

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

**The Board is asked to:**

- **Note** that the Staff Governance Committee met on Wednesday 10 November 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  
Elspeth Caithness, 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  
Emma Pickard, Culture Advisor  
Louise Bussell, Interim Chief Officer, Community  
Gayle Macrae, People Partner, Corporate Services  
Karen McNicoll, Divisional Manager, Acute Services (on behalf of Katherine Sutton)  
Mary Burnside, Deputy Director of Midwifery (on behalf of Heidi May)  
Pamela Dudek, Chief Executive  
Boyd Peters, Medical Director  
Alison Felce, Senior Business Manager  
David Garden, Finance Director  
Ruth Daly, Board Secretary  
Fiona Davies, Interim Chief Officer, Argyll & Bute HSCP

**1 WELCOME, APOLOGIES, AND DECLARATIONS OF INTEREST**

The Chair welcomed those present to the meeting and thanked them for attending. Apologies were received from Bob Summers.

There were no declarations of interest.

**2 ASSURANCE REPORTS & COMMITTEE ADMINISTRATION**

**2.1 MINUTES OF MEETING HELD ON 8 September 2021**

The Minute of Meeting held on 8 September 2021 was **Approved** and agreed as an accurate record.

## 2.2 ACTION PLAN

Associated Actions were then considered as follows:

It was noted that Action 35 Staffside Attendance was being addressed and Elspeth Caithness had been in touch with the Committee Administration team to ensure the correct attendees were invited. This would be reviewed again at the next meeting

With regard to Action 45, Statutory and Mandatory training, the Chair requested that this item stay on the Action Plan for further review, given the importance of this.

The other actions proposed to close were agreed.

## 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 remainder of the year.

F Hogg updated Members on the progress with Strategy Development and Workforce Engagement item.

### **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.

### 4.1 Medical & Dental Spotlight

B Peters introduced himself to the committee and explained his role within the organisation. A presentation was given covering the Spotlight on Medical & Dental Services throughout NHS Highland. The structure of the Board medical workforce, as well as the clinical research portfolio, was discussed.

There followed the discussion on the recruitment issues throughout NHS Highland:

- **Recruitment** - There continue to be challenges in recruiting Doctors and Consultants to the Highlands, the organisation continues to use Locums and rely on the Bank.
- **Training, Development, and Research** – there is not enough training and development for junior doctors and consultants. The presence of a medical school would be beneficial for the future of recruitment and development of the workforce. More research facilities and prospects could potentially attract people into the roles
- **Facilities and Equipment** – The building and facilities may not appeal to potential candidates. There may not be the right equipment for surgeons, this has been an issue in the past and led to employees relocating.
- **Accommodation** – There continues to be an issue around availability of accommodation for potential candidates as well as people already employed.
- **Sickness and Absence** – Sickness is low however data is not accurate due to employees not using the electronic system.

The following comments were made by the Committee:

- Clinical staff should be encouraged to contact the organisation even if a post is not vacant. Need to think about how the organisation advertises vacancies.
- Need to ensure more engagement with candidates by hiring managers right through recruitment and onboarding processes.
- We need to be able to offer more agile options for those who aren't looking for standard permanent full time work.
- There is a concern around the number of vacancies that cannot be filled.

B Donald contributed to the discussion and reflected on a recent visit to Argyll & Bute and Lochaber. He raised concerns around the issues and difficulties with accommodation for current and potential staff. Concerns were expressed about the support newly recruited staff received after they were appointed into a post. F Hogg assured the Committee that the organisation is actively looking at what support can be put in place concerning accommodation and relocation and also ensuring hiring managers provide ongoing engagement and support throughout a recruitment process.

The Chair thanked B Peters for attending the meeting and asked for the Committee to take any further questions offline.

**The Committee Noted** the position.

#### **4 COMMUNICATION AND ENGAGEMENT UPDATE**

##### **5.1 Communications and Engagement Update**

There was circulated a report by R Fry on the Communications and Engagement update proposing **moderate assurance** to the Staff Governance Committee. The report recommended that the Committee note the current position. This report provided a comprehensive update on communications and engagement actions from August to October 2021 particularly highlighting the following:

- Engagement campaigns
- Structure review
- Consistent channels
- Priority campaigns

Committee members welcomed the report and are pleased to see progress with the Website redesign.

Further information was requested around timescales for the values animation video. R Fry confirmed the videos are in the final stages of being edited and should go to the Culture Oversight group within the next couple of weeks. R Fry further highlighted the progress around the community & engagement framework and anticipates there will be a framework in principle by the end of the financial year, thereafter 1 year to pilot the framework.

P Dudek commended R Fry and the team for their hard work and commitment.

**The Committee Agreed** to accept **moderate** assurance on this item.

## 6 LEARNING AND DEVELOPMENT

### 6.1 Statutory Training improvement plan - progress update 01.14 – 01.48

There was a presentation by F Hogg on the Statutory and Mandatory Training update which proposed **limited assurance** to the Staff Governance Committee. A progress update was provided on the planning processes.

F Hogg provided the Committee with a comprehensive framework to consider the overall arrangements going forward for Statutory and Mandatory training. She welcomed any feedback and concerns the committee may have.

