**Approved minutes**

**Staff Governance and Person Centred Committee**

**3 May 2022, 9:45 am**

**Microsoft Teams**

**Members**

Marcella Boyle Non-Executive Director (Chair)

Jane Christie-Flight Employee Director

Callum Blackburn Non-Executive Director

Rob Moore Non-Executive Director

**In attendance**

Anne Marie Cavanagh Director of Nursing and AHPs

Donna Akhal Head of Learning and Organisational Development

Gareth Adkins Director of Quality, Innovation and People

Gerard Gardiner Head of Corporate Governance and Board Secretary

Professor Jann Gardner Chief Executive

Dr Mark MacGregor Medical Director

Nyree Anderson Corporate Learning & Educational Lead

Sandie Scott Head of Communications and Corporate Affairs

Serena Barnatt Director of HR

Susan Douglas-Scott CBE Board Chair

**Apologies**

Catherine McAllister Staff Side Representative

**Minutes**

Theo Richardson Corporate Administrator

**1 Opening Remarks**

* 1. **Chairs introductory Remarks**

Marcella Boyle opened the meeting and welcomed all attendees.

**2. Apologies**

Apologies were noted as above.

**3 Declarations of interest**

No Declarations of Interest were noted.

**4. Updates from last meeting**

**4.1a Unapproved minutes from 3 May 2022: Public Session**

The minutes of the previous meeting were agreed as an accurate record.

**4.1b Unapproved minutes from 3 May 2022: Private Session**

The minutes of the previous meeting were agreed as an accurate record.

**4.2 Action Log**

The Committee reviewed the action log and updated/closed the following actions:

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| --- | --- | --- | --- |
| **Action No.** | **Action** | **Lead** | **Status** |
| SGPCC/211109/03 | **8.2 iMatter & Staff Engagement** Provide further update on iMatter and Staff Engagement at the next meeting. | Serena Barnett Donna Akhal Lisa Walsh | Closed |
| SGPCC/040322/02 | **6.2 Integrated Performance Report** The Board Secretary to circulate iMatter report to SGPCC group when available to support discussion at an appropriate meeting of the Committee. | Gerard Gardiner | Closed |
| SGPCC/030322/04 | **8.1 SGPCC Terms of Reference Review** Compare Terms of Reference language regarding Staff Governance to other Boards and to consider inclusion of the Expansion Programme before next Committee meeting. | Gareth Adkins Gerard Gardiner | Closed |
| SGPCC/030322/03 | **7.1 AHP Workforce**  Present 5 year AHP workforce strategy upon completion to the Committee for discussion | Christina MacLean | Change Action Lead to Anne Marie Cavanagh |

**4.3 Matters arising**

**Action SGPCC /21109/03 - iMatter & Staff Engagement –** findings highlighted within the report will be covered under item 8.5 on the Agenda, with the circulated to members in advance of the Committee.

**5 Well Informed**

**5.1 Integrated Performance Report**

Gareth Adkins presented the Integrated Performance Report for March 2022 to the Committee.

**Sickness absence**

In February 2022 the Board’s sickness absence rate stood at 6.0%, up 0.1% on the previous month.

Across the Directorates absence was as follows:

* Corporate: 4.3%, the same as the previous month;
* Golden Jubilee Conference Hotel: 1.0%, down 1.0% on January;
* Heart, Lung and Diagnostic Services: 7.7%, up from 6.5% the previous month; and
* National Elective Services: 6.2%, which was 1.0% lower than January.

“Anxiety/stress/ depression/other psychiatric illnesses” continued to be the highest cause of sickness absence, accounting for 25.3% of all sickness absence in February, 0.5% lower than January’s figure of 25.8%. It was the main cause of absence in three of the four Directorates:

* Corporate: 31.4% (down from 31.7% in January);
* Heart, Lung and Diagnostic Services: 28.4% (down from 33.1%); and
* National Elective Services: 17.5% (up from 15.1%).

