NHS Greater Glasgow and Clyde

NHS Board Meeting   **19th February 2019**   **Paper No 19/10**

Co-Chairs – Staff Governance Committee

Staff Governance Committee Annual Report 2017-18

1.   Recommendation:

1.1   The NHS Board is asked to note the Staff Governance Committee Annual Report for 2017-18.

2.   Purpose of Paper:

2.1   The attached report describes the role and remit of the Staff Governance Committee, along with an update on the activities undertaken within each element of the Staff Governance Standard, as outlined in the NHS Greater Glasgow and Clyde (NHSGGC) Staff Governance Workplan, during 1st April 2017 to 31st March 2018.

2.2   The report highlights the areas of success and opportunities for continued improvement identified during 2017-18 and the required areas of focus going forward.

3.   Key Issues to be considered:

3.1   The Board is particularly asked to note Sections 9 and 10 which outline achievements during 2017-18 and future priorities for 2018-19.

Any Patient Safety /Patient Experience Issues: N/A

Any Financial Implications from this Paper: N/A

Any Staffing Implications from this Paper: The paper supports the delivery of the Staff Governance Standard

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: Better Workplace

Dear Board Member,

<u>Staff Governance Committee Annual Report 2017-18</u>

We are pleased to present the annual report of the Staff Governance Committee for 2017-2018. The report contains an update on the activities, achievements and challenges within each element of the Standard, and sets out the priorities for 2018-19.

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 NHS Greater Glasgow and Clyde fulfils its role and remit by agreeing a series of actions for NHSGGC and the services within it and by monitoring performance on a continuous basis.

This year the Staff Governance Committee has been particularly pleased to note:

1. The successful implementation of a staff engagement strategy for the Board's transformational change programme, 'Moving Forward Together.' This has resulted in positive feedback from well attended sessions which were delivered in partnership through members of the Area Partnership Forum.
2. Excellent examples of NHSGGC working in partnership with external agencies, local authorities, schools and colleges to create access to training and jobs for a wide range of people e.g. Clyde Gateway and Skills Development Scotland.
3. Integrated working in Health and Social Care Partnerships (HSCPs) which demonstrates how integrated services can deliver person-centred care in a community setting, e.g. The Independent Living Centre at Inverclyde HSCP.
4. NHSGGC being awarded Level 2 Disability Confident status and publishing Guidelines for Managers to support them in the application of reasonable adjustments for staff with a disability.
5. The smooth transition of Doctors and Dentist in Training across the West of Scotland to NHS Greater Glasgow and Clyde as the lead employer in the West Region.
6. The continued implementation of the NHSGGC Staff Health Strategy.
7. The introduction of a Succession Planning and Career Development Framework for all staff to support managers and staff on their career pathways.

This year, the Staff Governance Committee has particularly focussed on:

1. Measuring the performance of all services in respect of meeting the Staff Governance Standards and Staff Governance measures, promoting continuous improvement in areas of development and celebrating success in areas of strength.
2. Supporting NHSGGC to significantly improve statutory and mandatory training compliance across all service areas, particularly with Fire Safety training.
3. Promoting and raising awareness of the NHSGGC Whistleblowing Policy throughout the Board, including the provision of training sessions for Directors and Senior Managers involved in supporting Whistleblowing policy and practice.
4. Ensuring that the experience of Doctors and Dentists in Training has been reviewed and has improved through regular monitoring of external reports e.g. successful GMC visit in partnership with the University of Glasgow.

We hope that you find this report helpful.

