**Approved Minutes**

**Meeting: Staff Governance Person Centred Committee (SGPCC)**

**Date: Wednesday 7 July 2021 at 10:00 hrs**

**Venue: Via Microsoft Teams**

**Members**

Marcella Boyle Non-Executive Director (Chair)

Callum Blackburn Non-Executive Director

Jane Christie-Flight Non-Executive Director / Employee Director

Rob Moore Non-Executive Director

**In attendance**

Anne Marie Cavanagh Executive Director of Nursing and Allied Health Professionals

Cathy McAllister Staffside Representative

Donna Akhal Head of L&OD (agenda item 7.1, 7.2, 10.4)

Jann Gardner Chief Executive

June Rogers Director of Operations

Laura Langan Head of Clinical Governance (agenda item 5.1 and 10.1)

Mark MacGregor Medical Director

Nicki Hamer Deputy Head of Corporate Governance

Sandie Scott Head of Communications (agenda item 6.2)

Serena Barnatt Director of HR

Susan Douglas-Scott CBE Board Chair

**Apologies**

Gareth Adkins Executive Director Quality, Innovation & People

**Minutes**

Denise Crossan Corporate Administrator

1. **Opening Remarks**

Marcella Boyle opened the meeting by thanking everyone for attending.

1. **Apologies**

The apologies were noted as above.

1. **Declarations of Interest**

There were no declarations of interest.

1. **Updates from last meeting**
	1. **Unapproved Minutes**

The minutes from 11 May 2021 were approved as an accurate record of the meeting.

* 1. **Actions**

All previous actions were updated or closed.

* 1. **Matters Arising**

There were no matters arising.

**5 Person Centred**

**5.1 Annual Feedback Report**

Laura Langan joined the meeting and provided an overview of the Annual Feedback Report. The circulated report includes the formal feedback data in preparation for the Annual Feedback Report. In collaboration with colleagues in the Communications Team and Spiritual Care, the fully formatted version will be brought back to the Staff Governance and Person Centred Committee.

Response times continue to be an area requiring scrutiny. The Clinical Governance Risk Management Group discussed this issue at their last meeting. The Senior Management Business Meeting will be presented with a paper on the proposed improvement actions in relation to response times. As a result of some improvement measures being implemented, in May the response rate was 100% for stage two complaints.

The report includes a ‘COVID-19 related feedback’ section. The most common feedback within this section was in relation to waiting lists. Other common themes were patient journey, queries and concerns around Covid pathways, pre-op testing and communications. A lot of work has been undertaken by the Communications Team to ensure patients were receiving the communications they needed.

Marcella Boyle queried if delays responding to joint complaints with other Boards have improved. Laura Langan responded that there have been delays on some occasions but NHS Golden Jubilee (NHS GJ) do not have a high level of shared complaints.

Marcella Boyle thanked Laura Langan for her update and comprehensive paper.

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| **Action No.** | **Action** | **Action by** | **Status** |
| 070721/01 | Laura Langan agreed to update the Committee on the findings of the deep dive into response times. | Laura Langan | New |

The Committee noted the Annual Feedback Report.

**5.2 Spiritual Care Update**

Tosh Lynch joined the meeting and delivered a presentation on Spiritual Care including the following key highlights:

* Within Spiritual Care there has been a shift, informed by research, that Spiritual Care is Person Centred and not necessarily God Centred, it is all about the person.
* Welcome the involvement of Spiritual Care in the Health and Wellbeing Strategy
* Committee Members informed of the Strategy for Health and Social Care Chaplains and Spiritual Care in Scotland (2021-2026) and how this will inform NHS GJs Strategy.
* An audit will be undertaken to identify any gaps within Spiritual Care and wellbeing. The United Kingdom Board of Health Care Chaplin’s have an audit template that we will use.
* The results from the audit will inform the Spiritual Care Strategy.

Tosh Lynch outlined the next important steps:

* Embed Spiritual Care within our NHS GJ policies.
* Create an awareness that staff can deliver Spiritual Care.
* Initiating a multidisciplinary network of staff committed to implementing Spiritual Care.
* Establishing a Spiritual Care Forum. Membership would consist of representatives from the Spiritual Care Team, patient representatives, staff, volunteers and religion and belief representatives.

Marcella Boyle thanked Tosh Lynch for his presentation and acknowledged how well Spiritual Care sits within the health and wellbeing activity and support.

Susan Douglas-Scott welcomed traction on the strategy so far and suggested that Board Members are involved in the development of the Strategy.

Jann Gardner thanked Tosh Lynch for their presentation which outlined the whole context and the opportunity very well.