In the Hotel, “Unknown causes/not specified” was the main cause of sickness absence, accounting for 40.3% of hours lost. The second top cause of sickness absence in February was “Other musculoskeletal problems”, accounting for 15.0% of sickness absence hours. “Cold, cough, flu – influenza” was third, at 9.1%.

In February, COVID-19 special leave accounted for 2.5% of all contracted hours, down from 3.1% the previous month. The Directorate breakdown was:

* Corporate: 1.2%;
* Golden Jubilee Conference Hotel: 0.8% (decrease from 4.7%);
* Heart, Lung and Diagnostic Services: 3.2%; and
* National Elective Services: 3.0%.

**Agenda for Change appraisal**

Within the year to 28 February 2022, 63% of staff who come under the Agenda for Change terms and conditions completed their appraisal using TURAS, which is 3% less than the previous month. The Directorate breakdown is as follows:

* Corporate: 54%, down 5% on January;
* Golden Jubilee Conference Hotel: 46%, down from 54% the previous month;
* Heart, Lung and Diagnostic Services: 72%, the same as January; and
* National Elective Services: 65%, down 1% on the previous month.

**Medical appraisal**

The appraisal year for medical staff runs from 1 April to 31 March. As at 28 February, 49 (31.6%) out of 155 doctors for whom NHS GJ is the responsible body for appraisal and revalidation, have had an appraisal or ARCP in 2021/2022, up 15 on the previous month.

**Medical job planning**

New job plans were started for the year 1 April 2022. Currently 32 (26.4%) of 121 job plans have been signed off, four are awaiting third sign off, seven are at second management sign off stage, five need first manager sign off, 36 await to be signed off by the Consultant and 37 are in discussion.

Jane Christie-Flight sought assurance from the Medical Director that the requirement for medical staff to complete job-plans and appraisals prior to enjoying eligibility under the discretionary points scheme had been communicated and implemented. Mark MacGregor confirmed that these criteria to participation in the discretionary points scheme had been communicated to medical staff, and has been used as part of that process where applicable to individual cases.

The Committee noted the importance of monitoring Staff Governance statistics to identify early indicators that the prevailing cost of living challenges faced by many households might impact on staff attendance. The Committee noted advice from Gareth Adkins that financial stress can often lead to mental health issues and in turn absence from work. Gareth Adkins informed the Committee of emerging Scottish Government Covid-19 guidance on social distancing, testing, tracing and isolation. The Committee discussed the possibility of breaking down mental health absence figures to differentiate between work-related and non-work related stress related absence, and whether those issues have an impact on absence figures reported and agreed this should be explored.

The Committee discussed financial crisis and how it may affect staff throughout the organisation. Gareth Adkins agreed to undertake an assessment of staff enquiries made to Employee Assistance Programme to provide further information on the uptake of this service by staff.

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| **Action No.** | **Action** | **Lead** |
| SGPCC/030522/01 | **5.1 Integrated Performance Report** 1. Review staff absence data to explore whether mental health absences are attributable to work-related issues or external factors.  2. .Provide further information to the committee on uptake of the employee assistance programme by staff. | Gareth Adkins  Serena Barnatt |

Committee noted the Integrated Performance Report.

**5.2 Communications Update**

Sandie Scott provided a Communications update to the Committee. An annual report will be presented to the Committee at the next meeting due to clarification on engagement statistics caused by a change of social media algorithms, which will be detailed in the report.

**Social Media**

In 2021/2022, NHS Golden Jubilee received 100% positive media score with 31 press releases and 397 media coverages compared to 2020/2021 where there were 21 press releases and 119 media coverages, due to the use of PR-GLU system which enables NHS Golden Jubilee access to journalists.

**NHS Golden Jubilee**

Communications team assisted with 10 Walkrounds and Staff Awards throughout 2021 and currently organising the Long Service Awards. A date to hold the event will be decided in due course.

**NHS Event**

Communications team will have four stands at the upcoming NHS Event, representing Golden Jubilee University National Hospital; CfSD, NHS Scotland Academy and the Golden Jubilee Conference Hotel.

