**Approved minutes**

**Staff Governance and Person Centred Committee**

**14 July 2022, 12:30**

**Microsoft Teams**

**Members**

Marcella Boyle Non-Executive Director (Chair)

Callum Blackburn Non-Executive Director

Robert Moore Non-Executive Director

**In attendance**

Anne Marie Cavanagh Director of Nursing and AHPs

Gareth Adkins Director of Quality, Innovation and People

Serena Barnatt Director of HR

Katie Bryant Head of Clinical Governance

Susan Douglas-Scott CBE Board Chair

Gerard Gardiner Head of Corporate Governance and Board Secretary

Professor Jann Gardner Chief Executive

Dr Mark MacGregor Medical Director

Catherine McAllister Staff Side Representative

**Guests**

Deborah Finlay Organisational Development Consultant (item 6.1 only)

Maureen Franks Volunteer Manager (item 12.2 only)

**Minutes**

Denise Crossan Senior Corporate Administrator

**1 Opening Remarks**

* 1. **Chairs introductory Remarks**

Marcella Boyle opened the meeting and welcomed all attendees.

**2 Wellbeing Pause**

Marcella Boyle introduced the Wellbeing Pause, aimed at helping to recreate connections between colleagues. The Wellbeing Pause will feature as a standing agenda item at all future meetings.

**3 Apologies**

**Members**

Jane Christie-Flight Employee Director

Sandie Scott Director of Strategic Communications and Stakeholder Relations

**Attendees**

Donna Akhal Head of Learning and Organisational Development

**4 Declarations of interest**

 There were no declarations of interest noted.

**5 Updates from last meeting**

**5.1a Unapproved minutes from 3 May 2022: Public Session**

The minutes of the previous meeting were agreed as an accurate record subject to the minor amendment highlighted on page 12 to update ‘significance’ to ‘significant’.

**5.1b Unapproved minutes from 3 May 2022: Private Session**

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

**5.2 Action Log**

The Committee reviewed the Action Log, noting those items that featured on the Agenda and those programmed for future meetings of the Committee.

**5.3 Matters arising**

There were no matters arising from the previous minute or action log.

**6 Well Trained**

**6.1 Corporate L&OD Plan and Annual Report on Activity 2021/22**

Deborah Finlay informed the Committee that the Learning and Organisational Development (L&OD) 2021/22 ‘Year in Review’ Report provided insight into the work of the service along with a summary of the L&OD activities undertaken. The report had been designed to showcase a new eLearning resource ‘storyline’ that was available to support learner engagement. Similar to other areas of the organisation, L&OD had adapted how they worked during the Pandemic and upskilled their staff to meet new demands.

The areas of focus during 2021/22 included: The Learning Needs Analysis; Training activity and eLearning module development; The Further and Higher Education Scheme; Management and Leadership Development; Team development and Coaching; Staff Experience and iMatter and Health and Wellbeing.

The Committee commended Deborah Finlay and the team for the engaging report. The Committee reflected on the agile nature of the team and the meaningful contribution that they make to the organisation.

The Committee noted the Corporate L&OD Plan and Annual Report on Activity 2021/22.

**6.2a Workforce Plan**

Gareth Adkins provided an update on year one of the three-year Workforce Plan. Scottish Government asked that Health Boards produced three-year Workforce Plans for 2022 to 2025, aligned to other key plans, including Annual Delivery Plans and three-year Financial Plans.

The main drivers noted were: Phase 2 Hospital Expansion; Digital Transformation; and NHS Scotland Academy.

Gareth Adkins informed the Committee that the plan considers the current workforce position in terms of workforce availability. NHS Golden Jubilee (NHSGJ) has a relatively low vacancy rate of 86.36 WTE (or circa 4%) as at 31 March 2022. This was isolated into small areas of the organisation and had a disproportionate impact on those particular services, for example Theatres.

The Committee welcomed the comprehensive nature of the plan and the link with Services and Corporate Objectives.

The Committee discussed the issue of ‘ageing workforce’, which related to staff in the 50 to 59 age group and reflected that flexible working arrangements should be offered to this group to allow them to continue working. Gareth Adkins and Serena Barnatt confirmed that a number of pieces of work were being progressed in this area and agreed to emphasise this further within the Workforce Plan.