Marcella Boyle thanked Tosh Lynch and advised the Committee were supportive of the strategy development and dialogue input.

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| **Action No.** | **Action** | **Action by** | **Status** |
| 070721/02 | Further update on the Spiritual Care Audit and Strategy to be presented to the Committee at a future meeting once the work has started to progress. | Tosh Lynch | New |

 The Committee noted the Spiritual Care Update. Tosh Lynch left the meeting.

**6 Well Informed**

**6.1 Integrated Performance Report (IPR)– Staff Governance**

 Serena Barnatt presented the Staff Governance section of the IPR reporting to 31 May 2021. The following was noted:

* The sickness absence is slightly down on the previous month and is above the national target of 4%. Monitoring continues to identify any change or trends.
* Mental Health conditions remain the highest cause of sickness absence.
* Covid absence codes have been used to ensure staff are not disadvantaged in terms of using their sick leave. This figure dropped in May 2021 as a result of people who were shielding returning to work.
* KSF and PDP Appraisals is down by 1% and this will be discussed later in the agenda.

The Committee approved the IPR – Staff Governance.

**6.2 Communications Update**

Sandie Scott presented highlights of recent work within the Communications Team including:

* Staff Awards launched in June 2021 and 62 nominations received across most categories. Most popular categories are ‘Top Team’ and ‘Unsung Hero’.
* Plan for internal communications - highlighted some of the pieces have slipped due to O365. Currently in discussions with eHealth as to when can access new platforms Yammer and for putting our corporate intranet onto SharePoint.
* Launch of Centre for Sustainable Delivery (CfSD). Web and social media presence established.
* Launch of NHS Scotland Academy scheduled for August 2021.
* Reminder that managers have a responsibility to cascade communications with their teams.
* Developing a Tone of Voice which will ensure that all communications across the Board are written in the same language and personality.

The Committee discussed overall staff morale and the challenges that staff are facing working during a Pandemic. It was acknowledged that although staff morale is low, staff are engaged and this is evident by the number of staff award nominations received so far. The Communications Team do a great job of suggesting new ways of communicating with staff.

The Committee noted the Communications Update.

**7 Appropriately Trained**

**7.1 Corporate L&OD Plan and Activity Report**

 Donna Akhal joined the meeting to present the Corporate Learning and Organisational (L&OD) Plan and Activity Report. The activity report covers the activity undertaken in 2020/21. The department recruited four new team members towards the end of the year and this is already having an impact and allowing the team to support more workstreams across the organisation.

Donna Akhal informed the Committee of the eight priority workstreams for 2021/22 activity.

Jane Christie-Flight commented that it is positive to see the organisation invested in L&OD activity. The investment is critical to deliver the health and wellbeing support that staff need.

Committee Members welcomed the layout and presentation of the report and the level of detail provided.

The Committee discussed the use of Myers-Briggs and agreed to arrange a session on this for Board Members.

Marcella Boyle asked Donna Akhal to extend the Committee’s thanks to the L&OD Team for their commitment and engagement across the organisation.

The Committee noted the Corporate L&OD Plan and Activity Report.

**7.2 KSF and PDP Update**

Donna Akhal provided an update on the current Appraisal status, reporting that as at 31 May 2021, the appraisal rate is 66%. The report provides a detailed breakdown and a year on year comparison.

It is noted that the Board is not meeting its 80% national target, this is mostly due to Covid-19 and also the number of new recruits. Executive Directors have been asked to ensure improvement plans are in place for departments and areas that are not meeting the target.

HR and L&OD have formed a SLWG and invited managers to be part of the group to discuss any issues or barriers to completing appraisals. An action plan has been developed with the feedback received from managers.

Jane Christie-Flight noted that although the Board is not meeting its appraisal target, it is able to demonstrate that measures are being taken to improve completion rates. It was highlighted that there has been a lot of expansion in the organisation, including staff who have not worked in the NHS before. L&OD will be delivering ‘Back to Basics’ job evaluation training.

Marcella Boyle welcomed the ‘Back to Basics’ approach and noted that this item would remain on the agenda until figures have improved.

 The Committee noted the KSF and PDP Update.

**7.3 Medical Appraisal and Revalidation Update**

Mark MacGregor informed the Committee that a paper had been agreed with the Executive Team on the process for Medical Appraisals for the coming year. The main change to the process is that it will start earlier in the year. An education session has been set up for Clinical Directors and Service Managers in September 2021 and Service Planning will commence thereafter.

