



NHS GRAMPIAN
Meeting of the Grampian Area Partnership Forum (GAPF)
Wednesday 16 March 2023 10am to 12.30pm
Microsoft Teams

Present:

Adam Coldwells, Director of Strategy and Deputy Chief Executive (Co-Chair) – Chaired
 Steven Lindsay, Elected Staff Side Chair/Employee Director (Co-Chair) from 10.30
 Mike Adams, UCATT
 Adeyinka Adewumi, Deputy Business Manager, RCH
 Paul Allen, Director of Infrastructure & Sustainability
 Diane Annand, Staff Governance Manager
 Lynn Boyd, Service & Development Manager, Aberdeenshire Health and Social Care Partnership
 Jamie Donaldson, Elected Staff Side Chair of Health & Safety Representatives Group
 Dianne Drysdale, Smarter Working Programme Manager
 Alison Evison, Chair of NHS Grampian
 Alistair Grant, RCN
 Lynn Morrison, AHP Lead (Deputy for Susan Carr)
 Jane Ewen, Nurse Director, Excellence and Innovation (deputy for June Brown)
 Gemma Hood, SOR
 Stuart Humphreys, Director of Marketing and Corporate Communications
 Gerry Lawrie, Head of Workforce and Development (from 11.05)
 Martin McKay, UNISON
 Cameron Matthew, Divisional General Manager, Acute
 Tom Power, Director of People & Culture
 Sandy Reid, Lead - People & Organisation, Aberdeen City Health and Social Care Partnership
 Michael Ritchie, Unite
 Kathleen Tan, CSP
 Katherine Targett, Consultant Occupational Physician, Occupational Health Services
 Sarah Irvine, Senior Finance Manager
 Catriona Downie, Note-taker

In attendance:

Susan Harrold, Senior Planning Manager for Item 5b
 Lorraine Hunter, Head of HR Service Centre for Item 6c

	Subject	Action
1	<p>Welcome and Apologies</p> <p>Adam Coldwells welcomed all to the meeting and apologies were received from the following:</p> <p>Caroline Hiscox, Chief Executive June Brown, Executive Nurse Director (Jane Ewen deputised) Susan Carr, Director of AHPs & Public Protection Joyce Duncan, Non-Executive Board Member, Chair of Staff Governance Committee Philip Shipman, Head of People and Change Joan Anderson, Partnership Support Officer (Catriona Downie deputised)</p>	

2	<p>Minutes for Approval</p> <p>Minute of the meeting held on 16 February 2023 was approved as an accurate record.</p>	
3	<p>Matters Arising</p> <p>a. National Profiles for Nursing and Midwifery Health Care Support Workers (HCSW)</p> <p>Jane Ewen updated the group that currently the phase 1 position was that 786 Band 2's had progressed and in position, however there was a further 136 outstanding from across the various sites that had not yet submitted applications, broken down into:</p> <p>ARI Site 94 Woodend Site 3 Dr Grays and Moray 22 Aberdeen City and Royal Cornhill 4 Aberdeenshire 13</p> <p>There was evidence that a couple of HCSWs have been advised when requesting a band 3 that they had not been in post long enough to be eligible to progress to band 3. As this was incorrect advice, individual queries were being addressed on a case by case basis.</p> <p>All HCSW posts recruited to since 1st February 2023 had been appointed to one of the 3 generic job descriptions. Also those who commenced role between 1st October 2021 and 31st January 2023 had already been re-banded to Band 3 or paperwork had been received to confirm they would remain as a band 2.</p> <p>As phase 2 will focus on Bank workers, work was ongoing with Colin McNulty and a paper had been drafted for the short life working group (SLWG) for when Ashley Catto returned from leave.</p> <p>In response to a query raised regarding the progress made, Jane Ewen advised that the data was being monitored and the HR Hub was supporting the process by linking in with senior charge nurses and equivalents to ensure that phase 1 was concluded as soon as possible. There was also a small number of people who wished to remain as band 2.</p> <p>Martin McKay confirmed receipt of the information that he requested at the previous meeting, which was very helpful. He advised that there was a drive nationally within Scotland regarding the progression of this work. Work had been ongoing in Mental Health and Learning Disabilities, who are in a different position regarding the clinical aspect which had been defined as a band 3 and all new employees start on that grade.</p> <p>Jane Ewen confirmed that the move of band was competency based.</p>	

