

STAFF GOVERNANCE COMMITTEE
Report by Sarah Compton-Bishop, Committee Chair

The Board is asked to:

- **Note** that the Staff Governance Committee met on Wednesday 8 September 2021 with attendance as noted below.
- **Note** the report and agreed-on actions resulting from the review of the specific topics detailed below.

Present:

Sarah Compton-Bishop, Board Non-Executive Director (Chair)
James Brander, Board Non-Executive Director
Albert Donald, Board Non-Executive Director
Adam Palmer, Employee Director
Jean Boardman, Board Non-Executive Director
Etta Mackay, Staff side Representative

In Attendance:

Fiona Hogg, Director of People and Culture
Gaye Boyd, Deputy Director of People
Kayleigh Fraser, Committee Administrator
Ruth Fry, Head of Communications and Engagement
Bob Summers, Head of Occupational Health and Safety
Jo McBain, Deputy Director of Allied Health Professionals
Katherine Sutton, Chief Officer, Acute
Ruth Daly, Board Secretary
Emma Pickard, Culture Advisor
Helen Freeman, Director of Medical Education
Louise Bussell, Interim Chief Officer, Community
Tim Allison, Director of Public Health

1 WELCOME, APOLOGIES, AND DECLARATIONS OF INTEREST

The Chair welcomed those present to the meeting and thanked them for attending. Apologies were received from Heidi May, Elspeth Caithness, Pamela Dudek, Fiona Davies, and David Park.

There were no declarations of interest.

2 ASSURANCE REPORTS & COMMITTEE ADMINISTRATION

2.1 MINUTES OF MEETING HELD ON 7 JULY 2021

The Minute of Meeting held on 7 July 2021 was **Approved**, subject to the change of Kate Patience-Quate job title which should be Deputy Director of Nursing.

2.2 ACTION PLAN

Associated Actions were then considered as follows:

- **Action 14** (Medical Education Annual Report) - on today's agenda (Item 7.3). Complete
- **Action 35** (Staff side Attendance Reminder) It was reminded at a previous meeting that there should be 3 staff side representatives (including the Employee Director) at each meeting. This action will stay open as attendance was only 2 staffside representatives at this meeting.
- **Action 36** (APF minutes) APF minutes were circulated and approved at the APF meeting on 20th August 2021 and included in the papers for this meeting. Complete
- **Action 41** (Whistleblowing Standards) on today's agenda (Item 9.1). Complete.

2.3 REVIEW OF COMMITTEE WORKPLAN

The Committee Workplan had been circulated as a means of confirming all upcoming business and notify the Committee of any adaptations to the forward plan for the the remainder of the year.

The Committee:

- **Approved** the Minute.
- **Noted and/or agreed** to the actions discussed.
- **Agreed** further discussion on outstanding actions is taken out with the meeting and the relevant Action Plan to be updated before the next meeting.

3 MATTERS ARISING NOT ON THE AGENDA

There were no matters discussed.

4 SPOTLIGHT SESSION

A presentation had been provided covering the Spotlight on Acute Services. Katherine Sutton provided the Committee with a summary of the main points.

K Sutton highlighted the disruptions and pressures on the organisation in recent years and as a result, required a change in middle and Senior Management and how they work. She particularly highlighted the pressures to get patient flow out of hospital settings.

During the discussion, Committee members raised the following issues and questions:

- The same issues are being raised - capacity, time, and staffing.
- Despite best efforts, morale is low. There is too much work to do and not enough staff to meet the demands of the organisation.
- What Health & Safety groups are to be established in acute services?
- The continual change of direction and how this is having an adverse impact on how staff feel and what they face. Is this Government related or business related?

In response to queries K Sutton and F Hogg confirmed:

- There is a resurgence of COVID cases that are further impacting the workforce, in terms of availability for work due to self isolation.
- Health services need to be redesigned to better meet patient need, which will reduce the pressure on the Workforce.