Ms M Brown (Joint Chair)   **Mrs D McErlean (Joint Chair)**

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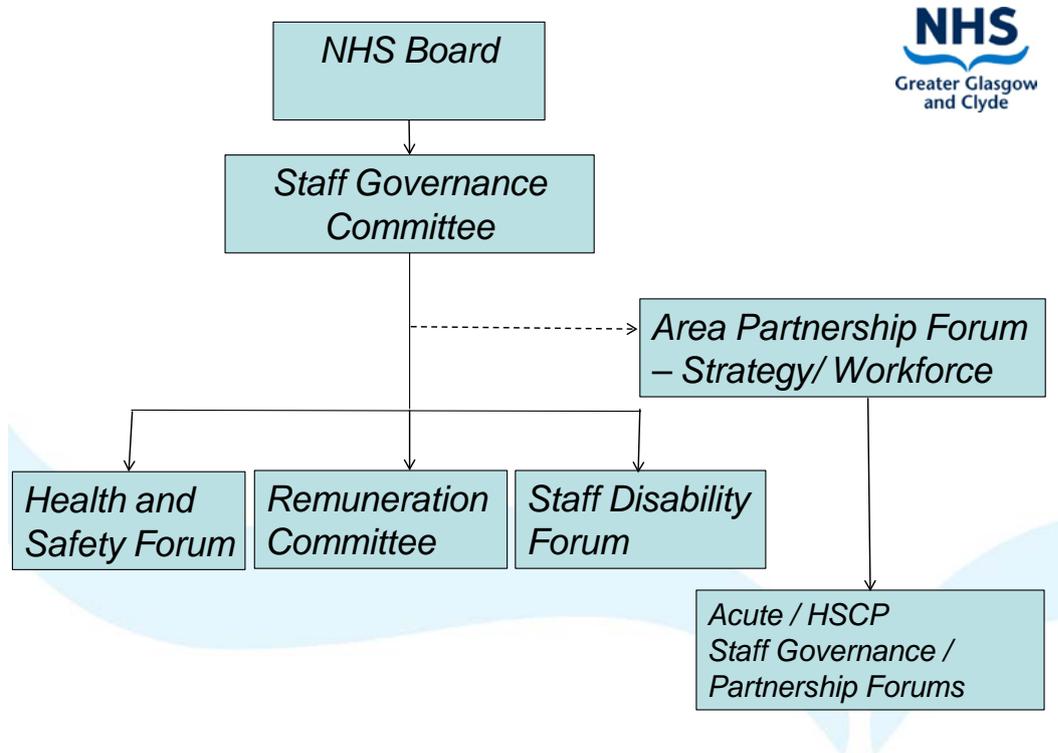
1.   The Staff Governance Committee

1.1   The purpose of the Staff Governance Committee is to provide assurance to the Board that NHS Greater Glasgow and Clyde meets its obligations in relation to staff governance under the National Health Service Reform (Scotland) Act 2004 and the Staff Governance Standard. The Staff Governance Committee is a Committee of the NHS Board.

1.2   The Committee ensures that a Staff Governance infrastructure is in place which supports the Board to set and meet Staff Governance objectives and action plans. The Committee monitors performance and is accountable to the NHSGGC Board for the implementation of the Staff Governance Standard.

2.   Remit of the Committee

2.1   The Committee ensures that structures and policies are in place to provide assurance 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.

2.2   Each Health and Social Care Partnership, the Acute Division and Corporate departments have their 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.

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

2.4   The Committee also provides governance for the NHSGGC Health and Safety Forum, Staff Disability Forum and the Workforce Analytics Sub-Group, and any other standing or ad hoc groups as agreed by the NHS Board. In 2017/18, the Committee agreed to provide governance and oversight of the NHSGGC Medical Education and Medical Revalidation Committee and receive regular reports going forward.

2.5   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.

2.6 The Remuneration Committee is also a subgroup of the Staff Governance Committee and oversees the process surrounding remuneration arrangements for the Executive and Senior Management cohort of the NHS Board.

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NHS Greater Glasgow and Clyde

3.   **Membership and Conduct of Business**

3.1 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.

3.2 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. The full membership is attached at Appendix 1.

3.3 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 representatives (City and Non city)

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

4. The NHSGGC Staff Governance Workplan

4.1 The Committee reviews the workstreams within NHSGGC which contribute to the achievement of the five elements of the Staff Governance Standard through the integrated NHSGGC Staff Governance Workplan.

4.2 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.

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

- Everyone Matters: 2020 Workforce Vision
- The iMatter continuous improvement tool outcomes
- The Workforce Equality Plan
- Disability Staff Forum Outputs
- Staff Health and Wellbeing Strategy
- Health and Safety Plan

4.4 The Workplan facilitates 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.

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

4.6 The full Workplan is circulated with the Staff Governance Committee papers and at each Staff Governance Committee meeting members focus on one of the five Standards thus enabling a detailed discussion to take place on each Standard in turn.

5. Everyone Matters: Workforce 2020 Vision

5.1 The workforce vision of the Scottish Government is to create a great place to work and deliver to 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.

5.2   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. This was the first element of a seven year plan which will take the NHS in Scotland to 2020.

5.3   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 and Compassion
- Dignity and Respect
- Openness, Honesty and Responsibility
- Quality and Teamwork

5.4   Each year an implementation plan will set out the actions and plans which will be carried out locally and nationally in line with the five priorities for action identified in 2014-15.

5.5   NHSGGC welcomes and supports 2020 vision and strategic priorities and is committed to delivery on these actions primarily through existing workstreams in the Board. This will be achieved through our current Organisation Development Framework and programme of activities, the NHSGGC Staff Governance Work Plan and the NHSGGC Workforce Plan.