<p>4</p>	<p>Well Informed</p> <p>a. Terms and Conditions Sub-Group Annual Update</p> <p>The Sub-Group Annual Report was shared prior the meeting which highlighted some of the work that had been undertaken by the group. This included the work which had been concluded to date with regards to Pay as if at Work for annual leave when on a fixed roster. This work progressed onto identifying areas with fixed rosters within Facilities and Estates.</p> <p>Guidance was produced to communicate the 3 additional public holidays, Queen’s Platinum Jubilee, funeral of Her Majesty Queen Elizabeth II and the Coronation of King Charles III. This was a live Q&A document which was kept up to date from queries raised. Other work undertaken over the year included reviewing the circulars with regards to buy back of annual leave (which was not an option for year 2023/24) and how this would apply to NHS Grampian.</p> <p>As the joint chair of the Sub-Group, Diane Annand continued to highlight the Cycle to Work Scheme and the changes being made to the scheme. Work was ongoing with Procurement with the introduction of the Lifestyle Savings Portal which would offer discounts to staff.</p> <p>Adam Coldwells thanked both Diane Annand and Gemma Hood on behalf of the group for the power of work undertaken. This was echoed by Tom Power who highlighted the groups positive response to requests which was not all work undertaken as a directive from the Scottish Government.</p> <p>Mike Adams acknowledged the work of the co-chairs and the group members, which Diane Annand followed up with a plea for more management representatives to join the group as currently short of representation from the 3 health and social care partnerships which would have greatly contributed practically in support of, for example, the retire and return work.</p> <p>Both Lynn Morrison and Cameron Matthew volunteered to join the Sub- Group.</p>	<p>DA</p>
	<p>b. Finance Update</p> <p>Sarah Irvine provided the forum with an update on the financial position as at the end of February. The actual deficit at the end of February was £20.8 million, which exceeded the level of deficit in the expected plan. £4 million of this was due to the impact of public holidays and the pay award back pay, however this was mitigated by additional funding provided by the Scottish Government.</p>	

Supplementary Staffing as well as hospital drugs and the TAVI service continued to overspend, however, the forecast for the year had been revised to £14.9 million deficit due to additional funding from the Scottish Government.

A forward look for 23/24 draft plan had been produced, with the final plan due that day. Currently the overall deficit was £61.5 million however this was expected to be in the region of nearer £70 million.

Adam Coldwells agreed that the scale of the deficit was enormous, an effort to improve the trajectories was part of the 5 year recovery plan.

In response to concerns raised by Mike Adams regarding the increasing cost for utilities and catering, Paul Allen confirmed that this was a high priority not just limited to NHS Grampian and although not part of the savings plan, there was recognition of the requirement to be efficient re the use of energy.

Sarah Irvine confirmed that energy costs were reflected in the plan as was purchased in advance, however, higher cost will need to be included for next year.

Catering costs were well above Consumer Price Index (CPI) levels, however, Procurement were reviewing contracts when they were due for renewal.

A further concern raised was the high cost relating to agency nursing, with Jane Ewen confirming that agency use was in high demand, however, the introduction of the Assistant Practitioner role had been helpful in assisting with progression into registered roles. International Recruitment would also assist by placing these colleagues into areas of high agency use.

Tom Power acknowledged the work being undertaken by the International Recruitment Team, and also highlighted the upcoming establishment of the Medical Bank, which should help with the use of home based locums. There is also the introduction of a new Specialty Doctor Contract which should help with filling the middle grade posts as well as offset the challenges within the junior doctor banding.

Tom Power also highlighted the Workforce Diversification to use a huge array of roles supported by NHS Education Scotland (NES), of which Moray Maternity Service was a catalyst. This was supported as encouraging news for building new roles for the future.

Additionally, part of the proposed new pay deal included a high level of intensity regarding remodelling of the workforce, to reform and improve and be involved in future workforce planning.

Suggestion was made that the Recruitment and Retention Premia (RRP) be revisited as a benefit to support with some of the harder to recruit to roles.

