

NHSGGC SGC(M)17/04  
Minutes: 61- 82

NHS GREATER GLASGOW AND CLYDE

**Minutes of a Meeting of the  
NHS Greater Glasgow and Clyde  
Staff Governance Committee  
held in the Boardroom, JB Russell House,  
Gartnavel Royal Hospital, Great Western Road Glasgow,  
on Tuesday 7 November 2017**

**PRESENT**

Ms M Brown (in the Chair)

Mrs D McErlean (Co-Chair)	Mrs J Donnelly
Mrs T McAuley	Mrs R Sweeney
Councillor S Mechan	Councillor J Clocherty

**IN ATTENDANCE**

Dr J Armstrong	Medical Director (Item 68)
Mr J Best	Interim Chief Officer, Acute Services
Mr J Brown	Board Chairman
Mr G Capstick	Area Partnership Forum Staff Side Secretary
Mrs L Delgado	Area Partnership Forum Staff Side Secretary
Dr L Donaldson	Director of Medical Education (Item 68)
Ms J Erdman	Head of Equality and Human Rights
Mr K Fleming	Head of Health and Safety
Mr B Greene	Head of People & Change, Renfrewshire HSCP (Item 63.1)
Mrs G Hardie	HR Administrator
Mrs D Hudson	Staff Governance Lead/iMatter Ops Lead
Mrs L Lauder	Head of People & Change, Organisational Effectiveness
Mr D Leese	Chief Officer, Renfrewshire Health Social Care Partnership (Item 63.1)
Ms S Leslie	Depute Director of Human Resources and Organisational Development
Mr D Loudon	Director, Property, Procurement & Facilities Management Directorate (Item 67.2)
Mrs A MacPherson	Director of Human Resources and Organisational Development
Mr A McCready	Co-Chair, Non City HSCP Staff Partnership Forum
Ms E Maconachie	Audit Scotland (Observer)
Mrs N Owens	Head of People & Change, Developments and Support (Observer)
Ms L Yule	Audit Scotland (Observer)

**61. WELCOME AND APOLOGIES**

**ACTION BY**

The Chair opened the meeting by welcoming Councillor S Mechan and Councillor J Clocherty to their first meeting, and reported that Councillor J McColl was also now a member of the Committee. Mr David Leese, Chief Officer, and Mr Brian Greene, Head of People and Change, Renfrewshire Health and Social Care Partnership, were in attendance, supported by Mr Graham Capstick, to provide an update on the application of the Staff Governance Standard in their service. Mr Jonathan Best, Interim Chief Officer, Acute Services and Ms Sarah Leslie, Depute Director of Human Resources and Organisational Development, would also be providing the Committee with a presentation on the Acute Division's application of the Staff Governance Standard.

Dr Jennifer Armstrong, Dr Lindsay Donaldson, and Mr David Loudon were present to speak to specific agenda items. Ms L Yule and Ms E Maconachie from Audit

Scotland, and Ms Nareen Owens, Head of People and Change, Development and Support, were in attendance as observers.

Apologies for absence were intimated on behalf of Ms F Carmichael, Mrs J Grant, Ms M McCarthy and Councillor J McColl.

NOTED

**62. DECLARATIONS OF INTEREST**

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

NOTED

**63. PRESENTATIONS – Local Compliance with Staff Governance Standard**

**63.1 Presentation by Renfrewshire Health & Social Care Partnership**

The Staff Governance Committee received copies of the Renfrewshire Health and Social Care Partnership (HSCP) Staff Governance Action Plan.

Mr David Leese, Chief Officer, Renfrewshire HSCP, provided a presentation which outlined the Staff Governance Infrastructure and provided details of absence, KSF and iMatter metrics. Mr Leese then outlined the achievements and challenges noted in the Renfrewshire Staff Governance Action Plan.

The improvement in sickness absence which had been achieved within Podiatry was provided as a Case Study. A reduction of 3.6 % had been achieved by applying a range of measures.

After some discussion and clarification the Chair thanked Mr Leese, Mr Greene and Mr Capstick for providing the Committee with a succinct and informative presentation.

**63.2 Presentation by Acute Services Division**

A copy of the Acute Services Division Staff Governance Action Plan had been circulated to the Committee in advance.

Mr Jonathan Best, Interim Chief Officer, supported by Sarah Leslie, Depute Director of Human Resources and Organisational Development, presented to the Committee. Mr Best explained the Staff Governance structure and the current attendance, KSF and iMatter metrics. The presentation also provided details of achievements and challenges within the Acute Services Division.

