

Staff Governance Committee Annual Report 2015-16

Recommendation:

The NHS Board is asked to note the Staff Governance Committee Annual Report for 2015-16.

1. Purpose of Paper

To update the Board on the progress and achievements of the Staff Governance Committee in the period 2015/16.

2. Key Issues to be considered

The Board is particularly asked to note the attached NHSGGC Staff Governance Workplan 2015-17 which presents all the workstreams which relate to the Staff Governance Standard in a comprehensive format which highlights linkages and interdependencies.

Any Patient Safety /Patient Experience Issues:- N/A

Any Financial Implications from this Paper:- N/A

Any Staffing Implications from this Paper:- N/A

Any Equality Implications from this Paper:- N/A

Any Health Inequalities Implications from this Paper:- N/A

**Has a Risk Assessment been carried out for this issue? If yes, please detail the outcome:-
N/A**

Highlight the Corporate Plan priorities to which your paper relates:- N/A

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Tel No: 0141 201 0781

Date: 6 December 2016

Dear Board Member,

Staff Governance Committee Annual Report 2015-16

We are pleased to present the annual report of the Staff Governance Committee for 2015-2016. The report contains an update on the activities, achievements and challenges within each element of the Standard, and sets out the priorities for 2016-17.

The Staff Governance Standard sets out what each NHS Scotland employer must achieve in order to ensure fair and effective management of staff.

The Staff Governance Committee of NHSGGC fulfils its role and remit by agreeing a series of actions with NHSGGC and the services within it and by monitoring performance on a continuous basis.

This year the Staff Governance Committee has particularly focused on:

- Ensuring that all NHSGGC services improve their performance in all aspects of the Staff Governance Standard through the establishment of measurable objectives/targets.
- Promoting and encouraging service engagement with the Staff Governance Committee through presentations from Directors and Heads of People & Change on a planned and regular basis.
- Streamlining and improving the reporting format of the Committee through the development of the Staff Governance workplan. This plan presents all the work streams in NHSGGC which relate to the Staff Governance Standard in a comprehensive format which highlights linkages and interdependencies.

Each year, NHSGGC submits a return to the Scottish Government Health Department which describes the achievements and challenges of the year. This year we were pleased to draw attention to:

- The consistent increase in the percentage of staff who feel they are kept well informed about what is going on in NHSGGC and receive effective communication from their manager (since 2010).
- The successful re launch of the Dignity at Work policy in 2015 which resulted in 98% of respondents to the staff survey, agreeing that the Board approach to this issue was working well or improving.
- The commitment and enthusiasm of NHSGGC to the roll out of the national staff engagement tool, iMatter. Board response rates are currently sitting at 61%.

However we do not underestimate the challenges ahead and remain committed to improvement particularly in the Involved in Decisions Standard which consistently emerges as an area for action in the staff survey and iMatter responses. As a result we are working on a number of recommendations which are detailed within the report.

We hope that you find this update helpful.

Ms M Brown (Joint Chair)

Mr D Sime (Joint Chair)

The Staff Governance Committee, the Clinical Governance Committee and the Audit Committee together form the governance framework for the Board.

1. The Staff Governance Committee

The role of this Committee is to support and maintain a culture within NHSGGC where the delivery of the highest possible standard of staff management is understood to be the responsibility of everyone working within NHSGGC and is built upon partnership and collaboration. It will ensure that robust arrangements to implement the Staff Governance Standard are in place and monitored.

2. Remit of the Committee

The Committee ensures that structures and policies are in place to provide assurance, in line with the Staff Governance Standards, that all staff are:

- Well informed;
- Appropriately trained and developed;
- Involved in decisions;
- Treated fairly and consistently, with dignity and respect, in an environment where diversity is valued; and,
- Provided with a continuously improving and safe working environment, promoting the health and wellbeing of staff, patients and the wider community.

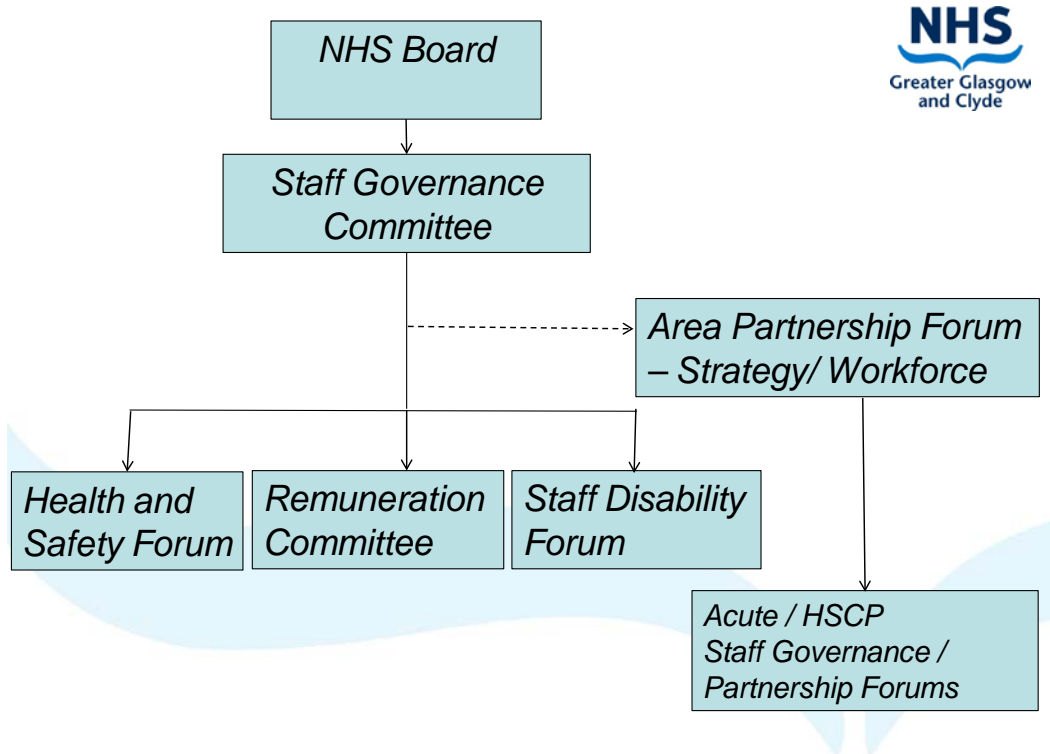
Each Health and Social Care Partnership and the Acute Division has its own staff governance arrangements and structure. Compliance with the standards is monitored through the development and delivery of local action plans and through an annual presentation from each area to the Staff Governance Committee.

In addition to the above, NHSGGC compliance with Staff Governance is monitored through a series of implementation plans & strategies, service presentations, policy review and regular NHSGGC Staff Governance work plan updates.

In addition, the Committee perform a governance function for the Board's Health and Safety Forum, the Boardwide Revalidation Group, Medical Staff Governance & Workforce Information Group, and any other standing or ad hoc groups as agreed by the NHS Board. This year the Committee has also agreed to provide governance and oversight of the NHSGGC Medical Education and Medical Revalidation Committee and will receive regular reports going forward.

Each year, all NHS Scotland Boards are required to provide information to the Scottish Government in relation to Staff Governance activity within the Board. The Committee approves the return prior to submission and it is signed by the Co-Chairs and by the Chief Executive.

The Remuneration Committee is also a Committee of Staff Governance and this committee oversees the remuneration arrangements for the Executive and Senior Management cohort of the NHS Board.



3. Membership and Conduct of Business

The Committee membership is appointed by the NHS Board and the remit includes providing advice to the Board on the conduct of its business within the Staff Governance Framework. The Committee meets a minimum of 4 times per year.

The Board nominates membership from the Non-Executive Directors of the NHS Board to include the Chair of the Board and the Employee Director. The Committee is co-chaired by the Employee Director and a Non-Executive Director appointed by the Board.

Members of the Area Partnership Forum (below) are ex-officio Members of the Committee (without voting rights):

- Director of Human Resources and Organisational Development
- Head of People & Change – Organisational Effectiveness
- Chief Officer (representing HSCPs)
- Chief Officer (representing Acute)
- Area Partnership Forum Staff Side Secretaries (2)
- Area Partnership Forum Acute Division Joint Trade Union representative
- Area Partnership Forum HSCPs Joint Trade Union representative

Other senior managers and trade union representatives are invited along to provide updates relevant to their service area, e.g. Head of Health & Safety, Head of Corporate Inequalities.

The full membership of the Committee can be viewed by clicking [HERE](#)

4. The NHSGGC Staff Governance Workplan

Following the appointment of the Director of Human Resources and Organisational Development, the Committee identified a significant number of work streams within NHSGGC which contributed to the achievement of the five elements of the Staff Governance Standard and it was agreed that an integrated Staff Governance workplan would be developed to summarise all workstreams in one document.

The workplan captures all the Staff Governance related activity currently underway within NHSGGC and cross references it to the appropriate strategy or plan. Activity is identified within each Staff Governance Standard, and the related Everyone Matters (2020 Workforce Vision) Implementation Framework values.

The NHSGGC Staff Governance Workplan incorporates the following Board strategies and reports:

- Facing the Future Together
- Everyone Matters: 2020 Workforce Vision
- PWC Audit Report: Dignity at Work
- NHS Scotland Staff Survey 2015
- The Workforce Equality Plan
- Disability Staff Forum

The workplan facilitates coherent performance monitoring and ensures that linkages and connections between related workstreams are quickly identified, enabling Staff Governance Committee members to identify challenges, and agree actions for improvement.

Organisational leads have been identified for each of the actions, and leads are required to provide regular progress updates for the workplan. Where current actions evolve or new actions are identified, these are reflected within the workplan.

An initial draft of the plan was reviewed by the Committee in December 2015, and approved. The most recent version of this is attached as Appendix 1.

5. Everyone Matters: Workforce 2020 Vision / Locally: Facing the Future Together

The workforce vision of the Scottish Government is to create a great place to work and deliver a higher quality healthcare service. Everyone who is

involved in health and care in Scotland needs to be valued, treated well and empowered to work to the best of their ability. In implementing the plan Boards are expected to engage with staff, stakeholders and partner organisations.