Gareth Adkins agreed to add a paragraph to the Workforce Plan that referred to the Volunteer Strategy.

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| **Action No.** | **Action** | **Lead** |
| SGPCC/220714/01 | **6.2a Workforce Plan**Include paragraph to emphasise support for staff in the 50 – 59 age group (i.e. flexible/part time working) | Gareth AdkinsSerena Barnatt |
| SGPCC/220714/02 | **6.2a Workforce Plan**Volunteer Strategy to be referenced within the Workforce Plan | Gareth AdkinsSerena Barnatt |

The Committee approved the Workforce Plan.

**6.2b Annual Workforce Monitoring Report**

Gareth Adkins provided a brief overview of the Annual Workforce Monitoring Report which would be presented to Board on 28 July 2022.

Similar to previous years, one key theme had been ageing workforce. Succession planning would be considered for any particular staff groups that this could affect.

The Committee approved the Annual Workforce Monitoring Report.

**7 Involved in Decisions**

**7.1 Partnership Forum Report**

Serena Barnatt provided a brief update from the recent Partnership Forum meeting.

Partnership Forum received an update on Workforce Change Guidance. The guidance consisted of HR and L&OD toolkit to support workforce change and to assist managers and employees through change projects. Both the HR and ‘Let’s Talk about Change’ Toolkits were recommended to be used at the beginning of change projects. It was noted that awareness sessions would be delivered with managers to support them through any change processes.

The Committee noted the Partnership Forum Report.

**8 Safe Working Environment**

**8.1 Board Corporate Risk Register**

Gareth Adkins presented the Board Corporate Risk Register to the Committee and highlighted that significant work had been completed in recent months to revise this. The paper now featured summary tables that articulated the risk appetite and clearly highlighted new or changed risks. The paper included an overview of all risks and the Corporate Objective they related to.

Marcella Boyle invited Gareth Adkins to elaborate on overall risk work that was underway. Gareth Adkins stated that in addition to Board level risks, the structure and reporting of risks was also being reviewed and in particular what risks were escalated and deescalated through the governance structure. This work was being undertaken by Katie Bryant, Head of Clinical Governance and Nicki Hamer, Deputy Head of Corporate Services.

The Committee approved the Board Corporate Risk Register.

**8.2 Health and Safety Report**

Gareth Adkins presented the Health and Safety Report to the Committee and drew attention to Adverse Incident Reporting and Staff Behavioural issues.The Health and Safety Committee discussed and agreed to review the definition for the Datix reporting of behavioural issues to ensure appropriateness and were exploring the separation of actual aggressive/abusive behaviour as distinct from unacceptable behaviour i.e. discourteous behaviour.

Gareth assured the Committee that the issue remained an area of focus and noted that it linked to other work that was underway in values, dignity and respect and early resolution.

The Committee welcomed a further update on how incidents are accurately recorded and how L&OD would support this work.

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| **Action No.** | **Action** | **Lead** |
| SGPCC/220714/03 | **8.2 Health and Safety Report**Provide an update, in due course, on how incidents are accurately recorded and how L&OD would support this work.  | Gareth Adkins |

The Committee noted the Health and Safety Report.

**8.3 Occupational Health Report**

Serena Barnatt presented the Occupational Health Report and noted the following:

**Autumn/Winter Vaccination Programme**

Awaiting National guidance but pre-planning had commenced by the Nursing and Occupational Health Teams.

**Employee Assistance Program (EAP)**

Management information in relation to the program could be found in Appendix 1 within paper 8.3. The program provided not only mental health support but also financial wellbeing support. The program was available to staff, their family members and volunteers. The management information provided benchmarking within the industry and the AXA Health Portfolio.

Serena Barnatt commended the range of work that Spiritual Care and Occupational Health have led to support staff.

**Mental Health First Aid Awareness Training**

Following a successful programme of delivery of the Mental Health First Aid training a further six sessions were planned. The team were working with the Communications Team to agree consent to publish a list of individuals who had completed the training to enable staff to be aware of who they could contact if they needed support.