**Digital Communications**

Communications, in collaboration with other NHSGJ departments, are working with the national team on implementation of SharePoint, StaffNet and Yammer as mechanisms of communication and document storage and retention. Additional social media platforms, including Tik-Tok, will be phased in to promote communications where appropriate.

**Strategies**

Communications team are working on internal strategies for the Golden Jubilee Hotel, NHSS Academy and CfSD.

Committee thanked Sandie Scott and the Communications team for their ongoing work and achievements throughout the last two years.

Marcella Boyle noted the upcoming recognising events recognising long-service. M Boyle sought assurance that volunteers would be recognised as part of this event and Sandie Scott confirmed that this was the case. Members of the Committee noted arrangements to ensure they received an invite to the event.

Jann Gardner advised the Committee that Sandie Scott’s job description had been reviewed and re-titled Director of Strategic Communications and Stakeholder Relations. J Gardner commended Sandie Scott for her performance in developing strategic relationships with a variety of stakeholders in industry and academia. Committee noted the amendments made to Sandie Scott’s job description and the enhanced responsibilities the post-holder has in regard to strategic partnerships.

Committee noted the Communications update.

**5.3 SGPCC Annual Report for Financial Year 2021/2022**

Gareth Adkins presented the SGPCC Annual Report for financial year 2021/2022 to the Committee.

The Committee noted the report and recommended it be updated before presenting to the Audit & Risk Committee and the Board of NHS Golden Jubilee, in order to be clearer as regards membership of the Committee, requirements for recording apologies of non-members and the situation in respect of attendees whose attendance is expected on a standing basis, as opposed to those attendees whose attendance is required on an ad-hoc basis.

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| **Action No.** | **Action** | **Lead** |
| SGPCC/030522/02 | **5.3 SGPCC Annual Report for Financial Year 2021/22** Amend report to clarify membership/attendance/apologies and status of attendees. | Marcella Boyle Gareth Adkins Gerard Gardiner |

Committee noted the SGPCC Annual Report for Financial Year 2021/2022.

**5.4 SGPCC Draft Annual Workplan 2022/2023**

Gareth Adkins presented the SGPCC Draft Annual Workplan 2022/2023 to the Committee.

Committee noted the workplan and how the Workforce Monitoring Report aligns with the workplan, which will be refreshed to ensure the feedback session aligned with reporting frequencies for this area of NHSGJ performance.

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| **Action No.** | **Action** | **Lead** |
| SGPCC/030522/03 | **5.4 SGPCC Draft Annual Workplan 2022/23** Refresh workforce monitoring report to reflect feedback report before the next meeting. | Anne Marie Cavanagh Serena Barnatt |

Committee noted the SGPCC Draft Annual Work-plan 2022/2023.

**5.5 National Workforce Strategy for Health and Social Care**

Serena Barnatt provided an update on the National Workforce Strategy for Health and Social Care to the Committee, which was published by the Scottish Government on 11 March 2022.

The strategy will cover a 10 year period and will support delivery of the Board’s 3 year workforce plan. The workplan will reference key pillars highlighted in the strategy document.

Committee noted the required alignment between the Board’s workforce plan and the national strategy. Committee also noted the requirements as regards submission of workforce information to the Scottish Government as part of the workforce plan.

Jann Gardner advised the Committee that risks associated with the emerging National Strategy would be discussed at the NHS Board meeting in May 2022, and that the National Workforce Strategy for Health and Social Care will be considered for inclusion in the Board seminar programme. J Gardner also assured the Committee that the National Strategy would factor into the development of Executive objectives. Committee agreed and Marcella Boyle offered support from non-executives for Gareth Adkins and Serena Barnatt if required in developing the Board’s workforce plan.

Committee noted the National Workforce Strategy for Health and Social Care.

**5.6 Revised Terms of Reference for Financial Year 2021/2022**

Gareth Adkins presented the revised Terms of Reference (ToR) for financial year 2021/2022 to the Committee. Committee were advised SGPCC ToR had been compared to other Boards which resulted in minor changes with an increased focus on the Committee’s statutory responsibilities as regards staff governance. The Committee noted the prior discussion, at Agenda Item 5.3, relating to requested amendments to the Terms of Reference.

