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Board Meeting  
Open Session  
03.08.23  
Item 13.5

**NHS GRAMPIAN**  
**Minute of the Staff Governance Committee**  
**held on Friday 18 April 2023 at 10am**  
**via Microsoft Teams**

**Present:**

Mrs Joyce Duncan, Non-Executive Board Member (Chair)  
Mr Bert Donald, Whistleblowing Champion  
Ms Alison Evison, Chair

**In Attendance:**

Mr Tom Power, Director of People and Culture  
Mr Philip Shipman, Head of People and Change  
Professor Caroline Hiscox, Chief Executive  
Ms Gerry Lawrie, Head of Workforce and Development  
Mr Ian Cowe, Acting Head of Health and Safety  
Ms Jane Ewen, Nurse Director, Excellence and Innovation (Deputy for Dr Brown)  
Mr Alistair Grant, Partnership Representative  
Professor Lynn Kilbride, RGU representative  
Ms Philippa Jensen, Interim Strategy and Transformation Manager (for agenda item 17/23 and 18/23)  
Ms Gemma Hood, Partnership Representative (for agenda item 17/23 and 18/23)  
Ms Lesley Brander, Workforce Intelligence Manager (for agenda item 18/23)  
Ms Pauline Rae, Workforce Service Manager (for agenda item 18/23)  
Ms Fiona Soutar, OD Manager (for agenda item 20/23)  
Ms Laura Kluzniak, We Care Programme Manager (for agenda item 20/23)  
Mrs Caron Thomson, Staff Experience Manager (for agenda item 20/23)  
Ms Liz Howarth, Deputy Head of Engagement (for agenda item 20/23)  
Ms Claire Houston, Programme Manager, PIP Directorate (for agenda item 21/23)  
Dr Adam Coldwells, Director of Strategy and Deputy Chief Executive (for agenda item 22/23)  
Ms Susan Harrold, Senior Planning Manager (for agenda item 22/23)

Minute Taker: Mrs Diane Annand, Staff Governance Manager

<b>Item</b>	<b>Subject</b>	<b>Action</b>
<b>14/23</b>	<b>Apologies</b> Apologies were received from Mr Steven Lindsay, Employee Director; Mr Jamie Donaldson, Health and Safety Partnership Representative; Dr Katherine Targett, Consultant Occupational Physician; Dr June Brown, Executive Nurse Director; and Professor Mohamed S. Abel-Fattah, Aberdeen University representative.	

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<p><b>15/23</b></p>	<p><b>Minute of meeting held on 24 February 2023</b></p> <p>The minutes were approved as an accurate record.</p>	
<p><b>16/23</b></p>	<p><b>Matters Arising</b></p> <p><b>a) Action Log</b></p> <p>Mr Power highlighted that action SGC29 was on the agenda, providing an update on HSE Prevention and Management of Violence and Aggression (PVMA) and including a decision on future reporting.</p>	
<p><b>17/23</b></p>	<p><b>Staff Governance Standard Assurance – Aberdeenshire</b></p> <p>Ms Jensen and Ms Hood attended the meeting to present to the Committee the Aberdeenshire Staff Governance Standard Assurance report. The following was outlined by Ms Jensen :</p> <ul style="list-style-type: none"> <li>• The Staff Governance Standard acted as overarching principles for HSCP activity.</li> <li>• Delivery of the Partnership’s Strategic Plan is underpinned by 3 key policies: the Workforce Plan 2022-25; the Strategic Delivery Plan 2022-25 and the Medium-Term Financial Strategy 2022-27. The Partnership engaged and worked with stakeholders to develop these as a basis on which to improve services.</li> <li>• The Partnership participated in both iMatter and the BPA Culture Survey during 2022. iMatter demonstrated an improvement in scores across each strand of the Standard when compared with 2021. Responses were more positive in relation to people’s experience within their own teams and team leaders, with greater dissatisfaction expressed in respect of organisational issues. However there was confusion over who the organisation question were aimed at i.e. NHS Board or the IJB.</li> <li>• High on the workforce agenda was attracting people to work in the Partnership.</li> <li>• Meeting the standard is more achievable on a day-to-day basis when it is business as usual, or where there is planned activity such as a service redesign. It can be more challenging where decisions must be made at pace due to circumstances beyond HSCP control or the need to invoke an Incident Management Team (IMT).</li> <li>• There were several workstreams to improve compliance with the Standard with the employee voice heard through the Joint Staff Forum.</li> </ul> <p>The Committee questioned whether, when decisions are made at pace that affect the ability for staff to be engaged as they should be, such as via an IMT, if staff were aware of the process and when in that process they <i>would</i> be engaged with. Ms Jensen responded that the Partnership would consider developing an IMT policy, detailing how matters should be taken forward to ensure consistency between individual situations.</p> <p>Ms Hood highlighted the following:</p>	