5.6   On the 29th November 2016 the SGHD issued the 2020 Workforce Vision Implementation Plan for 2017-18. The five priorities outlined in the original 2014/15 plan have not changed, although in this fourth implementation plan the overall focus for activity is on continuing to strengthen workforce planning and development, effective recruitment and retention, multi-professional working, supporting the health, wellbeing and resilience of all staff and ensuring that leaders and managers have the necessary skills to lead change in complex environments.

Using our shared values to guide the work we do, the decisions we take and the way we treat each other is as important as ever, and we will continue to develop a culture in NHSGGC which promotes equality, values diversity and recognises human rights.

5.7   The five Priorities of 2020 Vision are:

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

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

6.   <u>Service Presentations to the Staff Governance Committee</u>

6.1 In 2017/18 the Committee received regular updates from all service areas including the Health and Social Care Partnerships. At each Committee meeting two presentations are delivered, usually by the Director/Chief Officer, supported by their Head of People & Change and staff side partners.

6.2 In 2017/18, the Staff Governance Committee was pleased to receive presentations from the following service areas:

- Glasgow City HSCP
- Property, Procurement and Facilities Directorate
- East Dunbartonshire HSCP
- Corporate Functions – Finance
- Renfrewshire HSCP
- Acute Services
- Inverclyde HSCP
- Corporate Functions – Human Resources and Organisational Development

6.3 The presentations enabled service areas to provide assurance that structures and processes are in place to meet the Staff Governance Standard, and allow a level of scrutiny by Staff Governance Committee members. Achievements and challenges were highlighted, and an overview of Staff Governance structures and local workforce statistics for each area was provided.

6.4 Managing attendance and the implementation of the Knowledge & Skills Framework, now through TURAS, continue to require improvement in a number of service areas. Work is underway with Heads of People & Change and staff side colleagues to monitor and improve performance in both areas.

7. <u>Workforce Statistics</u>

7.1 A report on NHSGGC Workforce Statistics is presented at each Staff Governance Committee. This enables the Committee to review workforce information 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. During 2017/18 the Committee focussed on vacancy management and recruitment timelines, seeking assurance that recruitment processes are being progressed timeously.

7.2 The Workforce Statistics paper is developed in conjunction with a sub-group of the Area Partnership Forum and this ensures that the information provided to both the Staff Governance Committee and Area Partnership Forum is relevant, user-friendly and highlights workforce trends and themes for further analysis.

8. <u>The Staff Governance Standards</u>

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.*

During 2017/18 NHSGGC has developed and expanded its range of digital channels to support effective internal communications and ensure user friendly information for all our employees. The increasing use of these digital channels including social media, the corporate website, our digital staff magazine and the electronic briefing system, have resulted in more engaging, interactive communications which can be accessed easily by our large workforce, regardless of location or time of day.

We are able to measure and evaluate engagement with our users by monitoring usage of IT applications and this helps ensure content is relevant and of value.

Digital channels also assist with effective rapid two-way communication and we use social media, to respond quickly to staff queries and issues.

The iMatter Continuous Improvement tool continues to present opportunities for teams across all services to review their strengths, areas for improvement and more generally, methods and effectiveness of communication.

A number of questions asked as part of the iMatter continuous improvement tool measure the level and efficacy of communication within teams and across the organisation. Taking account of responses from the 24,545 members of staff who responded, the 2017 iMatter Board report indicated a weighted index value of 80 against the Well Informed Strand, which is a highly positive result. This in line with the results from 2016, and early indications show 2018 results will follow a similar trend.

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 KSF Personal Development Planning and Review in NHSGGC

NHSGGC supports and encourages all employees and their managers to have an up to date KSF Personal Development Plan and Review in place so that employees continue to feel supported in developing and updating their skills and experience; and the Board meets the national target of 80% compliance.

At the end of December 2017, after a sustained improvement in performance, NHSGGC performance was sitting at 74.5%. Between 1st January 2018 and 31st March2018, all Scottish Health Boards were preparing for the implementation of the TURAS platform which has replaced eKSF as the tool for recording Personal Development Plans. During this period NHS Scotland employees had no access to an electronic recording system for KSF Personal Development Planning and Review (PDP&R).

KSF PDP&R performance on TURAS dipped from January 2018 in the context of the three month gap and the transition to TURAS however all areas are now focused on the new system and the need to achieve the 80% target during 2018/19.

8.2.2 NHSGGC Learning & Development Plan

During 2017/18, NHSGGC developed a Boardwide Learning and Development Plan.