The NHSGGC Facing the Future Together and the value statements within it, support the 20/20 Workforce Vision and all activity in the Workplan is aligned with this strategy.

In December 2013 the Scottish Government launched the Everyone Matters (2020 Workforce Vision) Implementation Framework and Plan 2014/15 after a period of consultation with the NHS Scotland workforce.

Everyone Matters sets out the values that are shared across NHS Scotland and asks everyone who works here to live the values set out below:

- Care & Compassion
- Dignity & Respect
- Openness, Honesty & Responsibility
- Quality and Teamwork

Each year an implementation plan sets out the actions and plans which will be carried out locally and nationally and there were five priorities for action identified in 2014-15:

- Healthy Organisational Culture
- Sustainable Workforce
- Capable Workforce
- Integrated Workforce
- Effective Leadership & Management

In December 2015 the SGHD issued the 2020 Workforce Vision Implementation Plan 2016-17. The five priorities outlined in the original 2014/15 plan didn't change, however 2 further actions were identified for the Board in 2016/2017.

- identifying workforce actions to help tackle health inequalities across Scotland and;
- developing a workforce to deliver integrated health and social care services across NHS Boards, local authorities and third party providers.

NHSGGC will work with staff, stakeholders and staff side partners using the Board Strategic Organisational Development Group, the Staff Governance Committee and the Area Partnership Forum to ensure strategic focus and alignment with existing workstreams.

6. Service Presentations to the Staff Governance Committee

This year the Committee has received regular updates from all service areas, including Health and Social Care Partnerships. At each Committee meeting, two presentations are delivered, usually by the Director and Head of People & Change.

In 2015-16, the Staff Governance Committee was pleased to receive updates from the following service areas:

- Regional Services
- West Dunbartonshire HSCP
- East Renfrewshire HSCP
- Glasgow City HSCP
- Acute Services
- Facilities & Capital Planning
- East Dunbartonshire HSCP

The presentations enable service areas to provide assurance that the structures and processes are in place to meet the Staff Governance Standard. Achievements and challenges are highlighted, and an overview of Staff Governance structures and local workforce statistics are provided.

One major achievement has been progression with the establishment or refreshing of Staff Governance arrangements in both the Acute Sectors/Directorates and Health & Social Care Partnerships

A particular challenge identified across a number of service areas, was with the Staff Governance Standard, Involved in Decisions. As a result this Standard is the focus of ongoing work across NHSGGC.

Managing attendance and implementation of the Knowledge & Skill Framework has also been challenging in a number of areas, work continues with Heads of People & Change and staff side colleagues to monitor and improve performance in both areas.

7. Workforce Statistics

A report on NHSGGC Workforce Statistics is presented at each Staff Governance Committee. This enables the committee to monitor workforce performance and trends throughout the year. Generally the Committee will discuss an aspect of the statistics paper in some depth and seek further information on any areas of concern. This report has developed over the past year through a sub group of the Area Partnership Forum.

8. The Staff Governance Standards: Progress Towards Achievement

8.1 Well informed

Employers will ensure that:

- *All staff regularly receive accessible, accurate, consistent and timely information about their organisation.*
- *All staff have access to communication channels which offer the opportunity to give and receive feedback, either directly or via their trade union/professional organisation, on organisational and service delivery issues at all levels.*

- *All staff have access to a range of communication mechanisms. This will include IT systems and staff will be provided with appropriate training, and adaptation if appropriate, to use them.*

NHSGGC is committed to the Well Informed Standard and communicates with all staff through a broad range of mechanisms including Core Brief, Team Brief, Staff News and increasingly the use of Social Media. At local level Managers are supported and encouraged to supplement Board briefings with more local information and to actively seek feedback from staff.

Performance within this standard is monitored through the outcomes of the Staff Survey and from 2015 onwards the roll out of the iMatter Engagement tool.

NHS Scotland Staff Survey

The NHS Scotland Survey ran between August and September 2015. The response rate from NHSGGC has increased year on year between 2010 and 2015 and in 2015 a total of 11,844 NHSGGC staff responded to the Staff Survey (30%). This was 5% higher than in 2014. The national NHS Scotland response rate was 38%.

NHSGGC reviewed the outcomes from the survey at Board level and all Acute Directorates, HSCP's and service areas analysed their results to produce action plans which responded to the outcomes of the survey.

The principal actions/outcomes were:

- **Improvement in the approach to Dignity at Work**

Last year NHSGGC reviewed the approach and policy to improve Dignity at Work, focusing on a more positive workplace culture and dealing more quickly and appropriately with disrespectful behaviour. In 2015, 98% of respondents agreed that this approach is either 'working well' or 'improving'. This continues to be an area of focus for NHSGGC.

- **Quality of KSF/PDP meetings**

Only 42% of respondents said that the KSF/PDP&R process had helped improve how they do their job and 65% had agreed clear objectives though these reviews and meetings. As a result, improving the quality of the KSF/PDP&R is an important element of the KSF workplan within the Health and Social Care Partnerships and the Acute Division. A recent audit of quality was commissioned by the Acute Services Committee in order to provide assurance to the Committee.

- **Involved in Decisions – low response**

Low positive responses were received to the questions relating to the Involved in Decisions Standards. To improve this position a short life working group was established in the Acute Division and this group has

developed recommendations for implementation in NHSGGC which should help and support services to meet this standard. During the Staff Governance Committee presentations, we have also received a number of presentations providing detail of their good work to increase and develop staff involvement in decision making.

- **Staff Engagement – low response**

There continues to be a low positive response from staff when asked if they have been able to play a part in improvements within the workplace. During 2015 to 2017, the iMatter continuous improvement model will be rolled out in all Directorates and Partnerships, in NHSGGC. iMatter promotes staff involvement and engagement both in providing feedback and agreeing team action plans. To date iMatter response rates stand at 61% which is a positive indication that employees are willing to engage with iMatter. All Directorates are required to roll out imatters in line with the agreed timetable.

- **NHSGCC value statements – low response when asked if NHSGCC values are being upheld in practice**

Disappointingly NHSGGC staff response rates indicated that staff do not believe that organisational values are always reflected in practice within work areas and services. This is being reviewed through FTFT.

- **Engagement of Medical and Dental staff**

Work is also underway to improve the engagement of this staff group and involvement of Medical and Dental staff with the Staff Survey and iMatter. Locally and nationally Medical & Dental staff continue to be the staff group with the lowest response rate. This has been the same since the inception of the Staff Survey and is an area of continuing focus for NHSGGC and NHS Scotland.

- **Alignment of Staff Survey and iMatter**

Within the Staff Survey, two questions asked were also asked within the national iMatter questionnaire:

- I have confidence and trust in my direct line manager
- I feel senior managers responsible for the wider organisation are sufficiently visible

The iMatter steering group will continue to review and monitor the responses to those questions through iMatter, comparing them with the response rates from the Staff Survey.

NHSGGC Lead(s): Head of People & Change – Organisational Effectiveness; Head of OD – FTFT; Staff Governance Co-ordinator

8.2 Appropriately trained and developed

Employers will ensure that:

- *All staff have a regular, effective Personal Development Plan (PDP) and review discussion, in order to appraise past performance and identify any necessary learning and development opportunities.*
- *There is a workforce learning and development strategy in place which has been developed in partnership, includes mandatory training, reflects the outcomes of PDP discussions, and identifies actions for implementation, monitoring and evaluation. This strategy should be reviewed and updated regularly.*
- *All staff should have equity of access to training, irrespective of working arrangements or profession, and without discrimination on any other grounds.*
- *Resources, including time and funding, are appropriately allocated to meet local training and development needs taking into account the current priorities of both the service and service users.*

8.2.1 The Knowledge and Skills Framework

The KSF is a critical means of ensuring that every member of staff has an opportunity to discuss their development needs with their line manager on an annual basis. We continue to focus on achieving the KSF target of 80% of staff having a PDP&R in place and, at the end of March 2016, the NHSGGC figure was 65%. A comprehensive workplan is in place to support services to meet the target and deliver high quality KSF PDP&R's to all employees.

To facilitate a greater focus on the quality of the KSF process, a KSF Workplan has been developed and is being implemented through the KSF Leads Network. The KSF Workplan is supported by Staff Side representatives and progress is reported at the APF and local Partnership Forums as well as the Staff Governance Committee.

NHSGGC Lead(s): Head of People & Change – Organisational Effectiveness; Learning & Education Manager; Learning & e-Support Manager

8.2.2 Learning & Education Activities

The main priority in the Learning & Education plan for 2015/16 was to support the move of services to the new Queen Elizabeth University Hospitals campus. In addition L&E had to ensure the continued delivery of core programmes, such as mandatory and statutory training .

In this context, the key outcomes for 2015-16 were:

- Delivery of large scale orientation programmes and materials to all staff moving to the new hospitals and office block at QEUH campus
- Provision of interview skills support to staff displaced in Board service redesign projects – On the Move and Partnerships

- Development of staffing and booking/ space utilisation systems at the new Teaching and Learning Centre QEUH campus in partnership with University of Glasgow colleagues
- HR and OD Review work streams, contribution to activities in - the development of HR Connect, People Management Programme, Support and Advice structure, Service Standards and Directory
- Review of Learning and Education calendar activity refreshing content, format to meet service needs

During 2016-17, the focus for Learning & education teams, alongside 'business as usual' activity will be:

- Providing Learning & Education which supports the Care Assurance System and the delivery of person centred care.
- Continued work to improve KSF compliance and the quality of the KSF/PDP&R.
- Contribute to the Young Peoples Agenda through the provision of work experience and Modern Apprenticeships.