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- A number of methods were used to assess whether the Partnership was meeting the Staff Governance Standard, namely TURAS reporting and iMatter outcomes.
- The assessment had been that the Partnership partly met all elements of the Standard as there were always ways to improve.
- For example, 73% of respondents felt they were well informed, 27% did not. To assess full compliance with that element of the Standard felt like discrediting those views.
- Staff briefings summarising key points and staff views are written after each meeting in a concise manner to avoid mis-interpretations.
- Improving the number of staff with a completed appraisal will be taken forward with the Joint Staff Forum and Workforce workstream, through the Workforce and Training Group.
- There have been several TUPE transfers in Aberdeenshire and in each situation a working group is set up that includes the experts to provide an open and transparent environment. The HR FAQ is added to with new questions. At the end of the process there is an additional meeting to determine if there are any learning outcomes to help any further TUPE processes. The affected staff are offered one to ones to give them an opportunity to ask questions and to include them in the process.

Mr Power thanked Ms Jensen and Ms Hood for the balanced report and the honest reflections to the Committee. He stated that he understood why the less positive iMatter results were used to assess compliance with the Standard however the overall results were positive, especially when the “monitor to further improve” category was included, particularly given the pressures the Partnership has faced. Reaching an assessment could take into account additional factors than the survey results.

Mr Power responded to the question raised in the report on how can best practice be shared amongst sectors to ensure learning from each other to maximise opportunity to hear the employee voice. He felt this was through sharing at GAPF and the Culture Collaborative.

Mr Power highlighted the reciprocal rights and responsibilities within the Standard, asking what opportunities were there to encourage staff to fulfil their responsibilities. Ms Jensen responded that there had been a recent discussion regarding this at the Joint Staff Forum, where areas agreed to develop conversations with staff on their role and responsibilities, raising awareness of the Standard. Ms Hood added that there had been some roadshows in 2020, although not concluded because of the pandemic. Those who attended were engaged however there was the need to share experiences of staff in the Partnership: method yet to be decided.

The Committee highlighted the potential barrier in the report that HSCP managers employed by Aberdeenshire Council are not authorised to receive TURAS data on training and appraisals. Mr Power responded that it was the ambition of NHS Education for Scotland (NES) for TURAS to be accessible to local authority managers, not just NHS, and access was not reliant on an nhs.scot email address. He queried whether the barrier was in relation to