	<p>A discussion ensued with reference to the rising energy costs, and how the proposal for smarter working went beyond the 2 buildings currently being co-located elsewhere. Paul Allen responded a whole system led planning application in terms of estate over 10-15 years was required and smarter working was one aspect of this whole system approach which was included in an exercise anticipated to take 18 months to complete.</p> <p>The conversation concluded following further discussion regarding Workforce Planning and pathways for transformation work e.g. the implementation of the Health Care (Staffing) (Scotland) Act which would drive and generate data.</p> <p>Item 4b Financial Performance - Report February.docx</p>	
	<p>c. Current Operational Pressures</p> <p>Item 4c - 230310 Week in Review Report.pdf</p> <p>Cameron Matthew explained that the set of slides he was talking to was developed on a weekly basis to allow colleagues a review of the longer term data which highlighted the pressure points across ARI and the Foresterhill campus. This slide pack demonstrated data which ranged from:</p> <ul style="list-style-type: none"> • Occupancy - showing how tight the margins being worked to • Prediction – try and predict what resource was required • Boarders and delayed transfers – not in home ward and patients that were awaiting discharge • Nursing Trends – demonstrated safe staffing levels and the balance on a daily basis • Re-admission rates – boarded patients' stay tended to be ¾ days longer than in host ward • Surgery and waiting list trends • Breaches <p>Jamie Donaldson echoed the stress that the system was under having attended the daily 08.30 meeting to understand the pressures which was not easing on staff.</p> <p>Adam Coldwells thanked Cameron Matthew for his reflection on a week in the system and suggested that Lynn Morrison and Sandy Reid present similar information from the Aberdeen City HSCP perspective at the next meeting.</p>	<p>SL</p>

4	<p>d. Sector Reports – Staff Governance Committee Reports</p> <p>Diane Annand referred to the distributed Public Health report which was for GAPF to note, after being presented and discussed at the Staff Governance Committee (SGC) in February 2023. The purpose of the report was to provide the SGC with assurance against compliance with the Staff Governance Standard. The intention of thereafter using the same report for GAPF was to avoid Portfolios/Sectors preparing two different reports. It was reiterated that there was no longer the requirement for the Portfolios/Sectors to submit the Area Partnership Forum Reporting Framework document.</p> <p>The group agreed that it would be beneficial for the sectors or portfolios providing the report to be in attendance so the forum could hear from them directly as the Public Health Report demonstrated just how much change to roles they have had over the course of the pandemic. Mike Adams highlighted the work was undertaken appropriately when staff were released from the Test and Protect service and how this supported staff retention.</p>	
5	<p>Involved in Decisions</p> <p>a. Industrial Action Short Life Working Group (SLWG) Update</p> <p>Steven Lindsay informed the group that the proposed Agenda for Change (AfC) Pay Award to be implemented from April 2023 was out for consideration and Scottish Terms and Conditions Committee (STAC) Staff Side colleagues were convening the week after to consider the results. The NHS Grampian SLWG had been established due to the 22/23 AfC pay dispute, but its remit also included other potential industrial action. The British Medical Association (BMA) Scottish Junior Doctors Committee had advised NHS Grampian of balloting members from 29th March until 5th May 2023. The SLWG would continue to monitor the situation and respond accordingly.</p>	
	<p>b. Delivery Plan/Plan for the Future</p> <p>Susan Harrold presented a slide pack which provided an overview of where things are in regard to the Plan for the Future and the Delivery Plan, since her last attendance at this forum in November.</p> <p>Item 5b PFF & Delivery Plan Update GAPF 16.3.23</p> <p>Adam Coldwell expressed his thanks to Susan Harrold for her presentation, which emphasised what was needed to encourage good engagement.</p> <p>Susan Harrold highlighted the importance of service planning and advised that there was a toolkit that could provide support and work was ongoing with Health and Social Care Partnership (H&SCP) colleagues on how to embed and give the ownership to teams.</p>	

	<p>Work was currently sensitive towards the system pressures but there was an ongoing need to embed the Plan for the Future. Changes that had already been introduced were a live link to Plan for the Future within the Corporate Induction Video and working with managers through the Leadership Programme, which tied into the appraisal component.</p> <p>In response to Susan Harrold highlighting an example of majority of colleagues from 2 teams reliant on managers, had never heard of Plan for the Future, Adam Coldwells confirmed that there was ongoing work to do with a high level strategy plan which required practical support from managers and engagement with staff. An understanding of polices was required, if, for example, undertaking appraisals.</p> <p>Gerry Lawrie confirmed that there was support for appraisal, objective setting and personal development planning for managers and staff. This aligned with the Workforce Plan and related guidance which was reported at the same time as the Delivery Plan.</p> <p>Adam Coldwells invited Susan Harrold back to the May meeting in advance of the draft plan being submitted to NHS Grampian Board on 1st June 2023.</p>	
6	<p>Appropriately Trained and Developed</p> <p>a. GAPF Development Event 27th April 2023 – “The Fatigued and the Furious”</p> <p>The GAPF Development Day would focus on Fatigue with a full day workshop on the topic taking place on 27th April. Non-recurring funding of £10,000 had been confirmed to support departments and services to improve rest and recovery facilities for staff. GAPF had been asked to agree the process for these funds to be distributed for the benefit of staff across the system, and rather than re-invent the wheel, Steven Lindsay suggested requests were submitted via GAPF Endowments Sub-Group for approval given their knowledge and experience of how to distribute funding in this way.</p> <p>Papers detailing Process/Criteria with a draft Application Form were shared with the group prior to the meeting, and the forum agreed that to remit this to the GAPF Endowments Sub-Group was the appropriate approach in order to proceed.</p>	SL
	<p>b. Agenda for Change Arrears Payment</p> <p>Lorraine Hunter attended to provide the members with a briefing in relation to salary overpayments, which are a result of the AfC pay award arrears.</p>	