NHSGGC Lead(s): Head of People & Change – Organisational Effectiveness; Learning & Education Manager; Learning & e-Support Manager

8.3 Involved in Decisions

Employers will ensure that:

- *Staff are engaged and involved in decisions that affect them with the opportunity to influence such decisions.*
- *Staff are engaged and involved in strategic developments.*
- *Partnership working is embedded and mainstreamed within each NHS Board.*
- *Partnership Forums are in place in all Boards to reflect local structures.*
- *Service development and organisational changes are planned and implemented in partnership, and with effective staff engagement.*
- *A comprehensive workforce plan, based on these developments and changes, is developed in partnership.*

NHSGGC has a comprehensive workplan in place designed to ensure that all our employees feel involved in decisions that affect them and the opportunity to influence such decisions. As well as the communication mechanisms already outlined in the Well Informed Standard there are a number of working groups and projects within this element of the Staff Governance Workplan. The questions relating to this standard have always received a lower positive response rate both nationally and at Board level.

NHSGGC is committed to a formal Partnership model of engagement with trade unions and professional organisations. There is a comprehensive and well established structure in place to ensure continuous communication and consultation with staff side representatives. The main group is the NHSGGC Area Partnership Forum, where senior management

and staff representatives meet on a monthly basis to discuss strategy and workforce issues.

The Area Partnership Forum is supported by similarly constituted groups at local and service level who meet to consider issues of Board and local relevance. All policies relating to staff are developed and signed off in partnership using a formal and agreed process.

The Area Partnership Forum and staff side of NHSGGC are particularly focused on the Involved in Decisions standard and are working with Directors, managers and their teams in a number of ways to achieve improvements in application of this standard.

8.3.1 Involved in Decisions Short Life Working Group in Acute Services

This partnership group has just finished reviewing the outcomes of the Staff Survey and iMatter in order to identify actions for improvement which could be shared with other areas of NHSGGC. As well as creating a set of principles to promote and encourage the standard in everyday practice, the Community Engagement Team has completed an audit to measure the efficacy of current communication and engagement tools. The results from this survey are encouraging showing a high level of engagement with current methods of communication in NHSGGC.

A summary of the findings, reflections from group discussions and actions arising from the iMatter report will be reviewed to produce an Action Plan. This plan and the principles which underpin it will be discussed at the next Acute Partnership Forum and thereafter the Area Partnership Forum and Staff Governance Committee.

8.3.2 iMatter

iMatter continues to be rolled out successfully in NHSGGC, with 18 teams/Directorates having completed an initial run of the continuous improvement tool.

A critical success factors paper was developed based on learning from HSCPs / Directorates who have completed the iMatter process. This paper is circulated and discussed in details at the Director meetings, which take place at an early stage to ensure resources are identified and preparation begins as soon as possible.

Directorates continue to be encouraged to send a representative to the iMatter steering group, to share experiences, learn from those teams already underway with iMatter, ask questions and hear more about the planning and implementation of iMatter. The National iMatter lead attends the steering group, providing National input to discussions and support, as required.

Action plan completion rates vary across Directorates, and evidence suggests that engagement with the action planning process encourages further staff engagement in the anniversary run of iMatter.

Current response rates across NHSGGC continue to be encouraging, with the average Board response rate sitting at 61%. Regular updates are provided to the Staff Governance Committee, to provide an overview of iMatter activity.

NHSGGC Leads: Head of People & Change – Organisational Effectiveness; Head of OD – FTFT; Staff Governance Co-ordinator

8.4 Treated fairly and consistently, with dignity and respect, in an environment where diversity is valued

Employers will ensure that:

- *The Staff Governance Standard is embedded at all levels of the organisation and across all staff groups to ensure consistency of approach from all managers towards their staff.*
- *Workforce policies exist which meet or exceed the minimum standards set out within national PIN Policies and current legislation. Where policies are developed locally, this must be undertaken in partnership.*
- *Workforce policies must be implemented fairly and consistently. They must be monitored and evaluated and subject to regular review to ensure their ongoing fitness for purpose.*
- *Staff have security of employment where a contractual relationship exists and experience no detriment through any organisational change policy.*
- *Pay and terms and conditions for all staff are applied fairly and equitably (including Agenda for Change, Medical and Dental and Executive & Senior Manager pay).*
- *A clear strategy and supporting policies are in place for the effective management of the workforce equality, diversity, human rights and dignity at work agendas.*
- *They identify and embed a core set of values and behaviours which are expected of all staff at every level, so as to ensure that staff are treated, and treat others, fairly, professionally and with dignity and respect.*
- *All staff are and feel valued as individuals, have trust placed in their ability and capability and are appreciated for their effort and contribution.*
- *The work environment and culture encourages individuals to treat each other with respect.*
- *NHSGGC promotes and encourages a culture which values every employees contribution and ensures that each individual is treated with dignity and respect.*

8.4.1 Dignity at Work audit

In mid-2014, an audit was conducted by the Boards internal auditor, PwC, to provide qualitative information on the effectiveness of the Dignity at Work policy and approach in NHSGGC.

The audit explored the effectiveness of the Staff Survey process as well as providing a baseline of information about staff views on Dignity at Work prior to the refreshed Dignity at Work Policy launch in September 2014.

The audit also tested for awareness and views about the Facing the Future Together (FTFT) programme.

Key Messages from the audit:

- The audit identified areas of strength as well as areas for management to consider and improve.
- Staff Survey Communications were found to be inconsistent across the system.
- A strong supportive culture exists amongst peers but there is less confidence about support and respect from managers.
- Concerns were raised about the Grievance Process being protracted and not good at dealing with disrespectful behaviour at an early point.
- Senior Managers support the rationale and benefits of FTFT but its impact with front line staff is variable.
- There appears to be a disconnect between what management believe is happening and the reality on the ground in respect of the implementation of the Dignity at Work Policy.

Actions from the Audit as well as the planning, communications and resulting actions for Staff Surveys have been incorporated in the NHSGGC Staff Governance Workplan.

NHSGGC Lead(s): Head of OD – FTFT

8.4.2 Workforce Equality Plan

The Workforce Equality Plan accompanies NHSGGC's equality scheme- A Fairer NHSGGC: Meeting the Requirements of Equality Legislation 2016-2020. The plan covers the following priority actions:

- Collect, analyse and produce a range of workforce equality metrics on existing workforce;
- Ensure all staff are treated fairly and consistently as part of the Staff Governance Standards;
- Continue to build and develop the Equality and Diversity Learning and Education Plan to reduce discrimination in the workplace;
- Culture Change;
- Recruitment and retention of a diverse workforce;

- Prepare a Disability Improvement Plan to support the 2 tick award for Disability for NHSGG&C in 2016 and thereafter.

A Workforce Equality Group supports the implementation of the plan and includes Human Resources and Corporate Inequalities Team members.

The Staff Disability Forum was formed to help make positive changes in the workplace and provide a support network for staff with a disability. In addition, the Forum seeks to promote equality and protect staff with a disability against discrimination.

By February 2014, the Staff Disability Forum had established terms of reference, held meetings and roadshows and as a result identified a number of issues including:

- inconsistency in support for staff with a disability,
- barriers to the application of reasonable adjustments,
- staff being reluctant to declare disabilities, and
- inappropriate redeployment.

The Forum continues to be supported by the Workforce Equality Group and other relevant officers, to identify issues and concerns across NHSGGC. NHSGGC also has an online LGBT Forum and is considering other staff engagement with equality groups in 2017.

NHSGGC Lead(s): Director of Human Resources & Organisational Development; Head of Inequalities, Corporate Planning and Policy.

8.5 Provided with a continuously improving and safe working environment, promoting the health and wellbeing of staff, patients and the wider community

Employers will ensure that:

- *The personal health, safety and wellbeing of patients and staff should be paramount in the design and operation of services.*
- *There are appropriate monitoring and audit arrangements in place and appropriate risk assessment and management arrangements are also in place.*
- *They proactively inform and support staff to manage and maintain their health, and to manage ill health.*
- *They ensure that it is safe and acceptable for staff to speak up about wrongdoing or malpractice within their organisation, particularly in relation to patient safety.*
- *They continue to work to attain Healthy Working Lives (HWL) awards for all acute services, working towards the Gold Award and attainment of the HWL Mental Health Commendation Award as set out in CEL 01(2012).*
- *All staff have equal access to comprehensive, confidential and high quality occupational health and safety advice services as a means of improving the health and wellbeing of staff and promoting attendance.*
- *Resources, including time and funding, are appropriately allocated to implement the Occupational Health and Safety Strategic Framework at local level.*

8.5.1 Health & Safety Forum update

The Head of Health & Safety provides regular updates to the Committee on Health & Safety Forum activity. The most recent update to the Committee includes an annual health and safety activity report, which includes a number of health and safety related indicators. These provide an overview of health and safety performance across the organisation.

Key areas of organisational risk such as Health and Safety Executive Activity, Incident reporting performance, health and safety training and Violence and Aggression are covered in the report. The issue of mental health and stress was also reviewed, being one of the key aspects of the Staff Health Action Plan.

The organisation was recently involved in an NHS Scotland benchmarking exercise which indicated that NHS GGC was well within the parameter ranges for all incident categories. This specifically included RIDDOR reportable injuries and violence and aggression incidents which are reported within this document.

It should be noted that although a number of the performance measures are incident related, there are also performance measures of key health and safety related topics including a range of health and safety related training and stress risk assessments. These measures indicate the positive aspects of health and safety management and demonstrate that the organisation is implementing a range of health and safety measures as part of the overall risk management strategy.

The current NHS GGC Health & Safety policy document details objectives including the development of a 3 year strategy document. The organisational arrangements regarding responsibilities for health and safety management including responsibilities of Directors, managers, employees, specialist advisory services and others, such as contractors, is also detailed. The policy also identifies 16 Key Performance Areas and the associated monitoring arrangements.

The report demonstrates progress regarding the organisations compliance and performance related to the Health and Safety Policy, which is a legal requirement. The report also reflects performance in relation to legislative compliance and demonstrates a general decrease in the more severe types of incidents recorded to the Health and Safety Executive, which is indicative of an improving health and safety culture across the organisation.

Key activity arising from the recently agreed 2016-2019 Health & Safety Strategy, will be incorporated and monitored through the NHS GGC Staff Governance workplan.

