

**GREATER GLASGOW AND CLYDE NHS BOARD**

**Minutes of a Meeting of the  
Staff Governance Committee  
held in the Board Room, JB Russell House,  
Gartnavel Royal Hospital  
1055 Great Western Road, Glasgow  
On Tuesday 6 September 2016, 1.00 pm**

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**PRESENT**

Ms M Brown (in the chair)

Ms J Donnelly                      Councillor A Lafferty  
Mr J Legg                              Mr D Sime  
Mrs R Sweeney

**IN ATTENDANCE**

Dr J Armstrong	Medical Director
Mrs S Canavan	Depute Director of Human Resources & Organisational Development
Ms J Erdman	Head of Inequalities
Mrs G Hardie	HR Administrator, Organisational Effectiveness
Mrs D Hudson	Staff Governance Co-ordinator
Mrs L Lauder	Head of People & Change – Organisational Effectiveness
Mrs A MacPherson	Director of Human Resources & Organisational Development
Mrs D McErlean	Area Partnership Forum Staff Side Secretary

**BY INVITATION**

Mr P Cannon	Deputy Head of Administration (Items 39 and 40)
Mr B Greene	Head of People & Change, Inverclyde HSCP (Item 37)
Mr B Moore	Chief Officer, Inverclyde HSCP (Item 37)
Ms D McCrone	Staff Side Chair, Inverclyde HSCP (Item 37)
Mr N Russell	Head of Payroll Services (Item 39)
Ms K Ocker	Chair, Staff Disability Forum (Item 42)
Mr A McLaws	Director of Communications
Dr L Donaldson	Deputy Director of Medical Education (Item 43)
Mr K Tracey	Medical Staffing Team Lead (Item 43)

**34. INTRODUCTORY REMARKS**

**Action**

The Chair opened the meeting by welcoming the new Board Members to the Staff Governance Committee, Ms Jeanette Donnelly, Mr John Legg, Mrs Rona Sweeney and Mr Ian Ritchie.

Mr Brian Moore, Chief Officer, Mr Brian Greene, Head of People and Change and Ms Diana McCrone, Staff Side Chair, Inverclyde HSCP, were in attendance

to give a presentation on progress with implementation of the Staff Governance Standard in Inverclyde HSCP. Dr Jennifer Armstrong, Medical Director, Dr Lindsay Donaldson and Mr Kenny Tracey were also in attendance in relation to the Medical Education and Medical Revalidation Reports.

In addition Mr Paul Cannon, Deputy Head of Administration, Mr Neil Russell, Head of Payroll Services, Ms Kate Ocker, Chair, Staff Disability Forum and Mr Ally McLaws, Director of Communications, were present to speak to specific agenda items.

35. **APOLOGIES**

Apologies for absence were received from Mr G Archibald, Mr J Brown, Mr G Capstick, Ms F Carmichael, Councillor M Devlin, Ms C Haughey, Mr K Redpath, Mrs T McAuley and Mr I Ritchie.

NOTED

36. **DECLARATIONS OF INTEREST(S)**

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

NOTED

37. **PRESENTATION**

**Local Compliance with Staff Governance Standard**

Presentation by Inverclyde Health and Social Care Partnership

The Staff Governance Committee received copies of the Inverclyde Health and Social Care Partnership (HSCP) Staff Governance Monitoring Plan 2015/16.

Mr Brian Moore, Chief Officer, Inverclyde HSCP, provided an overview of the Partnership's Staff Governance infrastructure. Inverclyde Staff Partnership Forum members had recently participated in a development session in order to review and agree priorities. Ms McCrone advised that partnership working involved staff side colleagues from the Local Authority and the NHS, and that the Staff Governance Plan Subgroup met quarterly to review actions in the Monitoring Plan.

Mr Moore highlighted outcomes from the 2015 National Staff Survey and provided comparisons with NHSGGC and NHS Scotland as well as the 2014 survey results. The presentation outlined areas where Inverclyde HSCP had demonstrated improvements such as 'my line manager communicates effectively with me'. It was felt that the positive examples highlighted demonstrated that the 'Nurturing Inverclyde' approach was working, and that this was reflected in positive staff attitudes. In particular, it was highlighted that 87% of staff had confidence and trust in their line manager and this was a real cause for pride.

