staff Governance Committee required assurance on from the Delivery Plan priorities. His suggestion was:</p> <p>Objective 1: By the 31 March 2023 we will reduce delays in accessing care</p> <ol style="list-style-type: none"> a. Improving access to urgent & unscheduled care, through redesign & implementation of urgent pathways of care across all specialities. <p>Objective 2: By the 31 March 2023 support colleagues to be safe & well at work</p> <ol style="list-style-type: none"> a. Ensuring that ‘We Care’ & enhanced wellbeing support is more easily accessible, & that improvements required in respect of prevention & management of violence & aggression addressed b. Extending international recruitment capacity in collaboration with other North of Scotland Boards, & streamlining recruitment, including bulk recruitment & talent posts 	<p>TP/JD/DA</p>

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- c. Improving retention of staff through use of available terms & conditions, improved coverage of e-Rostering, & enhanced bank working to reduce use of supplementary staffing & level of vacancies
- d. Evidencing positive impact from action taken in respect of Phase 1 Best Practice Australia (BPA) Survey results, agreeing Culture Blueprint & behaviours, & putting a viable plan in place for Phase 2 roll out
- e. Improving prioritisation of statutory & mandatory training, & develop approaches to ensure protected time & learning
- f. Delivering key organisational role as a provider of research & education

Objective 3: By the 31 March 2023 we will create the conditions for sustainable change

- b. Developing, testing & agreeing an approach to service planning which is cohesive with workforce, financial & infrastructure (including digital) planning.
- h. Delivering improved whole system working & maximise the role of the Portfolios in this delivery with appropriate support from corporate services.

Mr Power proposed that after the fourth meeting there could be a review of which domains of the Staff Governance Standard had been covered.

The Committee agreed that the suggested changes would be noted for the 2023 review of its terms of reference.

The Committee commented that focussing on a separate domain of the Staff Governance Standard at each meeting did not allow for topical issues to fit in to that format. The preferred method would be topical issues and then a review to ensure all domains of the Standard had been covered.

Mrs Sarah Duncan offered a suggestion on how to incorporate all the domains of the Standard. Each Committee has a different lenses through which to review the same subject. For this Committee the Standard is the lens, for example when reviewing violence and aggression. The Standard creates a checklist for assurance. If the Standard cannot be applied to the topic the Committee may not be the appropriate place for the subject. Mr Power highlighted that the format for papers asked for the relevant domain(s) of the Standard to be detailed. The Committee compared this to the quality statement when reviewing IJB papers.

The Committee noted that rather than a focus on a domain of the Standard it was more important to ensure the remit was covered as the Committee was obtaining assurance on behalf of the Board. If the remit could not be covered this would require to be highlighted to the Board. Mr Power suggested that after the third or fourth meeting of the year, a sense check would be undertaken to ensure all domains of the Standard had been covered, taking action if any gaps.

Professor Kilbride raised that the staff voice was quiet at the Committee. In addition to the two Trade Union representatives who attend, how could the staff voice be heard in a stronger way. Ms Little responded that this could