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	<p>the relationship between appraiser and appraisee, or broader manager reporting. Ms Lawrie outlined that an appraisal record can only be accessed by the aligned manager, but the progress of appraisal within teams can be accessed. The work by NES to enable global reporting was not concluded nationally, and this has been picked up with them.</p> <p>The comment in the report on lower compliance rates for infection and control training was highlighted by the Committee. Ms Jensen responded that this would require further interrogation. Ms Lawrie offered that it may be in relation to reporting ongoing compliance against a withdrawn course given the introduction of a new course in 2022.</p> <p>The Committee asked what had been done to promote the Whistleblowing Standards in the Partnership. Ms Hood responded that the principles of the Staff Governance Standard are known by staff however not under the title of the Standard. She had undertaken a presentation at Scolty Ward on what the Standard meant. The need to increase the awareness of the Whistleblowing Standards was noted.</p> <p>The Committee thanked Ms Jensen and Ms Hood for a comprehensive report, complimented by the informative presentation. The Committee confirmed that they were assured that Aberdeenshire was working in the correct manner and direction.</p>	
<b>18/23</b>	<p><b>Workforce Information – Aberdeenshire</b></p> <p>Ms Rae referred to the distributed Aberdeenshire H&amp;SCP Staff Governance Workforce reporting document. A summary of the data was:</p> <ul style="list-style-type: none"><li>• Significant aging workforce across the majority of job families.</li><li>• High levels of part time working.</li><li>• Stability and turnover levels consistent, with no outliers.</li><li>• Concerns with statutory and mandatory training compliance.</li><li>• Long term absence higher than the NHS Grampian average.</li></ul> <p>The Committee raised the following points from the data:</p> <ul style="list-style-type: none"><li>• The action being taken to address the low compliance with training.</li><li>• The succession planning occurring to prepare for the impact of an ageing workforce.</li><li>• Whether there was impact on recruitment due to the increase in fixed term contracts.</li><li>• Was there any information on those retiring and returning and the wish of new starts to work part time to explain the increase in part time employees.</li><li>• Was there a correlation between the increase in the absence reason of anxiety/stress and the increase in fixed term contracts.</li><li>• What was being done to maintain good mental health in the workplace; need to explore mental health and wellbeing figures to avoid long term issues.</li><li>• Whether a fixed term contract was more common in part time roles for new appointments.</li></ul>	

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	<p>The Committee asked that future reports include an assessment of the data by the Partnership, confirming they were partly assured using the current format.</p> <p>Professor Hiscox raised that the owner of the workforce data was the Chief Officer, Aberdeenshire HSCP, although as the data only covered NHS Grampian employees it did not give a full picture for the partnership. How the data was used and analysed was key to achieve the greatest use from it. Mrs Duncan commented that combined data would be expected at the IJB. Mr Power stated that the reporting was still being tested and the aim moving forward was for the Portfolio/Directorate attending the Committee to work with and present the information.</p>	
<p><b>19/23</b></p>	<p><b>Annual Delivery Plan 22/23 committee assurance planner paper</b></p> <p>Mr Power outlined that this section of the Committee agenda reflected the agreed allocation of deliverables from the 2022/23 Delivery Plan, with the Committee asked to consider all or some of the progress across all three elements: people, places and pathways. PAFIC will receive the assurance reporting on Delivery Plan priorities assessed as red under the Scottish Government RAG rating while the Plan is in progress, to obtain assurance on actions being taken to improve the trajectory for achieving the priority. This Committee would receive reports covering the allocated deliverables for assurance purposes through the lenses of the Staff Governance Standard.</p> <p>Mr Power referred to the Committee workplan, split into three sections, designed to ensure the Committee discharged its responsibility:</p> <ul style="list-style-type: none"> <li>• Delivery Plan objectives 22/23</li> <li>• Statutory monitoring and Portfolio/Sector attendance at the Committee</li> <li>• Terms of reference</li> </ul> <p>Mr Power stated that the workplan would be used to sequence agenda items. This was noted by the Committee.</p>	
<p><b>20/23</b></p>	<p><b>Delivery plan assurance for Objective 2: People</b></p> <p>Mr Power delivered a presentation to update the Committee of the progress against the People milestones during quarter 4. The status against People milestones were Complete 18%; On Track 37%; Minor delay 36%; and Significant delay 9%.</p> <p>Key areas of learning and progress were:</p> <ul style="list-style-type: none"> <li>• North of Scotland International Recruitment Service now staffed. 95 registered nurses recruited with offers accepted by 31 March 2023. Expect all to be on-boarded by June.</li> <li>• Monthly protected time for learning for Agenda for Change staff has been agreed as part of the Agenda for Change reforms and to be progressed following agreement of 2023/24 pay deal.</li> <li>• All 3 HSCPs continue with early implementation of newly approved workforce plans. 65% actions reported On Track at quarter 3.</li> </ul>	