- There are recruitment pressures across NHS Scotland, due to a shortage of trained staff and increasing demand and NHS Highland have significant vacancies in key areas
- We are working locally, regionally and nationally to try and address this with short, medium and long term solutions. A nursing recruitment campaign is about to launch, trying a new way of approaching this, and we've recently hired 80 newly qualified nurses to start in October.
- The Acute Health and Safety forum is being taken forward; however, no dates have been confirmed for meetings at present.
- Employee Wellbeing and support is a key area of focus to support our workforce with the pressures and demands upon them.

The Chair thanked K Sutton on behalf of the committee, recognising the ongoing challenges being faced, thanking and commending all staff in acute for their sustained hard work.

The Committee Noted the position.

5 COMMUNICATION AND ENGAGEMENT UPDATE

5.1 Communications and Engagement Update

Ruth Fry provided the Committee with a summary of the main points contained in the circulated reports.

- Communication Plan - on track with the annual plan and making progress.
- Website review – the team is working with an external company that is pulling all information together from key stakeholders and will provide a report on the requirements for the website.
- There have been two new positions recruited to - Community Engagement Manager (Marie McIlwraith) and Community Engagement Coordinator (Kate MacLennan).

F Hogg commended the work done by the team to date and particularly commented on the benefits of having dedicated engagement resource – a critical component for many of the organisation's goals.

Along with the committee members, the Chair acknowledged the work done by the Communications and Engagement team and was happy to see the progress.

After discussion, the Committee Noted the update.

6 LEARNING AND DEVELOPMENT

6.1 Statutory Training improvement plan - progress update

F Hogg noted that a verbal update was to be made on progress against the Statutory Training Improvement Plan, but that a full report would be provided to the November committee.

K Sutton updated on behalf of the Chief Officers and explained to members that progress had not been as rapid as had been hoped in progressing the action plan and that the end of August targets had not been met. Attendance at face to face training is still a challenge particularly, given the critical resource shortages impacting on ability to release staff. B Summers and his team are still looking at capacity to deliver face to face training; significant challenges remain in the Violence & Aggression team due to turnover and capacity, although resource is being increased, however getting trainers trained takes time. Managers are urged to remind their teams to ensure that e-learning is up to date. There are also challenges with data following the move to Turas, although the project resource allocated has been doing a significant amount of work to check and validate the data and reporting. This work

will continue to ensure we can report the accurate position and managers and leaders have good awareness of compliance levels in their area.

The Chair appreciated the amount of work that is going into this and the unprecedented challenges facing the workforce, but noted significant lack of progress against the action plan and the ongoing risks of non compliance with statutory requirements. It was agreed that the committee could not take proper assurance from this update and requested a substantive report to come back to the next meeting.

ACTION: A full progress report and revised milestones / action plan to be brought to November meeting by the Chief Officers. The associated operational risks also need to be updated and brought to the committee for review as part of this report.

The Committee Noted the update.

7 PARTNERSHIP, WORKFORCE, AND ORGANISATIONAL CHANGE UPDATE

7.1 Area Partnership Forum draft meeting minutes of a meeting held on 26th February, 23rd April, 18th June, and 20th August.

F Hogg advised members 3 sets of minutes were circulated to the committee following some amendments and noting that some hadn't been to the committee previously.

All minutes were **approved**.

The Committee Approved the circulated draft Assurance Reports and **Noted** the update.

7.2 Integrated Performance and Quality Report – Staff Governance Committee metrics

F Hogg noted that the committee were presented with the workforce report in the pack, and that due to delays in production, the Staff Governance IPQR was presented on screen for members to review.

- Sickness absence - Specific covid sickness is not included in the report, but reports of this remain relatively low, although timely and accurate reporting is a challenge. Sickness absence rose in last 2 months, following a drop due to the taking of annual leave.
- Mental Health sickness - F Hogg provided a further breakdown on the impact of Mental Health sickness absence and discussed the strategies that were advised and are in place to try and reduce this. The Committee was assured there is work going to improve people process and upskill managers to try and avoid long term absence and to give colleagues the support they need. It was confirmed that the data included stress, anxiety and other mental health conditions.
- Staff turnover – figures remained static through COVID19. A detailed analysis will be provided explaining why people are leaving the organization on a future Workforce Report.