A formal sign off process has been introduced for service plans, these will be signed off by the Associate Medical Director, Divisional Director and Finance. Each Service Plan will have an accompanying Risk Plan which will identity gaps between capacity and projected demand and how the gap will be addressed.

The Medical Director is in the process of having one to ones with Clinical Directors to ensure that anything outstanding from last year is completed before September 2021.

The Medical Appraisal figures were noted. Mark MacGregor stated that within the figures, those that are of most concern are those who do not have an allocated appraiser. The team are actively recruiting new appraisers.

Mark MacGregor noted no specific issues causing concern for revalidation. Mark MacGregor reminded the Committee that the GMC formally revalidates following referral from NHS GJ and there is a steady flow of staff going through the process.

Marcella Boyle thanked Mark MacGregor for the Medical Appraisal update and noted that the Committee are assured by the activity that Teams are progressing.

The Committee noted the Medical Appraisal and Revalidation Update.

**8 Involved in Decisions**

**8.1 Partnership Forum Report**

Jane Christie-Flight presented the Partnership Forum Report from the meeting held on 18 June 2021 and highlighted the main agenda items discussed.

The Forum were presented with several updates to policies and these were approved. The Work Life Balance Policies have been refreshed, these policies will form part of the Once for Scotland Polices but due to the delay in progressing this work nationally, NHS GJ have been keeping the polices up to date internally.

The Committee approved the COSHH Policy, Risk Assessment Policy, Child Protection Policy and the Corporate Parenting Plan.

The Forum were informed that the Once for Scotland programme of work is due to recommence on 1 August 2021 with all policies being implemented by late 2022. The Once for Scotland Homeworking Policy will be out for consultation at the end of June 2021 and Forum members will have an opportunity to comment on this if they wished.

This year’s Staff Governance Submission request has been received and work has commenced to prepare it. The completed documentation will come back to the Partnership Forum in August 2021 in advance of going to the September 2021 Staff Governance and Person Centred Committee.

The Forum discussed the Staff Awards and Long Service Awards. The Long Service Awards will commence in Autumn 2021.

The Forum were updated on the progress of the Nursing Strategy that was launched early 2020. It was noted that many areas of the Nursing Strategy plans were paused during 2020/21, due to Covid-19, however there are now plans to review and ‘reset’ many of the themes in the coming months.

Marcella Boyle suggested that a deeper dive into the Nursing Strategy should be presented in due course.

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| **Action No.** | **Action** | **Action by** | **Status** |
| 070721/03 | A deep dive of the Nursing Strategy to be presented at a future Committee meeting. | Anne Marie Cavanagh | New |

The Committee noted the Partnership Forum Report.

**8.2 Draft Staff Governance Action Plan 2021/22**

Serena Barnatt explained that the Board is required to develop an annual Action Plan that supports the delivery of Staff Governance.

The Action Plan captures other high level plans like the Health and Wellbeing Plan and the Equality and Diversity Plan. For this year the format has been revised, the actions have been segregated into the five strands of staff governance and a delivery plan format has been adopted. The final report will feature a column for progress updates.

This will be a live document which will allow the feedback from the iMatter survey to be incorporated. Scottish Government have advised Boards to continue to use the 2020 vision and when this is updated any priorities will be refreshed in the Action Plan.

Marcella Boyle thanked Serena Barnatt for the comprehensive Action Plan and supported the new format.

 The Committee approved the Draft Staff Governance Action Plan 2021/22.

**9 Fair and Consistent**

**9.1 iMatter update**

Lisa Walsh joined the meeting and provided an update on iMatter including the following:

* The iMatter questionnaire will now feature questions in relation to demographic and Covid-19.
* Doctors and Dentists in Training (DDiT) including clinical fellows, proposal to run with the previously agreed 9 questions with a commitment to move to the full questionnaire at a future date.
* The 60% response rate threshold has been removed.Teams of less than five will still need to have 100% return rate to generate a report.
* Next day team reports for full electronic directorates / Boards will be available. Those directorates who have paper copies will receive reports two weeks after closing date. This means eight-week (reduced form 12 week) action planning can start the next day.
* No longer a requirement to submit team stories directly to Scottish Government. Each Board will be required to upload team stories directly onto iMatter website by 1 November 2021.
* A local implementation group has been established.
* Delivered first of two sessions with Scottish Ambulance, back to basics one hour MS Teams session on responsibilities as a manager.
* Questionnaire goes live on 30 August 2021.
* Reports will be published on 4 October 2021.

It was agreed a time would be identified for Board Members to be involved in an iMatter action planning session.