Achievements and challenges from the Staff Governance Action Plan were then highlighted. These included improved communication pathways including a weekly memo from the Chief Officer and joint training to improve the quality and quantity of KSF Personal Development Plans and reviews. It was also reported that the Staff Governance Standard ‘treated fairly and consistently’ was central to the HSCP values and this was positively evidenced by staff survey results. Data quality issues around Health and Safety Training had been recognised and were being addressed through the Health and Safety Committee which was co-chaired by management and staff side.

For the Inverclyde example of good practice, Mr Moore highlighted the successful implementation of iMatter in the integrated HSCP. Inverclyde was the first in Scotland to run iMatter with both Health and Social Care staff. In the anniversary run, issues of language and terminology will be addressed to make the questionnaire more relevant to Council staff. Inverclyde will also strive to improve questionnaire completion among home care staff who did not have access to computers. Subject to the above amendments, Mr Moore would be happy to recommend iMatter as a useful staff engagement tool for HSCPs.

In response to a question from Ms Donnelly, Mr Moore acknowledged that the result from the staff survey showing that 66% of staff in Inverclyde didn’t feel able to speak up or challenge decisions, was a concern. The HSCP were focused on improving this outcome as part of their Staff Governance Action Plan and would continue to reinforce key messages about culture and values.

Mrs MacPherson advised that overall, the NHSGGC 2015 staff survey had achieved a response rate of 30% which was an improvement on previous years. A wide range of mechanisms were available for communicating with staff including FTFTs ‘Ask the Boss’, Team Brief and Core Brief. The advantage of iMatter was that it supplemented Board-wide communications by focusing on local teams and the effectiveness of local communication channels with staff.

The Chair thanked Mr Moore, Mr Greene and Ms McCrone for their helpful and informative presentation.

NOTED

### 38. **MINUTES OF PREVIOUS MEETING**

The Minutes of the meeting of the Staff Governance Committee held on Tuesday 3 May 2016 (NHSGGC SGC(M)16/02) were accepted as a correct record.

NOTED

### 39. **MATTERS ARISING**

- **Whistleblowing – Champion Update/Monitoring Report 2015/16**

A report from Ms Morag Brown, in her role as NHSGGC Whistleblowing Champion, and Mr Paul Cannon, Deputy Head of Administration, had been circulated which provided a Whistleblowing Champion update and action plan,

and the draft Monitoring Report for 2015/16 (Paper 16/27).

Ms Brown reported that the launch of the national guidance on Whistleblowing was still awaited. She advised that the role of the Whistleblowing Champion was an assurance role, ensuring that staff received appropriate support and feedback when raising concerns, that investigations were concluded timeously and appropriately, and that regular reporting was undertaken to the NHS Board, Staff Governance Committee and Area Partnership Forum.

The monitoring report provided details of cases raised during 2015/16. These had been reviewed by the Whistleblowing Champion to provide an assurance overview. In reviewing the processes currently in place to deal with cases, some areas for change/improvement had been identified. Further publicity was being arranged to notify staff of the systems that are in place to allow them to raise concerns and access the support that is available.

Mrs MacPherson highlighted the Action Plan which had been drafted. This would be developed further and brought back to the Committee at a later date. A MacPherson

Mr Cannon took the Committee through the Monitoring Report and advised that five cases had been investigated during the 2015/16 period. It was noted that the Level 3 Reviewer had retired and the replacement would shortly be notified by the Board Chairman.

It was agreed that any amendments required would be made to the paper, which would then be submitted to the Audit Committee and Area Partnership Forum. It was suggested that it would be helpful for Appendix 2 of the Monitoring Report on Whistleblowing Activity 2015-16 to be provided to Board members for information. P Cannon

The Chair advised that an update on the national launch would be provided at the next meeting. M Brown

- **Pensions Re-enrolment Update**

The Head of Payroll Services had circulated the Pensions Re-enrolment Update paper (Paper 16/28). Mr Russell advised that this was the final update on the re-enrolment exercise which had been undertaken at 31 March 2016.