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	<p>be brought forward for discussion with GAPF to strength the relationship with the Committee. There may also be opportunities to provide staff feedback in the forward planner. The Committee reflected that the Standard has both employer and staff commitments, which should be covered.</p> <p>The Committee referred to Mr Power’s proposal of which priorities the Staff Governance Committee required assurance on from the Delivery Plan priorities. Mr Power explained his proposal as:</p> <ul style="list-style-type: none"> • Objective 2 - all six deliverables would be appropriate as all linked to the Staff Governance Standard. • Objective 1 – a. due to change affecting people and ways of working, with potential for organisational change, and during the next six months has a workforce element linked to capacity as discussed at the Chief Executive Team. • Objective 3 - b.– due to an emphasis on the workforce planning element of this in light of the acknowledged limitations of the 3 Year Workforce Plan approved August and h.– due to change affecting people and ways of working, and during the next six months has a workforce element linked to capacity as discussed at the Chief Executive Team. <p>The Committee noted the wish for the involvement of Professor Kilbride to ensure the education of future employees was covered.</p>	
<p>47/22</p>	<p>HSE update prevention and management of violence and aggression (PVMA) Intervention</p> <p>Mrs Rodriquez referred to the distributed paper and gave the following update:</p> <ul style="list-style-type: none"> • There had been increased engagement across all staff groups which gave greater assurance of meeting the HSE expectations by October 2022. • A number of stakeholders had attended the meeting with the HSE on 5 August 2022 for which an updated action tracker had been shared. The HSE acknowledged the diversity of and input from the roles in attendance and appreciated the conciseness of the action tracker. • There had been an increase in eLearning, actioned in a period of enduring pressure. • In the process of embedding trainers, two within Acute and one within Facilities and Estates. The HSE had noted concern of the timescale to recruit individuals to posts, although the process had been followed as diligently as possible. • There was a clear plan in place to demonstrate meeting the enforcement notices. • The next meeting with the HSE is on 23 September 2022 at which the HSE will focus on documentation such as the refreshed policy and action tracker progress. 	

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	<p>Mrs Rodriguez stated that although there was still lots of actions to achieve, if the current momentum was maintained, there would be sufficient progress to achieve the lifting of the enforcement notice.</p> <p>The Committee noted their assurance from the update and acknowledged the good feedback from the HSE.</p> <p>The Committee asked if there was a date when the training would be rolled out from. Mrs Rodriguez responded that a training needs analysis was ongoing first to determine the number of staff that needs face to face training. Prioritisation for training would be by role rather than area, based on the training needs analysis and those that carry most risk.</p> <p>The Committee requested an update after the 23 September 2022 meeting.</p> <p>The Committee asked about the work on preventing violence and aggression incidents and whether the trends were changing. Mrs Rodriguez reported that there was a challenging behaviour group interconnected with the group chaired by Ms Little. In addition there was a national media campaign, a security review and staff on dementia training. Mr Power stated that the prevention and management of violence and aggression work was ongoing with the work originally starting pre pandemic. The work was complex recognising the factors related to clinical conditions. Ms Little updated on the prevention work, which reported through the Occupational Health, Wellbeing and Safety Committee. There had been a successful campaign in Mental Health called “Respect us” to support staff. There was consideration of making the campaign more generic and upscaling across the system. There was close contact with the challenging behaviour group and the national work to harmonise work, avoid confusion and duplication. Ms Little thanked Mrs Rodriguez and her team for the work undertaken, recognising that prevention and management of violence and aggression was just one aspect of the health and safety agenda.</p> <p>The Committee was assured by the work done.</p> <p>Mrs Rodriguez informed the Committee that she would be leaving NHS Grampian and may not be at the next meeting. She thanked the Committee for the interesting albeit at times challenging discussion. The Committee wished Mrs Rodriguez good luck for her future.</p>	
	<p>Statutory Information, Reports and Returns</p>	
<p>48/22</p>	<p>NHS Grampian Equality and Diversity Workforce Monitoring Report for 2021/22</p> <p>Mr Firth presented the NHS Grampian Equality and Diversity Workforce Monitoring report 2021/22, produced as a requirement of the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012, covering all nine of the protected characteristics. The purpose of the report was to assess whether NHS Grampian was a fair and equitable employer and was complied with information provided from the People and Culture Directorate.</p>	