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	<ul style="list-style-type: none"><li>• Positive feedback from NHS Charities Together received January 2023. Long covid rehab and extension of Values Based Reflective Practice projects on track. TRiM assistant psychologist recruited and in post.</li><li>• Soft launch of refreshed We Care website incorporating staff feedback. Correction of final snagging issues underway before full launch. Usage and impact plan in place.</li><li>• Evaluation of clinical band 2 HCSWs progressing well, 796 individual applications assessed, or 80% of the eligible population. NHS Grampian at an advanced stage in completing this exercise compared with other boards.</li></ul> <p>People Milestones with a Red RAG status were:</p> <p>Establish a Medical Staff Bank to enable easier take up of locum opportunities:</p> <ul style="list-style-type: none"><li>• 50% of funding requested for resource to establish Medical Staff Bank allocated via 2023/24 budget prioritisation. Supplementary Staffing project steering group have advised that the Medical bank will not be delivered within original timescale of March 2023.</li><li>• Further discussions taking place to determine whether additional support can be factored by the PIP Directorate as a means of ensuring that a basic medical bank for trainee doctors can be implemented as monies allocated are not sufficient.</li><li>• No status change between Q3 and Q4</li></ul> <p>Validate BPA Culture Survey Phase I results with staff groups who did not participate:</p> <ul style="list-style-type: none"><li>• Two participating directorates have shared how Phase I results used with teams and Directorate with the Culture Collaborative, which has encouraged engagement with BPA by a wider audience.</li><li>• Progress of validation with areas not participating in Phase I not possible due to lack of specialist capacity for analytical and facilitation work.</li><li>• 50% of requested funding for Culture Matters allocated on a recurrent basis as part of budget prioritisation. This will support progression of BPA Survey in 2023/24, with scale to be determined by June.</li><li>• No status change between Q3 and Q4</li></ul> <p>Improve participation in Statutory and Mandatory training:</p> <ul style="list-style-type: none"><li>• Due to significant operational pressures the Partnership chaired Subject Matter Experts Group had a meeting cancelled, and actions not progressed</li><li>• NES has indicated a 3 month timeframe from February for completion of work to support medical staff and proxy reporting in TURAS Learn. Required to ensure medical staff compliance can be tracked.</li><li>• Whole System Decision Making Group agreed that NHS Grampian Quality and Safety Group consider prioritisation of topics and refresh requirements to support further improvement of the position.</li><li>• Status moved from amber in Q3 to red in Q4</li></ul>	
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	<p>People updates relevant to Scottish Government priority areas of focus 2022/23:</p> <p>Staff Wellbeing</p> <ul style="list-style-type: none"><li>• Some areas of enhanced support for staff wellbeing beyond March 2023 put at risk, including the ability to complete work and retain expertise, due to financial constraints, with partial funding secured.</li><li>• Evidence from NHS Charities Together and local wellbeing projects indicate they are having a positive impact and enhance wellbeing support for staff will remain a key priority in the medium/long term.</li><li>• Resource is required to further analyse data in order to identify and appropriately target areas of concern.</li></ul> <p>Recruitment and Retention of Workforce</p> <ul style="list-style-type: none"><li>• Recruitment actions continuing to demonstrate results, while funding levels risk efficient development and utility in a number of areas.</li><li>• Increasing costs to sustain the national eRostering roll-out programme due to lack of integration between the Allocate system and SSTS, risk making the programme unaffordable locally.</li><li>• A lack of clarity on the position regarding continuation of national funding to support the Health and Care Staffing Act implementation puts at risk the ability to complete preparatory work and retain expertise during a crucial year for this programme of work.</li></ul> <p>Mr Power referred to the distributed flash reports from the Health, Safety and Wellbeing Committee and the Sustainable Workforce Oversight Group which outlined key areas of discussion from the latest meeting; key decisions; and areas of assurance and escalations. In addition a summary of progress against the longer-term Plan for the Future Colleagues and Culture deliverables for completion by 2028.</p> <p>The Committee noted that plans can be delayed when there are regional/national independencies, outwith the influence of NHS Grampian. Mr Power confirmed that opportunities were taken to feedback the impact of such delays. The next would be via the three year Workforce Plan action plan update due in June 2023. Professor Hiscox outlined that when NHS Grampian meet with the Scottish Government to discuss the annual delivery plan, it will be articulated what can be delivered within the challenges of the current financial position.</p> <p>Mr Power referred to the distributed paper which gave an in-depth focus on Culture and Staff Experience. The progress with milestones reflected delays due to a period of sustained system pressure throughout 2022/23 and the current organisational change within the People and Culture Directorate. Progress in the coming year will be aided by the appointment of a Head of Wellbeing, Culture and Leadership in May, who will lead the forming of their department specialising in this area. However the need to disaggregate current teams and roles to create the new department and team structures, may impact on the ability in the short-term to progress all of the priorities.</p> <p>The paper had six appendices covering:</p>	
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- Culture Matters programme and BPA Culture Survey
- Leadership Development
- iMatter and Staff Experience
- Management Development
- Becoming an antiracist and anti-discriminatory health board
- Trickle App Pilot