F Hogg also briefly touched on the Information Governance training and the discipline and grievance metrics within the report.

During the discussion, Committee members raised the questions and sought clarification on the following:

- There has been a significant increase of vacancies (25% increase) can these be identified what the reasons for these vacancies are. And what work is being done to fill these vacancies.
- Time scales – useful to have greater insight into timescales to resolve disciplinary, grievance and Bullying and Harassment cases, as there is a sense these are still taking too long too long to complete – approx. 9 months.
- Was stress included in these mental health absence figures?

In response to queries G Boyd confirmed:

- Concerning an increase in vacancies, there have been a substantial number of new posts created, following establishment reviews, as well as new demands for contact tracers, vaccination workforce, and the staffing of the National Treatment Centre - Highland, along with the challenges to recruit to some long standing vacancies.
- A further report will be produced to provide more accurate data on case timescales in the November meeting.
- Stress-related sickness is included in the Mental Health absence metrics presented to the Committee.

The following further comments were made by the Committee:

- Important to have facilities for staff to go to on breaks. This may help reduce stress.
- It was noted that there would be relevant Safety / Compliance metrics in the IPQR going forward and work was ongoing to establish what data and how often to report.

The Chair advised the committee to send any further questions to F Hogg and G Boyd.

The Committee Noted the updated position and **agreed** that the proposed Staff Governance IPQR metrics for September which had been presented on screen be circulated to the Committee for their feedback.

7.3 Annual Medical Education report

The chair welcomed Helen Freeman to the meeting and she presented the previously circulated paper.

The Annual Report is presented to the Staff Governance Committee for review and discussion. The report sets out key challenges and achievements in delivering the program of Medical Education across 2020 – 2021 during the pandemic and the unprecedented demands throughout the organisation.

Members took assurance on the work that was being done in this space and the innovation of the team working to continue to deliver support throughout the pandemic

The Chair congratulated H Freeman on the innovative work the Medical Education team and their trainees have done over this challenging period and said the update was very positive and reassuring.

The Committee Noted the updated position.

8 POLICIES, TERMS AND CONDITIONS, DIVERSITY AND INCLUSION, VALUES, AND CULTURE

8.1 Culture Oversight Group Minutes from meetings held on 19th July and 23rd August 2021

The circulated minutes were **approved**

The Committee Approved the minute of the meeting held on 19th July and 23rd August 2021

8.2 Listening and Learning Survey results

F Hogg gave a brief presentation setting out the results and actions to be taken following the Listening and Learning survey that was carried out in June and July 2021 across the organisation. 41% of colleagues completed the survey and over 16,000 comments were made.

The following were discussed:

- There was a suggestion to solely focus on one action as opposed to several actions. The Committee agreed that this would be the best way forward to ensure that corrective actions are completed.
- A recommendation was proposed to convene a panel of randomly selected staff to exchange ideas, ensuring the staffs have a spectrum of experience depending on the length of service.
- Need to work on both organisational issues and on individual issues in teams.

J Boardman expressed the need to focus efforts on helping long term staff with negative views to feel better about their work and workplace.

The Committee was content to note the update.

The Committee Noted the update.

8.3 Culture Update report

F Hogg assured the committee there is significant progress with the Culture programme, and whilst the status was amber, many of the long term programmes were on track to deliver in the next month, including Leadership and Management development and the Team Conversations, after a huge amount of work. She advised programmes are continually being reviewed and the plan is being updated to ensure it's addressing the outcomes of the recent surveys, and will track those actions too.

The Committee Noted the update.