The Acute Division Case Study focused on the Women and Children's Directorate iMatter Implementation Process which had resulted in 100% completion of iMatter action plans.

The Committee discussed the challenges presented by maintaining staff engagement and motivation in a period of rapid change and transformation. Mrs Sweeney indicated that 100% completion of iMatter action plans should be the norm rather than the exception.

The issue of staff completion of Statutory and Mandatory training was raised and Committee members expressed their concern at the current compliance figures and measures to improve the situation, and sanctions for non completion were discussed. Mr Best assured the Committee that work was underway to strengthen and improve the delivery and monitoring processes for Statutory and Mandatory training in NHSGGC.

A comprehensive report will be provided to the next meeting of the Committee which will include an accurate current position, timescales for rapid improvement and measures in place to support managers and staff to comply with organisational and legislative requirements

**J Best**

Ms Brown thanked Mr Best and Ms Leslie for an informative presentation and noted that a request had been made for a mandatory fire training update to be given to the next Acute Services Committee.

NOTED

**64. MINUTES**

The Minutes of the Staff Governance Committee meeting held on Tuesday 1 August 2017 NHSGC SGC(M)17/03 were accepted as a correct record.

Mrs McAuley asked for clarification on the approval process for the Remuneration Committee minutes. Following a brief discussion the Director of Human Resources and Organisational Development agreed to seek advice from the Head of Board Administration and to clarify the governance for the Remuneration Committee at the February meeting.

**A MacPherson**

NOTED

**65. ROLLING ACTION LIST**

The Employee Director had circulated the Rolling Action List (Paper 17/40).

Mrs McErlean provided a brief update on the items on the list which were not on the current Agenda and noted those marked as completed.

Mr Brown queried the presentation of statistics on days lost and cost of absence. It was explained that further analysis of the attendance statistics is underway and will be reported to the Acute Services Committee in due course. It was agreed to record that this information was still awaited and details would be reported in due course. The Head of Administration would be asked to include this as an action in the Acute Services Committee Rolling Action List.

**J Best/  
A MacPherson**

NOTED

**66. HEALTH AND SAFETY UPDATE**

The Head of Health and Safety circulated the Health and Safety Update paper (Paper 17/51) and provided a briefing on the main items discussed at the Health and Safety Forum meetings on 20 April and 19 July 2017.

Mr Fleming highlighted the main points discussed at the April Forum meeting including an update on progress to achieve the 25% reduction in overdue incidents on Datix and the 2016/17 Strategy and Action Plan year end report which had now been

finalised.

It was noted that the revised NHSGGC Asbestos Policy had been approved and that an eLearning programme was in place. The Annual Fire Safety Report noted that the total number of staff trained had increased by 16% from the previous year. More detailed data was being provided to management colleagues to enable them to further promote compliance. The Corporate Security Update indicated that key security issues for 2017/18 were theft, security access doors and Staff ID Badges.

The Head of Health and Safety advised that a formal response had been sent to the Health and Safety Executive following notification of their findings in relation to the visits in February/March 2017. It was noted that follow up visits had taken place on 7 and 19 September and 1 November 2017 and that 2 notices had been issued which the Board were required to comply with by end of February 2018. These related to skin health surveillance practices at the QEUH and the types of glove in use. It was noted that glove usage was in line with infection control recommendations and were used across NHS Scotland. This will be raised at national level to establish the NHSScotland position.

NOTED

**67. MATTERS ARISING FROM THE MINUTES**

**67.1 Attendance Management Update**

The Director of Human Resources and Organisational Development had circulated Paper 17/41 providing an update on Attendance Management.

Mrs MacPherson updated on the request made at the last meeting for a more detailed update and presentation of data in a simpler format. The Depute Director of Human Resources and Organisational Development was working with Heads of People and Change and an Attendance Management Performance Group was in place to support and improve staff attendance at work.

Ms Leslie reported that the sickness absence rate for NHSGGC for the month ending August 2017 was 5.17%. Graphs providing more detail and comparisons were provided.

Actions to improve performance in this area were outlined including support materials available on the HRConnect site for staff on key issues such as stress, finance, carer support and depression as well as support materials for managers in creating a healthier workplace and supporting staff in the area of health and wellbeing. The Attendance Management Performance Group has commissioned a range of initiatives including a review of absence within Mental Health and LD services. New escalation reports have been implemented, and various initiatives have been put in place including support for flu immunisation and winter staffing plans, attendance management clinics, revision of the Attendance Management training programme, and bespoke training on managing stress at work.