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	<p>Mr Firth highlighted a recommendation on following up the reasons for a net outflow of 463 mostly Scottish staff. Anecdotally the exit questionnaire process is said not to be used as effectively as it could be by managers. Mr Power responded that it had already been recognised that the exit questionnaire process could be more streamlined to capture the valuable data.</p> <p>Mr Power raised the following points from the Report:</p> <ul style="list-style-type: none">• If there is incomplete data from JobTrain is there an alternative route• It was good to see comparison data across staff groups• Turnover could be included• Benchmark the staff who have identified themselves as having a disability against the wider population to assess whether representative or not <p>Mr Firth responded that information had previously been available from Job Train, in a reliable and usable format however this was now not the case. With regard to the number of staff with disabilities, it was challenging to draw meaningful conclusions when comparing to the general population due to a number of factors. 20% of the general population who have a disability are beyond working age and a substantial number who have had a disability from birth are not precluded from taking up employment. Appointing Officers should be encouraged to give an opportunity to a disabled applicant. In addition as declaring a disability is self-defining there can be inconsistency between those with the same conditions therefore there is potentially more NHS Grampian members of staff that could describe themselves as disabled. Mr Firth stated that turnover was low as more members of staff were joining than leaving, along with NHS Grampian attracting from a broad range of ethnic backgrounds with these individuals remaining in our employment. Mr Power challenged whether this was the case as there may be quicker turnover even though more are recruited.</p> <p>The Committee highlighted that disability data for the general population is available for the working age of 16-64. It was acknowledged that comparators are difficult to highlight. Mr Firth responded that information is collected in silos, with the data criteria set nationally, however there is a linking of information together to see if any glass ceilings.</p> <p><i>Mrs Ewen left the meeting</i></p> <p>The Committee asked that the Staff Side are involved, to provide a staff voice, in further work to examine why there has been an outflow of 463 mostly Scottish staff.</p> <p>Ms Lawrie explained that JobTrain does not feed data as it is a standalone system. She was happy to examine the possibility of providing turnover data by staff group by ethnicity, linked to stability.</p> <p>Mr Power outlined that he was happy to endorse the report but the Committee should acknowledge that although assessed as a fair and</p>	
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	<p>equitable employer it does not mean staff do not experience inequality of treatment.</p> <p>The Committee endorsed the Report.</p>	
49/22	<p>Whistleblowing Year 2 Q1 report</p> <p>Mrs Annand reported that there had been no new whistleblowing concerns raised during Year 2 Quarter 1 - 1 April to 30 June 2022.</p>	
50/22	<p>2021/22 Staff Governance Monitoring</p> <p>Mr Power referred to the distributed paper which outlined the Scottish Government approach to 2021/22 which was similar to last year. The Scottish Government had identified Board information already available that support compliance with the Staff Governance Standard to minimise questions asked and avoid duplication. A template, to be completed by identified lead officers by 18 November 2022, outlined tailored questions where there were potential gaps in the information held by the Scottish Government. The Whole System Decision Making Group will review the final draft to promote the Standard and share good practice.</p> <p>Mr Power asked the Committee if they wished to submit final comment on the Return by correspondence, as the scheduled meetings on 5 October and 30 November 2022 were not complimentary to the timeline or hold an extraordinary meeting. The Committee agreed to submit final comment by correspondence.</p>	<p>DA ALL</p>
51/22	<p>Remuneration Committee 21 June 2022 agenda and assurance statement</p> <p>Mrs Joyce Duncan, Remuneration Committee Chair referred to the distributed agenda and assurance statement.</p>	
52/22	<p>Staff Governance Committee Board report content</p> <p>Ms Sarah Duncan outlined that there was no longer a requirement to produce a Board report. The Committee may choose to escalate an issue to the Board, however the relationship between the Board and the assurance Committees had changed. The Committee was now getting assurance on behalf of the Board.</p>	
	<p>For Information</p>	
53/22	<p>a. BMA Joint Negotiating Committee Minutes – 23 February 2022</p> <p>b. Culture and Staff Experience Oversight Group minutes – no further approved minutes</p> <p>c. Occupational Health, Wellbeing and Safety Committee – no further approved minutes</p> <p>Noted by the Committee.</p>	

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54/22	AOCB – none raised	
55/22	Date of next Meeting Wednesday 5 October 2022 10.30am to 12.30pm via Teams Mrs Joyce Duncan thanked Ms Little for her input to the Committee over the last four years, it had been appreciated and always delivered in good humour.	