In this Plan, we describe the current and future learning, development and educational activities which are available in NHS Greater Glasgow and Clyde during 2018-2020. The activities are aligned with the five strategic priorities of the 20/20 Workforce Vision, cross referencing where appropriate to the NHSGGC Corporate Objectives, the Staff Governance Standards and the NHSGGC Staff Governance Action Plan.

There are several functions involved in the delivery of learning and development activity within NHSGGC, the main ones being Human Resources, Learning and Education team, the Organisational Development team and the Health and Safety team. Nursing, Practice Education and Development and, the Medical Education Directorate. In addition some specialist training is delivered by teams such as Control of Infection, Child Protection and Clinical Governance.

The Plan does not contain an exhaustive list of all training and organisational and workforce development in NHSGGC but aims to present the principal activities within a strategic framework which highlights the common aims of the functions and the links to the corporate and national themes.

The plan reaffirms the Board commitment to providing all employees with the training and development they need to carry out their jobs effectively now and in the future, and to ensure that they are given the appropriate time and resources.

8.2.3 Apprenticeships

NHSGGC has the largest NHS apprenticeship programme in Scotland and in 2017/18, appointed 60 modern apprentices across 10 different apprenticeship frameworks. A total of 162 apprentices have been appointed into Acute, Community and Corporate services in the last 5 years. The programme has an 84% completion rate to date and there are currently 88 apprentices in training. Of those who have successfully completed in the first two cohorts (77 trainees), 59 (77%) remain employed within NHS Scotland and 8 (10.4%) have taken up nursing programmes scheduled to complete in the next three years. The programme offers entry at B2, B3, B4 and B5 and offers qualifications in a wide range of services including:

Accounting, Business Admin, Engineering, Health & Safety, Healthcare Support (clinical and non-clinical), Life Sciences, Pharmacy Services, Plumbing, Printing, Procurement, Social Services & Health Care, Social Services (Children & Young People) and Youth Work.

8.2.4 Succession Planning and Career Development Framework

In recognition of the changing workforce demographics of NHSGGC and the need to ensure the continuing supply of skilled leaders and managers in the future.

NHSGGC have developed a Succession Planning and career development framework. Working through a steering group and in partnership with staff side the framework aims to:

- Provide a structured process for managers to plan succession to ensure they can maintain and develop the knowledge skills and behaviours (competencies) needed to deliver their service efficiently
- Provide employees and managers with information on the leadership, management and quality improvement competencies needed for roles at different levels of the organisation
- Signpost the existing learning and development provisions available to support developing competence in the current role
- Support to plan development of competencies to the next level where needed for planned career paths
- Connect competence levels more directly to our recruitment process to support better staffing decisions for key posts
- Highlight and offer good practice information on alternative development methods that offer critical experiential learning
- Highlight, where appropriate, gaps in our current development provision
- Engage leaders in supporting the development of high-potential employees towards critical posts and encouraging cross directorate planning and exchange

- Improve employee commitment and retention by supporting development expectations and aligning these activities to planned career paths

The framework has now been finalised and has been published on HR Connect. An action plan is in place to ensure implementation through managers and leads, and progress will be monitored and reported to the Staff Governance Committee as it progresses.

8.2.5 <u>Doctors and Dentists in Training</u>

During 2017 / 2018 medical education within NHSGGC has been quality controlled and improved through external and internal quality assurance processes. Striving for excellence in education and improving employment experience has been a high priority area.

The experience of Doctors and Dentists in Training continues to be reviewed and has improved through regular monitoring of external reports. NHSGGC were part of the GMC National Review on Scotland and several initiatives were positively highlighted including the chief resident role and clinical teaching fellows.

The GMC de-escalated enhanced monitoring status for two sites (Paediatric cardiology and the Beatson West of Scotland Cancer Centre) following significant improvement in the quality of medical education experienced by our trainees. De-escalation represented a large amount of collaborative work on behalf of trainers, trainees, medical and service managers. While we still have two sites under enhanced monitoring we are utilising previous learning to achieve improvements and de-escalation over the next 12 months.

NHSGGC is one of four regional employers and has been a large part of the drive to deliver a once for Scotland model of employment thereby improving the doctors and dentists in training experience of being employed. This process allows parity and equity in employment throughout Scotland ensuring it is an attractive place to train.

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 action plan in place designed to ensure that all our employees feel involved in decisions that affect them and the opportunity to influence such decisions.