It was reported that 73.3% of staff who had been auto enrolled had opted out, with a comparative opt out figure of 47% from the 2013 exercise. It was difficult to identify the reasons why staff had chosen to opt out but it was suggested that increased contribution rates and the removal of NI relief could have been factors in this decision. A short discussion took place on the data which had been provided in the tables.

It was noted that Boards were not allowed to provide pensions advice to staff. However it was suggested that it may be helpful to liaise with SPPA to provide a fact sheet outlining the benefits of the pension scheme to staff, as well as providing links to organisations who could assist staff by providing independent financial advice. Mrs McErlean advised that staff were able to access a financial adviser through the Staff Benefits Scheme and that a Credit Union was

also available within NHSGGC.

It was agreed that in addition to the development of a fact sheet for staff, it would be helpful to undertake further work to analyse the information to highlight retention rates as well as opt-out rates, particularly for Bands 1-4 and the Nursing and Midwifery staff group. N Russell

NOTED

40. **NON EXECUTIVE MEMBERS' ROLES IN CAMPAIGNS/LAUNCHES**

The Deputy Head of Administration had circulated an updated paper on Non Executive Members' involvement in campaigns and launches (Paper 16/39).

The paper provided a table outlining the current initiatives and the linked Non Executive Members. Mr Cannon proposed to seek volunteers for current vacancies from the Non Executive Members and would also canvas views on any additional projects which require a Non Executive champion. The Committee supported this proposal. The paper also highlighted that the Scottish Patient Safety Programme walk rounds also had some vacancies which required to be filled.

It was noted that the time commitment required varied, depending on the nature of the project/initiative, but was rarely onerous.

Mrs MacPherson advised that the Healthy Working Lives and Staff Health and Wellbeing projects could be undertaken as one initiative and she would discuss this further with the Head of Board Administration. A MacPherson

Members present were asked to contact Mr Cannon to advise of any workstreams they would be interested in becoming involved in. Non Executive Members

AGREED

41. **STAFF GOVERNANCE COMMITTEE ROLLING ACTION LIST**

The Director of Human Resources and Organisational Development had circulated the Rolling Action List (Paper 16/29). The list provided a brief summary of outstanding actions arising from the work of the Staff Governance Committee.

Mrs MacPherson highlighted that the updated Staff Health Strategy Action Plan would be presented to the next meeting. A MacPherson

It was noted that the Rolling Action List would be a standing item at each meeting.

NOTED

42. **RELEASE POTENTIAL UPDATE**

The Head of Inequalities had circulated a report which provided an update on

Release Potential (Paper 16/30).

The report provided an update on the Staff Disability Forum, the Manager's Guide, the move from Double Tick standard to Disability Confident, and actions to improve recruitment and data collection on disability.

Ms Kate Ocker, Chair of the Staff Disability Forum, provided some background to her involvement in the Staff Disability Forum and reflections from her own personal experiences working within NHS GGC.

The Forum met three times a year and was committed to involving as many staff as possible. The Forum aimed to provide an opportunity for staff to raise concerns, identify common themes and provide comment and feedback on relevant matters. The issue of reasonable adjustments and the ageing workforce profile are topics on which the group will contribute a view

Mrs MacPherson advised that Rona Wall, Head of Occupational Health, attended the Staff Disability Forum meetings and was also leading a Working For Longer Group whose outcomes would feed into the Forum. It was recognised that the Forum's input into HR Connect had been extremely helpful and their input would be sought on future initiatives.

The Employee Director advised that Mr John Brown, Board Chairman, had met with the Staff Disability Forum and expressed support for the work of the group.

The Chair thanked Ms Ocker, the Staff Disability Forum, and HR colleagues for their work in this area to date.

NOTED

#### 43 **MEDICAL EDUCATION REPORT**

The Medical Director had circulated the Medical Education Annual Report 2015/16 (Paper 16/31). Dr Armstrong was accompanied by Dr Lindsay Donaldson, Deputy Director of Medical Education, and Mr Kenny Tracey, Medical Staffing Team Lead.

It was noted that the governance framework for Medical Education and Revalidation was now included in the Staff Governance Committee role and remit.