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| **Action No.** | **Action** | **Action by** | **Status** |
| 070721/04 | iMatter action planning session to be arranged for Board Members | Nicki Hamer | New |

The Committee noted the iMatter update. Lisa Walsh left the meeting.

**9.2 Workforce Monitoring Report**

Serena Barnatt informed the Committee that the Workforce Monitoring Report is a requirement annually for every Board in Scotland. The report is produced in line with the Equality Act.

The key highlights within the report are:

* Increased headcount to support Expansion and Remobilisation Plans.
* Sickness absence at the lowest rate in five years.
* Increase in Anxiety/stress/depression/other psychiatric illness. There is a focus on interventions that will support staff.
* Gender segregation stands at 75% women to 25% and is representative of health care professions.
* NHS GJ has an ageing workforce and this will be an area of focus.
* The three-year Workforce Plan will come to the Committee in January 2022.
* The quality of data held on eESS in relation to the protected characteristics continues to improve, with an ongoing decrease in the proportion of staff who have provided no information in relation to the protected characteristics.

Jane Christie-Flight commented that the age demographics within Nursing have changed quite considerably. From a national perspective, some real challenges across NHS Scotland around retirements. In five years’ time 19.2% of the workforce would be at an age where they could retire. Good to keep focus in this challenging area.

Callum Blackburn welcomed the level of data within the report.

Anne Marie Cavanagh acknowledged the importance of having conversations with staff and understanding what ‘creating the condition’ means to them. In relation to the ageing workforce, Anne Marie Cavanagh expressed that it is key to understand what we can do for staff that want to be in the workplace for longer. Nursing are starting to see an influx of younger staff and we need to consider how we can develop those members of staff.

Marcella Boyle welcomed insight from across Scotland into the ageing workforce issue and it is important NHS GJ learn from this.

The Committee noted the Workforce Monitoring Report.

**9.3 Staff Governance Submission Update**

Serena Barnatt informed the Committee that notice had been received from Scottish Government for the annual Staff Governance return. The report is underway and will be presented to the Committee in September 2021. Previously feedback took the format of a letter but this year it will be verbal with the Chair of Staff Governance and Person Centred Committee.

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| **Action No.** | **Action** | **Action by** | **Status** |
| 070721/05 | Staff Governance Submission to be presented at September meeting | Serena Barnatt | New |

 The Committee noted the Staff Governance Submission Update.

**9.4 Review of Key Performance Indicators (KPI)**

Carole Anderson joined the meeting and advised Committee Member’s that the circulated paper reviews the current construction of the Integrated Performance Report (IPR) and suggests amendments to current measures with the IPR Performance Dashboard for 2021/22.

It is recognised that Covid-19 has had an impact on a number of indicators in the last year and therefore adjustments to trajectories or revision of targets are expected. There are no new KPIs for the Staff Governance Committee.

Job Planning and Medical Appraisals will be reported as actual position. Initially, the amendments were agreed with the Medical Director and target leads and then presented through the governance structure.

It is recognised that there are still indicators that are proving challenging and these indicators are either annual targets or targets that are set nationally.

Marcella Boyle queried if there is the opportunity to influence national indicators like the Sickness Absence target. Carole Anderson advised that there are a number of calculations done around the assumption of 4%, this figure has been in place for a large number of years and has been difficult for Boards to achieve or maintain.

NHS GJ are doing a significant amount of longitudinal data given longevity of this target. It is disaggregated by divisional areas and departments to identify hotspots. Carole Anderson confirmed that they believe there is appropriate management of the target. Carole Anderson advised that they were unaware of any movement for this target.

The Committee approved and endorsed the Staff Governance KPI amendments.

**10 Safe Working Environment**

**10.1 Board Risk Register**

Laura Langan noted that the wrong cover paper had been circulated to Committee Members. The risks aligned to the Staff Governance Committee are W7, W18 and W19.

It is proposed that W19 is removed from the Board Risk Register and moved to the Divisional Risk Register. The risk has been at its target level for a considerable amount of time now and there are a number of monitoring processes in place. Any issues would be escalated to the Board.

The Committee agreed to remove risk W19 from the Board Risk Register and for it to be added to the Divisional Risk Register.

The risk remains high for W7 and mitigations have been updated.

Risk W18 remains as a medium risk. Laura Langan informed the Committee that the Risk Register would be presented at the September 2021 Committee and will be presented to the Audit and Risk Committee on 20 July 2021.

Marcela Boyle thanked Laura Langan and welcomed further updates at the next Committee.

The Committee noted the Board Risk Register update.