**Health Surveillance**

Occupational Health and Health and Safety were working collaboratively to undertake risk assessments in order to identify what roles within the organisation required health surveillance. Once this had been established, a policy would be written and surveillance undertaken accordingly.

**Recruitment**

Tosupport recovery and remobilisation and upcoming extension plans, there continued to be a significant increase in current and expected volume of recruitment. The team were working with eHealth and Clinical Governance on rolling out an online pre-employment process which would be more efficient in managing the organisation’s current recruitment needs.

The Committee welcomed the comprehensive data provided by AXA Health.

The Committee noted the Occupational Health Report.

**8.4 Staff Governance Policy Tracker Update**

Serena Barnatt informed the Committee that a suite of National policies were launched pre pandemic, these were Phase 1 and every Health Board in Scotland must use the Once for Scotland Policies. Phase 2 was paused but this work had recently recommenced including flexible and home working policies.

A range of local policies had been developed in recent months including the Retirement and Re-Employment Policy. The Recruitment and Selection policy would be submitted to the Partnership Forum for approval in August 2022.

 The Committee noted the Staff Governance Policy Tracker Update.

**8.5 Health and Wellbeing Update**

Gareth Adkins provided an update on the Health and Wellbeing Strategy to the Committee.

The Strategy was in its second year and had four key delivery themes: Mental Health; Physical Health; Financial and Social; and Creating the Condition. The Strategy provided assurance on the comprehensive planned actions for the coming year.

The Committee noted an opportunity to explore links between the Health and Wellbeing Plan and Site Plan to further develop the use of green space, taking into account affordability.

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| **Action No.** | **Action** | **Lead** |
| SGPCC/220714/04 | **8.5 Health and Wellbeing Update**Paper 8.5b to be reformatted and uploaded to Admin Control.  | Corporate Administrator |

TheCommittee noted the Health and Wellbeing update.

**9 Person Centred**

**9.1 Annual Feedback Report**

Katie Bryant highlighted that a significant amount of improvement work had taken place in relation to complaints and feedback. Ongoing training continued and a training day was planned for a CME day in September 2022. Timescales for responses to complaints had been an area of particular focus and improvements had been evident in this area. Low Scottish Public Services Ombudsman (SPSO) activity highlighted the quality of responses. The Committee requested that benchmarking analysis in this area was provided at a future Committee meeting.

The Committee commended the Clinical Governance Team for their work over the past year and thanked Mark MacGregor and Anne Marie Cavanagh for their leadership in this area. The Committee noted particular thanks to Katie Bryant who had made a significant impact since joining the organisation. The Committee reflected that there was a genuine commitment from the organisation to ensure a person centred approach to complaints and the dedication to ensuring learning was taken from each complaint.

The Committee were heartened to note that compliments were the highest form of feedback within the report.

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| **Action No.** | **Action** | **Lead** |
| SGPCC/220714/05 | **9.1 Annual Feedback Report**Benchmarking analysis on Scottish Public Services Ombudsman (SPSO) activity to be presented at a future meeting. | Katie Bryant |

The Committee noted the Feedback Report update.

**10 Fair and Consistent**

**10.1 Nursing Strategy Annual Update 2021/22**

Theresa Williamson advised that the strategy had been written in conjunction with Nursing Staff who had identified eight priorities with action(s) assigned to each priority:

* Teams and Team Working; Caring for Patients; Opportunities; Clinical Specialities; Leadership; Managing Change; Reputation; and Relatives and Carers.

Theresa Williamson informed the Committee that an area of focus had been embedding new technologies and digitalisation. The recent implementation of the Anaesthetics system in Theatres had gone well with nurses being involved in the design, configuration and development of the project.

Theresa Williamson stated that consideration was being given to Health Care Support Worker roles and the team were looking at the work of non-registered staff to understand how these members of staff could be developed further.

The Nursing Team were keen that the nursing workforce of NHS Golden Jubilee had a positive reputation across NHS Scotland and they had been participating in recruitment fairs locally and nationally to raise NHS Golden Jubilee’s profile.

Theresa Williamson concluded the update by noting that although the strategy was concise it had been developed and driven by the Nursing Team who wanted a clear and succinct document.