The majority of the elements of arrears were system generated, however, some required manual interventions which resulted in 2 forms of overpayment. This had been discovered via routine checks and identified that the overpayment linked to the following:

- Double payment of arrears to 919 bank workers between November 2022 and the end of January 2023, the period being the hours since the transfer to weekly pay. The total value for this was £130k with the individual value ranging from £0.19 - £1,500.87.
- Pay uplift incorrectly applied to a payment made to 178 substantive employees for the buy back of annual leave. Total overpayment for this cohort was £12k, individual values ranging from £2.11 to £194.61.

There were established policies in place for recovery of salary overpayments and normal practice was to negotiate a repayment period with the staff member concerned. Given the large number of employees, the decision had been made to only recover an over payment exceeding £20 which reduced the numbers from 919 to 689 and 178 to 158.

A number of steps had been taken to ensure that the impact on colleagues and the reputation for NHS Grampian was mitigated as much as possible as follows:

- Welfare Cell and Employee Director's input into written communication for the individuals involved to ensure it is supportive
- Offer a repayment period on sliding scale to the colleagues involved
- Communication prepared in anticipation of media coverage

The Payroll Team deeply regretted the errors that had been made and had undertaken lessons learned sessions. Plans were in place to deal with expected contact from affected colleagues to provide support.

The group thanked Lorraine Hunter for her open and honest update and acknowledged the hard work always undertaken by the Payroll Team.

Jane Ewen made a request that the letters due to be distributed to the affected staff were not sent out on a Friday given that in advance of the weekend, there may not be the support in place. Lorraine Hunter confirmed delaying these until Monday and advised that she would share the supporting comments made by members with her team.

Adam Coldwells thanked Lorraine Hunters again and made a plea to managers to consider the capacity and resource within the Payroll Team.

[Item 6c - AfC Arrears of Pay.docx](#)

