Minutes of a Meeting of the
Staff Governance Committee held
in Meeting Room B, Ground Floor, Dalian House
350 St Vincent Street, Glasgow, G3 8YZ
on Tuesday, 7 August 2007 at 1.00 p.m.

PRESEN T

Mr R Cleland (in the Chair)
Ms R Dhir MBE Mr A O Robertson OBE
Mrs E Smith

IN ATTENDANCE

Mr G Anderson … APF Joint Trade Unions Representative
Mrs M Bassy … Head of Staff Governance
Ms C Brennan … Staff Governance Unit, Scottish Executive Health Department
Mr A Carter … Associate Director of Human Resources (Partnerships)
Mr A Killick … Staff Governance Unit, Scottish Executive Health Department
Ms L Lauder … Head of Learning and Education
Ms M MacDonald … Learning and Education
Ms A MacPherson … Associate Director of Human Resources (Acute)
Mr I Reid … Director of Human Resources
Ms M Robertson … APF Staff Side Secretary
Mr W S Marshall … Secretariat Officer

ACTION BY

13. INTRODUCTORY REMARKS

The Chairman opened the meeting by welcoming Ms C Brennan and Mr A Killick from the Staff Governance Unit of the Scottish Executive Health Department. He also welcomed Ms L Lauder and Ms M MacDonald from the Learning and Education Department of the Board.

14. APOLOGIES

Apologies for absence were intimated on behalf of Sir John Arbuthnott, Ms R Agnew, Mr G Archibald and Mr D Sime.

15. MINUTES OF PREVIOUS MEETING

The Minutes of the meeting of the Staff Governance Committee [NHSGGC SGC(M)07/1] held on 15 May 2007 were approved as a correct record.

NOTED

16. SCOTTISH EXECUTIVE HEALTH DEPARTMENT STAFF GOVERNANCE UNIT

Mr Killick advised that the Staff Governance Unit was part of the Workforce Directorate of the Scottish Executive Health Department. Its main role was to provide support and assistance to any NHS Board which required it particularly on issues concerning staff governance, partnership and employment practice. The Directorate would also undertake national monitoring of staff governance implementation and would produce information for the Annual Review process.
Mr Killick stressed that there would be robust links between the NHS Board Partnership Forums, the SPF, SWAG and the Workforce Directorate in order to support and enhance the practical implementation of the Staff Governance Standard. He and Ms Brennan were visiting all of the Boards in Scotland to explain the role of the Staff Governance Unit and he was keen to encourage effective liaison with the various Staff Governance Committees throughout Scotland.

Ms Brennan referred to the importance of the new Staff Governance Standard (circulated to members). The SAAT would be reviewed to match up with this document. She pointed out that there was some debate regarding the National Staff Survey planned for 2008 and whether this might be structured differently to meet the new Staff Governance Standards. SWAG may become more involved in this process.

The Chairman welcomed the offer of more support and assistance from the centre and looked forward to working with the Staff Governance Unit in the future. He pointed out that the Committee considered the Staff Surveys undertaken within Greater Glasgow and Clyde to be a most useful tool for engaging with staff and expected these to continue in the future. The Chairman also expected that whilst everyone involved in staff governance was sharing a similar direction of travel, there were always local variations tailored to specific needs. He thanked Mr Killick and Ms Brennan for their presentation.

**NOTED**

17. MATTERS ARISING FROM MINUTES

(a) **Health Visitor Review**

Mr Anderson referred to the recent Health Visitor Review where the staff concerned had not felt part of the decision making process affecting aspects of their work. The Trade Unions were concerned that there had been no meaningful dialogue with management. The Director of Human Resources advised that the Chief Executive of the Board had made a response to the staff side which specifically addressed their grievances regarding the way the review was handled. He emphasised that no decisions had been made regarding the future arrangements for the health visitor service, only proposals were being discussed. A future meeting with the staff side would be held on 9 August 2007.

**NOTED**

(b) **Draft Human Resources Plan**

A report of the Director of Human Resources [NHSGGC Paper No. 07/7] comprising a Draft Human Resources Plan was submitted.

The Director of Human Resources pointed out that at the meeting of the Staff Governance Committee held on 15 May 2007, it was noted than an over-arching Workforce Strategy was considered to be unnecessary given the planning activity within the Acute Directorates/CHCPs/CHPs. These organisations all produced annual plans which contained workforce issues as key elements. In addition, there were a number of workforce specific plans.

However, at that meeting it was further agreed that it would be helpful to have an overall summary of the key human resources objectives, and these were part of the Human Resources Plan which had been submitted.
The Chairman asked how induction fitted in to this process. Ms Lauder advised that a process was underway to rationalise the Board’s induction procedures. Each member of staff would have an individual induction journey universal in nature but also relevant to the job they were doing.

**NOTED**

(c) **Pay Modernisation Benefits Realisation Plan: March 2007**

A report of the Director of Human Resources [NHSGGC Paper No. 07/8] comprising an update on the Pay Modernisation Benefits Realisation Plan as at March 2007 was submitted.