Ms Leslie also advised of the approach being adopted within the Property Procurement and Facilities Management Directorate to address the high levels of sickness absence. It was recognised that a continued and sustained effort would be required to make progress to deliver the 4% absence target for NHSGGC.

Mr J Brown questioned the presentation of some of the attendance figures noting that variations made it difficult to make valid comparisons and consequent conclusions. The Depute Director of Human Resources and Organisational Development agreed to revise the presentation methodology to address these concerns.

S Leslie

It was reported that flu immunisation for staff was at 28% uptake after four weeks and Mr Brown asked for an update on actions to improve this figure. It was noted that staff were being encouraged by managers and staff side to take up the offer of immunisation and the availability of flu immunisations and sessions had been widely promoted. Regrettably many staff do opt not to undergo immunisation for a variety of reasons.

It was recognised that every effort must be made to encourage employees to be immunised including highlighting the risk to patients and colleagues inherent in a low immunisation rate in NHS GGC.

NOTED

### **67.2** Fire Safety Training Update

The Director of the Property Procurement and Facilities Management Directorate introduced this subject noting the concerns expressed by members of the Staff Governance Committee at the previous meeting in relation to completion of Fire Safety training by staff in NHS GGC.

Mr Best, Interim Chief Officer, Acute Services, updated on the project group that had been established in the Acute Division to rapidly improve compliance. A broad range of measures were being implemented including improvements in reporting and measurement of compliance and a clearer definition of the different types of Fire training available and the nature and timings of the training required by different staff groups.

Sustained promotion of Fire Safety training was ongoing and had resulted in 2079 staff undertaking general Fire Safety training during September 2017 and 289 Fire Evacuation sessions being provided by Fire Advisers within clinical areas.

Mrs Sweeney suggested that the key issue was not how many staff had attended training programmes, but ensuring that staff in all areas were competently trained to the required level at any given time. It was agreed that this was the assurance the Committee required.

An update on progress would be provided to the Acute Services Committee and a copy circulated remotely to the Staff Governance Committee members given that the next meeting would not take place until February 2018.

J Best

A further comprehensive update would also be given at the next Staff Governance Committee meeting.

J Best

NOTED

### **67.3** Release Potential – BME Forum

Ms Erdman, Head of Equality and Human Rights, advised that following discussion at the previous meeting, consideration was being given to creating a Black Minority Ethnic Forum for NHS staff. It was noted that currently a Disability Forum and LGBT

Forum were in place within the organisation.

It was intended to engage with BME staff to discuss their issues and scope out what would be required to put the forum in place. Ms Erdman would be meeting with Mrs MacPherson and Mrs Lauder in order to consider the best way to move this forward and the process and timescales involved. On an ongoing basis, it was important to check with current forums that they are still fit for purpose.

**J Erdman**

The Committee would be kept updated on progress.

NOTED

**68. UPDATE ON GENERAL MEDICAL COUNCIL VISIT**

The Medical Director had circulated an Update on the General Medical Council visit to Inverclyde Royal Hospital (Paper 17/43). Dr Jennifer Armstrong, Medical Director, introduced the item and provided background information.

Dr Lindsay Donaldson, Director of Medical Education, advised that the visit had taken place on 7 October 2017 at Inverclyde Royal Hospital. The GMC visit had gone well and initial feedback had indicated that there were no serious concerns. The draft report highlighted areas which were working well and areas which could be improved on. Dr Donaldson confirmed that the three areas highlighted for improvement were being addressed ie appointment of clinical teaching fellows, rota issues and lack of an appropriate rest room. The formal report would be provided in due course.

**J Armstrong**

It was noted that while the Beatson Oncology Centre, Paediatric Cardiology and Vale of Leven Hospital were no longer on GMC enhanced monitoring, the QEUH was. A further meeting with the GMC would be held early in the new year to progress this and an update would be provided with future Medical Director reports.

**J Armstrong**

NOTED

**69. WHISTLEBLOWING MONITORING REPORT**

The Head of Administration had provided the Half Year Monitoring Report for the period April 2017 to September 2017 (Paper 17/44).

Ms Brown advised that there had been three Whistleblowing cases investigated within NHSGGC during the six month period. These had been reviewed and the Whistleblowing Champion requested sight of the concluded reports prior to confirming assurance. The final reports on these cases and an update on the implementation of the recommendations will be included in the year end report to the Committee.

