

NHSGGC SGC(M)18/02
Minutes: 19 - 34

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 1 May 2018**

PRESENT

Ms M Brown (in the Chair)

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

IN ATTENDANCE

Mr J Best	Interim Chief Officer, Acute Services
Mr G Capstick	Area Partnership Forum Staff Side Secretary
Ms F Carmichael	Co-Chair, Acute Staff Partnership Forum
Ms A Cooper	Medical Staffing HR Manager (Item 25)
Mrs L Delgado	Area Partnership Forum Staff Side Secretary
Mr K Fleming	Head of Health and Safety
Mr G Forrester	Deputy Head of Administration (Item 31)
Mrs J Grant	Chief Executive
Ms L Gregson	HR Business Partner, East Renfrewshire HSCP (Item 21.1)
Mrs G Hardie	HR Administrator
Mrs D Hudson	Staff Governance Lead/iMatter Ops Lead
Ms M A Kane	Interim Director, Property Procurement & Facilities Management (Item 21.2)
Professor P Knight	Associate Medical Director (Item 25)
Mrs L Lauder	Head of People & Change, Organisational Effectiveness
Mrs A MacPherson	Director of Human Resources and Organisational Development
Mr A McCready	Staff Side Chair, Non City HSCP Staff Partnership Forum
Mrs J Murray	Chief Officer, East Renfrewshire Health & Social Care Partnership (Item 21.1)
Mr J Pender	Workforce Planning and Analytics Manager (Item 26)
Mrs R Wall	Occupational Health Service Manager (Item 24.2)
Mr S Wallace	Head of People & Change, PPFM Directorate (Item 21.2)

19. WELCOME AND APOLOGIES

ACTION BY

The Chair opened the meeting by welcoming Mrs Julie Murray, Chief Officer, and Ms Lisa Gregson, HR Business Partner, East Renfrewshire Health and Social Care Partnership, who were in attendance to provide an update on the application of the Staff Governance Standard in the HSCP. Ms Mary Anne Kane, Interim Director, and Mr Stephen Wallace, Head of People and Change, Property Procurement and Facilities Management Directorate, would also be providing the Committee with a presentation on the PPFM's application of the Staff Governance Standard.

Mr Jonathan Pender, Mrs Rona Wall, Professor Paul Knight, Ms Angela Cooper and Mr Graeme Forrester were present to speak to specific agenda items.

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Apologies for absence were intimated on behalf of Dr Jennifer Armstrong, Mrs Sybil Canavan, Mrs Jeanette Donnelly, Ms Sarah Leslie, Ms Margaret McCarthy, Councillor Jonathan McColl, and Mrs Rona Sweeney.

NOTED

20. DECLARATIONS OF INTEREST

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

NOTED

21. PRESENTATIONS – Local Compliance with Staff Governance Standard**21.1 Presentation by East Renfrewshire Health & Social Care Partnership**

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

Mrs Julie Murray, Chief Officer, East Renfrewshire HSCP, supported by Lisa Gregson, HR Business Partner, gave a presentation which set out the Staff Governance structures and provided details of absence, KSF, iMatter and Fire Training Compliance metrics. Mrs Murray then outlined the achievements and challenges highlighted in the East Renfrewshire Staff Governance Action Plan.

The case study provided details of the Fit for the Future Redesign Early Engagement Sessions. Mrs Murray outlined the steps which had been taken to ensure successful engagement with staff.

Following discussion, the Chair thanked Mrs Murray and Ms Gregson for providing the Committee with a focused and informative presentation. The HSCP were commended on the positive scores achieved in iMatter and it was noted that further work would be required to increase iMatter action planning rates and improve IT access for staff who cannot easily access a PC.

21.2 Presentation by Property Procurement and Facilities Management

A copy of the Property Procurement and Facilities Management Directorate Action Plan had been circulated to the Committee in advance.

Ms Mary Anne Kane, Interim Director of the Property Procurement and Facilities Management Directorate, supported by Stephen Wallace, Head of People and Change, presented to the Committee. Ms Kane updated on the Staff Governance infrastructure and the current attendance, KSF, iMatter and staff induction metrics. The presentation also provided details of achievements and challenges within the Property Procurement and Facilities Management Directorate.

The Property, Procurement and Facilities Management case study focused on the success of the Estates Modern Apprenticeship programme.

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Following a brief discussion, the Chair thanked Ms Kane and Mr Wallace for providing a succinct and informative presentation. The Committee recognised the excellent work within the Directorate to improve career opportunities for young people and ensure the supply of a skilled workforce for the future and also acknowledged the achievement of a 94% success rate with iMatter action planning.

