16. INTRODUCTORY REMARKS

The Chair opened the meeting by welcoming Mr Robin Wright, Director of eHealth and Mrs Bridget Howat, Head of People and Change, Corporate Services, to give a presentation on the Staff Governance Standard within the eHealth Directorate. Mr David Leese, Chief Officer and Mr Brian Greene, Head of People and Change, Renfrewshire Health and Social Care Partnership, were also in attendance to provide an update on their progress with the implementation of the Staff Governance Standard. Ms Lilian Macer, Employee Director, NHS Lanarkshire, was also in attendance as an observer as part of a planned, developmental series of visits to other Health Boards across NHS Scotland.
17. APOLOGIES

Apologies for absence were received from Mr J Brown, Mr K Redpath, Mr I Fraser, Rev Dr N Shanks, Mr G Archibald, Councillor J McIlwee, Councillor A Lafferty and Mrs G Hardie.

NOTED

18. DECLARATIONS OF INTEREST(S)

No declarations of interest were raised in relation to any of the agenda items to be discussed.

NOTED

19. PRESENTATIONS

Local Compliance with Staff Governance Standard

Presentation by Renfrewshire Health and Social Care Partnership

The Staff Governance Committee received copies of the Renfrewshire Health and Social Care Partnership Staff Governance Monitoring Framework 2015/16.

Mr David Leese, Chief Officer, Renfrewshire Health and Social Care Partnership, provided an overview of the Partnership, noting that 2015/16 was a transition year focusing on the integration of services in order to form the Health and Social Care Partnership from 1st April 2016.

The Staff Governance structure within the HSCP was described and the current HSCP HR&OD Performance Matrix was shared with the Committee. Attendance management, KSF compliance, performance management and induction completion rates were highlighted as priority areas for attention.

Mr Leese highlighted outcomes from the 2015 National Staff Survey which had given both cause for pride and concern within the HSCP and confirmed that a local action plan had been developed in partnership to work on the areas of challenge.

Achievements and challenges from the Staff Governance Action Plan were then highlighted. These included maintenance of the Healthy Working Lives Gold Award, the programme of senior management and IJB Chair site visits, a focus on improving the quantity and quality of KSF activity, full implementation of the mandatory Health Care Support Worker Induction Standard, development of the local Leadership Network and iMatter implementation.

In terms of a case study, Mr Leese highlighted the Renfrewshire CHP award ceremony which had attracted more nominations than previously. In future, the ceremony would include social care awards to recognise the contribution of employees working in social care.

In response to questions from Mrs MacPherson, Mr Leese confirmed that action
was underway to improve the HSCP induction completion figures. Mr Leese also confirmed that the local Leadership Network was designed to support leaders in the HSCP and when appropriate, would complement and align with the NHSGGC Fast Track Programme.

Mrs McAuley thanked Mr Leese for his presentation, and sought his view on the reduction in the number of HSCP staff who felt they had the opportunity to put forward new ideas/suggestions for improvement in the workplace. Mr Leese responded by explaining that the ‘Bright Ideas’ programme had a lower profile in the past year and this, in combination with structural changes, had increased anxieties and staff concern about engagement. Mr Leese anticipated that this performance indicator would improve in 2016/17.

In response to questions from Mr Sime, Mr Leese confirmed that Renfrewshire Council was currently paying the Scottish Living Wage and that in respect of KSF, the HSCP were realigning KSF activity to spread it across the year, rather than taking place primarily in March. The aim is to meet the KSF PDP&R target of 80% by the end of March 2017.

Responding to a query from Mrs McErlean, Mr Leese confirmed that Renfrewshire hosted services would be included with the HSCP implementation of iMatter.

The Committee thanked Mr Leese and Mr Greene for their presentations and the progress they have made with the implementation of the Staff Governance Standard.

Presentation from eHealth Directorate

The Staff Governance Committee received copies of the eHealth Staff Governance Monitoring Framework 2015/16.

Mr Robin Wright, Director of eHealth, provided a brief overview of the Directorate which employs 1,395 staff. The Staff Governance structure was also outlined for information, including the fora currently in place to support Staff Governance. Mr Wright highlighted the successful partnership working which had supported the recent reorganisation in the Directorate.