Dr Armstrong introduced the Medical Education Annual Report for 2015/16 which was an element of the full report to NHS Education for Scotland (NES). It was noted that NHS GGC trained 1600 Postgraduate Junior Doctors and provided placements for 700 medical students in 2015/16. It was reported that the General Medical Council (GMC) were becoming more focused on all NHS Boards' medical training programmes, with the ability to remove training accreditation if any aspect was deemed sub standard. It was noted that the GMC were due to visit Scotland in July 2017.

Dr Donaldson provided an overview of the core business of the Medical

Education Directorate which had been formed in 2009 to improve the quality of Medical Education.

It was reported that 33 external visits had taken place during the year, 29 from NHS Education for Scotland (NES) and 4 from the Medical School. The number of visits from NES has escalated from 16 in the previous year, due to the new services being provided at the Queen Elizabeth University Hospital. The report provided examples of feedback following visits and also some examples of good practice. It was noted that trainee forums were in place and were proving very successful in eliciting feedback and enabling improvements in the trainee experience. In order to recognise positive achievements, Certificates for Excellence in Education had been introduced and 49 certificates were being awarded this year to NHSGGC medical trainees.

Mrs Lauder noted that trainees who have concerns were able to raise these through various routes including the Medical Education Directorate and asked how often this had happened in 2015/16. Dr Donaldson advised that only 7 of the 1600 trainees had raised any issues of concern. These trainees were contacted through the Deanery and given the opportunity to informally resolve their issue with Dr Donaldson. The Directorate had worked with trainees to identify local solutions, with only one case going to a formal process.

A briefing paper on Appraisal and Revalidation 2015/16 had also been provided to the Committee. Medical staff appraisals were undertaken annually and revalidation every 5 years. Appraisal compliance had substantially improved in the last few years with the Board now achieving a 92% completion rate compared to the NHS Scotland rate of 90%.

In response to a query from Mr Legg regarding revalidation, Dr Armstrong advised that the usual reasons for deferrals were maternity leave or sick leave. However, it could also be due to not enough information being provided or competency issues. A fuller report on Revalidation would be provided at the next Staff Governance Committee meeting.

The Chair acknowledged the work which was being undertaken by the Medical Education Directorate to ensure NHSGGC met GMC and Deanery requirements.

It was agreed that the Red Amber Green report on external visits referred to in the Medical Education update should be circulated to the Committee. G Hardie

NOTED

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

The Director of Human Resources and Organisational Development had circulated a copy of the draft Staff Governance Committee Annual Report to the NHS Board (Paper 16/32).

Mrs MacPherson advised that the updated role and remit of the Staff Governance Committee required that the co-chairs submit a formal report to the

NHS Board on an annual basis. The draft report submitted was the first report of this nature.

The report outlined the role and remit of the Committee and the development of an integrated Staff Governance Workplan which incorporated FTFT, Everyone Matters 2020 Workforce Vision, Staff Survey 2015, the Workforce Equality Plan and the Staff Disability Forum workstreams. It also described the service assurance presentations which were provided to the Committee on a regular basis. In 2015/16 the Staff Governance Committee had 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.

The report confirmed that the Committee will continue to monitor the performance of the organisation in meeting the Staff Governance Standard through the integrated Workplan and outlined the priorities for the year ahead.

It was agreed that any comments on the draft Annual Report should be submitted to Mrs L Lauder, Head of People and Change, Organisational Effectiveness, by 27 September 2016. Once finalised, the report would be submitted to the NHS Board. All  
L Lauder

Following a query from Mr Legg regarding NHSGGC's performance in respect of 'involved in decisions', Mrs Lauder updated on the work of a short life working group in Acute Services which was examining the application of this standard. A report on the outcome of this work will be brought to a future Staff Governance Committee. L Lauder

It was agreed that it would also be helpful to provide the Committee with more detailed background on the iMatter tool and questionnaire. L Lauder

NOTED

#### 45. **AREA PARTNERSHIP FORUM REPORT**

The Employee Director had circulated the Area Partnership Forum Report (Paper 16/33).