Mr Brown thanked Ms Brown for the work she had undertaken on Whistleblowing governance and assurance processes.

NOTED

**70. WHISTLEBLOWING ALERT AND ADVICE SERVICE**

The Head of People and Change, Organisational Effectiveness, had provided a paper on the NHS Scotland Whistleblowing Alert and Advice Service for information (Paper 17/45).

A new Whistleblowing Alert and Advice Service for NHS Scotland had been launched to replace the previously used NHS Scotland Confidential Alert Line. Trained advisers are available to assist staff with any concerns and can pass on such concerns to the appropriate NHS Board. The service will continue to be run by Public Concern at Work.

The Scottish Government have indicated their intention to appoint a National Whistleblowing Officer and undertake a national launch later in 2018. It was noted that awareness-raising was underway across NHS GGC, utilising standard communication routes and payslip messages. The potential for running whistleblowing workshops will be considered later in the year.

NOTED

**71. STAFF GOVERNANCE 2016/17 ANNUAL REPORT TO NHS BOARD**

The Director of Human Resources and Organisational Development had provided a paper on the Staff Governance Annual Report to the NHS Board (Paper 17/46).

The report had been prepared in conjunction with the Co-Chairs and described the role of the Committee and highlighted issues which had been discussed and considered by the Staff Governance Committee during 2016/17. The report also outlined future priorities for the Committee. Members were requested to provide any comments on the report to Mrs Lauder or Mrs MacPherson.

Members

Following discussion, it was agreed to amend the report to provide an update on Statutory and Mandatory training and Attendance Management. The updated report would be circulated to members and thereafter submitted for the NHS Board meeting in December 2017.

A MacPherson

Following a suggestion from Mrs Sweeney it was agreed it would be helpful to include information on statutory mandatory training, particularly relating to fire safety and induction, as part of the workforce information presented to the Board by service areas. This information will be included in a revised template from May 2018 onwards.

L Lauder

NOTED

**72. AREA PARTNERSHIP FORUM REPORT**

The Employee Director had circulated a report comprising the Area Partnership Forum Report and minutes of the meetings of the Forum held on 24 May 2017 and 16 August 2017 (Paper 17/47).

Mrs McErlean updated on recent issues being discussed by the Area Partnership Forum including the Annual Review meeting with the Cabinet Secretary for Health and Sport where the session had focused on finance, communication and relationships between Acute and Integrated Joint Boards, and Pay issues. The Forum also discussed the funding to the Board, particularly with regards to shifting the balance of care.

In addition, the Forum continues to discuss a number of other important matters including the Local Delivery Plan and Financial Plan, Streamlining processes, workforce statistics, partnership working, and policy development.

The Forum is also involved in a large and varied range of workstreams including supporting the Dignity at Work survey, child care vouchers, workforce plans, implementation of the nursing and midwifery rostering policy, business continuity, financial inclusion and universal credit. Assistance and support is also provided for reviews that may have organisational change implications.

NOTED

**73. STAFF GOVERNANCE WORKPLAN – Treated Fairly and Consistently**

The Director of Human Resources and Organisational Development had circulated the Staff Governance Workplan 2017/18 (Paper 17/48). The Workplan had been updated and at this meeting would focus on the Treated Fairly and Consistently strand of the Staff Governance Standard.

Mrs MacPherson advised that the Workforce Equality Group continued to progress the Equality Action Plan. The guidelines for managers on reasonable adjustments for staff with a disability had been finalised and were under discussion with the Area Partnership Forum. Work had also been undertaken to create a Transitioning in the Workplace Protocol.

A proposed organisational culture framework had been created with Organisational Development colleagues and was currently being reviewed and discussed with the Chief Executive prior to wider circulation. A separate piece of work had been undertaken with BMA, Chiefs of Medicine and Postgraduate leads regarding consultant behaviours and a framework proposal would be drawn up for wider consultation

Ms Erdman pointed out that diversity data was no longer included in the presentations from service areas and suggested that this should be reinstated. It was agreed that the presentation template should be adjusted to include this information.

**L Lauder**

NOTED

**74. DIGNITY AT WORK SURVEY**

The Head of People and Change, Organisational Effectiveness, had circulated the report on the Dignity at Work Survey (Paper 17/49) which was being undertaken across NHSGGC from 6 November 2017.