8.4 Annual Staff Governance Standard Monitoring - submission review 02.26

G Boyd spoke to the Committee highlighting the current status of the Annual Staff Governance Standard Monitoring review, which is a submission that is made to the Scottish Government. The Board is asked to assure that the Staff Governance standards are being met and to describe progress in key areas. The monitoring processes have been reviewed since these were last required in 2019, therefore there was a more tailored questionnaire for us to complete.

Some additional points were suggested for addition to the submission:

- Whistleblowing – We should include the work that has been done across the Board area, in raising awareness and in the visits and promotion that Bert as our non Executive has been doing.
- Appraisals – there's a need to recognise there were issues with the appraisal system before COVID19 and to bring out our longer term plans in the narrative .

F Hogg advised the committee that these points would be included in the final submission and that she would do a further overview to ensure nothing was missed.

The Committee is asked to **discuss** the report and **agreed** on the additional inputs to complete the monitoring document.

8.5 Staff Governance Committee Terms of Reference Review

An updated Staff Governance Terms of Reference had been circulated and R Daly advised there were minor changes to the current document. This included the addition of the committee having oversight of Medical Education and states specifically that there will be a self-assessment exercise carried out by the Staff Governance Committee.

The Committee Approved the update.

9 HEALTH, SAFETY, AND WELLBEING, ABSENCE, AND WHISTLEBLOWING

9.1 Board report on Whistleblowing

F Hogg referred to the draft version of the first quarterly Whistleblowing Standards report for NHS Highland, covering the period 1 April 2021 – 30 June 2021 for review and feedback from the Committee, ahead of submission to the NHS Highland Board meeting on 28th September 2021. F Hogg welcomed any questions around the report and the data.

B Donald contributed to the discussion by making the following comments:

- The National Whistleblowing Standards give guidance on what should be included in the reports, but we can influence what else we include for NHS Highland.
- The numbers of Whistleblowing concerns being reported are low, it would be helpful to include if there has been an increase in concerns raised through HR Processes.
- Not all levels of the standards are in place and we should note this.
- The numbers of those completing that Turas Learning training has been low and would be useful to refer to what the take up has been within the report
- Include the reporting levels prior to the new standards

The Chair asked the following:

- Does the Board have sight of the cases that are being investigated?
- What is the process for deciding what is Whistleblowing and what is the framework?

F Hogg confirmed that she and the relevant Chief Officers and professional leads are involved and sighted on all the cases under investigation and that she oversees every potential concern to agree with relevant expert input whether it is Whistleblowing and to agree who investigates. She also receives progress reports. F Hogg thanked the committee for their input and will amend the report as discussed.

It was noted that there will be a development session scheduled for the Committee to discuss this further and understand the processes around the report.

ACTION: The report will be further discussed at the development session scheduled for October 6th.

The Committee Noted the content of the report.

9.2 Draft Minutes from the Health and Safety Committee on 10 August 2021

There was no minute circulated period to the meeting.

ACTION: Minutes for this meeting to be taken to the November meeting.

The Committee Noted the position.

10 Staff Governance Corporate Risks – Assurance report

F Hogg notified the Committee of the responsibility to review the relevant risks that are aligned to Staff Governance on the strategic risk register. A template of an assurance report had been developed to look at the 3 risks and the actions, and feedback on this was requested. The aim is to give the Committee assurance on the progress with the risks and associated mitigating actions.

It was noted that the report was really helpful and that this approach should be considered for other committees. Good progress had been made. It was also noted that operational level risks relevant to the Staff Governance Standards should also be scrutinised and a process for this would be implemented.

The Chair reminded the Committee there will be a development session on the 6th of October to discuss this process further.

Action: Relevant operational risks to be provided to the Staff Governance Committee

11 AOCB

The Chair thanked Adam Palmer, Employee Director for his commitment and contribution to the Staff Governance Committee, as he steps down on 30 September and wished him well in his new role. The Committee joined in expressing their thanks to him.

12 DATE OF NEXT MEETING

The next meeting of the Committee will take place on **Wednesday 10th November at 10.00 am on MS Teams.**

The meeting closed at 12.55 pm