**Approved minutes**

**Staff Governance and Person Centred Committee**

**9 November 2021, 10am**

**Microsoft Teams**

**Members**

Marcella Boyle Non-Executive Director (Chair)

Anne Marie Cavanagh Director of Nursing and AHPs

Callum Blackburn Non-Executive Director

Gareth Adkins Director of Quality, Innovation and People

Jane Christie-Flight Employee Director

Jann Gardner Chief Executive

June Rogers Director of Operations

Mark MacGregor Medical Director

Rob Moore Non-Executive Director

Serena Barnatt Director of HR

Susan Douglas-Scott Board Chair

**In attendance**

Catherine McAllister Staff Side Representative

Donna Akhal Head of Learning and Organisational Development

Gerard Gardiner Head of Corporate Governance

Laura Liddle Associate Director of HR

Sandie Scott Head of Communications

**Minutes**

Theo Richardson Corporate Administrator

**1 Opening Remarks**

Marcella Boyle opened the meeting and commended Comms for organising coverage of the Staff Awards 2021.

Marcella Boyle was delighted to chair the Volunteer Forum again since it had its last meeting in September 2019. She thanked all parties for collating papers for the Staff Governance and Person Centred Committee.

**2. Apologies**

No apologies were noted.

**3 Declarations of interest**

No declarations of interests noted.

**4. Updates from last meeting**

**4.1 Unapproved minutes from last meeting**

The minutes of the previous meeting were agreed as an accurate record following three minor amendments.

**4.2 Action Log**

The Committee reviewed the Action Log and closed previous actions and agreed on 5 new actions.

**4.3 Matters arising**

Jane Christie-Flight advised the Job Evaluation Report requires approval before it is sent to the Scottish Government. STAC as had been placed on hold.

**5 Person Centred**

**5.1 Complaints – Q2 2021/22 Feedback Report**

Anne Marie Cavanagh presented the Complaints – Q2 2021/22 Feedback Report to the Committee.

Key points highlighted from the report are:

* There were 44 complaints received (20 stage one; 24 stage two).
* 8 complaints sill open, 3 progressed to an SAER review and 1 was time barred.
* 9 were fully upheld (7 stage one; 2 stage two), 9 partially upheld (4 stage one; 5 stage two), 14 not upheld (8 stage one; 6 stage two).
* Main themes related to Clinical Governance (15), Cancellations (6) and Patient Journey (5).
* 8 stage one complaints were granted extensions and responded to within agreed timeframes.
* 7 stage two complaints were over 20 working days for multiple reasons. Stage two response days ranged from 10-67 days.
* During quarter 2 there were 55 compliments logged on Datix. Wards/Consultants have received compliment letters/cards and also patient/visitor care areas.

The Committee noted the Complaints – Q2 2021/22 Feedback Report

**6 Well Informed**

**6.1 Communications Update**

Sandie Scott provided a report to the Committee around Key Performance Indicators (KPIs) across all social media platforms which recorded the following statistics:

**GJNH Engagement**

* Facebook – 25.45%
* Twitter – 3.2%
* LinkedIn – 10.81%

**CfSD Engagement**

* Twitter – 3.68%
* LinkedIn – 11.51%

**GJNH Followers**

* Facebook – 4.33%
* Twitter – 2.74%
* LinkedIn – 22.41%

**CfSD Followers**

Follower growth on platforms is a baseline year.

**GJNH Subscribers**

* YouTube – 21.76%

NHS Scotland Academy website was launched this month and the Website statistics will be provided within the next report. In summary, NHS GJ and CfSD received high engagement on all the platforms.

Comms are trialling QR Codes for digital communication methods, including vaccination and staff magazine. Staff can use mobile phones to scan QR Codes to share information easier. Comms have received positive feedback about the trial.

Comms have launched SharePoint and YAMMA in support of staff engagement and share information to set groups.

Marcella Boyle asked Sandie Scott to undertake a deep dive into the Pilot Rollout and provide an update at the next meeting.

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| **Action No.** | **Action** | **Owner** | **Target date** |
| 091121/01 | Take a deep dive into Pilot Rollout and provide an update at the next meeting. | SS | 13.01.22 |

The Committee noted the Communications Update.

**6.2 Integrated Performance Report**

Gareth Adkins provided the Integrated Performance Report to the Committee. Key findings were:

**Sickness absence**

* Corporate: 4.1%
* Golden Jubilee Conference Hotel: 5.2%
* Heart, Lung and Diagnostic Services: 6.6%
* National Elective Services: 8.4%

Anxiety, Stress, Depression or Other Psychiatric Illnesses was the main reason for sickness absence at Corporate, Heart, Lung and Diagnostic Services and National Elective Services.

Musculoskeletal problems were the main reason for sickness absence at Golden Jubilee Conference Hotel.

**COVID-19 Special Leave**

* Corporate: 1.1%
* Golden Jubilee Conference Hotel: 1%
* Heart, Lung and Diagnostic Services: 1.6%
* National Elective Services: 2.4%

COVID related absences were recorded lower on 1.9% from the previous month.