The eHealth HR&OD Workforce Matrix was shared with the Committee. Areas of challenge include KSF compliance, attendance management and turnover figures. It was noted however that reductions had been achieved with bank usage, excess hours and overtime.

Mr Wright updated the Committee on the successful implementation of the iMatter continuous improvement tool within eHealth in February 2015. Overall, the iMatter response rate was 79%, in comparison to the 36% achieved by the NHS Scotland Staff Survey.

Action planning is now underway in teams across eHealth. There is a particular opportunity for improvement in respect of visibility of senior management and involving staff in decisions.
Achievements included a consistent improvement in induction and fire training attendance rates, improved Directorate wide communications, the creation of an increased number of Modern Apprentice opportunities and the use of Staff ‘Change Champions’ to improve wider representation and communication during reorganisation. Challenges within the Staff Governance action plan include improving sickness absence rates, KSF completion rates, and an increased focus on succession planning and development.

As an example of a good practice case study, Mrs Howat described the HR workshops for line managers which were developed within eHealth to ensure a consistent approach to the application of HR policy throughout the employee journey. This has improved managers’ confidence in dealing with HR issues and reduced the number of problem issues being reported to HR from the eHealth Directorate.

Ms Brown asked for further detail on the work underway to improve attendance management within Health Records. Mrs Howat confirmed that the current figure was unusually high, mainly due to some long term sickness absence across the Directorate, however she provided assurance that action was underway to improve the position.

The Committee thanked Mr Wright and Mrs Howat for their clear and focussed presentation.

20. MINUTES OF PREVIOUS MEETING

The Minutes of the meeting of the Staff Governance Committee held on Tuesday 16th February 2016 (NHSGGC SGC(M) 16/01 were accepted as a correct record, with the following amendment:

Item 4, Page 3, first paragraph, change ‘difficulties’ to ‘disabilities’.

NOTED

21. MATTERS ARISING

- Pensions Re-enrolment Update

A report from the Head of Payroll Services (Paper 16/14) had been circulated which provided an update on the Pensions Re-enrolment process.

Mrs MacPherson explained that presently 1,429 staff members had opted out, and 2,050 had remained in the scheme. A further update would be brought to the Committee once the final figures were available.

It was also noted that in addition to the implementation of auto-enrolment, staff remuneration had been affected by an increase to National Insurance contributions.

Councillor Devlin asked if additional information was available on the reasons why 41% of staff had decided to opt out. Mrs MacPherson explained that although considerable effort had gone into promoting and publicising the
advantages of auto enrolment, a significant number of staff involved were part-time. Remaining in the scheme may not have been a cost effective option for some employees.

Ms Brown requested a further demographic analysis of the staff who had opted out, while recognising that encouraging numbers remained in the scheme.

**NOTED**

- **Awards and Ceremonies update**

Mrs Lauder confirmed that letters had been sent out to those members of staff and services who had received an award, as noted at the previous Staff Governance Committee.

**NOTED**

- **Whistleblowing Champion Update**

Ms Brown provided an update on the role of the Whistleblowing Champion noting that national guidance had not yet been received from the Scottish Government Health Directorate.

Within NHSGGC, four whistleblowing cases had been initiated during 2015/16.

Ms Brown confirmed the Staff Governance Committee would be kept up to date with any issues or critical themes arising.

**NOTED**

- **Disability Recruitment Statistics**

The Head of People and Change, Organisational Effectiveness, had circulated a report (Paper 16/15) updating the Committee on recruitment statistics relating to candidates disclosing a disability.

The workforce statistics presented at the previous Staff Governance Committee had suggested that candidates declaring a disability were significantly less likely to be appointed to post than those not declaring a disability.

Further analysis and information gained through the guaranteed interview scheme for disabled applicants revealed that the position was better than the initial statistics had indicated. This further analysis showed a relative chance of success of 4% for candidates declaring a disability, compared to a 5.4% chance of success for applicants not declaring a disability.

Despite the above Mrs Lauder would further analyse the position with the Head of Recruitment recognising that there are still opportunities for improvement. An update will be provided to the next meeting.