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

8.3.1 <u>iMatter</u>

iMatter continues to be implemented within NHSGGC with 25 Sectors/Directorates, Health and Social Care Partnerships and other smaller teams having run the continuous improvement tool during 2017. This has resulted in 24,545 staff taking the opportunity to have their voice heard in 2017.

iMatter is a critical element of the Staff Experience and Governance programme in NHSGGC and an important indication of a healthy organisational culture. All Services have identified iMatter Champions who lead iMatter locally and represent that service at the Board Steering Group.

In 2017, the average Board response rate was sitting at 58%, below the nationally required 60% which means that we were not able to get a Board Report, however some areas achieved much stronger results and we are using these areas to promote and encourage good practice.

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

In respect of iMatter questions which specifically cover involvement and engagement in decisions, the average weighted index value was 69. This score was only lowered by the inclusion of the result from the following question: '*I feel involved in decisions relating to my organisation'*, which we have committed to look at further in order to understand the reasons for the low response, and take appropriate improvement actions. Not including this question, the average weighted index value increases to 72.

To ensure further engagement and involvement, and drive improvement in all aspects of iMatter, a number of actions are underway, such as:

- Working with the National team to increase and support those completing paper copies
- Ensuring that protected time is available to all staff so that they can complete the questionnaire and participate in the action planning process
- Promoting the locally developed 'Steps to a Successful iMatter' document, which sets out the critical success factors for improving staff engagement with iMatter
- Working with all Directorates and HSCPs in NHSGGC to embed the critical success factors.

Finally we are currently reviewing the strategic positioning of iMatter in the overall NHSGGC Staff Experience programme, and we will be proposing changes to the current position in 2018/19.

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 very employees contribution and ensures that each individual is treated with dignity and respect.*

8.4.1 <u>Dignity at Work Survey 2017</u>

In November 2017 NHSGGC implemented the National Dignity at Work survey. This survey was designed to complement iMatter and asks specific

questions relation to Bullying and Harassment, Whistleblowing and Staffing levels.

33% of NHSGGC employees responded to the survey, an increase of 3% on the previous NHS Scotland Staff Survey, which asked similar questions.

Positively, 65% of staff believed it was safe to speak up and challenge the way things are done if they have concerns about quality, negligence or wrongdoing by staff, which is an increase of 8% from the 2015 NHS Scotland staff survey. For the remaining 35% of staff responding to this particular question, who were less confident in speaking up about concerns, NHSGGC will ensure appropriate support is available.

Looking at the outcomes in the overall NHSGGC report, from the staff who indicated they had experienced incidents of bullying/harassment, or emotional/verbal abuse, an average of 64% of staff didn't report the incident. Where staff didn't report the incident, this was mainly due to them feeling nothing would happen; fearing what would happen or having concerns over confidentiality.

This indicates that improvement is needed to highlight reporting routes (including informal resolution), to encourage staff to report any concerns, to ensure managers are trained appropriately to deal with such situations, and generally build up confidence in the process. These actions will be progressed during 2018, through local and Board Staff Governance Action plans.

8.4.2 Equal Pay Statement

NHSGGC is committed to equality of opportunity in employment and believes that staff should receive equal pay for the same or broadly similar work, or work rated as equivalent and for work of equal value, regardless of their age, disability, gender reassignment, marital or civil partnership status, pregnancy, political beliefs, race, religion or belief, sex or sexual orientation. It is good practice and reflects the values of NHSGGC that pay is awarded fairly and equitably.

NHSGGC recognises that in order to achieve equal pay for employees doing the same or broadly similar work, work rated as equivalent, or work of equal value, it should operate pay systems which are transparent, based on objective criteria and free from unlawful bias.

The Equality Act 2010 requires all public sector organisations to audit the pay rates of all employees, to identify any gaps between men and women and to publish this information. In addition organisations should publish an action plan setting out how they intend to address any equality issues and gaps revealed by the data. From 2017 organisations are also required to review the data for inequalities in the pay of both disabled and black and minority ethnic employees and incorporate these groups into their action plan. NHSGGC carried out an audit in early 2017 to enable us to meet these requirements and agreed an action plan through the NHSGGC Workforce Equality Group.

In 2017, NHSGGC published an equal pay statement which was agreed in partnership and which will be reviewed on a regular basis by the NHSGGC Area Partnership Forum and the Staff Governance Committee.