Committee approved the Terms of Reference for financial year 2021/2022, subject to sundry revision as noted at Agenda Item 5.3.

**6 Appropriately Trained**

**6.1 Mandatory Training Report for Financial Year 2021/2022**

Nyree Anderson presented the Mandatory Training Report for financial year 2021/2022 to the Committee. The key aspects of the report were as follows:

**Training refresher frequency**

* Fire awareness – annual
* Hand hygiene – annual
* Valuing diversity – not required
* Safe information handling – every two years
* Manual Handling – every two years
* Induction – once employed

**Training compliance rates for year 2022 (Target: 90%)**

* Fire awareness – 78%, up 3% from previous year
* Hand hygiene – 74%, down 7% from previous year
* Valuing diversity – 72%, down 5% from previous year
* Safe information handling – 83%, down 3% from previous year
* Manual Handling – 80%, unchanged
* Induction – 69%, up 5% from previous year

Nyree Anderson advised that training refresher requirements are reported to managers on a monthly basis via email hyperlink which details staff who are due to complete training. Training compliance rates are also recorded on the eEss system since 2019. Committee noted the findings, discussed hygiene compliance rates and were informed figures may be higher in the next report.

J Christie flight queried with Nyree Anderson how the figures relating to corporate induction were recorded, as given the rolling nature of this programme, it was difficult to identify a point at which training figures should be retrieved and reported. Nyree Anderson confirmed that figures are extracted on 1st of April every year. Nyree Anderson acknowledged that identifying an appropriate date for reporting of information for corporate inductions was challenging, however it was valuable to present the figures to the Committee, as it did provide some insight into performance.

Callum Blackburn asked whether there had been any steps taken to add to the list of “mandatory” training. Gareth Adkins responded that it was important to distinguish between those training requirements which are statutorily mandatory, and those which are required at a local, or individual Board, level. Gareth Adkins advised of the need to maintain a balance between mandatory and other forms of training, as the resource implications for services of requiring training also have to be considered.

M Boyle requested that the status of training, whether statutorily mandatory, mandated by NHSGJ, and training which is available to support wider Learning & Organisational Development priorities, be more readily identifiable in Reports.

Committee agreed that a review into mandatory language is required to ensure staff understand requirements clearly, including the definition of ‘exclusion’ and what it represents in the report.

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| **Action No.** | **Action** | **Lead** |
| SGPCC/030522/04 | **6.1 Mandatory Training Report for Financial Year 2021/22** 1.Review terminology around training, to ensure statutorily and locally mandated training modules are identifiable in distinction to other training resources.  2. Define the meaning of 'Exclusion' and what it represents in the report. | Gareth Adkins Nyree Anderson |

Committee noted the Mandatory Training Report for financial year 2021/2022.

**6.2 Medical Appraisal Revalidation 6 Monthly report**

Mark MacGregor provided a presentation on the Medical Appraisal Revalidation 6 Monthly report to the Committee. The presentation confirmed the status of medical appraisals as follows:

**Medical appraisals**

|  |  |  |  |
| --- | --- | --- | --- |
| **Areas** | **Complete** | **In progress** | **No action** |
| Anaesthetics | 34 | 2 | 1 |
| Cardiology | 31 | 1 | 1 |
| CT Surgery | 25 | 1 | - |
| Miscellaneous | 3 | 3 | - |
| General Surgery | 2 | 3 | - |
| Ophthalmology | 6 | - | - |
| Orthalmology | 22 | - | - |
| **Total** | **123** | **10** | **2** |

**Job planning**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Completion rate (73%)** | **Awaiting 3rd sign off** | **Awaiting 2nd sign off** | **Awaiting 1st sign off** | **Awaiting doctor sign off** | **No Action** |
| 33 | - | 2 | - | 1 | - |
| 25 | - | - | - | - | - |
| 13 | - | 1 | 1 | 3 | 3 |
| 3 | - | - | - | - | - |
| 4 | - | - | - | - | - |
| 5 | - | 1 | - | - | - |
| 2 | - | - | 3 | - | 14 |
| **85** | **0** | **4** | **4** | **4** | **17** |

Committee noted a substantial improvement to appraisal completion rates since the start of the COVID pandemic. Committee also noted Mark MacGregor’s observation that rates of compliance are expected to improve in financial year 2022/23. Committee agreed that appraisals be spread over a 5 year period to ensure appraisals are completed in a timely manner.