The Health and Safety Strategy 2016/19 and Action Plan 2016/17 can be accessed by clicking [HERE](#)

*NHSGGC Lead(s): Director of Human Resources and Organisational Development;
Head of Health & Safety*

8.5.2 Staff Health Strategy

A draft Staff Health Strategy Outline and Action Plan has been produced to support the updated Staff Health Strategy(SHS) for 2016-2019. The SHS Outline highlights the overarching aim, strategic priorities and strategic programmes, with more detail being provided within the Action Plan. The Outline and Action Plan have been developed by the Staff Health Governance Group in partnership with stakeholders from HSCPs, Health Improvement, Human Resources, Staff-side, Public Health and Healthy Working Lives.

The Staff Health Strategy 2016-19 will be agreed and finalised in the coming months and will be brought to the Staff Governance Committee in due course.

NHSGGC Lead(s): Director of Human Resources and Organisational Development

9. **Staff Governance Committee Achievements**

The Staff Governance Committee has been productive over 2015/16 and has made good progress in promoting and supporting the implementation of the Staff Governance standard across NHSGGC. In particular the Committee has:

- *Reviewed the focus on Performance Management with a particular emphasis on the provision of accurate workforce statistics/data which helps inform decision making*
- *Highlighted and agreed actions on aspects of the equality data which have given cause for concern e.g. recruitment of applicants declaring a disability.*
- *Completed a comprehensive Annual return for 2015/16 to the Scottish Government which showcases Board and local good practice.*
- *Developed a new and integrated format for the Staff Governance Action Plan which shows progress with all aspects of the Staff Governance standards in one document.*
- *Incorporated the governance framework for Medical Education and Revalidation within the Staff Governance Committee role and remit.*
- *Championed the relaunch of the Dignity at Work policy working in partnership with staff side to promote the refreshed policy*

10. **Staff Governance Committee Future Priorities**

The Staff Governance Committee will continue to monitor the performance of the organisation in meeting the Staff Governance Standard through the integrated Workplan. In 2016/17 NHSGGC will particularly focus on the following priorities:

- identifying workforce actions to help tackle health inequalities across Scotland;
- developing a workforce to deliver integrated health and social care services across NHS Boards, local authorities and third party providers;

- working with local services to identify and address common themes and actions arising from the Staff Survey and iMatter response rates;
- planning for future Healthcare reform, and ensuring that all NHSGGC employees are engaged and included in the decisions that affect them.

The Committee has welcomed the opportunity to explore key workforce issues, supported by Human Resources and Organisational Development and the Area Partnership Forum, and champion initiatives to improve staff experience.

Lyndsay Lauder, Head of People & Change – Organisational Effectiveness
Diana Hudson, Staff Governance Co-ordinator

References & Links:

1. Everyone Matters: 2020 Workforce Vision

<http://www.staffgovernance.scot.nhs.uk/improving-employee-experience/2020-workforce-vision/>

2. iMatter Continuous Improvement model

<http://www.staffgovernance.scot.nhs.uk/monitoring-employee-experience/imatter/>

3. Workforce Plan

<http://www.nhsggc.org.uk/working-with-us/hr-connect/workforce-planning-and-information/workforce-planning/nhsggc-workforce-plan-201516/>

4. Staff Governance Standard

<http://www.staffgovernance.scot.nhs.uk/what-is-staff-governance/staff-governance-standard/>

5. HR Connect

<http://www.nhsggc.org.uk/working-with-us/hr-connect/>

6. Scottish Terms and Conditions Committee

<http://www.stac.scot.nhs.uk/>

7. Scottish Workforce and Staff Governance Committee

<http://www.staffgovernance.scot.nhs.uk/partnership/groups-and-committees/scottish-workforce-staff-governance-swag-committee-agenda-and-minutes/>

8. Staff Governance Committee Minutes 2015/16

http://www.staffnet.ggc.scot.nhs.uk/Human%20Resources/Staff%20Governance/Pages/sg_staffgovctteeminutes_gh_061107.aspx

NHS GGC STAFF GOVERNANCE WORKPLAN

2015 – 2017

Incorporating actions from: Facing the Future Together, Everyone Matters : 2020 Workforce Vision, the PWC Audit Report: Dignity at Work, the Staff Governance Standards, the NHS Scotland Staff Survey 2015, Workforce Equality and Disability Staff Forum

Appendix 1: NHS Everyone Matters : 2020 Workforce Vision – NHS GGC Action plan 2015/16

Appendix 2: NHS Everyone Matters : 2020 Workforce Vision – NHS GGC Action plan 2016/17

Appendix 3: iMatter Update – October 2016

1. Well Informed

Action		Timescale	Lead (s)	2020 Workforce Vision Priority	Update : November 2016
1.1	<p>Analyse the 2015 NHS Staff Survey outcomes to identify Board and Local themes/issues for action.</p> <p>In order to identify and generate an action plan to tackle service specific improvements, Directors will review their individual results, discussing and monitoring these through local Partnership Forums, and other appropriate fora.</p> <p>Ensure these are comprehensively communicated and fed back to all employees along with action plans to respond.</p>	March 2016	<p>Chief Officers and Directors</p> <p>Staff Governance Co-ordinator</p>	Healthy Organisational Culture	<p>A summary paper, outlining the key findings from the NHS Staff Survey, was circulated to Heads of People & Change and to key committees, in January 2016.</p> <p>Local teams have analysed their Staff Survey results and incorporated them into their local Staff Governance action plans.</p> <p>Progress continues to be reported through existing partnership and staff governance structures at local and Board level.</p>
1.2	<p>Develop an effective plan for the roll out of the 2016 Staff Survey, ensuring early communication & promotion of the survey, accurate email addresses provided and robust communication with all staff throughout the survey.</p>	August 2017 (TBC)	Staff Governance Co-ordinator	Healthy Organisational Culture	<p>NHS Staff Survey is paused for 2016, to allow more focus on iMatter implementation. This action will roll over to NHS Staff Survey 2017, if required.</p>
1.3	<p>Develop the HR/OD performance matrix to facilitate wider organisational access and understanding of key workforce metrics (including equality and diversity information where possible), working in partnership with staff side through the Workforce Statistics Working Group.</p>	March 2016	<p>Depute Director of Human Resources and Organisational Development</p> <p>Workforce Planning & Analytics Manager</p>	Capable Workforce	<p>Workforce performance data is now accessible through the Board's business intelligence platform, MicroStrategy. This provides performance data down to Ward-level, for</p>

					the last 2 years. E-KSF and PDP are also now available and a bank usage dashboard is in testing.
1.4	Develop an iMatter StaffNet page, located within FTFT, to show provide information and show actions relating to the implementation of iMatter, the continuous improvement tool, ensuring staff are kept up to date with developments.	March 2016	Head of Organisational Development - FTFT	Healthy Organisational Culture	Completed. Further development is planned once information and best practice has been pulled together to share on the page. Further information is available on HR Connect, and updated regularly as implementation progresses.
1.5	Review the Equality & Diversity data provided to the Staff Governance Committee and Area Partnership Forum, ensuring it provides appropriate information relating to changes in the equality demographic of the workforce and any potential risks in relation to the Equality Act 2010.	October 2016	Head of People & Change – Organisational Effectiveness	Sustainable Workforce	Workforce statistics information is provided at every Staff Governance Committee and quarterly to the Area Partnership Forum. Issues for further action arise from discussion and are progressed as required.

2. Appropriately Trained and Developed

Action		Timescale	Lead (s)	2020 Workforce Vision Priority	Update : November 2016
2.1	Continue to support training on equality and diversity in response to unmet needs or gaps in services (e.g. tackling behaviours / stereotypes; 2-tick disability etc)	September 2016	NHS GGC Learning & Education Manager Senior Learning & Education Adviser Planning & Development Manager (Corporate Services) HR Advice & Support Unit Manager	Capable Workforce	Gaps identified through EQIA's, complaints and feedback from HR Advice and Support unit, continue to be reviewed at 6 monthly intervals and approaches for addressing the gaps agreed.
2.2	Develop, implement and monitor the NHS GGC induction programme and process for all new staff, identifying gaps and refreshing content on a continuous basis so that the induction remains fresh and fit for purpose.	September 2016 & ongoing thereafter	NHS GGC Learning & Education Manager	Capable Workforce	Compliance with the NHS GGC induction standards states that all new employees should have received an induction within 3 months of starting. This is monitored on a monthly basis and reported in the HR&OD performance matrix and at Organisational Performance reviews.
2.3	Embed and mainstream the KSF PDP&R process within NHS GGC, ensuring an organisational culture which places personal development at the centre of training and education. Support the Directorates and HSCPs to meet the 80% KSF PDP&R target.	September 2016 & ongoing thereafter	Learning and e-Support Manager	Capable Workforce	Board compliance was 59% at the end of September 2016. A comprehensive workplan is in place to support services to meet the target

					<p>and deliver high quality KSF PDRs to all employees.</p> <p>To facilitate a greater focus on the quality of the KSF process a series of audits have been planned within Acute Services. Outcomes from the audits will inform further actions to improve quality.</p>
2.4	Rollout the Healthcare Support Workers Code of Conduct to existing staff ensuring that all support staff who are affected, understand the Code of Conduct and can put the code into practice in their working lives.	December 2017	NHS GGC Learning & Education Manager	Capable Workforce	<p>All services have been provided with lists of staff who are HCSW staff within the definition of CEL 23 (2010)</p> <p>Roll out implementation plans are underway and will be completed by end of December 2017.</p>
2.5	Continue to deliver SOAR and OLPM for Medical staff and Senior Managers and Executives respectively, to effectively provide a robust system for recording and monitoring the performance of senior staff in NHS GGC.	March 2017 & ongoing thereafter	Medical Staffing team Chiefs of Medicine	Effective Leadership and Management	Both performance systems are fully operation and implementation is in line with agreed timescales and targets.
2.6	Manage the application of the Aston Development Journey for Directorate senior teams as a key element of the organisational review.	December 2016	Heads of Organisational Development	Effective Leadership and Management	All Chief Officers and Directors are now facilitating their team through the Aston Team Journey (~6 months) supported by an Aston Coach and are now embedding this approach into their ways of working by the end of 2016.