Each Appendix outlined the relevant plan (i.e. the 22/23 Annual Delivery Plan or just the Plan for the Future); progress in the current financial year; medium term look ahead to 2026; and key risks and mitigations.

The Committee enquired on the difference made as a result of the BPA Culture Survey Phase I, the rationale for progressing to Phase II if Phase I was not concluded, and whether there would be sufficient capacity to take forward outcomes. Mr Power responded that ultimately the re-surveying of Phase I participants in due course would demonstrate whether a positive difference had been made. Progressing Phase II was challenging due to receiving 50% of requested funding for Culture Matters, therefore meticulous planning was required to establish if feasible at the scale originally envisaged, particularly as a commitment had been made to undertake Phase II. If Phase II was not possible, clear communication with staff would be essential and a viable alternative sought.

Mrs Ewen outlined that further to the BPA Phase I outcomes, work had been done with Teams and the NMAHP Strategy revamped. The nursing team within the Royal Aberdeen Children's Hospital proceeding with Magnet accreditation would be the first to participate in the survey for a second time. Mr Power noted that discussion with an SCN participating in Phase I on his recent visit to RACH had highlighted the profound difference this had made to their leadership approach, with a positive impact being experienced by the team and the service concerned.

Ms Kluzniak added that Facilities and Estates had provided an update at the March 2023 Culture Collaborative, on their action planning including culture sampling exercises and town hall meetings. Mr Power noted that the BPA Survey had been cited as a 'mandate for change' in relation to work already underway by those presenting the update. Ms Kluzniak added that she received monthly updates from Phase I leads that are collated into a flash report for the Culture Matters Programme Board. She suggested this could be taken into the Culture and Staff Experience Oversight Group, the minutes of which are shared with this Committee.

The Committee raised an example of a department not being aware of the Culture Collaborative. Mr Power stated that further internal advertising of the Collaborative was required to inform others and encourage attendance, with ownership by the services, and that it needed to move beyond an online only approach. Ms Kluzniak commented that a working group involving colleagues from across different professional groups had been established to further develop the Collaborative and support greater system ownership.

The Committee was assured by the progress outlined.