The Director of Human Resources advised that at the previous meeting, the Committee noted that an update of the Pay Modernisation Benefits Realisation Plan at November 2006 had been sent to the Scottish Executive Health Department. A further update of the plan as at March 2007 was now being submitted to members for information.

**NOTED**

(d) **Partnership Conference 2006**

The Director of Human Resources advised that the report of this event had been circulated to the attendees.

**NOTED**

(e) **Revised Staff Governance Standard and Self-Assessment Audit Tool**

A report of the Director of Human Resources [NHSGGC Paper No. 07/9] comprising the revised Staff Governance Standard and Self-Assessment Audit Tool was submitted.

The Head of Staff Governance advised that the revised Staff Governance Standard was launched by the Interim Director of Workforce, Scottish Executive Health Department in June 2007. The revised Standard was the result of development and review of the previous Standard, in partnership, by representatives of NHS Scotland Employers, Trade Unions and the Scottish Executive Health Department.

The principles of ensuring that staff were well informed; appropriately trained; involved in decisions that affected them; treated fairly and consistently and provided with a safe and improved working environment remained unchanged. The third edition of the document acknowledged recent changes to national structures for partnership as well as clarifying some detail around the remit of Staff Governance Committees and Remuneration Committees.

**ACTION BY**
The Head of Staff Governance pointed out that review of the Staff Governance Self-Assessment Audit Tool and external audit arrangements were ongoing with the Scottish Executive Health Department and further information was awaited. Copies of the revised Standard have been issued to members of the Area Partnership Forum, the PPP Group and to the Acute Division and Partnerships for distribution locally.

**NOTED**

(f) **Policies and Procedures Harmonisation**

The Director of Human Resources referred to the complexity involved in harmonising the various Human Resources Policies and Procedures across the entirety of NHS Greater Glasgow and Clyde. Whilst it had not proved possible to meet all of the timescales envisaged, progress was being made. Discipline and grievance procedures were the current subject of detailed discussions with the Trade Unions.

Ms Robertson asked about progress regarding the Work-Life Balance Policies. The Associate Director of Human Resources (Acute) confirmed that these were in the process of being completed and were being developed in conjunction with the Attendance Management Policy.

Mr Killick advised that a number of PIN Guidelines and Policies would be subject to national review. He would welcome dialogue with the Staff Governance Committee at that time.

**NOTED**

(g) **Senior Managers Pay**

The Director of Human Resources referred to the recent Scottish Executive Health Department Circular which set out the new arrangements for implementing the outstanding pay awards for Executive and Senior Managers. The Staff Governance Committee expressed its profound disappointment that the new arrangements were not within the spirit of what was previously expected. The Chairman referred to the recently produced Staff Governance Standard which required that Boards must demonstrate that their staff were well informed, involved in decisions which affected them and were treated fairly and consistently. The Chairman pointed out that this criteria had not been applied in relation to this particular issue.

Mr Killick acknowledged these concerns and explained the background to the pay award.

**NOTED**

(h) **Staff Governance Action Plan 2007-08**

Ms L Lauder, Head of Learning and Education, assisted by Ms M MacDonald, gave a presentation on developing managerial capability and capacity.

**ACTION BY**
Ms Lauder referred to the often quoted maxim that “well designed and delivered management development would enhance organisational performance”. She suggested that this maxim, though widely touted, was rarely tested.

Ms Lauder went on to explain why NHS Greater Glasgow and Clyde should invest in management development. There was a strong recognition among Directors and General Managers that investment in management development was critical for individuals and the organisation. The identification of management development as a key need had emerged from local learning and education plans through the various PDPs. Ms Lauder pointed out that effective management development provision was integral to the organisational development framework and was part of the Board’s staff governance commitments.

Ms Lauder pointed out that the management development programme:

- was routed in the Board’s organisational strategy and plans and reflected the needs of our patients;
- was built on existing good practice;
- utilised a wide range of methodologies and techniques;
- exploited technology as much as possible;
- recognised and met individual needs as well as organisational requirements;
- offered choice and flexibility in learning methodologies which reflected different learning styles;
- was a shared responsibility between the manager and their line manager;
- where appropriate, would lead to a recognised qualification;
- would begin with the knowledge and understanding which was required for all levels of management within Greater Glasgow and Clyde.

Ms Lauder also pointed out that the programme would offer support for potential managers. A foundation programme was being organised for newly appointed and promoted managers and a core development programme had been devised for all current managers.

Ms Lauder hoped to have the management development programme well under way by the end of the year. There were between 3,500 and 4,000 managers across Greater Glasgow and Clyde and this represented a huge challenge. Mr Killick intimated that this was a very important and encouraging development which NHS Greater Glasgow was undertaking and it would make a major contribution to managerial efficiency.

The Chairman thanked Ms Lauder and Ms MacDonald for what had been a most informative and interesting presentation and invited them back to a future meeting to update the Committee on progress.