Theresa Williamson informed the Committee that Schwartz Rounds are group reflective practice forums that gave staff from all disciplines, clinical and non-clinical, an opportunity to reflect on the emotional and social aspects of working in healthcare. The Committee commended Theresa Williamson for her commitment to the Schwartz Rounds over the years.

The Committee commended the significant amount of work that had gone into the Strategy and in particular the consideration of non-registered staff, ensuring career progression for this group of staff.

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| **Action No.** | **Action** | **Lead** |
| SGPCC/220714/06 | **10.1 Schwartz Rounds**Circulate dates of Schwartz Rounds to Non-Executives | Gerard Gardiner |

 The Committee noted the Nursing Strategy Annual Update 2021/22.

**10.2 Equal Pay Analysis 2021/22**

Gareth Adkins advised the Committee that Brynley Pearlstone joined NHS Golden Jubilee as part of Glasgow Centre Inclusive Living placement and brought with him a breadth of analytical skills which could be seen within the report.

Gareth Adkins reflected that NHS Golden Jubilee continued to employ more females than males and this was due to a large proportion of the workforce being made up of nursing staff and these roles tended to be predominantly female. It was noted that it was more difficult for the organisation to have an influence on professional groups as these rely on career pathways started at educational level. However, the organisation was considering how it could project non-professional careers, like housekeeping and portering, which were not gender specific.

It was noted that there was a relatively large presence of BAME staff in the Medical job family.

Gareth Adkins shared that there was not enough data on staff with disabilities to provide any analysis on.

The Committee welcomed the development of the report and richness of information it provided. The Committee reflect that although there were no concerns raised within the report, the Committee remained conscious of the ongoing need to explore any opportunities to increase diversity across the workforce.

 The Committee approved the Equal Pay Analysis 2021/22.

**10.3 Scottish Adult Congenital Cardiac Service (SACCS) Strategy 2022 – 2025**

Alex McGuire provided an overview of the SACCS Strategy and noted the following key highlights:

* Three year Strategy due to an immediate pressure in SACCS service
* Several years of challenging recruitment in the service and there was now a backlog in patients. The Strategy describes the backlog and what was required to address this.
* Work was underway on the longer term SACCS Strategy to identify how much work would need to be undertaken as part of a national service and how much could be delivered regionally/locally
* The Strategy was supported by a business case which was submitted to NSD at the end of June and which they are considering alongside other business cases.
* The Strategy was presented to SGPCC for endorsement and would be submitted to the Board on 28 July for final approval.

Jann Gardner noted that a considerable discussion on the Strategy and also the Heart Transplant piece had taken place at Board Chief Executives this week however no resolution was met. Jann Gardner reflected that both cases prepared by Alex McGuire and the team were well noted and framed in a constructive way by Susie Buchannan. Further work would be carried out by Jann Gardner and Susan Douglas-Scott to progress this work.

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| **Action No.** | **Action** | **Lead** |
| SGPCC/220714/07 | **10.3 SACCS Strategy 2022 – 2025**Ensure strategy is revised in line with accessibility guidelines.  | Gerard Gardiner/ Alex McGuire |

The Committee endorsed the SACCS Strategy acknowledging the specific implications for SGPCC, which had been reflected in the Workforce Plan.

**11 Well Informed**

**11.1 Integrated Performance Report**

Gareth Adkins presented the Integrated Performance Report for April 2022 to the Committee highlighting the following:

* Sickness absence had continued to decrease from the previous report.
* Agenda for Change appraisal required further attention across all directorates and was continually monitored by the Executive Team.
* Medical job planning was in a good position for the current year.

 The Committee noted the Integrated Performance Report.