Committee requested that the Medical Appraisal Revalidation 6 Monthly report remain on the Committee’s work-plan for FY 2022/23.

Committee noted the Medical Appraisal Revalidation 6 Monthly report.

**7 Involved in Decisions**

**7.1 Partnership Forum Report**

Jane Christie-Flight provided an update on Partnership Forum activity. Key points of the report were as follows:

**Standing items**

Current standing items on the PF agenda are remobilisation and hospital expansion.

**AHP Strategy**

The Forum was presented with the AHP Strategy update. It was noted that the first Golden Jubilee AHP Strategy was launched in August 2018, running until the end of March 2021, to support the local delivery of the national Active Independent Living Programme in Scotland.

**Digital update**

The Director of Digital and E-Health had reviewed the systems and processes to understand expectations on workload for the eHealth team. An investment plan has been developed which would allow Digital Workforce capacity and capability to grow and would bring NHS GJ in line with industry commitments.

**Policies**

The following policies were approved:

* Voluntary Retirement & Re-employment
* Annexe 21 & Starting Salary Guidance

**Band 2 HSCW Review**

STAC has instructed boards to work in partnership with their local staff side and agree a process on how they will review all existing Band 2 Nursing Clinical Support Workers job descriptions to ensure that they are up to date and reflect the role and responsibilities post holder as of 1 October 2021.

**Notice periods**

The Partnership forum approved a change to notice periods for new starts with Band 7 posts moving to 2 months’ notice and Band 8A and above moving to 3 months.

M Boyle requested that consideration be given to the name of the “Dying to Work” charter, relating to staff who receive a terminal diagnosis. Members unanimously agreed that this should be re-visited, if possible. Jane Christie-Flight noted that this was a Once for Scotland policy, however would feedback the Committee’s perspective on the suitability of the name of the Charter.

Committee noted the Partnership Forum Report.

**7.2 Trade Union Facility Time Report**

Serena Barnatt presented the Trade Union Facility Time Report to the Committee.

Data collated from the SSTS system showed there were 14 employees who devoted part of their time at work to activities with their occupation of Trade Union roles. This represented an increase of 10 from the previous year. Facility time costs totalled £16,680, an increase of £443.92 from the previous year. At present, there are 3 Trade Union Representatives who are trained in Health and Safety.

Committee noted the Trade Union Facility Time Report.

**8 Safe Working Environment**

**8.1 Board Risk Register**

Gareth Adkins presented the Board Risk Register to the Committee. Committee noted minor updates to the risk register, which is undergoing a substantial review, with reports on progress of the review due to be submitted to the Board of NHS Golden Jubilee at its meeting of 24 May 2022.

Committee agreed that a view of organisational and executive priorities should be provided and to discuss changes with Chairs of committees.

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| **Action No.** | **Action** | **Lead** |
| SGPCC/030522/05 | **8.1 Board Risk Register** Ensure that organisational and executive priorities feature in the presentation of Risk in the Risk Register, and work with Chairs of committees to discuss changes. | Gareth Adkins |

Committee noted the Board Risk Register.

**8.2 Health and Safety Report**

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

The report highlighted the approval of the Missing Patients policy which outlines roles, responsibilities and procedures. Committee were advised that the Health and Safety team are now at full capacity and will undertake health and safety audits to help identify areas for improvement, themes, and further training and development.

Gareth Adkins highlighted the strengthened H&S audits which had taken place in the period under report. M Boyle thanked Gareth Adkins for this update, confirming the assurance taken from the quality of report provided to the Committee, and the good rates of attendance at recent meetings of the Health & Safety Committee.

Committee noted the Health and Safety Report.