Mrs S Canavan suggested that it would be helpful to clarify the disability status of existing employees in order to provide an accurate picture of the whole
workforce. It was noted that Ms Erdman had agreed to provide intelligence on
disclosure processes in other organisations to inform discussions on this topic.   J Erdman

NOTED

- Review of Committee Role and Remit

Mrs McPherson confirmed that the revised role and remit report had been
submitted to John Hamilton, Head of Board Administration.

NOTED

- Boardwide Revalidation & Medical Education and Staff
  Governance Groups

The Director of Medical Education had circulated a paper (Paper 16/16)
proposing a reporting framework for Medical Education and Medical
Revalidation.

Mrs MacPherson confirmed that the report proposed that the Staff Governance
Committee would provide the governance framework for Medical Education
and Medical Revalidation, and that quarterly reports would be provided.

AGREED

- Staff Health Strategy - Update

The Director of Human Resource and Organisational Development circulated a
paper (Paper 16/17) providing an update on the Staff Health Strategy.

The paper set out the Staff Health Strategy Outline and Action Plan, which was
developed by the Staff Health Governance Group with input from HSCPs,
Health Improvement, Health and Safety, Human Resources, Learning and

The strategic priorities were outlined in the report and Mrs MacPherson
confirmed that work would now be undertaken to develop detailed programmes
of activity.

The Committee thanked Mrs MacPherson for the update. Ms Brown and Mrs
McCaulay asked if further analysis of the programmes of work would be made
available in order to ensure effective performance management. Mrs
MacPherson confirmed that performance measures would be reviewed.   AMacPherson

NOTED

22. AREA PARTNERSHIP FORUM REPORT

The Employee Director had circulated a paper (Paper 16/17) which included the
Area Partnership Forum Report and minutes from the meetings of the APF held
on 21st and 27th January 2016.
Mr Sime highlighted some of the areas considered by the Area Partnership Forum including iMatter and the recent Trade Union Bill. Mr Sime particularly mentioned the Director of Human Resources and Organisational Development’s support of the recent Scottish Trade Unions Congress’ day of action on the Bill. Ms Brown also commended Mrs MacPherson’s support.

**NOTED**

23. **EVERYONE MATTERS: 2020 WORKFORCE VISION 2016/2017 DRAFT ACTION PLAN**


The focus of the 2016/17 plan is on identifying workforce actions to help tackle health inequalities across Scotland and on developing a workforce to deliver integrated health and social care services across NHS Boards, local authorities and third party providers.

Mrs Lauder confirmed that the Action Plan followed on from the 2015/16 priorities and existing workstreams underway in NHSGGC.

Mrs McAuley asked if it would be possible to combine some of the reports on the current agenda with the Staff Governance Workplan to create a more integrated and coherent view of overall activity. This suggestion was welcomed by the Committee and Mrs Lauder agreed to action this.

**NOTED**

24. **NHS GGC IMATTER UPDATE**

The Head of People & Change – Organisational Effectiveness had circulated a report updating on the progress of the iMatter implementation plan (Paper 16/20).

Mrs Lauder updated on the progress of iMatter implementation and confirmed that the overall NHSGGC response rate to date was 55%. The aspiration is to achieve a response rate of 60% in all Directorates as this enables a Directorate/Partnership/Function report as well as individual team reports. This has been achieved in all but two areas.

Preparation meetings are being scheduled with all Directors well in advance of iMatter go live dates to ensure maximum engagement and benefits from the iMatter tool.

Many important lessons have been learned from the implementation sites thus far and a paper setting out the critical success factors has been written to capture this learning.

Ms Brown asked if the Committee could have sight of the paper and Mr Sime requested information on how the outcomes from iMatter would be embedded...
within the overall Staff Governance Workplan.

It was also agreed that the iMatter Implementation Plan and Update would be included as an appendix to the Staff Governance Workplan in future.

**NOTED**

25. **STAFF GOVERNANCE WORKPLAN**

The Director of Human Resource and Organisational Development had circulated the NHSGGC Staff Governance Workplan (Paper 16/21).

Mrs MacPherson highlighted that this was a new format for reporting on Staff Governance activity and it was hoped that this would provide a clearer, more comprehensive and integrated overview of the broad range of workstreams underway in support of the Staff Governance Standard.

Mrs MacPherson explained that the current priorities were on improving levels of attendance management, KSF compliance and induction completion.