Mr Sime introduced his final report as Employee Director due to his imminent retiral from the role, and reflected on the positive relationship which had been established through the Area Partnership Forum between management and the

recognised trade unions and professional organisations.

The paper outlined the main points raised at the Area Partnership Forum meeting with the Cabinet Secretary at the Annual Review and highlighted some of the issues discussed including financial challenges, dignity at work, iMatter and integration of Health and Social Care.

The Employee Director referred to the Partnership Working report and in particular the NHS Scotland HR Strategy 'Towards a New Way of Working' and NHS Circular MEL (1999)59 which made it mandatory for Boards to enter into a partnership agreement with Trade Unions. Mr Sime agreed to arrange for these documents to be circulated to the Committee members for information. D Sime

Mr Sime thanked members of the Committee for their support during his time on the Staff Governance Committee and advised that Dorothy McErlean would be taking over the Employee Director role and would provide the Area Partnership Forum reports going forward.

The Chair paid tribute to Mr Sime for his valuable input to the Staff Governance Committee during his terms as Employee Director. Mr Sime had worked in the NHS for 44 years undertaking 3 terms as Employee Director and was wholly committed to the values of the NHS. Mr Sime had undertaken all aspects of his role with integrity, dignity and honesty. Ms Brown sincerely thanked Mr Sime on behalf of the Committee for all his support.

Mr Sime thanked Ms Brown for her kind words and advised that he had enjoyed the role of co-chair and his involvement in Staff Governance Committee and was glad to be leaving the Committee in such good hands. He wished the Committee members all the best for the future

NOTED

46. **NHSGGC STAFF GOVERNANCE WORKPLAN**

The Director of Human Resources and Organisational Development had circulated the updated Staff Governance Workplan (Paper 16/34).

Mrs MacPherson gave a brief update on the topics contained in the Workplan and proposed that the Plan be discussed in more detail at the next meeting. A MacPherson

It was noted that a position paper on KSF was being prepared and this would be brought to the Committee at a future meeting. L Lauder

NOTED

47. **WORKFORCE STATISTICS**

The Head of People and Change, Organisational Effectiveness, had circulated the Workforce Statistics report (Paper 16/35).

Mrs Lauder advised that the Workforce Statistics analysis was an evolving and developing area of work by its nature. A new HR case management system was

now in place which was able to provide improved data and this was being incorporated into the Workforce Statistics report going forward.

It was noted that the core workforce dataset which had been presented also included trending information. A paper on disability recruitment statistics had been presented to the Staff Governance Committee meeting in May and further analysis was underway which would be presented to the November meeting.

Mrs MacPherson suggested it would be helpful to share the Disability Recruitment Statistics paper which had been discussed at the last Staff Governance Committee with the new members. The Committee agreed to await the outcome of the current analysis before taking any further action. L Lauder

NOTED

48. **NHSGGC WORKFORCE PLAN 2016/17**

The Head of People and Change, Organisational Effectiveness, had circulated the NHSGGC Workforce Plan 2016/17 (Paper 16/36). Mrs Lauder advised that the Workforce Plan was now published in final draft.

The Plan, which had been developed in partnership with staff side, was presented to the Area Partnership Forum on 24 August 2016 and had been widely circulated to Directors and their senior teams. Subject to final sign off by the Staff Governance Committee, the Plan would now be placed on the NHSGGC website as required by the Scottish Government Health Directorate.

The Chair acknowledged the value of the Workforce Plan in terms of the detailed information presented on the totality of the NHSGGC workforce and the many issues to be addressed.

Mrs MacPherson advised that a specific piece of work was underway with the Medical Director and others to address medical workforce issues.

The Committee agreed the NHSGGC Workforce Plan and it was suggested that it would be helpful for the Committee to receive updates on progress. It was therefore agreed that a six monthly update on progress with the Workforce Plan implementation would be provided for the Committee. L Lauder

AGREED

49. **UPDATE ON HUMAN RESOURCES AND ORGANISATIONAL DEVELOPMENT REVIEW**

The Director of Human Resources and Organisational Development had circulated an update on the Human Resources and Organisational Development Review (Paper 16/37).