It was noted that specific projects were ongoing to improve attendance management within PPFM and a proactive approach was being taken to improve access to IT for staff.

NOTED

22. MINUTES

The Minutes of the Staff Governance Committee meeting held on Tuesday 6 February 2018 NHSGC SGC(M)18/01 were accepted as a correct record.

NOTED

23. ROLLING ACTION LIST

The Employee Director had circulated the Rolling Action List (Paper 18/14).

Mrs McErlean provided a brief update on the items on the list which were not on the current Agenda and highlighted those items which had been actioned and were now marked as completed.

NOTED

24. MATTERS ARISING FROM THE MINUTES**24.1 Dignity at Work Survey**

The Head of People and Change, Organisational Effectiveness had circulated a paper on the Dignity at Work Survey 2017 (Paper 18/15).

It was noted that the survey took place from 6-27 November 2017 and was designed to supplement the iMatter survey by covering issues such as whistleblowing, dignity at work, and bullying and harassment, which were not included in the iMatter survey.

A response rate of 33% had been achieved in NHSGGC and Mrs Lauder provided the Committee with an overview of the survey results. The action plans from Directorates/HSCPs were expected by 18 May 2018 and a Boardwide overview of outcomes would be available by the end of May 2018.

The survey demonstrated that while 65% of staff believed it was safe to speak up, 35% of staff believed that it was not safe to speak up and this is something that would need to be addressed in the Board action plan. In addition, the low rate of disability declaration was also recognised as an area for improvement.

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It was noted that work had been undertaken to encourage staff to speak out about concerns and to declare disability, with further initiatives planned in an effort to improve in both areas. In response to a query, it was confirmed that mediation was promoted within NHSGGC and was always encouraged as an option before invoking the Dignity at Work policy.

NOTED**24.2** Healthy Working Lives Survey

The Occupational Health Service Manager had circulated a paper on the Healthy Working Lives Survey (Paper 18/16).

Mrs Wall advised that the Healthy Working Lives Award Scheme requires that a health and wellbeing survey is undertaken every three years. The most recent survey was undertaken in 2017 and the results were presented to the Committee. It was noted that 1829 staff completed the survey which represented 6% of the workforce.

The importance of support for staff impacted by stress and mental health issues was discussed and recognised as a critical element of Healthy Working Lives. The Committee requested a specific paper on this issue at the next meeting. The paper should present available data and support available for managers and employees.

R Wall

NOTED**24.3** Fire Safety Training Update

The Interim Chief Officer for Acute Services had circulated a paper which provided an update on Fire Evacuation and General Awareness Fire Safety Training (Paper 18/17).

Mr Best advised that General Awareness training showed an overall Board compliance rate of 78.7% for the period 1 April 2016 to 18 April 2018. From 1 April 2017 to 31 March 2018, 702 Fire Evacuation training sessions were undertaken and a total of 6,935 staff trained. It was noted that Fire Evacuation Training is provided on site and is bespoke for each department. These figures represent a significant increase on previous years due to an extensive promotional campaign in the last six months.

In line with new national guidance, and following discussion with the NHS Scotland National Fire Safety Advisor and representatives of Strathclyde Fire and Rescue, recommendations for improving the Board approach to Fire Safety and Training will be considered by the NHSGGC Corporate Management Team in the near future and reported to the Staff Governance Committee at a future meeting.

J Best

The Committee noted the progress to date and were reassured by the ongoing robust approach, although sought clarification on the target aimed for. Updates would continue to be provided at future Staff Governance Committee meetings and it was confirmed that NHSGGC were aiming for 90% compliance by the end of June 2018.

J Best

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24.4 Statutory and Mandatory Training Update

The Head of People and Change, Organisational Effectiveness, had circulated a paper on Statutory and Mandatory Training (Paper 18/18).

A refresh of the current Statutory and Mandatory training programme and modules had taken place and performance monitoring was in place through MicroStrategy to allow managers to track progress of training for staff in their area by topic.

This was the first Statutory and Mandatory report to the Committee and further refining would continue in order to improve data capture and presentation.

The paper provided details of compliance for each of the nine topics and by Directorate/HSCP. Generally compliance is improving but there are variations across topics and services which are not acceptable. Concern was expressed around the infection control compliance figure and this should be highlighted to the Board Nurse Director.

L Lauder

The Chair thanked Mrs Lauder for the work undertaken to date which has given Statutory and Mandatory training compliance visibility and allowed scrutiny.

Given the need for improved performance, Statutory and Mandatory training data would now be a standing item at future Staff Governance Committee meetings.