**8.3 Occupational Health Report**

Serena Barnatt presented the Occupational Health Report to the Committee. Key points of the report were highlighted below:

**Autumn/Winter Vaccination Programme**

Official guidance had not, at the time of the Committee, been released by the Scottish Government but information will be brought to the Committee when received.

**Student Nurse Vaccinations**

Pre-employment health screening for student nurses completed.

**Mental Health Services**

Feedback from all provisions appear to be positive and have been implemented by staff and managers.

**Management of sharps and inoculation injuries**

Policy rewritten and has been followed appropriately.

**Track and Trace**

Managers educated to understand processes which has reduced volume of queries.

**Recruitment**

Significant increase in current and expected volume of posts. Recruitment processes to fill posts are being conducted as quickly as possible. A resource bid was recently successful to assist with an increase of employment checks for the hospital expansion.

J Christie-Flight highlighted the importance of ensuring robust pre-employment checks are carried out, however also noted the potential increase in work-load for members of staff tasked with carrying out these checks. Serena Barnatt confirmed that this would be monitored closely.

Committee noted the Occupational Health Report.

**8.4 Health and Wellbeing Report for Financial Year 2021/2022**

Donna Akhal presented the Health and Wellbeing Report for Financial year 2021/2022 to the Committee. Committee noted work completed by Health and Wellbeing Group during the past year, including the implementation of EAP to provide staff physical, social, financial and mental health supports, the iMatter programme and the delivery of enhanced diversity training.

A signification investment from NHS Golden Jubilee Board and Scottish Government was received for the Group, which has been allocated to healthy food initiatives. The Group’s focus on deliverables in the next two years will be presented at future SGG meetings, which includes a reflective garden project that is underway this year to support rest areas.

Gareth Adkins highlighted the potential benefits to NHSGJ of exploring links with Strathclyde University as regards input of psychology students to identify and report on metrics of staff well-being. The Committee requested that this be investigated, and a report brought to Committee at a relevant time.

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| **Action No.** | **Action** | **Lead** |
| SGPCC/030522/06 | **8.4 Health and Wellbeing Report for Financial Year 2021/22** Explore opportunities to link withstudent psychology to assist in developing and refining metrics of staff wellbeing. | Gareth Adkins |

Committee noted the Health and Wellbeing Report for Financial year 2021/2022.

**8.5 iMatter Deep Dive**

Lisa Walsh gave a PowerPoint presentation on the iMatter Deep Dive to the Committee.

The iMatter results were presented to the committee in the table below:

**iMatter results 2019-2021**

|  |  |  |  |
| --- | --- | --- | --- |
| **Key Performance Indicators** | **2019** | **2021** | **Comparative** |
| Response rate | 67% | 67% | Unchanged |
| Employee Engagement Index | 77 | 72 | Down 5 points |
| Thermometer | 7.4 | 6.5 | Down 0.9 of a point |
| Action plans | 52% | 74% | Up 22% |
| Number of teams | 95 | 129 | Increased by 34 |
| ‘Strive and Celebrate’ | 7 | 28 | Increased by 21 |
| ‘Monitor to further improve’ | 2 | 5 | Increased by 3 |
| ‘Improve to monitor’ | 0 | 0 | Unchanged |
| ‘Focus to improve’ | 42 | 8 | Decreased by 34 |

Compared to NHS Health and Social Care 2021 figures, NHS Golden Jubilee achieved an 11% higher response rateand 32% more action plan completionwithin the 8 weeks. D Akhal confirmed that the iMatter model is based on the MacLeod enablers and health and wellbeing across staff governance standards, components and KSF dimensions.

There are four key drivers for staff engagement: Strategic narrative, Engaging managers, Employee voice and Integrity. The Committee noted that iMatter Year 1 focus was on embedding structures and processes and were advised that SWAG requested to move the iMatter cycle 2 months forward, which may impact on response rates. Scottish Government were notified of the concerns.

Committee discussed how the Health and Wellbeing Group strategy is interconnected with iMatter and sought discussion on how NHS Golden Jubilee can improve reflecting on the results. Committee noted that response rates remain high as against other boards. Committee noted opportunities to maintain this high level of performance.