3. Involved in Decisions

Action		Timescale	Lead (s)	2020 Workforce Vision Priority	Update : November 2016
3.1	Fully implement iMatter throughout NHS GGC, including Partnerships, ensuring engagement and consultation with employees and staff side throughout the process.	December 2017	Head of Organisational Development - FTFT	Healthy Organisational Culture	As at October 2016, iMatter has been rolled out to 21 Directorates, and continues to generate promising response rates, although performance is variable in each area. Six directorates remain to implement in the next 12 months.
3.2	Through the Involved in Decisions short life working group (Acute), develop and implement actions to increase staff engagement across Acute Directorates and share learning with the wider Board.	September 2016	Head of People & Change – Organisational Effectiveness Director, North Sector	Healthy Organisational Culture	The Short Life Working Group has met 4 times and has developed guiding principles and an action plan for all services, to support further engagement and involvement of staff. This will help to focus local efforts. These outcomes were reviewed at the November 2016 meeting of the Acute Partnership Forum.
3.3	Develop and agree a plan that will improve the engagement and involvement of medics with the Staff Survey and iMatter.	May 2016	Head of Organisational Development - FTFT Medical Director	Healthy Organisational Culture	This is recognised as a national issue as well as at Board level and has been identified as one of the priority areas of focus for the National OD Leads Group. Learning from this

					group will be shared and implemented over next 12 months.
3.4	Continue to engage staff who do not have regular PC access, through promoting the use of PCs within Libraries, using generic logins, to ensure they have the opportunity to be involved in staff engagement campaigns such as Staff Survey and iMatter.	Ongoing – Complete by December 2017	Head of Organisational Development - FTFT	Healthy Organisational Culture	Installation of additional Staff PCs was delayed due to renovation in two of the main sites. Roll out commenced in September 2016.

4. Treated Fairly and Consistently, with Dignity and Respect, in an Environment where Diversity is Valued

Action		Timescale	Lead (s)	2020 Workforce Vision Priority	Update : November 2016
4.1	Develop a Disability Improvement Plan to support the organisations' commitment to the Double tick standard and Release the Potential Campaign. Continue to raise awareness with line managers across the organisation, at, and beyond the recruitment process.	Review in September 2016	Head of Corporate Inequalities team Head of People & Change – Support Services Disability Staff Forum Members	Capable Workforce	HR have met with relevant officers and representatives from the Disability Staff Forum (DSF) and developed actions on the Double Tick Standard (changing to Disability Confident in 2016). A guide for managers is being drafted with input from the DSF and will be available in October 2016. A fuller report on this work was presented at the Staff Governance Committee on the 6 th September, 2016.
4.2	Deliver actions to increase the number of younger people in the workforce (including young people from equality groups) and support the recruitment of people with additional barriers or from equality groups.	August 2016	Head of People & Change – Organisational Effectiveness Directors Head of Recruitment HR Employability Group Employment and Health Strategic Group	Sustainable Workforce	NHS GGC has a Youth Employment and Strategic Education Plan outlines 3 specific areas of work: <ul style="list-style-type: none"> Revised and improved activity to increase awareness of NHS careers and pathways into these Development of new pathways into employment linked to suitable vacancies

					<ul style="list-style-type: none"> • Expansion of the Modern Apprenticeship Programme <p>Key developments in 2016 include:</p> <ol style="list-style-type: none"> 1. NHS Careers Insight Work Experience Programme 2. Youth Employment information pages on website 3. Support for development of NHS Scotland careers website 4. Implementation of two new models (pilot stage) of pre-employment programmes linked to B2 vacancies (Renfrewshire Certificate of Work Readiness with West College Scotland and the Prince's Trust Get Into Healthcare programme) 5. Development of Cohort 3 intake for MA programme which will see an additional 75 new apprentice appointments by July 2017 6. Increase in employees aged 16-24 from 3.8 (April 2015) to 4.5%
4.3	Measure the impact of the Dignity at Work Policy (e.g. how widely the policy is used, is there a reduction in the number of grievances raised, is there an increase in situations which	June 2016	Head of People & Change – Organisational Effectiveness	Healthy Organisational Culture	Within HR&OD we are continuing to monitor the number of grievances related to the Dignity at Work Policy. At present data

	are resolved informally)		Staff Governance Co-ordinator Heads of People & Change		indicates that the situation remains stable, however we will continue to monitor through the case management system to identify trends.
4.4	Increase staff confidence in reporting disrespectful behaviour within the organisation (from staff at all levels)	October 2016	Heads of People & Change	Healthy Organisational Culture	Table talkers have been developed and distributed to all NHS GGC meeting rooms and staff restaurants to raise the profile of the values and the importance of treating each other with respect.
4.5	Prepare to review and publish an Equal Pay statement on men and women	March 2017	Head of People & Change -Organisational Effectiveness Head of Payroll Services Workforce Information and Analytics Staff Governance Coordinator	Healthy Organisational Culture	This work is underway and will be completed by March 2017. A meeting took place at the end of October 2016 to review the current position and action required to progress development of the statement in 2017.
4.6	Through the Dignity at Work Policy, support staff to identify, report and challenge hate crime.	December 2016	Head of Health & Safety Head of Organisational Development – FTFT Planning & Development Manager (Corporate Services)	Healthy Organisational Culture	NHSGG&C has published Hate Crime Guidance for staff and alongside this, an e-learning module has been developed in partnership with Glasgow community Services. This is currently being tested via LearnPro online L&E facility. Hate Crime monitoring continues through our DATIX

					<p>reporting system and intelligence is fed back to the City-wide Hate Crime Working Group (multi-partner).</p> <p>NHSGGC continues to work in partnership with Police Scotland to deliver Hate Crime awareness and reporting training (quarterly).</p> <p>Corporate Communications developed a staff and public facing campaign to promote disclosure and reporting of Hate Crime in readiness of Hate Crime Awareness Week in October 2016.</p>
4.7	Revise the mediation framework to improve access to trained internal mediators who aim to resolve conflict within working relationships, and measure its impact.	June 2016	Head of People & Change – Organisational Effectiveness	Healthy Organisational Culture	<p>The mediation framework has been revised and is awaiting approval by the Area Partnership Forum. Mediation training, both new and refresher will be available to existing and new mediators in August 2016.</p>

5. Provided with a Continuously Improving and Safe Working Environment, Promoting the Health and Wellbeing of Staff, Patients and the Wider Community

Action		Timescale	Lead (s)	2020 Workforce Vision Priority	Update : November 2016
5.1	Fully implement recommendations from the Working Longer Review around occupational health, safety and wellbeing and that flexible approaches are taken.	March 2016	Director of Human Resources and Organisational Development Head of Occupational Health Services	Capable Workforce	The Staff Health Strategy Group are now prioritising the work. Initial data collection has commenced and this is currently being analysed.
5.2	Work with partners toward the Health and Wellbeing Outcomes, developing a shared culture, values and ways of working through effective teams and local partnerships.	October 2016	Partnership & Acute Directors	Integrated Workforce	FTFT and Staff Governance are integrated into local action plans. Aston Team Development has been in place since summer 2015.
5.3	Develop a mechanism within FTFT online to enable staff to feedback about their own experiences of NHS GGC care and services, to support further improvements.	June 2016	Head of Organisational Development - FTFT	Healthy Organisational Culture	A 'data amnesty' commenced in September 2016 which aims to considerably improve the accuracy of the information that staff themselves need to keep updated on our Active Directory and Global Address list. This will enable the Staff Feedback on Care system to be implemented.
5.4	Gather feedback on reasons for leaving through the exit process, ensuring that actions are taken from this learning to continually improve the working environment.	December 2016	Head of Organisational Development - FTFT	Healthy Organisational Culture	This facility is currently available through StaffNet but requires to be integrated into the HRConnect system as part of a manager

					guideline for employee exit process. This will aim to improve the level of uptake of the online questionnaire.
5.5	Promote the Health and Wellbeing of our Staff with the continuation of participation in the Healthy Working Lives Award Scheme	March 2017	Head of Occupational Health Services	Capable Workforce	The Acute Employee Health & Wellbeing group continues to meet to ensure maintenance of the Gold level award. Re-registration proposal sent to Directors and registration is now being resubmitted
5.6	Develop and support the creation of a staff health work plan for NHS GGC staff. Within this, refresh the management of stress guidance.	September 2016	Director of Human Resources and Organisational Development Head of Occupational Health Head of Health and Safety	Capable Workforce	<p>The Staff Health Strategy Governance Group meets on a quarterly basis.</p> <p>The Staff Health Action Plan has now been drafted and includes a range of topics including Mental Health and Wellbeing, Physical Health, Health Screening and Immunisation.</p> <p>Specifically in relation to stress management, a Stress Action Framework has been devised by a stress sub-group of the Staff Health Strategy Group.</p> <p>One of the key outcomes is to identify current 'hotspots'. This has been undertaken through the</p>

					<p>Heads of People & Change with the aim to identify and deal with issues promptly. 'Stress in the healthcare' training courses were arranged for staff in September 2016. The identification of hotspots has allowed the training to be targeted to those staff who will benefit most from such training. A key feature of the training is about understanding personal coping strategies, which previous staff attending these courses have found extremely beneficial.</p>
5.7	<p>Ensure NHSGGC has a process in place to monitor the implementation of reasonable adjustments, and to develop guidance for managers on making reasonable adjustments.</p>	<p>September 2016</p>	<p>Head of Occupational Health</p> <p>Head of Corporate Inequalities</p> <p>Workforce Planning & Analytics Manager</p>	<p>Healthy Organisational Culture</p>	<p>Funding has been allocated to support creation of guidance for line managers on making reasonable adjustments, and work is now underway with this.</p>

EVERYONE MATTERS
2020 WORKFORCE VISION
NHSGGC ACTION PLAN 2015/16

PRIORITY #1 Healthy organisational culture – creating a healthy organisational culture in which our NHSScotland values are embedded in everything we do, enabling a healthy, engaged and empowered workforce. **The focus this year is on ensuring behaviours consistently live up to expectations.**

Scottish Government and others will:

- Provide organisational development support and tools to NHS Scotland Boards

NHS Boards will:

- Promote and recognise the behaviours of individuals and teams at all levels which reflect our values.