L Lauder

NOTED**24.5** Staff Governance Monitoring Framework 2017-18

The Head of People and Change, Organisational Effectiveness, had circulated the completed Staff Governance Monitoring Framework (Paper 18/19).

The annual request to complete the Staff Governance Monitoring Framework had been received from Scottish Government Health Directorate and the completed template for NHSGGC had been circulated to members for comment and approval.

Mrs McAuley requested that the section 'strategic action by Board to support staff to maintain attendance' should make reference to the fact that there is visibility of this issue at Board level. The Chair indicated she had a couple of minor changes to make which she would forward to the Staff Governance Lead.

L Lauder

Following these changes, the template was agreed for signature by the Co-Chairs and the Chief Executive, and thereafter submission to SGHD.

L Lauder

AGREED**24.6** Recruitment Shared Services Update

The Director of Human Resources and Organisational Development had circulated a report providing an update on the National Shared Services Recruitment Workstream (Paper 18/20).

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It was reported that the aim of the review was to simplify and standardise processes and allow sharing of best practice across Scotland.

Following wide stakeholder engagement a recommendation had been made that recruitment services be delivered from three regional hubs, with NHSGGC being part of the West of Scotland Regional hub. The Board Chief Executives will consider the proposal before the end of June 2018.

In addition, the Electronic Employee Support System (eESS) is expected to be live by the end of 2018.

NOTED

25. MEDICAL REVALIDATION

The Medical Director had circulated a paper on Medical Revalidation and the Professional Governance Annual Report 2016/17 (Paper 18/21). Professor Paul Knight, Associate Medical Director, and Angela Cooper, Medical Staffing HR Manager, were present to speak to the paper.

Professor Knight advised that the Board had achieved 95% appraisal completion for the appraisal year 2016/17 thereby achieving the Healthcare Improvement Scotland target. The focus during 2018 would be on improving the quality of the appraisal process and a pilot is underway in relation to improving the experience of Clinical Fellows in the appraisal process. NHSGGC is also developing a process to ensure that doctors are reflecting on the full spectrum of their practice during appraisal and this would be monitored using sample audits.

It was reported that the General Medical Council have developed a Responsible Officer dashboard which will allow appropriate access to data that the GMC hold on appraisal and revalidation and ongoing fitness to practise cases.

The Chair thanked Professor Knight for the very helpful and comprehensive report which provided significant assurance to the Board.

Professor Knight indicated that he would be stepping down from the Associate Medical Director role. Ms Brown thanked Professor Knight for his significant contribution to the medical revalidation process and conveyed the Committee's best wishes for the future.

NOTED

26. WORKFORCE STATISTICS

The Head of People and Change, Organisational Effectiveness, had circulated Paper 18/22 which provided Workforce Statistics for the quarter ending March 2018.

Mr Jonathan Pender, Workforce Planning and Analytics Manager, spoke briefly to the workforce dataset, HR Activity, and workforce equality information and highlighted

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points of interest. As requested at the last meeting, disciplinary figures had been split to show attendance management or misconduct, and in addition information had been included regarding Corporate Services disciplinary figures, and the NHSGGC Executive and Senior Manager gender pay gap.

It was noted that benchmarking data was being sought in relation to the NHSGGC gender pay gap and would be reported back along with details of any required actions to address the gender pay gap.

L Lauder

Following a query on linking turnover and vacancies with attendance, it was noted that a suite of reports is provided to managers which enables them to make comparisons and connections across a range of data.

NOTED

27. 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 20 December 2017 and 24 January 2018 (Paper 18/23).

Mrs McErean updated on recent issues discussed by the Area Partnership Forum including Regional Planning, the Transformational Agenda/Financial Strategy, the Moving Forward Together programme, Succession Career and Development Planning, Statutory and Mandatory Training, Everyone Matters: 2020 Vision and Policy Development. It was noted that the Director of Finance had presented the paper on Transformational Agenda/Financial Strategy and staff side are involved in the Moving Forward Together workstreams.

The Forum is also involved in a large and varied range of projects/issues including eESS, Turas, Contracts of Employment, mainstreaming Job Evaluation and Financial Inclusion.

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28. HEALTH AND SAFETY REPORT

The Head of Health and Safety had circulated the Health and Safety update and minutes of the meeting of the Forum held on 24 October 2017 (Paper18/24).

Mr Fleming highlighted some issues discussed at the Health and Safety Forum meeting on 24 October 2017 including Datix overdue incidents, a fire and security update, and Statutory Mandatory training.