The following comments were made by the committee:

- Support needs to be given to managers and colleagues in this area, to ensure the current pressures and challenges are understood.
- Colleagues need to know what the expectations are of them in regard to this training, and to take responsibility for their training and be reminded why the training is in place.
- There was a suggestion for the organisation to ensure that time was made available for online and face to face training which would encourage staff to complete this.
- Statutory and Mandatory training should be a highly topical subject in clinical leadership and professional leadership circles.
- Audits and data should be made available to managers and teams about their performance and gaps in completion.
- The organisation needs to be innovative and think differently about how the training is delivered and how the messages are communicated to employees.

F Hogg further commented:

- The culture towards training needs to change and not talk about statutory and mandatory training as a burden.
- Managers and team leaders must create the time and capacity for colleagues in their teams to undertake the training.
- Employees should be reminded that Statutory and Mandatory Training is required to ensure that the organisation is meeting any legislative duties. Mandatory training is an organisational requirement to limit risk and maintain a safe working practice for patients and staff.

P Dudek appreciated the work involved and is aware of the challenges and pressures the organisation is under. She reminded the committee the action to resolve the issue sits with EDG and not Staff Governance Committee.

The committee is supportive of the proposed actions and agreed on limited levels of assurance. The Chair assured the Committee that Statutory Training will be a substantive item at the next Staff Governance Committee meeting.

**The Committee Agreed** to accept **limited assurance** on this item.

**The Committee Noted** the updated position.

## 7 PARTNERSHIP, WORKFORCE, AND ORGANISATIONAL CHANGE UPDATE

### 7.1 Area Partnership Forum draft meeting minutes 29<sup>th</sup> October 2021.

F Hogg advised the committee that there was a timing issue with the minute which was being drafted and reviewed. The minute will be circulated to the Committee after the meeting.

**The Committee Noted** the update.

### 7.2 Integrated Performance and Quality Report – Staff Governance Committee metrics

F Hogg introduced the report and proposed **moderate assurance** to the Staff Governance Committee. The report recommended that the Committee note the current position and give confidence of compliance with legislation, policy, and Board objectives.

F Hogg drew members' attention to the IPQR report, noting that work on this and the Workforce report is continuing to have the appropriate level of assurance available for the purposes of the Committee, as opposed to the detail that is needed for management reporting. The discussion was particularly highlighting sickness absence levels which are currently sitting at 5% for July and August, significantly below the national figure, but reflecting that absence levels are lower in holiday periods. It was advised there has been an increase in turnover rates and reported that the vacancy level has also increased, with a large number of additional posts for both temporary and permanent recruitment.

G Boyd discussed the Workforce report and highlighted the people process update and the work done on roles and remits as well as the processes, and training.

B Donald expressed concerns around the timescales for grievance investigations. F Hogg noted that these processes are not fast but are hugely complex and trying to establish facts is challenging. This is why we are keen to use early resolution as much as possible.

The Chair asked about delivery of learning sessions to employees with management responsibilities on the people processes. G Boyd advised the HR teams are working with the managers to ensure a level of consistency and quality. There was a discussion with staff side colleagues to ensure managers are doing the training before they start a grievance process.

F Hogg assured the committee the organisation is continuously trying to improve the processes to ensure early resolutions.

**The Committee Agreed** to accept **moderate assurance** on this item.

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

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

### 8.1 Culture Oversight Group Minutes from meetings held on 8th September, 20th September, and 7th October

The circulated minutes were **approved**

**The Committee Approved** the minute of the meeting held on 8th September, 20th

September, and 7th October

## **8.2 IMatter / Listening & Learning 2021 results and action plans**

The report submitted for information was to provide the Staff Governance Committee with a summary of the results and updates on the current status of the NHS Highland IMatter / Listening & Learning 2021 results. The report proposed **moderate assurance** to the Staff Governance Committee.

**The Committee Agreed** to accept **moderate assurance** on this item.

## **8.3 Culture Update report 02.31**

F Hogg spoke to the circulated report and advised members a lot of progress has been made and the programme is now reporting green status. This report proposed **substantial assurance** to the Staff Governance Committee

The Committee welcomed the report and was happy to see the dashboard-style being presented.

**The Committee agreed** to accept a **substantial assurance** on this item.

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

### **9.1 Minutes from the Health and Safety Committee on 10th August and Draft Minutes and Assurance report from Health and Safety Committee on 19th October 2021.**

F Hogg updated the Committee on the new style of minute for the Health & Safety Committee. A new cover has been implemented setting out what the key issues are. The committee was supportive of the layout.

**The Committee Approved the circulated minutes.**

## **10 Staff Governance Corporate and Operational Risks – Assurance report 02.44**

F Hogg introduced the report and proposed **moderate assurance** to the Staff Governance Committee. The purpose of the report was to give confidence in compliance with legislation, policy, and Board objectives. F Hogg presented and discussed the level 2 workforce-related risks contained on the acute and corporate register.

The Committee agreed to accept moderate assurance.

**The Committee Agreed** to accept **moderate assurance** on this item.

## **11 AOCB**

R Daly sought feedback on the new reporting format and level of assurance format. Members approved the new format however said it would be beneficial if the guidelines about the levels of assurance were circulated to the committee for reference as part of each pack of papers. The Chair also suggested that the level of assurance sought to be added to the agenda.

**ACTION:** R Daly to send the account guidelines on the levels of the assurance to the Committee as part of each pack of papers and to add the level of assurance proposed to the agenda template.

## **12 DATE OF NEXT MEETING**

The next meeting of the Committee will take place on Wednesday 12<sup>th</sup> January 2022 **at 10.00 am on MS Teams.**

**The meeting closed at 12.55 pm**