Ms Brown acknowledged the progress made with the new format and agreed that this was a more helpful way of presenting a large amount of related information.

Mrs McAuley expressed the view that the work to engage medical staff was critical. Mrs MacPherson agreed and confirmed that ensuring full engagement of medical staff was an ongoing area of work which was a challenge nationally as well as in NHSGGC and that the Chiefs of Medicine and Clinical Directors were actively supporting this discussion.

**NOTED**

26. **STAFF GOVERNANCE STANDARD: SCOTTISH GOVERNMENT NATIONAL ANNUAL MONITORING RETURN 2015/16**

The Head of People & Change – Organisational Effectiveness had circulated a copy of the NHSGGC Staff Governance Standard Scottish Government National Annual Monitoring Return 2015/16 (Paper 16/22) for approval by the Committee.

It was noted that the Scottish Government require a Staff Governance Monitoring return on an annual basis and provide a national template for completion and return by the end of May each year.

The NHSGGC return reflects progress/uploads from all Services and Partnerships within NHSGGC with the assurance that each of the local returns was completed in partnership with staff side.

Subject to the relevant approvals, the return will be signed by the Chair of the Staff Governance Committee, the Employee Director and the Chief Executive.

Ms Brown asked if some additional information/changes could be made before
she signed the return and this was agreed. 

APPROVED

27. **STAFF GOVERNANCE COMMITTEE ANNUAL REPORT TO NHS BOARD**

Mrs MacPherson confirmed that the Staff Governance Committee Annual Report would be brought to the September meeting for the Committee to review/approve. The report will reflect the broad range of work underway and will include contributions from key stakeholders.

**NOTED**

28. **WORKFORCE STATISTICS**

The Head of People & Change – Organisational Effectiveness had circulated the regular report on Workforce Statistics (Paper 16/23).

Mrs Lauder highlighted the slight reduction in bank and excess hours usage across the system and confirmed that attendance management was a continuing priority in the context of short and long term absence reduction.

Mr Sime noted that the Chairman has requested a consistent approach to the use of whole time equivalents, headcount and percentages when referring to employee numbers.

Mrs McAuley sought clarification on whether the equal opportunity recruitment figures included current employees applying internally. Mrs MacPherson confirmed that they did and also that all hiring managers in NHSGGC have an opportunity to access training on equalities in recruitment to support them in their responsibilities.

**NOTED**

29. **HEALTH AND SAFETY UPDATE**

The Head of Health and Safety had circulated a report which provided a Health and Safety update (Paper 16/24).

Mr Fleming asked the Committee to note four areas for particular consideration/approval: Governance arrangements in relation to the Board Health and Safety Forum; the Alcohol and Substance testing proposals; the Health and Safety and Mental Health and Wellbeing policies which were now ratified and available on StaffNet; and the Strategy and Action Planning event in January 2016 which supported development of the 2016-2019 Health and Safety Strategy and the 2016/17 Action Plan.

Mr Fleming then highlighted significant issues from the 2016-2019 strategy including the inclusion of patient safety considerations within all policy reviews; the permitting of e-cigarettes as part of the Smokefree Policy; and the addition of an agile working section.
Following a question from Mrs McAuley, Mr Fleming clarified that actions arising from the Health and Safety updates are agreed at the Board Health and Safety Forum, prior to review by the Staff Governance Committee.

Ms Brown thanked Mr Fleming for his report.

**NOTED**

30. **FACING THE FUTURE TOGETHER – UPDATE**


**NOTED**

31. **ORGANISATIONAL DEVELOPMENT STRATEGIC FORUM MINUTES**

A paper from the Director of Human Resources and Organisational Development (Paper 16/26) enclosing the Organisational Development Strategic Forum minutes of 26 January 2016, had been circulated for information.

**NOTED**

32. **REMUNERATION SUBCOMMITTEE MINUTES**

A paper from the Director of Human Resources and Organisational Development (RSC2015/02) enclosing the Remuneration Subcommittee minutes of 23 June 2015 was tabled at the meeting.

These were circulated, read and returned by Committee members.

**NOTED**

33. **DATE OF NEXT MEETING**

Tuesday 6th September 2016 at 1.00 pm, Board Room, JB Russell House, Gartnavel Royal Hospital.