**NOTED**
18. **AREA PARTNERSHIP FORUM REPORT**

A report of the Employee Director [NHSGGC Paper No. 07/11] comprising an Area Partnership Forum Report and the minutes of meetings of the Area Partnership Forum held on 26 April 2007 and 31 May 2007 were submitted.

The Staff Governance Committee noted the references in the report to Patient Safety, the Clyde Clinical Strategy and Agenda for Change.

**NOTED**

19. **AGENDA FOR CHANGE**

A report of the Director of Human Resources [NHSGGC Paper No. 07/12] comprising an update on Agenda for Change implementation was submitted.

The Director of Human Resources advised that since the last of the large job families were assimilated in May, the focus had been on trying to assimilate those staff whose assimilations were not successful mainly because they had more than one job, secondment or acting arrangement in the period since 1 October 2004 and, at the same time, dealing with current assimilations as remaining posts have been matched. Over 28,000 of the current workforce (i.e. 79% of eligible staff excluding bank staff) were now assimilated. In addition, over 3,500 leavers had been assimilated although not yet processed.

The Director of Human Resources then turned his attention to the arrangements to progress non-assimilated staff. Work was ongoing to complete the outstanding assimilations as quickly as possible. There were a number of new job descriptions submitted in respect of posts which changed after 1 October 2004 as well as posts established since that date and work was in hand to agree how these posts should be progressed. However, this meant that it would not be possible to assimilate staff in these posts in the meantime.

A review of posts previously not matched was currently under way by consistency panels. It was hoped that this process would result in some of these posts being successfully matched and staff assimilated. It would establish a clear list of posts which required to be fully evaluated. This process would commence in the near future. The Job Evaluation Unit had issued guidance on appointing staff on to Agenda for Change bands where there were new or changed job descriptions and this had been implemented across the system to support staff moving to Agenda for Change bands.

The Director of Human Resources then referred to arrears of pay, reviews and anomalies, Knowledge Skills Framework outline development and Knowledge Skills Framework based PDPs.

**NOTED**

20. **ATTENDANCE MANAGEMENT**

A report of the Director of Human Resources [NHSGGC Paper No. 07/13] comprising an update on average sickness absence rates to 31 May 2007 was submitted.
The Director of Human Resources pointed out that at its meeting on 18 May 2007, the Committee had discussed the approach being taken within the Board to achieve the target of 4% by 31 March 2008. Appendix I to the report set out the average absence rates within the Board to the 10-month period from April 2006 to May 2007 and the average absence rates in the 2 months of 2007/08.

Mr Robertson suggested that some written commentary should be provided in future reports in regard to significant outliers. Mr Anderson offered a number of possible reasons as to why sickness absence rates were as high as they were in some specialties and areas.

NOTED

21. **NHS GREATER GLASGOW AND CLYDE COMPLIANCE ACTION PLAN: RACE EQUALITY DUTY**


The Associate Director of Human Resources (Partnerships) advised that the Commission for Racial Equality had given notice of its intention to serve the Board with a Compliance Notice for failure to comply with the Race Equality Duty. The Board had been given 21 days to provide evidence of areas of compliance and a clear action plan outlining what action would be taken to address areas of non-compliance. Based on the submission of this evidence, the Commission for Racial Equality would decide whether or not to issue the Compliance Notice.

The Associate Director of Human Resources (Partnerships) advised that, to date, no response had been received from the Commission other than to advise that the information submitted in the Chief Executive’s letter was being considered. It was the intention that equality data be presented to the Area Partnership Forum and the Staff Governance Committee on a regular basis and that this was incorporated into the Staff Governance Action Plan. The Associate Director of Human Resources (Partnerships) was chairing a short life working group which had been established to ensure actions identified were implemented to timescales.

Ms Dhir expressed her surprise that the Board was not already collecting equality data as outlined by the Commission for Racial Equality. In response to this point, the Director of Human Resources advised that in the absence of a human resources system it was not possible to provide the level of detail required by the Commission for Racial Equality around this issue. Such information could at the moment only be collected manually but the resources were simply not there to achieve this.

NOTED

22. **MINUTES OF THE REMUNERATION SUB-COMMITTEE**

The Staff Governance Committee received for information copies of the Minutes of a meeting of the Remuneration Sub-Committee held on 31 May 2007.

NOTED
23. **TERROR ATTACK ON GLASGOW INTERNATIONAL AIRPORT**

The Chairman suggested that the sincere thanks of the Staff Governance Committee should be recorded for the exceptional efforts of all those NHS Greater Glasgow and Clyde staff who became involved in the events following the recent terrorist outrage at Glasgow International Airport. It was agreed that the Secretary should write to the Chief Operating Officer accordingly.

**NOTED**

24. **DATE AND TIME OF NEXT MEETING**

The next meeting of the Staff Governance Committee would be held on Tuesday, 20 November 2007 at 12 noon in Meeting Room B, Dalian House, 350 St Vincent Street, Glasgow.