**11.2 Workforce Data Deep Dive**

Gareth Adkins delivered a presentation on Workforce Data and highlighted the following key points:

* Planning to build an organisation wide data repository which would be fed by data sources
* Data sources were: Specific data collected and entered; and data generated as by-product of business or clinical process within clinical or business system
* Database that sat within clinical based systems would be fed by clinical or business systems.
* At present, individual systems need to be accessed to obtain data. The majority of these systems had supplier ‘standard’ and ‘commissioned’ reports. The majority of these systems, but not all, had customisable nosiness objects or similar reporting system that allowed users to create reports. This required local skillset and resource to create these reports.
* Current systems provide a small level of visualisation and presentation however manual interpretation and manipulation was often required using Microsoft Excel and other statistics packages.
* Without the proposed data repository, combining multiple data sources requires a common index such as CHI or staff payroll number. This method was resource intensive and could sometimes lead to data quality issues.
* With the data repository the process would become automated ensuring consistent high quality data and required less resource.
* The workforce data systems used within NHS Golden Jubilee are Jobtrain, SSTS and eESS. Jobtrain had limited standard reports and required specific skillset for yellowfin reporting system. SSTS and eESS are skills dependant to extract data and require manipulation through Excel to use data.
* Significant work had been carried out with Finance to establish a process to integrate financial data with the data from SSTS and eESS to produce the monthly integrated report which looked at budgets for different areas.
* Live recruitment data was an area of focus and reports had been commissioned in Jobtrain to extract data around outstanding disclosures, posts with action required and posts that have had no movement for a period of time. Further reports on end to end process, protected characteristic and fill rate are about to be commissioned.

In order to allow a fuller discussion, the Committee agreed to take discuss Workforce Data as the first item of business at the September meeting.

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| **Action No.** | **Action** | **Lead** |
| SGPCC/220714/08 | **11.2 Workforce Data Deep Dive**Workforce Data to be the first item of business at the September meeting | Gerard Gardiner |

The Committee noted the Workforce Data Deep Dive.

**11.3 Staff Governance Indicators Review**

Gareth Adkins advised that the only change to the Key Performance Indicators (KPIs) were the tightening of targets in Disciplinaries and Grievances.

 The Committee approved the Staff Governance Indicators Review.

**12 Any Other Competent Business**

**12.1 Corporate Objectives**

Jann Gardner outlined the draft Corporate Objectives with the Committee and noted that these would be reviewed further before a final version would be presented to the Board on 28 July 2022. The Corporate Objectives had been designed to ensure that NHS Golden Jubilee was a high performing, person centred and innovative organisation. A Senior Leadership session was planned for 26 July 2022 and managers had been asked to prepare a short slide set to describe what the Corporate Objectives mean for them and their team. The Corporate Objectives had been designed to set out a clear direction of travel for the organisation.

The Committee commended the clear Corporate Objectives and looked forward to a fuller discussion at the July Board meeting.

The Committee noted the Corporate Objectives.

**12.2 Volunteer Update**

Maureen Franks joined the meeting and provided an update on recent volunteer activity.

Maureen Franks talked about the value and impact that Volunteers made to patients and staff. NHS Golden Jubilee were fortunate to have volunteers who had been with the organisation for 15 years plus but also the benefit and experience that new volunteers brought to the organisation. The Pandemic had been challenging for volunteers and they had adapted the way they worked and their contribution was greatly noted.

The recent virtual volunteer event to celebrate volunteer’s week was well attended and gave volunteers the opportunity to hear from Jann Gardner, Marcella Boyle and Susan McLaughlin who provided an overview of the expansion project.

Activity was underway to draft the Volunteer Strategy for 2023 – 2026 and due to the halt of activity during the pandemic, a number of actions from the current strategy would be carried into the new strategy. A Volunteer Stakeholder Strategy event was being hosted on 28 July 2022, allowing volunteers to discuss new themes and discuss objectives.

International Volunteer Day will be held on 5 December 2022 and preparation is underway for a face to face meeting to allow volunteers to come together to reflect on their wonderful work in NHS Golden Jubilee.

The team had recruited three new members: Tosh lynch, Spiritual Care Lead, Maureen Franks, Volunteer Manager and Joe Keenan, Chaplain. Maureen Franks thanked the Committee for the support they provided to volunteers.

The Committee commended Maureen Franks for her comprehensive presentation, the work that she has led during her first year in post and the compassionate leadership she demonstrated to the volunteers. The Committee expressed their gratitude to the volunteers who were a valued part of the organisation.

The Committee noted the Volunteer Update.

**13 Items for Board Update Report**

It was agreed the Board update would be issued to Committee members virtually.

**14 Date and Time of Next Meeting**

Tuesday 6 September 2022 at 1:30 pm.