J Gardner commended Gareth Adkins and his teams for leadership on this matter. J Gardner reflected on the important role that iMatter had played in ensuring that staff voices and perspectives were heard during the pandemic. Callum Blackburn commented that the iMatter Report disclosed a substantial amount of work aimed at facilitating the ability of staff in providing their perspective on service delivery, personal development well-being. Jane Christie-Flight observed that the high rates of employee engagement were encouraging.

Committee noted the iMatter Deep Dive.

**9 Person Centred**

**9.1 Feedback Report**

Anne Marie Cavanagh advised the Committee that Feedback Quarter 4 report will be presented at the next meeting to align quarterly reporting with bi-monthly committee cycle

Committee noted the Feedback Report update.

**10 Fair and Consistent**

**10.1 Staff Governance Self-Assessment Letter**

Gareth Adkins advised the Committee that the Staff Governance Self-Assessment Letter is included on the workplan and awaiting further information before responding to the Scottish Government. Jane Christie-Flight asked whether a self-assessment letter had been received. Gareth Adkins advised that a letter had been received indicating further information will be provided at a later date.

Committee requested that the item remain on the agenda until the self-assessment is completed.

Committee noted the Staff Governance Self-Assessment Letter.

**11 Any Other Competent Business**

**11.1 DL - Health and Social Care Staff Respiratory Infection Guidance**

Jann Gardner asked the Committee to note updated guidance from Scottish Government on Health and Social Care Staff Respiratory Infection. Anne Marie Cavanagh advised that the Standard Operating Procedures will be updated to reflect this Guidance.

Committee noted the Health and Social Care Staff Respiratory Infection Guidance.

**12 Items for Board Update Report**

Marcella Boyle gave a summary for the Board Update Report:

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| **Item** | **Details** |
| **Safe Working Environment** | Committee discussed resources allocated and actions undertaken by Occupational Health and Safety and noted the work undertaken by the Health and Wellbeing Group which provided a strong delivery for 2021/2022.  Committee commended Donna Akhal and Lisa Walsh for their work on the iMatter deep dive. Committee also discussed interconnections between iMatter and other work-streams/priorities aimed at staff well-being, and noted how individual team action plans will support improvement of staff experience. |
| **Well Informed** | Committee noted the Integrated Performance Report. Committee requested work to investigate the possibility of identifying mental health absences attributable to work and those attributable to non-worked related mental health issues.  Committee agreed to undertake a deep dive into the Strathclyde University Partnership to assess opportunities to support staff mental health and wellbeing and monitor how many financial enquiries are made by staff to the Employee Assistance Programme, following the current financial crisis.  Committee commended Sandie Scott and the Communications team for their contribution during the pandemic. Committee noted that social media engagement statistics would be presented in the next Committee cycle.  Committee were informed that Long Service Awards have experienced delays and discussed how to achieve the best outcome recognise the contributions of staff and volunteers.  Committee discussed the draft Annual Workforce Plan. Committee noted a number of actions aimed at developing the workforce strategy with support of non-executives if required.  Committee approved SGPCC Terms of Reference, and annual report. Committee requested that consideration be given to the narration of members and attendance across NHSGJ governance committees, and how this is minuted. |
| **Appropriately Trained** | Committee discussed performance against mandatory training requirements, noting a decline in hygiene compliance rates. Committee discussed opportunities to categorise training requirements as mandatory as a result of statute or national policy, training which is mandated by NHSGJ, and other forms of training (advisory/optional) within the 2022/2033 report. |
| **Involved in Decisions** | Committee noted the Partnership Forum Update, including detail of the evolution of policies on early retirement and re-employment, and starting salaries.  Committee also noted a report on the time provided within NHSGJ relating to the performance of Trade Union duties. |

**13 Date and Time of Next Meeting**

The next scheduled meeting of the Staff Governance and Person Centred Committee is 5 July 2022 at 1:30 pm.

**The meeting closed at 12:05 pm**