Mrs Lauder advised that the national staff survey had been paused in 2016 to allow the implementation of iMatter. However, due to staff side concerns that critical issues such as bullying and harassment and whistleblowing were not included in iMatter, it was agreed to implement a Dignity at Work survey in all Scottish Health Boards

Most of the Health and Social Care Partnerships had chosen to survey Health staff only, with East Renfrewshire HSCP being the exception and including Council staff. The results from the survey would be provided by Directorate/HSCP and advice was being sought on whether this could also be provided by job family. Staff side were encouraging members to complete the survey.

The final report would be available in February 2018 and would be reported back to Staff Governance Committee thereafter.

**L Lauder**

NOTED

**75. ORGANISATIONAL CULTURE/REVIEW OF FTFT**

The Director of Human Resources and Organisational Development had circulated Paper 17/50 on the review of Organisational Culture/Facing the Future Together (FTFT).

It was noted that a new approach to organisational culture was currently being developed which would subsume the current FTFT programme . A framework paper setting out this new approach will be available for the December Board meeting.

The Director of Human Resources and Organisational Development would provide regular updates to the Staff Governance Committee.

**A MacPherson**

NOTED

**76. WORKFORCE STATISTICS**

The Head of People and Change, Organisational Effectiveness, had circulated Paper 17/52 which provided Workforce Statistics to the end of September 2017.

It was noted that the declaration of disability figure had gone down during this period and consideration would have to be given to how this can be improved, perhaps with support from the Staff Disability Forum.

**J Erdman**

Mrs Lauder advised that she would arrange for Jonathan Pender, Workforce Planning and Analytics Manager to attend a future meeting to support a more detailed discussion of the workforce statistics.

**L Lauder**

NOTED

**77. NHSGGC ANNUAL WORKFORCE PLAN 2017-18**

The Head of People and Change, Organisational Effectiveness, had circulated the NHSGGC Annual Workforce Plan 2017-18 (Paper 17/53).

The Workforce Plan had been developed through an agreed consultation process overseen by the joint management/staff side Workforce Plan Development Group. In line with national requirements, the final Plan was published on the NHSGGC website on 31 August 2017. Refreshed guidance on workforce plans was expected from Scottish Government next year.

Mrs MacPherson advised that future Workforce Plans would require to align with the Board's Transformational Plan and reflect the Regional Workforce Plans. The Audit Scotland report on Workforce Plans would also be taken into consideration.

NOTED

**78. STAFF HEALTH STRATEGY**

The Director of Human Resources and Organisational Development had circulated a paper on the Staff Health Strategy (Paper 17/54).

Mrs MacPherson advised that the Staff Health Strategy had been launched in September 2017 following engagement with a wide range of stakeholders. The Staff Health Strategy Governance Group would oversee strategy implementation going

forward. The Strategy had been presented at the Board Seminar and would also be presented to the Area Partnership Forum.

Mrs MacPherson would provide regular updates to the Committee on progress with any actions within the Strategy.

**A MacPherson**

NOTED

**79. NON EXECUTIVE DIRECTOR ROLES IN CAMPAIGNS/LAUNCHES**

The Director of Human Resources and Organisational Development had circulated a paper provided by the Head of Administration on Non Executive Director involvement in campaigns and launches for information (Paper 17/55).

Mrs Sweeney and Mrs McAuley advised that the list did not appear to be accurate in terms of their responsibilities. The Chair asked that members notify Mrs Hardie of any inaccuracies in the paper and these would be reported back to the Head of Administration.

**G Hardie**

NOTED

**80. ORGANISATIONAL DEVELOPMENT STRATEGIC FORUM MINUTES**

A paper from the Director of Human Resources and Organisational Development (Paper 17/56), enclosing the Organisational Development Strategic Forum minutes of 29 June 2017, had been circulated for information.

NOTED

**81. MEETING/PRESENTATION SCHEDULE 2018**

The Head of People and Change, Organisational Effectiveness, had circulated Paper 17/57 which outlined the meeting and presentation schedule for 2018.

The meeting schedule was agreed. In relation to the Presentations, it was noted that presentation and action plan templates had been provided to service areas for use to ensure consistent reporting to the Committee. Despite this, members felt that the information was not always presented in a consistent manner.

Mrs MacPherson agreed to provide members with a copy of the templates, and recirculate these to Directors and Heads of People and Change to remind them of the importance of using a consistent reporting template for Staff Governance.

**A MacPherson**

NOTED

**82. DATE & TIME OF NEXT MEETING**

The next meeting of the Staff Governance Committee would be on Tuesday 6 February 2018 at 1.30 pm in the Boardroom, JB Russell House, Gartnavel Royal Hospital.

The meeting ended at 4.55 pm.