PRIORITY	ACTION	LEAD(s)	UPDATE
Healthy Organisational Culture			
Promote and recognise the behaviours of individuals and teams at all levels which reflect our values.	Organisation Review – New Sen. Mgt. Team Development focus on values.	A. MacPherson	Sen. Team Development Programme now underway with AstonOD. Each Director is now facilitating their team through the Aston Team Journey (~6 months) supported by an Aston Coach.
	Measure impact of DAW Policy	Heads of People & Change	Awareness of the DAW policy was been further raised as part of FTFT Digest and also prioritised with the Heads of People & Change. Review of impact will include checking for reduction in Grievances.
	Implement action plan from 2015 Staff Survey results	APF Staff Survey Group	The results of the 2015 staff survey will be available in December. The APF Staff Survey Group will reconvene to review results and consider what cross system actions are required. Local filtering of results will allow for more specific action planning in each Directorate/

	Commence iMatter with rollout plan across GG&C up to 2017	Head of OD - FTFT	Partnership. HI&T, Board Non Execs, Board Medical Directorate, Board Nurse Directorate, Planning & Policy, Finance, Public Health and Diagnostics have all started using iMatter. Research project being conducted in HI&T to study success factors.
	Continue to run the Local Staff Awards and Chairman's Awards in 2015.	All Directors Chairman	Both award processes nearing completion culminating in the 'Celebrating Success' Event in November.
	Implementation of Persons Centred Care in HRM. Plan which aims to enhance Person Centred Care and values in all HR processes.	Directors and Managers and all Leaders across NHSGGC	This work is ongoing. Changes have been made to the recruitment and selection, training and education and appraisal processes to ensure that we are promoting and encouraging person centered values amongst all our staff.

PRIORITY #2 Sustainable workforce – ensuring that the right people are available to deliver the right care, in the right place, at the right time. **Strengthening workforce planning continues to be the focus this year.**

Scottish Government and others will:

- Collaborate to make better use of analysis, intelligence and modelling of education and workforce data to inform longer-term planning.
- Refresh workforce planning guidance taking three-year approach which takes account of the challenges of a multi-disciplinary workforce.
- Develop an integrated workforce planning approach across the wider workforce with other partners.

NHS Boards will:

- Use high quality workforce data and contextual information to inform local workforce plans.
- Ensure that recommendations from the Working Longer Review around occupational health, safety and wellbeing are fully implemented and that flexible approaches are taken.

PRIORITY	ACTION	LEAD(s)	UPDATE
Sustainable Workforce			
Use high quality workforce	Establishment of	Head of	The Workforce Statistics

<p>data and contextual information to inform local workforce plans.</p>	<p>Joint Management staff/side working group to review Workforce Statistics and make improvements in Quality</p> <p>Ensure continuous review of workforce information reports and identification of workforce risks at local & Board level to inform Workforce Plans</p>	<p>Workforce Planning & Analytics</p> <p>Head of Workforce Planning & Analytics</p>	<p>Group is supporting the development of an HR matrix which will support Directors and Chief Officers to manage all aspects of the workforce, including sickness absence, starters and leaver's data and bullying and harassment information. The group continues to meet to finalise the matrix & develop the IT support for the matrix.</p> <p>Ongoing work</p>
<p>Ensure that recommendations from the Working Longer Review around occupational health, safety and wellbeing are fully implemented and that flexible approaches are taken.</p>	<p>NHSGGC Policies and Guidance which relates to the recommendations of this review will be refreshed as part of the ongoing policy review cycle</p>	<p>Head of Health & Safety</p> <p>Head of Occupational Health Services</p> <p>HRD and other Directors</p>	

PRIORITY #3 Capable workforce – ensuring that everyone has the skills needed to deliver safe, effective, person-centred care. **The focus this year is on developing a more consistent, Scotland-wide approach to learning and development.**

Scottish Government and others will:

- Develop a learning and development framework and career pathways taking account of prior learning, particularly for support workers.
- Provide ongoing investment in developing Quality Improvement capability across the workforce to meet the growing demand for these skills.

NHS Boards will:

- Ensure that everyone has a meaningful conversation about their performance, their development and career aspirations.
- Develop the skills and behaviours required for working collaboratively and flexibly across primary and secondary care, and across health and social care.

PRIORITY	ACTION	LEAD(s)	UPDATE
Capable Workforce			
<p>Ensure that everyone has meaningful conversation about their performance, their development and career aspirations.</p>	<p>Ensure all areas in NHSGGC embed and mainstream KSF PD&R and meet the organisational target of 80%.</p> <p>Continue to deliver SOAR and OLPM for Medical staff and Senior Managers and Executives respectively.</p>	<p>Head of Workforce Planning & Development</p> <p>Directors and Managers</p>	<p>The current figure for KSF PDP & R is 70% as at 13th October 2015. Work continues within NHSGGC to work towards the target of 80% by offering support to areas where the target is not being achieved.</p> <p>SOAR (run via NHS NES) continues to operate well for Medical staff, with most doctors in NHSGGC using it to record information prior to their appraisal and for the appraisal itself.</p> <p>OLPM has been in place since 2007/08 and continues to be a robust and consistent framework for recording and reporting Senior Manager & Executives performance and objectives.</p>
<p>Develop the skills and behaviours required for working collaboratively and flexibly across primary and secondary care, and across health and social care.</p>	<p>As part of the Org. Review check the leadership development requirements for those in key interface positions between acute and primary care with particular focus on collaborative working.</p> <p>As part of the establishment of HSCPs, review and fulfill the</p>	<p>Heads of OD</p> <p>Heads of L&E</p> <p>New HSCP Chief Officers</p>	<p>This is being addressed at Senior level with the AstonOD team development work which has a focus on how different teams collaborate. The outputs from this work in each team will be shared and reviewed for themes/ cross system collaboration.</p> <p>Head of People & Change, OE is working with the new Chief Officers/Head of OD to identify and describe ongoing team development</p>

	<p>particular development needs of the new teams and team leaders.</p> <p>Ensure that the quality of the KSF/PDR and other developmental conversations is consistently good and support this with the provision of online and face-to-face resources which will support managers and supervisors.</p> <p>Guidance to managers as the mainstreaming of person centred care and values within Appraiser processes.</p>	<p>KSF Managers and L&E Advisors</p>	<p>work.</p> <p>Aston Team Development now underway in HSCPs with new teams.</p> <p>The Staff Governance Standards have now been included in the HSCP Schemes of Establishment.</p> <p>Work continues to improve the quality of KSF PDP review conversations to ensure that they are meaningful. For this purpose the dedicated KSF website www.ksf.scot.nhs.uk is available. This website hosts videos, one for staff and the other for managers/reviewers that will help with meaningful conversations.</p> <p>This guidance is now developed and available.</p>
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PRIORITY #4 Integrated workforce – developing an integrated health and social care workforce across NHS Boards, local authorities and third party provides. **The focus this year is on working with colleagues and partner organisations to implement integrated health and social care workforce arrangements.**

Scottish Government and others will:

- Develop a shared approach to Quality Improvement and skills development across health and social care.

NHS Boards will:

- Work with partners toward the Health and Wellbeing Outcomes developing a shared culture values and ways of working through effective teams and local partnerships.
- Provide leadership to continue to support the integration of primary and secondary care recognising the role of GPs, dentists, pharmacists and others as part of the workforce

PRIORITY	ACTION	LEAD(s)	UPDATE
Integrated Workforce			
Work with partners toward the Health and Wellbeing Outcomes developing a shared culture, values and ways of working through effective teams and local partnerships.	<p>NHSGGC re investing in a wide range of organisational development programmes across the new HSCP's.</p> <p>These interventions are aimed at optimising joint and integrated working arrangements between staff teams and services in order to deliver national and local outcome agreements.</p>	<p>Partnership & Acute Directors</p> <p>Partnership & Acute Directors</p>	Head of People & Change, OE is working with the new Chief Officers to identify and describe ongoing team development work
Provide leadership to continue to support the integration of primary and secondary care recognising the role of GPs, dentists, pharmacist and others as part of the workforce.	Partnership Directors are developing HSCP's to work dynamically and effectively to create new ways of working which will bring measurable benefits to patients at the interface with Acute services.	Partnership & Acute Directors	Head of People & Change, OE is working with the new Chief Officers/Head of OD to identify and describe ongoing team development work

PRIORITY #5 Effective leadership and management – leaders and managers lead by example and empower teams and individuals to deliver the 2020 Vision. **This year, the focus is on ensuring effective leadership for change.**

Scottish Government and others will:

- Support the delivery of work on the five leadership and management priorities.

NHS Boards will:

- Build leadership skills to lead/drive Quality Improvement.
- Ensure leaders at all levels and in all professions have the skills to support the workforce through change.

PRIORITY	ACTION	LEAD(s)	UPDATE
Effective Leadership & Management			
Build leadership skills to lead/drive Quality Improvement	Continuing the development of the Care Assurance & Accreditation System and it's implementation across GG&C based on Salford Model.	M. McGuire	CAAS is now fully launched adult Acute wards are working towards achievement of the standards. The first element of the assurance process will begin in November with the commencement of assurance support visits. Maternity, Neonatal and Paediatric services are currently finalising their standards and are working towards launching in early 2016. Community and Mental Health Partnerships are in the final stages of testing their standards and are working towards finalising launching into 2016.
Ensure leaders at all levels and in all professions have the skills to support the workforce through change.	Continued investment in significant suite of Leadership Development activities both at GG&C and National level. L&E and OD led provision covers from front line leaders, Clinical Leadership and up to Exec.	Heads of OD Heads of L&E	Leadership development work ongoing at all levels ranging from AstonOD development work with Senior Teams and the Fast-track programme, to Ready to Lead for frontline managers. Other national programmes such as Delivering The Future (for Clinical Leaders) are fully supported. A new Leadership Toolkit was developed specifically to support 'On the Move'.