Since the last published equal pay statement in 2013, progress has been made in the following areas:-

- Since 2014 NHSGGC has been improving workforce monitoring data in order to provide a more accurate picture of NHSGGC workforce demographics. The output of this work is a quarterly report on NHSGGC workforce statistics which analyses numbers and workforce trends and presents a full set of equalities data for analysis and review. This has facilitated the identification of areas of concern for further analysis.
- NHSGGC has achieved Level 2 of the Disability Confident Award (formerly the Double Tick Standard) and is working towards Level 3. NHSGGC has an active Staff Disability Forum who have advised the organisation on releasing the potential of disabled staff.
- NHSGGC has developed an action plan to address the gender pay gap which has been highlighted in the medical and dental job family and senior managers. Further analysis is underway in respect of black and minority ethnic employees.

8.4.3 New Developments

1. **Staff Disability Forum**

   The Staff Disability Forum has been meeting since November 2014 with support from Human Resources and the Equality and Human Rights Team. The forum has a dedicated core group of disabled staff who have given their time to develop the forum, consider the issues affecting staff and propose solutions.

   During 2017/18, the Forum met a number of times, and progressed various developments including:

- A Disability Passport which enables staff to give managers information on their disability is being piloted;
- The inclusion of accessibility information on the online meeting room planner;
- The creation of a new section of HR Connect which will give staff easy access to equality information, including on the forum and the 'Manager's Guide to Supporting Disabled Members of Staff'.

2. **LGBT Forum**

   The forum met twice between November 2017 and January 2018, having previously operated as an online/virtual network based on Facebook.

   During discussions the forum agreed various actions including the expansion of forum membership and the possibility of NHSGGC participating in the LGBT Pride festival in future years.

It was recognised the Forum was in its infancy and that it would take time to build membership and momentum. It was agreed that continuing to meet regularly was key, in order to discuss experiences and focus work on agreed outcomes.

3. **The Black and Minority Ethnic Forum**

Human Resources and the Equality and Human Rights Team held three focus groups in February 2018 to determine the view of BME staff on how they would like their voices to be heard. The events were supported by the Human Resources Learning and Education team and the Equality and Human Rights Team. The outcomes from these focus groups will be used to develop actions for 2018/19.

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 <u>**Health & Safety Forum update**</u>

The recommendations contained within the Safe and Well at Work framework have been incorporated into the Health and Safety Strategy 2016-2019 and Action Plan 2018/19. The Action Plan for 2018/19 will go to the Health and Safety Forum for approval in 2018.

All organisations are required to manage health and safety, and have a specific management system in place for doing so. This is required under the Management of Health and Safety Regulations 1999. The NHSGGC health and safety management system for managers is the Health and Safety Management Manual. This is an auditable health and safety system based on the Health and Safety Executive

Guidance HSG65, which has risk assessment and control as the key features. All managers within NHSGGC are required to operate this system which is accessed through HR Connect. Particular attention must be to focus on statutory / mandatory training. All health and safety related policies can be accessed through HR Connect.

The headings within the Strategy and Action Plan include the development of Health and Safety Policies, audit and review, Board and local Health and Safety Forums and Consultation, Key Performance Indicators, Needlestick Reduction, Skin Health, Violence and Aggression Reduction, Musculoskeletal Injury Reduction, Stress Management, Health and Safety Management Manual Audit, Health and Safety Training Programmes. The end of year report for the 2017/18 Strategy and Action Plan is available for information, and will be submitted for approval by the Health and Safety Forum in 2018.

The Human Resources -Health and Safety team undertake regular monitoring of health and safety performance which is normally reported at the end of each financial year. The most recent Health and Safety audit data indicated average scores in excess of 80% compliance from 122 Management Manual audits which were completed. Local action plans address areas of low compliance.

In terms of RIDDOR (Reporting of Injuries, Diseases and Dangerous Occurrences Regulations) reports there were 173 RIDDORS that have been reported during 2017/18. 89 RIDDORS were from within Acute Services, 49 from Health and Social Care Partnerships and 35 from Estates and Facilities. RIDDORs are reported to the Health and Safety Executive by the Health and Safety Service and an associated investigation is undertaken. RIDDORs which are reported can relate to staff, patients or visitors, and normally link to a 'major injury' or an over 7 day absence of staff related to an incident/ accident.

Incident data is monitored through the Health and Safety Forum. The incident data is collated via the Datix incident reporting system. Datix is accessed through any PC within the organisation. The Datix team and the Health and Safety team have now agreed a number of standardised reports which can be utilised by managers to produce localised data for analysis. The data can be broken down by a number of specific fields including staff type, injury type, injury severity and related absence. These reports are now available on the Datix system. Standardised reports are also produced for a number of specialist groups such as the Needlestick Injury Reduction Group, Violence Reduction Group and Falls Strategy Group – data can be produced on a quarterly or monthly basis, as required by the group. Data can also be provided for National Review or Compliance groups in addition to the range of Enforcing Authorities.