7	<p>Provided with a continuously improving and safe working environment, promoting the health and wellbeing of staff, patients and the wider community</p> <p>a. Peterhead Incident Management Team Update</p> <p>Lynn Boyd reported that legionella pneumophila had been detected on 1 February 2023 in the water at Peterhead Health Centre. An Incident Management Team (IMT) had been established to deal with the issue, support teams to operate safely during this time and lead the plan to eliminate the problems which had been detected in the water system. The IMT was chaired by Dr Kal Cave, Consultant Microbiologist & Infection Prevention & Control Doctor and the 6th meeting was planned for 20 March 2023. Four sub-groups had been set up as follows: Technical, Health Centre, Communications and Operational Management – onsite/cross site services.</p> <p>As at 13 March 2023, 11 outlets had Legionella identified – all without thermal controls.</p> <p>In the first days of the issue coming to light, the IMT recommended that as many teams which could be moved off site should be. This led to the Maternity Unit pausing on-site birthing and GMED and the Minor Injury teams being relocated to Fraserburgh Hospital.</p> <p>Summers Ward was the in-patient ward and could provide up to 18 beds, however, due to restrictions in admissions requested by the IMT, patient numbers declined to seven by week commencing 4th March 2023.</p> <p>The duration of the required repairs was to be fully ascertained, but the situation has been subject to ongoing risk assessment to ensure that the hospital site continued to deliver as many services as was safe to do so, whilst the investigation and remedial works were carried out.</p> <p>The option to relocate the in-patients to a safer environment where they could receive the level of care that was strived to be delivered, was pursued and as part of this process the possibility of moving in-patients to Kinnaird Ward at Fraserburgh Hospital was investigated.</p> <p>The document ‘Standard Operating Procedure (SOP) for the Opening and Use of Facilities Previously Unoccupied / Partially Occupied in which Healthcare is to be Delivered’, was issued to the designated sub-group ‘Operational Management Team’ who were tasked with looking at options for a possible move. Part of this document allowed the team to move directly to Appendix 3 as this was felt to be an ‘Operational Pressure’ or ‘Emergency Situation’.</p>	
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	<p>Having successfully worked through this process, in-patients from Peterhead Hospital moved to Kinnaird Ward at Fraserburgh Hospital on 9th March 2023 and had been renamed 'Summers Ward at Fraserburgh Hospital'. As the ward and staff settle in, patient numbers would scale back up to the capacity of the ward which was 15. This move had proven to be successful for the well-being of both patients and staff.</p> <p>Discussion with the IMT continued to consider service demands in conjunction with the viability of teams operating safely on site in Peterhead Hospital whilst the water issues continued. In addition to a focus on the remedial work required to the water system and the disruption that may cause, discussions about the potential for restarting on-site birthing within the Maternity Unit and relocating the Minor Injury and GMED back to Peterhead were taking place.</p> <p>Risks – low – no cases of illness from Legionella Medium – public and press interest To be mitigated – toilets and fitting more in line filters.</p> <p>Services at 16.3.23: - At Fraserburgh Hospital – inpatient ward, GMED, Minor Injuries Unit (MIU), physiotherapy, catering At both sites – domestics At Peterhead Hospital – maternity clinics and scanning, renal, outpatients at 50%, pharmacy, occupational therapy, radiology Additional overnight security at Peterhead Hospital added</p> <p>Steven Lindsay expressed his thanks to Lynn Morrison for the update, however, highlighted that initially Staff Side colleagues had not been made aware of this issue, and requested that these colleagues were alerted to any future issues at an earlier opportunity.</p> <p>Paul Allen reported that the IMT was part of the service, not facilities and highlighted that the water pipework was extremely complex. Gavin Payne was conducting a survey of all buildings to obtain this digitally over the next few years.</p>	
	<p>c. Self Certification – this item was deferred to the next GAPF meeting 16 May 2023.</p>	

8	<p>Treated Fairly and Consistently, with Dignity and Respect, in an environment where Diversity is Valued</p> <p>a. Retire and Return</p> <p>Diane Annand referred to the paper shared with members which outlined the local implementation of national interim arrangements for Retire and Return to ensure appropriate scrutiny and governance whilst still taking on board the principles of the national arrangements. The arrangements were split to give different processes for returning to:</p> <ul style="list-style-type: none"> • Own post • Different role same job family • Bank post • Different job family <p>When returning to a different role in the same job family, this was where the most significant local process was being proposed, of the creation of a retire and return register and matching process to ensure accessibility to all, consistency of treatment and governance but equally complying with the principle in the national arrangements of “being considered before others”. However, decision taken that vacancies must first be considered for those on the redeployment register due to health, organisational change and then if not appointed to through that route, consideration of those who wished to return after retirement i.e. those on the new register. There was a need for managers to understand why the additional step was in place and accept this.</p> <p>Martin McKay confirmed that the various issues highlighted were also being discussed by the Once for Scotland group developing the national policy. The reason that this policy was being taken forward was to help alleviate the nursing shortages.</p> <p>GAPF approved the recommendations as outlined in the paper.</p>	
	<p>b. Public Holidays</p> <p>Due to time constraints, this item was deferred to the next GAPF meeting 16 May 2023.</p>	
9	<p>Any Other Competent Business</p> <p>Stuart Humphries expressed his thanks to Steven Lindsay for his participation in the Caroline Question and Answer (Q&A) which worked well. The Q&A due to take place end March/April would feature finance so any questions in advance would be gratefully received.</p>	ALL
10	<p>Communications messages to the Organisation</p> <p>Steven Lindsay would cover the items discussed at the meeting in the next report to the Board.</p>	SL

11	<p>Date of next meeting</p> <p>GAPF Development Event “The Fatigued and the Furious” 27 April 2023 from 9am to 4pm</p> <p>The next meeting of the group to be held at 10am to 12.30pm on Thursday 18 May 2023 via Microsoft Teams.</p> <p>Agenda items and Sector Partnership Reports to be sent to gram.partnership@nhs.scot by Wednesday 2 May 2023</p>	
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Joan Anderson - gram.partnership@nhs.scot