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<p><b>21/23</b></p>	<p><b>Delivery plan assurance for Objective 1: Pathways</b></p> <p>Ms Houston referred to the distributed paper which provided information on the Unscheduled Care Programme and two enabling groups of communication and engagement, and data, quality improvement and evaluation.</p> <p>Ms Houston delivered a presentation providing the following information:</p> <ul style="list-style-type: none"><li>• There were four Programme Managers each a lead for either Unscheduled Care Improvement Programme Board; Communication and Engagement; data, quality improvement and evaluation; and Discharge without delay.</li><li>• The Unscheduled Care Programme Board reported to the Chief Executive Team, with a flow of information with the Whole System Decision Making Group. The Unscheduled Care Improvement Programme and the Optimising Patient Flow Programme reporting to the Programme Board.</li><li>• Priorities to March 2024:<ul style="list-style-type: none"><li>• ED 4 hourly target 60% by November 2023</li><li>• ED 4 hourly target 70% by March 2024</li><li>• Discharge without delay</li><li>• Triage and assessment including ED footprint</li><li>• Flow Navigation Centre development</li><li>• Hospital@Home/Hospital Without Walls</li><li>• Primary Care Sustainability</li><li>• Mental Health</li><li>• Cath Lab – reduction of Boarders</li></ul></li><li>• How the Staff Governance Standard was applied to the Programme and the proposed structure of the Programme:<p><i>Well informed</i></p><ul style="list-style-type: none"><li>• Whole system representation on Unscheduled Care Programme Board</li><li>• Dedicated Teams channel</li><li>• Fortnightly update sessions</li><li>• Summary action plan (under development)</li><li>• Data, evaluation and quality improvement enabling group bringing together experts with the ask based on priority and need</li><li>• Communication and engagement enabling group deciding the format and how much information is shared to ensure it contains the right information at the right time and at the right level.</li><li>• Monthly information sharing network (to be established)</li></ul><p><i>Appropriately trained and developed</i></p><ul style="list-style-type: none"><li>• Enabling groups – hints, tips and tools</li><li>• Training and development opportunities such as having a courageous conversation and establishing the model of urgent care practitioners</li></ul></li></ul>	
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	<ul style="list-style-type: none"> <li>• System leadership approach – those who do the work do the change</li> <li>• Monthly information sharing network</li> </ul> <p><i>Involved in decisions</i></p> <ul style="list-style-type: none"> <li>• 10 week consultation</li> <li>• Link with Delivery Plan</li> <li>• Link with Plan for the Future</li> <li>• Senior Responsible Officer and Operational Lead aligned to each workstream</li> </ul> <p><i>Professor Hiscox left the meeting</i></p> <p>Due to limited time at the meeting, members were asked to submit any questions to Mrs Annand who would arrange for an answer to be obtained. The Committee thanked Ms Houston for the very clear presentation.</p>	<p><b>ALL/DA</b></p>
<p><b>22/23</b></p>	<p><b>Delivery plan assurance for Objective 3: Places</b></p> <p>Ms Harrold referred to the distributed paper. It was outlined that the developing, testing and agreeing of an approach to service planning had been deliberately delayed following some preliminary planning sessions, due to ongoing high level system pressures impacting significantly on service/team capacity to progress. From preliminary discussions there was broad consensus for an integrated approach to planning. A proposed draft planning approach/framework will be developed for consideration by Chief Executive Team and wider engagement with colleagues, with implementation of the agreed approach expected to be phased and targeted against key organisational priorities set out in the 2023/24 Delivery Plan. In the context of this paper, the term ‘service planning’ should be considered in the broadest sense to encompass whole system ‘wider teams’, services, networks and end to end pathways of care operating across ‘traditional’ organisational/service specific boundaries. This will be key to ensuring a truly coherent and integrated approach to planning.</p> <p>The Scottish Government has set out its approach to planning and delivery with the aspiration for ongoing collaboration and a more coherent and integrated approach to planning and delivery of services. This includes national goals to guide local, regional and national planning.</p> <p>It was important that critical enabling resources such as workforce, digital, infrastructure and finance are aligned appropriately to effect the transformation required to ensure a sustainable health and care system; improved population health and reduce health inequalities.</p> <p>Ms Harrold provided assurance of the work ongoing highlighting the initial output from local preliminary discussions. This will be further developed into a proposed framework setting out the approach to integrated service planning.</p> <p>The Committee noted the update and thanked Ms Harrold for the concise reporting. It was noted that a draft proposed framework setting out the approach to integrated service planning including the key building blocks</p>	