Following the visit and report of the Health and Safety Executive in February/March 2017 an Action Plan has been created. The Action Plan addresses important areas including patient falls, sharps safety and skin health and a number of NHSGGC documents had been revised or updated based on the HSE findings. Follow up visits and meetings had taken place and further visits were expected from the HSE. A formal response on the follow up visits has not been received, however, any further updates would be reported to the Staff Governance Committee in due course.

K Fleming

NOTED**29. ANNUAL REVIEW OF STAFF GOVERNANCE WORKPLAN**

The Director of Human Resources and Organisational Development had circulated the Staff Governance Workplan which had been refreshed for 2018/19 (Paper 18/25).

Mrs MacPherson advised that the Workplan was a draft document and would be further reviewed to take account of the NHSGGC Corporate Objectives, iMatter results and other current initiatives.

A performance monitoring section had been added to the Workplan to measure success under each action. It was suggested that it may be helpful for those with lead responsibility for each action to attend meetings and provide an update on progress.

Following the suggestion of a small change by Mrs McErlean, the Committee agreed the Workplan for 2018/19.

AGREED**30. WHISTLEBLOWING MONITORING REPORT AND UPDATE**

The Whistleblowing Champion had circulated the Whistleblowing Annual Report April 2017 – March 2018 (Paper No 18/26).

Ms Brown advised that Jennifer Haynes, Interim Corporate Services Manager, would attend future meetings to present Whistleblowing reports.

It was noted that the conclusion of the work to develop National Whistleblowing Standards and the appointment of the Independent National Whistleblowing Officer were still awaited. Ms Brown attended a workshop in February 2018 with colleagues from other NHS Boards in order to contribute to the development of the national policy and the role of the Independent National Whistleblowing Officer.

It was recognised that the role of the Whistleblowing Champion was to scrutinise the Board's Whistleblowing policy and processes and to provide assurance to the Board that Whistleblowing in NHSGGC was being dealt with appropriately and in line with Board values and policy.

It is the responsibility of NHSGGC to ensure that a culture is in place which encourages employees to speak up without fear and which provides support to those that do.

The Monitoring Report for the period 1 April 2017 to 31 March 2018, the Assurance Overview and Areas for Improvement appendices were all noted. The report would now be submitted to the Audit Committee and Area Partnership Forum.

NOTED

31. REVIEW OF STAFF GOVERNANCE COMMITTEE REMIT

The Deputy Head of Administration had circulated a paper on the annual review of the Staff Governance Committee Remit (Paper 18/27).

As part of the Annual Review of Corporate Governance, a formal review of the remit of the Standing Committees of the NHS Board is undertaken. The Deputy Head of Administration had provided a copy of the Staff Governance Committee remit and invited the Committee to consider the remit and confirm that it remained fit for purpose.

It was noted that at point 2.4 Membership, the Area Partnership Forum HSCPs Joint Trade Union representation should be split to allow for Glasgow City and Non City Partnerships representation. With that small change, the Committee agreed the Staff Governance Committee remit. The updated remit will be taken to the Audit Committee and NHS Board for approval.

AGREED

32. INTRODUCTION OF TURAS PERFORMANCE SYSTEM

The Head of People and Change, Organisational Effectiveness, had circulated Paper 18/28 which provided an update on the introduction of the Turas Performance System.

Mrs Lauder advised that Turas went live on 2 April 2018 for all NHS Boards. A communication plan had been put in place and the transition had gone smoothly. The system was more intuitive and user friendly than the previous eKSF system and Mrs Lauder outlined some of the new features of the system. The Turas appraisal system will be able to report on KSF performance in NHSGGC from the beginning of July 2018.

It was noted that Turas Executive Appraisal would replace the current Online Performance Management System for Executive and Senior Manager appraisal from the 2018/19 performance year.

NOTED

33. REMUNERATION COMMITTEE MEETING 24 APRIL 2018

The Employee Director provided a brief update on decisions taken at the recent Remuneration Committee on 24 April 2018. Mrs McErlean advised that she was unable to attend the meeting however she had met with the Committee Chair to agree outcomes to be reported.

The Remuneration Committee ratified performance appraisals for 2016/17 for senior managers, and noted both the report on Turas Executive Appraisal, and the interim arrangements for the Executive team. The Committee was unable to conclude discussions on governance arrangements and would consider this matter further at the next meeting.

NOTED

34. DATE & TIME OF NEXT MEETING

The next meeting of the Staff Governance Committee would be on Tuesday 7 August 2018 at 2.00 pm in the Boardroom, JB Russell House, Gartnavel Royal Hospital.

The meeting ended at 4.00 pm.