EVERYONE MATTERS
2020 WORKFORCE VISION
NHSGGC ACTION PLAN 2016/17

PRIORITY #1

Healthy organisational culture – creating a healthy organisational culture in which our NHSScotland values are embedded in everything we do, enabling a healthy, engaged and empowered workforce.

Scottish Government and others will:

- Provide organisational development support and tools to NHSScotland Boards

NHS Boards will:

- Promote and recognise the behaviours of individuals and teams at all levels which reflect our values.

PRIORITY	ACTION	LEAD(s)	UPDATE
Healthy Organisational Culture			
Ensure that staff know their individual contribution is essential to making sure we achieve the workforce vision	Continued commitment to KSF / PDP implementation throughout NHS GGC including agreeing individual objectives, which align with NHS GGC values.	Directors Head of People & Change – Organisational Effectiveness Learning & e-Support Manager	NHS GGC compliance with KSF is 65% across GGC, as at the end of March 2016. A KSF workplan has been developed to support services with meeting the quantitative target and improve the quality of the process.
	Review 2015 Staff Survey responses on 'Involved in Decisions and NHSGGC values'	Head of People & Change – Organisational Effectiveness Staff Governance Co-ordinator	Involved in Decisions Short Life Working Group is currently developing a set of principles and supporting actions for Acute Services, which will be shared throughout the Board, by the end of September 2016. Sectors and HSCPs are currently analysing Staff Survey results and will be

		Directors Heads of People & Change	developing local action plans arising from the outcomes, by the end May 2016. The Staff Governance monitoring form will be returned to the Government on 6 th May 2016.
	Aston team development programme rollout	Director of Human Resources & Organisational Development	All Directors are now facilitating their team through the Aston Team Journey (~6 months) supported by an Aston Coach and will have embedded this approach into their ways of working by the end of 2016.
Improve engagement using the iMatter staff experience model and other tools	Implementation of iMatter continuous improvement tool to all teams across NHS GGC	Head of People & Change – Organisational Effectiveness Head of OD – FTFT	The iMatter implementation plan details the roll out timescales up to the end of 2017, and includes all Directorates and Partnerships in GGC. Discussions with Directors are taking place to ensure the required preparation is underway to gather the information required, and raise awareness, within the agreed timescales. The iMatter steering group is monitoring the progress of iMatter implementation on behalf of the Board.
Ensure appropriate arrangements are in place to support the health and well-being of staff	Continue participation in the Healthy Working Lives scheme, which promotes employee health and safety in the workplace	Head of Occupational Health Services	HWL groups continue to make progress towards the Award. A re-formatting of groups is now underway.
	Reducing Workplace Stress Short Life Working Group	Head of Occupational Health Services	The Heads of People & Change will identify stress 'hot spots' with the aim of identify and deal with issues promptly. Additionally, a range of training is planned to support staff and managers on stress awareness and

			support.
	Raise awareness of the Resilience & Wellbeing toolkit, available to all staff	Head of OD	The toolkit is available on StaffNet for all staff to access. Regular awareness sessions run for staff and detailed training days for line managers.

PRIORITY #2

Sustainable workforce – ensuring that the right people are available to deliver the right care, in the right place, at the right time.

Scottish Government and others will:

- Develop an integrated workforce planning approach across the wider workforce with other partners.

PRIORITY	ACTION	LEAD(s)	UPDATE
Sustainable Workforce			
Manage workforce implications of new and emerging service delivery models and take appropriate action	<p>Develop and publish the NHS GGC Annual Workforce Plan 2016/17 by the end of August 2016.</p> <p>All Acute Sectors and HSCPs to describe main workforce implications of service change and articulate these in Workforce / L&E / OD plans by April 2016, including new models of service delivery and roles emerging as a consequence of integration.</p>	<p>Head of People & Change – Organisational Effectiveness</p> <p>Workforce Plan Development Group</p> <p>Workforce Planning & Analytics Manager</p> <p>Directors and Service Teams</p>	The Workforce planning process has been approved by the Staff Governance Committee and the Area Partnership Forum, and the plan will be developed according to agreed timescales between now and August 2016.

PRIORITY #3

Capable workforce – ensuring that everyone has the skills needed to deliver safe, effective, person-centred care.

Scottish Government and others will:

- Provide ongoing investment in developing Quality Improvement capability across the workforce to meet the growing demand for these skills.

NHS Boards will:

- Ensure that everyone has a meaningful conversation about their performance, their development and career aspirations.
- Develop the skills and behaviours required for working collaboratively and flexibly across primary and secondary care, and across health and social care.

PRIORITY	ACTION	LEAD(s)	UPDATE
Capable Workforce			
Ensure all staff are aware of health inequalities and act appropriately to respond to the life circumstances that affect people's health	Ensure there is a consistent message on inequalities which is cascaded throughout all of our training.	Corporate Inequalities Team Learning & Education Manager Senior Learning and Education Advisor	This worksteam aims to ensure staff are clear on the organisational responsibilities arising from the Equality Act and can access resources/ advice/ support to foster a positive workplace culture, and is due to be completed by April 2016. All in house training programmes have been reviewed to ensure that they support inequalities sensitive practice.
	Introduction to Equality and Diversity module continues to be a mandatory requirement for induction Deliver Double Tick Action Plan in consultation with Staff Disability Forum.		The Board will publish an equality mainstreaming and outcomes report for 2016 on the 30 th April This will be supported by a Workforce Equality Action Plan which covers a wide range of activity on Workforce Planning and Analytics, Recruitment and Resourcing, Learning and Education and Organisational Development. Our training provision will be redesigned to reflect this and in particular our statutory / mandatory training on equality and diversity will be redesigned to take into account patient experience, complaints feedback and evidence on inequalities in health.
	Produce and disseminate a manager's guide on reasonable adjustments.		Funding has been allocated to support creation of guidance for line managers on making reasonable adjustments, and work is now underway with this.

	<p>Ensure that young disabled people access NHSGGC modern apprenticeships.</p>		<p>For phase 3 of the Modern Apprenticeship programme, the recruitment process has been amended to ensure that we reach disabled people through advocacy organisation.</p>
	<p>Review recruitment practices to ensure fair access to employment opportunities by protected characteristic</p>		<p>NHS GGC holds the Double Tick standard and the workforce statistics are reviewed at every Staff Governance Committee and quarterly at the Area Partnership Forum to review equal opportunities data and take actions as identified. This is an ongoing process</p>
	<p>Produce and distribute a Transitioning in the Workplace Guide on how to support staff reassigning their gender</p>		<p>The draft guide has been written and is in consultation.</p>
	<p>Ensure all staff are aware of health inequalities and act appropriately to respond to the life circumstances that affect people's health</p> <p>Develop training to support the delivery of the equality mainstreaming actions and outcomes.</p>		<p>Our statutory / mandatory training on equality and diversity will be redesigned to take into account patient experience, complaints feedback and evidence on inequalities in health.</p>
	<p>Commission training on equality and diversity in response to unmet needs or gaps in services e.g. tackling behaviours / stereotypes</p>		<p>In house training is currently being reviewed to reflect changing requirements of our patients and addresses areas of concern as identified through EQIA's, complaints etc.</p>
<p>Improve digital literacy skills among all staff, especially support workers</p>	<p>Increase availability of PCs for staff without regular access so that all staff can access Staffnet and applications</p>		<p>Hardware and facilities are now being installed in 7 locations, with implementation due by the end of May 2016.</p>
	<p>Continuous roll out of ECDL training</p>		<p>This continues to be available to all staff, with PC access, and</p>

	(accredited training)		is designed to cover the key concepts of computing, its practical applications and their use in the workplace and society. Application is via the e-learning support team.
	Mandatory Trakcare training provided for all staff using this system		Staff involved in patient care or administration continue to be provided with training in the use of the TrakCare system.
	Provision of basic IT skills through Library Services		One hour face to face sessions run regularly through Library Services, across a number of sites, which aim to develop basic digital literacy alongside general literacy and numeracy skills. Further information relating to these sessions can be accessed through the NHS GGC website.
	Access to IT Skills Pathway (through LearnPro) and Alison.com provided, which furthers basic IT skills (non-accredited)		Access to these e-learning facilities continues to be provided through StaffNet. Staff are routinely directed to these sites following a basic introduction from Library Services.
Recognise and support the role of carers in the delivery of healthcare	Patient and Carers Experience Group (PACE)		Carers have been recruited to the PACE group in order to give a patient perspective, as part of an ongoing drive to further understand the opportunities for support.

PRIORITY #4

Integrated workforce – developing an integrated health and social care workforce across NHS Boards, local authorities and third party provides.

Scottish Government and others will:

- Develop a shared approach to Quality Improvement and skills development across health and social care.

PRIORITY	ACTION	LEAD(s)	UPDATE
Integrated Workforce			
Support implementation of the commitments in the Workforce Development and Support Plan and Organisational Development Plan within Integrated Joint Boards (IJBs)	Describe NHS GG&C workforce planning needs and ensure these are clearly translated into HSCP plans in collaboration with Local Authority needs.	Head of Organisational Development	Local activity will be reported to Strategic OD Group for NHS GGC through the Head of OD.
Ensure that their workforce plan aligns with the workforce plans of IJBs	Connect NHS GG&C Workforce Plan to HSCP Plans through collaborative activity and use analysis to inform/construct across the system.	Workforce Planning & Analytics Manager	HSCP Workforce Planning Boards are at different stages of development therefore Head of OD & People and Change will continue to work with the Heads of People and Change to ensure cross system learning when relevant.

PRIORITY #5

Effective leadership and management – leaders and managers lead by example and empower teams and individuals to deliver the 2020 Vision.

Scottish Government and others will:

- Support the delivery of work on the five leadership and management priorities.

NHS Boards will:

- Build leadership skills to lead/drive Quality Improvement.
- Ensure leaders at all levels and in all professions have the skills to support the workforce through change.