In February/ March 2017, the Board had a planned visit programmed from the Health and Safety Executive focussing on Moving and Handling, Falls Management, Skin Surveillance and Sharps. A Working Group is in place which meets on a monthly basis to ensure the associated actions from the HSE report are progressed. An HSE Implementation Plan is updated on a monthly basis and circulated to all Chief Officers and Service Directors for action. The Health and Safety Forum also supports this process and the HSE Plan is a standing agenda item.

8.5.2 Healthy Working Lives Award & Staff Health Strategy Update

In December 2017 NHS GGC was awarded the Healthy Working Lives gold award for the third year running in recognition of our ongoing commitment to improving the health, safety and wellbeing of employees.

Retention of the Healthy Working Lives gold award involves a number of groups across Acute and Partnerships who promote healthy living messages to our staff; and support the NHSGGC Staff Health Strategy. The groups have representation from clinical services, Facilities, Health and Safety, Human Resources and are supported by Occupational Health, Public Health and Health Improvement. Examples of campaigns that were delivered are:

- Financial awareness and support
- Promotion of mental health awareness
- Active staff events including indoor football events
- Healthy eating advice
- Campaigns delivered with the support of relevant charities on cancer awareness and sources of support

The NHSGGC Staff Health Strategy, launched in September 2017, was designed to maintain focus on good staff health and wellbeing. The Strategy covers 2017 into 2020 and aims to ensure there is a sustainable improvement in our staffs health and wellbeing by not only looking at Healthy Working Lives but more specific challenges around working for longer, financial inclusion and carer positive. Some of the aims are set out below.

By 2020:
- all staff will have had the opportunity to complete a stress survey and receive training on stress management if required
- staff will have access to a range of weight management activities and information
- staff will have greater opportunity to take part in physical activity through a range of programmes and initiatives
- staff will be able to choose a range of healthy choices within our facilities, and will be further encouraged to eat healthily through campaigns and initiatives
- staff will be aware and able to use the range of cessation services available through the workplace if required.

It also supports the important role the workplace has in improving staff health, in promoting mental wellbeing and physical activity and in tackling health inequalities.

8.5.3 Managing Attendance

NHSGGC is committed to promoting, encouraging and supporting staff health and well being and this commitment is set out in the Staff Health and Wellbeing strategy. Managing Attendance not a stand-alone issue but is linked to a wide range of other measures and programmes which improve staff health and well being including:

- Improved awareness of the Equality Act and the duty of line managers to make reasonable adjustments as evidenced in the publication of the Glasgow Centre for Independent Living "Implementing Reasonable Adjustment guide".

- Improved accessibility for line managers and staff on health promotion and staff help guides with a focus on mental health and well being. These materials are now easily accessible on HR Connect
- Changes to absence reporting and recording with the introduction of absence exception codes which do not automatically lead to formal absence procedures e.g. compassionate exemption codes for staff who have clear medical diagnosis and will be absent from work due to medical treatment (or hospitalisation)
- A Board wide approach to winter planning and support to managers in managing attendance.

All areas of the Board have a particular focus on managing attendance.

Within the Acute Sector, the Attendance Short Life Working Group has been reconvened and has agreed specific actions which include improvements to:

- The return to work interview process encouraging earlier intervention and support
- Communications with staff absent due to long term illness and improve support for return to work following long term sickness absence
- Line management skills and confidence in holding supportive staff well being conversations
- Awareness of NHS Greater Glasgow and Clyde self help resources including money management and employee benefits
- Awareness of mental health training and suicide awareness
- The dissemination of areas of good practice and case studies for wider use

The Heads of People and Change for Partnerships presented a paper and recommendations on how attendance management could be improved within the Health and Social Care Partnerships and the recommendations were presented to the Chief Officer Group in February 2018.

Attendance management, which is the responsibility of local managers, remains an important issue for the Staff Governance Committee and will be subject to continued performance monitoring and evaluation of work to ensure absence performance is improved and best practice applied across NHS Greater Glasgow and Clyde.

8.5.4 <u>Whistleblowing</u>

NHSGGC has a Whistleblowing policy and procedure in place which reflects national guidance on good practice. The Directors and Managers responsible for investigating any Whistleblowing allegations are provided with training and support through HR and Learning and Education. A Non Executive Whistleblowing Champion has been appointed and she is provided with regular updates on any ongoing Whistleblowing cases.

A Whistleblowing Monitoring report is provided annually to the Staff Governance Committee and this has been scrutinised by the Non Executive Champion to provide assurance that cases are being fairly and appropriately dealt with.