**10.2 Health and Safety Report**

Jane Christie-Flight informed the Committee that the Health and Safety Committee last met on 22 June 2021 and highlighted the following from the report:

* One RIDDOR in the last quarter that was reportable to the Health and Safety Executive. There has been challenge where Health and Safety are not being notified directly of these incidents through DATIX. Work has been undertaken by Occupational Health and Health and Safety to address that and raise awareness to ensure proper reporting.
* Within the incident statistics, an area that has been flagged is ‘Exposure to Unhygienic Environmental Conditions’. This is due to staff not taking care of theatre changing environments. Discussions have taken place at staff side meeting about this. Managers at local level have got plans in place to address it.
* The second highest category is ‘Exposure to unsafe environmental conditions’ and this in relation to warm weather and the heat in the wards. The Estates and Health and Safety Teams have implemented measures to support staff and there are regular communications distributed to staff.
* The Scottish Fire and Rescue Service conducted an audit of the Hospital. This Audit identified some low risk items that require improvements. The areas have been forwarded to the appropriate Health and Safety Forum to progress.
* The number of unwanted fire signals in the last reporting period remains low.
* Fire Safety and Security Sub-Group has been established and the draft Terms of Reference have been developed and shared with Divisional Health and Safety Forums.
* A number of policies were approved and taken through to Partnership Forum.
* Work continues on violence and aggression and developing training for staff with a collaborative approach with other Health Boards. Training is expected to be in place by the end of 2021.

Jann Gardner informed the Committee of correspondence from a member of staff regarding the warm weather issues and advised of the various measures taken to address these issues. Jann Gardner stated they felt assured that all necessary action is being taken to improve the conditions in warmer weather.

The Committee noted the Health and Safety Report.

**10.3 Occupational Health Report**

Serena Barnatt highlighted the key achievements and challenges experienced by the team during the first quarter of 2021.

The COVID-19 Vaccination Programme has continued in accordance with Government guidance. The figure for total number of vaccinated staff was noted, this figure includes staff (including new starts), volunteers, and students with second vaccinations. Measures have been put in place for the vaccination of younger members of staff.

Planning has commenced for the Winter Flu and Covid Booster Vaccination Programme and the Vaccination Group are scheduled to meet week commencing 12 July 2021.

Sharon Docherty and David Wilson have been working with Clinical Nurse managers on the management of Needlestick (sharps) and similar injuries in the workplace. Source risk counsellors have been identified in clinician areas and refresher training has been delivered.

The Occupational Health Clinical Lead continues to lead on the mental health sub group of the Health and Wellbeing Group supported by the Spiritual Care Lead. There are now almost 40 trained mental health first aiders and the mental health first aid training continues to be delivered across the Board. The Occupational Health Team are now progressing the implementation of an employee assistance program (EAP) which will offer mental health (including counselling), financial and legal support for staff.

Marcella Boyle commended the progress and roll out of the Mental Health Frist Aid Training.

The Committee noted the Occupational Health Report.

**10.4 Health and Wellbeing update including Delivery Plan**

Donna Akhal informed the Committee that the Health and Wellbeing Group have developed the action plan into a delivery plan. The delivery plan focuses on four key areas, Mental Health, Physical Health, Financial and Social and Creating the Condition. The delivery plan provides a detailed indication of aims and how these will be achieved.

The delivery plan will remain a live document so that feedback from the iMatter survey can be incorporated.

The Committee noted the Health and Wellbeing update.

**11. AOCB**

 Marcella Boyle thanked everyone for attending the meeting and the reports provided.

**12 Board Update**

Marcella Boyle provided a summary of key points covered within the meeting for the Board Update Report including:

* The work of Spiritual Care including audit and strategy development.
* Acknowledgement that although Medical Appraisal and Job planning are not where they need to be, improvement actions are taking place. There is a commitment to clear any outstanding appraisals in preparation for September 2021.
* L&OD Plan commended by the Committee. The plan highlights an increase in resource and funding but also note the performance of the team in a difficult year and the support they have given to management and staff.
* Assurance around Appraisal for Agenda for Change. ‘Back to Basics’ is welcomed by the Committee.
* Health and Wellbeing plans and how they link to other plans. The priorities for the year ahead in the first year of the plan.
* To note the level of information that the Committee receive and how the Board is informed by national activity.
* The monitoring of the iMatter survey.
* Workforce Monitoring Report and Staff Governance Action Plan were approved.

**13. Date and time of next meeting**

The next meeting of the Staff Governance and Person Centred Committee is scheduled for Tuesday 7 September 2021 at 10am.