**Agenda for Change appraisal**

* Corporate: 69%
* Golden Jubilee Conference Hotel: 79%
* Heart, Lung and Diagnostic Services: 66%
* National Elective Services: 62%

**Medical Job Planning**

* Medical staff: 54.4% completed a job plan.
* HLDS: 62.9% completed a job plan.
* NES: 40.9% completed a job plan.

13 out of 155 doctors had either an ARCO or Appraisal for 2021/2022.

Marcella Boyle requested Serena Barnatt to monitor appraisal rates and provide an update at the next meeting.

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| **Action No.** | **Action** | **Owner** | **Target date** |
| 091121/02 | Monitor appraisal rates and provide an update at the next meeting. | SB | 13.01.22 |

Gareth Adkins advised the Recruitment Team will extract job post data to assess fill rate abilities.

Marcella Boyle asked for a Leavers and Joiners item to be included on the agenda when the data is ready to be shared.

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| **Action No.** | **Action** | **Owner** | **Target date** |
| 091121/03 | Leavers and Joiners included as an item on agenda when ready. | GA | N/A |

The Committee noted the Integrated Performance Report.

**7 Well Trained**

**7.1 Medical Appraisal and Revalidation 6 Monthly Report**

Mark MacGregor presented the Medical Appraisal and Validation 6 Monthly Report to the Committee.

Between April and September 2021, 32 doctors were recommended for revalidation and a further 20 doctors will require revalidation by March 2022.

The following appraisal statuses were recorded for 155 medical staff:

* ARCP – 5
* Completed – 8
* In progress – 4
* To be submitted – 10
* Not started – 128

The Committee noted the Medical Appraisal and Revalidation 6 Monthly Report.

**7.2 Service Planning and Job Planning Update**

Mark MacGregor presented the Service Planning and Job Planning Update to the Committee.

Key points highlighted from the report are:

* 58% completion at 31 March 2021.
* 144 doctors have completed appraisal.
* 7 doctors who have not completed appraisal for 2021/22
  + 3 consultants
  + 2 non-training grade junior doctors
  + 2 retired doctors (intentions to be clarified)
* 35 doctors revalidated for 2021/22
  + 7 doctors deferred revalidations
* 156 doctors requiring appraisal
* 15 (+3) appraisers with 4 further in training
* Trajectory being agreed with Deputy Responsible Officer
* Internal target of all appraisals to be completed by 28 February 2022.
* Service plans constructed for all departments except Orthopaedics.
* Job plans for 2020/21 rolled over to 2021/22.
* Service plans to be presented to Executive Team on 20 December 2021.
* Service plans will support Financial Plan and AOP.
* Recruitment will proceed based on service plans.
* Job planning will proceed thereafter for completion between Jan-Feb 2022.
* Third sign-off is Medical Director.
* Escalation process is in place.

Mark MacGregor advised as Medical Director and responsible officer, all outstanding appraisals will be reviewed if expectations to meet Medical Appraisal completion target is not met.

Marcella Boyle thanked Mark MacGregor for his presentation.

The Committee noted the Service Planning and Job Planning Update.

**8 Involved in Decisions**

**8.1 Partnership Forum Report**

Jane Christie-Flight presented the Partnership Forum Report to the Committee and advised the following Policies were discussed and approved at the Partnership Forum:

* **Flexible Working Location Policy –** placed on hold
* **Learning and Development Policy –** amendments approved
* **Digital and Social Policies –** approved
* **Board Manual Handling Policy –** amendments approved

Public Holiday dates for 2022/2023 which required approval before being communicated to all staff. The key dates are:

* Friday 15April 2022 – Good Friday
* Monday 18 April 2022 - Easter Monday
* Monday 2 May 2022 - May Day
* Monday 26 September 2022
* Monday 26 December 2022
* Tuesday 27 December 2022
* Monday 2 January 2023
* Tuesday 3 January 2023

Staff who have retained HCI contracts will receive an additional 2 Public Holidays:

* Spring – Friday 3 June 2022
* Glasgow Fair – Monday 18 July 2022

**Queens Platinum Jubilee Holiday:** awaiting confirmation on whether additional holiday (Friday 3 June 2022) will be classed as Public Holiday or added to staff annual leave entitlement.

**Mental Health:** Employee Assistance Programme signed off and available from 1 October 2021. Values Based Reflective Practice Taster sessions were offered. Schwartz Rounds have recommenced.

**Physical Health:** range of promotion activity i.e.Cycle to Work Day, National Fitness Day, planning and training for seasonal Flu/COVID-19 booster vaccination clinics.

**Financial and Social:** Resources for MAPS added to intranet for Money Advice Service/ The Pensions Advisory Service and Pension Wise. Further/Higher Education Fund has reopened for a second application intake.

**Creating the Conditions:**  Hotel reintegration has progressed with an induction return day for all returning staff, Enhanced Diversity Training was undertaken by 67 delegates. iMatter questionnaire has now closed.