In 2017 NHSGGC communicated with all employees through pay slip messages, HR Connect and NHSGGC Core Brief, to ensure that all employees understood the way to raise Whistleblowing concerns and could do so without fear of recriminations Part

of the NHSGGC Whistleblowing Policy enables the provision of confidential support to any member of staff who decides to be a Whistle blower.

The NHSGGC Whistleblowing Champion, the Employees Director and senior officers of the Board attended training organised by Scottish Government, in conjunction with Public Concern At Work.

All Directors and Managers involved in investigating Whistleblowing cases receive training and support, both procedural and interpersonal, from HR and Learning and Education to enable them to deal with the complex issues involved in such cases. Training was delivered in March 2017 and early 2018.

9. **Staff Governance Committee Achievements**

The Staff Governance Committee has made good progress in promoting and supporting the implementation of the Staff Governance standard across NHSGGC in 2017/18. In particular the Committee has:

- Continued the focus on Performance Management with an emphasis on the provision of accurate workforce statistics/data which helps inform decision making and the completion of Statutory/Mandatory training. In particular, completion of the fire safety training module has significantly improved.

- Highlighted and agreed actions on aspects of the equality data which have given cause for concern.

- Completed a comprehensive Annual return for 2017/18 to the Scottish Government which showcases Board and local good practice.

- Engaged with local areas to seek assurance around the Staff Governance Standard.

- Provided champions to support the Staff Health Strategy and Whistleblowing.

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 2018/19 NHSGGC will particularly focus on the following priorities:

- Building on the Staff Experience programme of work and improving iMatter response and action planning rates. Embedding iMatter into the evolving culture framework and recognising its importance in improving staff engagement and wellbeing.

- Refreshing the NHSGGC Whistleblowing Policy and processes in the context of the new Whistleblowing Standard for the NHS and the appointment of the independent National Whistleblowing Officer.

- Using the outcomes and feedback from the BME focus groups held during 2018 to ensure the application of our policies are appropriate to the needs of our diverse communities and provide a voice for BME staff to be heard.

- Continue to rigorously support and monitor all services compliance with Statutory and Mandatory training requirements ensuring that targets are met and all staff are enabled to undertake this important training.

- Continue to develop and embed the NHSGGC culture framework, clearly defining the culture NHSGGC aspires to, and ensuring that key Staff Governance performance data is available to support and inform its development.

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

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

References & Links:

1. Everyone Matters: 2020 Workforce Vision
https://www.gov.scot/Topics/Health/NHS-Workforce/Policy/2020-Vision

2. iMatter Continuous Improvement model
http://www.staffgovernance.scot.nhs.uk/monitoring-employee-experience/imatter/

3. Workforce Plan
http://www.nhsggc.org.uk/media/250555/2018-19-nhsggc-workforce-plan-final.pdf

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 Healthy Strategy
 http://www.nhsggc.org.uk/working-with-us/staff-health/staff-health-strategy/

Appendix 1

<u>**GREATER GLASGOW AND CLYDE NHS BOARD**</u>

<u>**STAFF GOVERNANCE COMMITTEE**</u>

MEMBERSHIP

Ms M Brown (Joint Chair)
Mrs D McErlean (Joint Chair)
Mr A Cowan (Vice Chair) – appointed Vice Chair from August 2018
Councillor J Clocherty
Ms J Donnelly
Councillor S Mechan
Ms T McAulay – left committee: August 2018
Mrs R Sweeney

IN ATTENDANCE

Mrs A MacPherson, Director of Human Resources & Organisational Development
Mrs L Lauder, Head of People & Change, Organisational Effectiveness
Ms S Leslie, Depute Director of HR&OD
Ms B Culshaw, Chief Officer, West Dunbartonshire HSCP, representing HSCPs
Mr G Archibald, Chief Officer representing Acute
Ms L Delgado, Area Partnership Forum Staff Side Secretary
Mr G Capstick, Area Partnership Forum Staff Side Secretary
Ms F Carmichael, Staff Side Chair, Acute Division Staff Partnership Forum
Ms M McCarthy, Staff Side Chair, Glasgow City HSCP Staff Partnership Forum

Mr A McCready, Staff Side Chair, Non City HSCP Staff Partnership Forum
Mrs D Hudson, Staff Governance Co-ordinator/iMatter Operational Lead

AS REQUIRED

Dr J Armstrong, Medical Director (or delegated representative)
Ms J Erdman, Head of Equality and Human Rights
Mr K Fleming, Head of Health and Safety