PRIORITY	ACTION	LEAD(s)	UPDATE
Effective Leadership & Management			
Deliver work on the five leadership and management priorities: <ul style="list-style-type: none"> • Cross sector working • Adopting values driven 	Delivery of FastTrack for senior staff which incorporates the leadership and managerial priorities	Heads of OD	Second cohort is now in Year 2 of the programme, with the evaluation of Year 1 complete. Rolling central calendar of events in place. The third programme is likely to be planned mid 2016.

<p>approaches</p> <ul style="list-style-type: none"> • Making space for honest dialogue to improve performance, sustain good performance and tackle poor performance • Strengthening management at all levels but with a particular focus on middle management, talent management and succession planning • Leading teams and engaging people. 	<p>Delivery of related development interventions e.g. coaching conversations, dialogue practice</p>		<p>Local and Board wide development interventions are in place and being delivered and evaluated regularly.</p>
	<p>Provision on Aston and bespoke team development</p>		<p>All Directors now facilitating their team through the Aston Team Journey (~6 months) supported by an Aston Coach and are now embedding this approach into their ways of working by the end of 2016.</p>
	<p>Development of organisational approach to succession management</p>		<p>Early work underway to scope wider organisational activity on processes for succession and talent management.</p> <p>A Clinical leadership programme is in development and will be delivered in the second half of 2016</p>
	<p>Work to raise profile of NHS GGC values</p>		<p>Table talkers have been developed and distributed to all NHS GGC meeting rooms and staff restaurants to raise the profile of the values.</p>

iMatter update

Recommendation:

The Forum is asked to note the update below.

1. Background

iMatter continues to be rolled out nationally, and all Boards have committed to the deadline set by the Scottish Workforce Governance Committee (SWAG) that all Directorates will have run at least one iMatter cycle by end 2017.

2. Purpose of paper

The purpose of this paper is to provide an update on progress of the iMatter implementation plan to date.

3. Progress update

Cohort 5

Staff side JOC and Communication teams have now completed their action plans within the timescales identified. The anniversary run for these teams begins in early 2017.

Cohort 6

Regional Services and Inverclyde HSCP are beginning to prepare for their anniversary run in early 2017, with the development of local implementation groups, awareness sessions and review of teams beginning soon.

Cohort 7

Women and Children's, and HR & OD teams have completed the questionnaires. The action planning process is coming to an end with teams in these directorates completing 81% and 100% of action plans respectively.

Representatives from the Women & Children's Directorate will present their implementation progress at the December Acute PF. This will highlight success in both response rates and action plan completion, to further encourage other Directorates and highlight the critical factors in achieving these results.

Cohort 8

Teams within Oral Health, North sector SMT and Board admin are now at the action planning stage. Oral Health have now achieved 100% action plan completion, with North sector SMT and Board admin underway with their plans.

Cohort 9

Staff questionnaires have been completed in the anniversary run of Planning & Policy and Board Nursing Directorate, achieving response rates of 89% and 82% respectively.

Cohort 10

The questionnaire completion stage is now completed with the North sector, achieving a response rate of 59%. Action planning support sessions are now being planned, to ensure line managers have the opportunity to discuss the next stage, particularly where reports are not available for those teams achieving below a 60% response rate.

Cohort 11

Line manager confirmation stage is now underway for teams within Finance, Public Health and Diagnostics. The anniversary run for Chair and non-Exec team has now been included in this Cohort.

The first iMatter run for Clyde sector is also part of this Cohort, with managers currently confirming team details prior to the questionnaire being rolled out to staff from 14th November 2016.

Cohort 12

Board Medical Directorate anniversary run was rescheduled to the end of October 2016 and line manager confirmation of teams is now underway.

West Dunbartonshire HSCP are now in line manager confirmation stage for their initial run of iMatter, with the questionnaire being launched to staff towards the end November 2016.

Cohort 13

The e-health anniversary run is now scheduled to go live in November 2016, which allows time for the restructure to be fully implemented. Work is underway to finalise the team details for rollout.

Overall

Meetings have taken place with all Directors whose services are scheduled to run iMatter in 2016/early 2017. Early discussions and preparation with South sector and Glasgow City HSCP are underway, given the staffing numbers and potentially complex structures involved.

A detailed critical success factors paper has been developed, built on learning from Directorates already underway with the iMatter process. This paper is circulated and discussed in detail at the Director meetings, and monitored both through Directorate specific implementation plans and a more detailed overall Board implementation plan.

Directorates continue to be encouraged to send a representative to the iMatter steering group, to share experiences, learn from those teams already underway with iMatter, ask questions and hear more about the planning and implementation of iMatter. Directorates are then encouraged to bring together a local implementation group to support communications and driving implementation forward.

Action plan completion rates continue to vary across Directorates, and evidence suggests that engagement with the action planning process encourages further staff engagement in the anniversary run of iMatter. We are currently running support sessions for managers in those Directorates who are beginning the action planning process. These sessions, which are delivered by OD, Staff Governance and L&E colleagues, help managers in taking forward team discussions to develop effective action plans.

To date the overall organisational response rate is currently sitting at 61%, and response rates continue to update as roll out progresses.

Cohort	Directorate / HSCP	Date Manager Confirmation begins	Questionnaire launch date	Response Rate from questionnaires	Action plans due date	Action plans completed?	Progress updates due date	Progress Updates completed?	R / A / G rating (based on current stage of implementation)
1	e-Health	02/02/2015	02/03/2015	78%	17/07/2015	78%	09/10/2015	41%	
2	Chair, Non-exec team & CE	13/07/2015	20/07/2015	82%	30/10/2015	100%	22/01/2016	0%	
3	Board Medical Directorate	24/08/2015	21/09/2015	76%	05/02/2016	66%	29/04/2016	8%	
	Board Nursing Directorate	24/08/2015	21/09/2015	86%	05/02/2016	86%	29/04/2016	7%	
	Corporate Planning & Policy	24/08/2015	21/09/2015	82%	05/02/2016	50%	29/04/2016	0%	
4	Corporate Finance	19/10/2015	12/10/2015	60%	01/04/2016	15%	24/06/2016	5%	
	Public Health	19/10/2015	12/10/2015	83%	01/04/2016	62%	24/06/2016	0%	
	Diagnostics	19/10/2015	12/10/2015	72%	01/04/2016	56%	24/06/2016	5%	R
5	Staff Side JOC team	11/01/2016	08/02/2016	95%	03/06/2016	100%	26/08/2016	0%	R
	Corporate Communications	11/01/2016	08/02/2016	90%	03/06/2016	100%	26/08/2016	0%	R
6	Regional Services	08/02/2016	07/03/2016	54%	08/07/2016	31%	30/09/2016	4%	R
	Acute SMT	08/02/2016	07/03/2016	94%	08/07/2016	50%	30/09/2016	0%	R
	Inverclyde HSCP	08/02/2016	07/03/2016	55%	08/07/2016	23%	30/09/2016	9%	R
	CE team	08/02/2016	07/03/2016	80%	08/07/2016	0%	30/09/2016	0%	R
7	Women & Childrens	04/04/2016	02/05/2016	62%	26/08/2016	100%	18/11/2016	17%	G
	HR & OD	04/04/2016	02/05/2016	91%	26/08/2016	81%	18/11/2016	9%	R
8	Board Admin	23/05/2016	20/06/2016	87%	14/10/2016	11%	06/01/2017	11%	R
	Oral Health	23/05/2016	20/06/2016	81%	14/10/2016	100%	06/01/2017	4%	G
9	Board Nursing Directorate (anniversary run)	15/08/2016	12/09/2016	82%	06/01/2017	0%	31/03/2017	0%	G
	Corporate Planning & Policy (anniversary run)	15/08/2016	12/09/2016	89%	06/01/2017	0%	31/03/2017	0%	G
10	North Sector	29/08/2016	26/09/2016	59%	20/01/2017		14/04/2017		
11	Clyde Sector	17/10/2016	14/11/2016		10/03/2017		02/06/2017		
	Corporate Finance (anniversary run)	17/10/2016	14/11/2016		10/03/2017		02/06/2017		
	Public Health (anniversary run)	17/10/2016	14/11/2016		10/03/2017		02/06/2017		

	Diagnostics (anniversary run)	17/10/2016	14/11/2016		10/03/2017		02/06/2017		
	Chair, Non-exec team & CE (anniversary run)	17/10/2016	14/11/2016		10/03/2017		02/06/2017		
12	West Dunbartonshire HSCP	24/10/2016	21/11/2016		17/03/2016		09/06/2017		
	Board Medical Directorate (anniversary run)	24/10/2016	21/11/2016		17/03/2016		09/06/2017		
13	e-Health (anniversary run)	07/11/2016	05/12/2016		31/03/2017		02/06/2017		
14	East Dunbartonshire HSCP	16/01/2017	13/02/2017		09/06/2017		01/09/2017		
	Staff Side JOC team (anniversary run)	16/01/2017	13/02/2017		09/06/2017		01/09/2017		
	Renfrewshire HSCP	16/01/2017	13/02/2017		09/06/2017		01/09/2017		
	Corporate Communications (anniversary run)	16/01/2017	13/02/2017		09/06/2017		01/09/2017		
15	Regional Services (anniversary run)	13/02/2017	13/03/2017		07/07/2017		29/09/2017		
	Inverclyde HSCP (anniversary run)	13/02/2017	13/03/2017		07/07/2017		29/09/2017		
	Acute SMT (anniversary run)	13/02/2017	13/03/2017		07/07/2017		29/09/2017		
	Chief Executive Team (anniversary run)	13/02/2017	13/03/2017		07/07/2017		29/09/2017		
16	South Sector	20/02/2017	20/03/2017		14/07/2017		06/10/2017		
17	Women & Childrens (anniversary run)	03/04/2017	01/05/2017		25/08/2017		17/11/2017		
	HR & OD (anniversary run)	03/04/2017	01/05/2017		25/08/2017		17/11/2017		
18	Glasgow City HSCP	10/04/2017	08/05/2017		01/09/2017		24/11/2017		
19	Facilities	08/05/2017	05/06/2017		29/09/2017		22/12/2017		
	East Renfrewshire HSCP	08/05/2017	05/06/2017		29/09/2017		22/12/2017		