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	required to support will come back to the Committee later in the year. The time frame for this to be agreed by Chief Executive Team based on the capacity of the system to undertake the work.	
<b>23/23</b>	<p><b>HSE Prevention and Management of Violence and Aggression (PMVA) update</b></p> <p>Mr Cowe referred to the distributed report highlighting the proposal that future assurance would be via the routine provision to the Committee of Occupational Health, Safety and Wellbeing Committee minutes and focus on any relevant Delivery plan milestones. The Committee thanked Mr Cowe for the update provided and agreed the proposal. Mr Power highlighted that the participation in training continued to increase with monitoring progressing despite system pressures. The Committee noted the ongoing programme of work, and the agreement that the Chief Executive Team would continue to receive quarterly updates despite the notices being closed off by the HSE in January 2023.</p>	
<b>24/23</b>	<p><b>Agenda for Change reform</b></p> <p>Mr Power briefed the Committee that the Scottish Government had been negotiating with the Trade Unions/Professional Organisations a one year pay deal for 2023/24 which included a pay award and a review of Agenda for Change. This included:</p> <ul style="list-style-type: none"> <li>• Review of the Band 5 nursing job profiles;</li> <li>• Protected Learning Time;</li> <li>• Working week reduction to 36 hours from 37.5.</li> </ul> <p>This built on the review of the approach to appraisal, statutory and mandatory training and incremental progression agreed as part of the three year Agenda for Change pay deal in 2018, which had not progressed as intended. An update would be provided to the Committee every second meeting, ultimately forming part of the delivery plan once more details were known. Mr Shipman added that the national groups were being formed to scope out work with a delivery plan by September 2023.</p>	
	<b>Statutory Information, Reports and Returns</b>	
<b>25/23</b>	<p><b>Sharing cultural intelligence group including Triangulation of Whistleblowing and other data</b></p> <p>Mr Power reported that two linked groups had been set up to triangulate learning from whistleblowing concerns with other sources of intelligence. The learning would inform the Committee agenda and the work of the Culture Collaborative. The terms of reference would be shared at the August 2023 meeting with updates as appropriate thereafter.</p>	
<b>26/23</b>	<p><b>Remuneration Committee 8 March 2023 agenda and assurance statement</b></p> <p>Noted by the Committee.</p>	

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<p><b>27/23</b></p>	<p><b>Scottish Government feedback from Staff Governance Monitoring 2021/22</b></p> <p>Mr Power referred to the feedback received from the Scottish Government on the Staff Governance monitoring exercise submitted in 2022 using 2021/22 activity. The feedback highlighted areas which were of particular note and could be shared as good practice across Boards. There were also areas highlighted that NHS Grampian may wish to feed into the return for 2022/23, namely:</p> <ul style="list-style-type: none"> <li>• Success of online training for managers.</li> <li>• Progress of 5 Year Anti-racism Strategy in development supported by Staff Equalities Network.</li> <li>• Outcome and benefits of digital learning programme for managers</li> <li>• Progress on implementation of the Speak Up programme including Ambassadors recruitment and training</li> <li>• Update on adoption of Vivup no-cost staff discount scheme</li> <li>• Progress on the streamlining of the Exit Questionnaire to better understand factors impacting retention</li> <li>• Update on Anti-Racism badge.</li> </ul>	
	<p><b>For Information</b></p>	
<p><b>28/23</b></p>	<p><b>a. BMA Joint Negotiating Committee Minutes – 8 November 2022</b></p> <p><b>b. Culture and Staff Experience Oversight Group minutes – no new approved minutes</b></p> <p><b>c. Occupational Health, Wellbeing and Safety Committee – no new approved minutes</b></p> <p><b>d. Sustainable Workforce Oversight Group - 9 November 2022.</b></p>	
<p><b>29/23</b></p>	<p><b>AOCB</b></p> <p><b>a. Points of escalation to the Board</b></p> <p>Mr Power asked that the potential of industrial action by junior doctors be highlighted to the Board, as the outcome of the BMA ballot and the first potential date for strike action was before the next Committee meeting.</p>	
<p><b>30/23</b></p>	<p><b>Date of next Meeting</b></p> <p>Thursday 22<sup>nd</sup> June 2023 10.30am to 12.30pm via Teams</p>	