Mrs MacPherson advised that following a review by the Edinburgh Institute, a review of the Human Resources and Organisational Development service had been undertaken. The service had moved from a traditional model to a business partner model with a focus on transformational services. The new centralised

service allowed more consistent and quality advice to be provided. The new service was supported by HR Connect a new online information portal, as well as a new HR Support and Advice Unit (HRSAU).

Feedback on the new service had been largely positive so far but the service was under constant review to ensure it remained fit for purpose. Service users have been asked to give feedback on their experience of using the new service and queries raised through the HRSAU are recorded for monitoring and quality purposes. A Service Delivery Board has been established which monitors the Service Standards Agreements between Human Resource & Organisational Development and the service areas, and the overall performance of the HR&OD Team.

All Human Resources and Organisational Development teams are now located in West Glasgow ACH and any members who were interested in visiting were welcome to contact the Director of Human Resources and Organisational Development.

It was noted that the senior Human Resources and Organisational Development team were developing a Workforce Strategy for NHSGGC. This strategy would be developed in partnership with staff side and senior management colleagues and would be brought to the Area Partnership Forum and Staff Governance Committee in due course.

A MacPherson

#### NOTED

#### 50. **EVERYONE MATTERS: 2020 WORKFORCE VISION – 2017/18 PRIORITIES IMPLEMENTATION PLAN**

The Head of People and Change, Organisational Effectiveness, had circulated the proposed 2017/18 Priorities Implementation Plan issued by Scottish Government (Paper 16/38).

Mrs Lauder advised that each year Scottish Government issued refreshed priorities to NHS Boards and sought comments from the service. The priorities for 2017/18 were outlined as:

- Developing a culture in Scotland which promotes equality, values diversity and recognises the human rights of those working within NHSScotland.
- Maximising the contribution of all of the workforce through the development of multi-professional teams to support new models of care.
- Effective recruitment activity and workforce planning to ensure we have the workforce we need, in the right place and with the right skills.
- Effective Leadership to ensure that leaders and managers have the necessary skills to lead change, particularly in relation to integration, and also to enable greater regional working arrangements.

NHSGGC were supportive of the proposed priorities but had suggested to

Scottish Government that there should be a more explicit focus on the wellbeing and resilience of the workforce in the Healthy Organisational Culture section.

Following a query from Mrs Sweeney, Mrs Lauder advised that each year Boards' were required to develop an action plan for each of the priorities. Updates on this were provided to each Staff Governance Committee meeting as part of the Staff Governance Workplan Update.

NOTED

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

A paper from the Head of Organisational Development, Facing The Future Together, (Paper 16/40) enclosing the Facing the Future Together Update, had been circulated for information.

NOTED

**52. ORGANISATIONAL DEVELOPMENT STRATEGIC FORUM MINUTES**

A paper from the Director of Human Resources and Organisational Development (Paper 16/41) enclosing the Organisational Development Strategic Forum minutes of 21 April 2016, had been circulated for information.

NOTED

**53. iMATTER CRITICAL SUCCESS FACTORS**

The Head of People and Change, Organisational Effectiveness, had circulated a paper on iMatter Critical Success Factors (Paper 16/42).

The learning captured during the early implementation of iMatter had been used to develop a list of key success factors. This information could now be used by Directorates/Partnerships to ensure the iMatter process was effective. This would be examined in more detail at the next meeting when there would be a fuller discussion on iMatter. L Lauder

NOTED

**54. REMUNERATION COMMITTEE MINUTES**

The Remuneration Committee minutes of 29 February 2016 were tabled at the meeting by the Director of Human Resources and Organisational Development (RSC2016/01). These were circulated, read and returned by Committee members.

Mrs MacPherson provided a short briefing for new members on the role of the Remuneration Committee.

NOTED

55. **DATE OF NEXT MEETING**

The Chair reported that the NHS Away Session which had been arranged for 1 and 2 November 2016, clashed with the Staff Governance Committee arranged for Tuesday 1 November and this now required to be rearranged.

It was therefore agreed that the next meeting of the Staff Governance Committee would be held on Tuesday 15 November 2016 at 1.00 pm, in the Board Room, JB Russell House, Gartnavel Royal Hospital. An email would be issued to confirm this. G Hardie