**Mental Health First Aid Awareness Training** – participation levels are steady and staff are encouraged to book on the course at the earliest opportunity.

The Committee noted the Partnership Forum Report.

**8.2 iMatter Board Report**

Serena Barnatt and Lisa Walsh presented the iMatter Board Report to the Committee.

The response rate had reached 67% with 61 out of 170 teams achieving 100% response rate.

Teams have eight weeks from published reports to produce an action plan. The deadline for uploading onto the system is Monday 29 November with the exception of the Executive Team and the Board Chair Team who have a deadline of 16 November due to all electronic and reports published the next day.

Marcella Boyle asked Serena Barnatt and Lisa Walsh to provide a further iMatter update at the next meeting.

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| **Action No.** | **Action** | **Owner** | **Target date** |
| 091121/04 | Provide further update on iMatter engagement at the next meeting. | SB/LW | 13.01.22 |

The Committee noted the iMatter Board Report.

**8.3 Involving People Strategy Update**

Gareth Adkin provided an update on Involving People Strategy to the Committee and advised the Strategy development is underway and ongoing. The next update will occur at the beginning of the next financial year.

The Committee noted the Involving People Strategy Update.

**9 Safe Working Environment**

**9.1 Board Risk Register**

Gareth Adkins provided an update on the Board Risk Register to the Committee.

The Committee were advised workforce risk processes are in place which are reviewed at Staff Governance Group and referred to the Board Risk Register when appropriate.

The Committee approved the Board Risk Register.

**9.2 Health and Safety Report**

Gareth Adkins presented the Health and Safety Report to the Committee.

Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) statistics and Health and Safety related adverse incidents remained low with no significant trends or high risk rated events**.** In the past quarter there has been no reportable incidents.

A number of Health and Safety related policies and guidance documents have been shared with the Health and Safety Divisional Forums.

The Committee noted the Health and Safety Report.

**9.3 Health and Safety Risk Register**

Gareth Adkins provided an update on the Health and Safety Risk Register.

Health and Safety Committee will be provided an update for action HS11 and Programme Director, John Scott will present a paper on Water and Ventilation at the next Health and Safety Committee Meeting.

The Committee reviewed and approved the Health and Safety Risk Register.

**9.4 Occupational Health Report**

Serena Barnatt presented the Occupational Health Report to the Committee. In summary, the key areas were:

**Flu/Covid Booster Vaccination Programme** – commenced on 30 September 2021. Onsite collaboration working was considered excellent.

**HIV Post Exposure Prophylaxis** – discussions with Prevention and Control of Infection, Microbiology and Pharmacy are underway to review current practice and any possible changes that should be considered implementing to current practice/policy.

**Occupational Health Pre-Employment and Managing Skin at Work** – procedure and policies are both under review at present.

**Employee Assistance Programme** – launched on 1 October 2021 with AXA Health. Information and resources to access the EAP will be available on StaffNet in due course.

**Student Vaccinations** – student nurses have now been accepted back onto clinical placement following COVID-19 restrictions.

**Mental Health First Aid Awareness Training** – participation levels are steady and staff are encouraged to book on the course at the earliest opportunity.

Marcella Boyle thanked vaccination staff for their work.

The Committee noted the Occupational Health Update.

**10 Any Other Competent Business**

Serena Barnatt advised Flu/COVID Vaccination appointments will be available again from 23 November 2021.

Marcella Boyle requested Health and Wellbeing items to be included earlier on the agendas.

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| **Action No.** | **Action** | **Owner** | **Target date** |
| 091121/05 | Health and Wellbeing items to be included earlier on the agendas. | AMac/TR | N/A |

**11 Items for Board Update Report**

Marcella Boyle gave a summary of the meeting and stated the following:

* Committee noted the Complaints Quarter 2 Feedback Report and acknowledged all key points.
* Committee received an update from the Communications Team who are trialling QR codes for digital communication methods and had received positive feedback.
* Committee noted the Integrated Performance Report, discussed sickness absence and reflected on the increase of absence, excluding COVID related.
* Committee noted the mitigations in place for the Employee Assistance Programme which has been available since 1 October 2021.
* Committee discussed staff turnover, KPIs and how to close the loop on joiners and leavers.
* Committee agreed to bring forward all points above under an agenda item that will conduct a deep dive into the difficulty of filling posts.
* Committee approved the Medical Appraisal and Revalidation 6 Monthly Report.
* Committee agreed medical appraisals should be completed as a priority and medical professionals who are responsible will be reviewed by the Medical Director if expectations are not met.
* Committee noted Partnership is working well and an iMatter update will be provided after the iMatter Action Plan deadline.
* Committee agreed to refresh agenda items on a rotational basis to allow more time for discussion.
* Committee received the Health and Safety Report and noted the update to the Board Risk Register. Committee were provided with assurance that there are no high risk issues identified.
* Committee received the Occupational Health Report and noted the Covid/Flu Vaccination progress.

**12 Date and Time of Next Meeting**

The next scheduled meeting of the Staff Governance and Person Centred Committee is 13 January 2022.

**The meeting closed at 12:11pm**