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

The Board is asked to:

- Note that the Staff Governance Committee met on Wednesday 5 May 2021 with attendance as noted below.
- **Note** the report and agreed 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 Pam Dudek, Chief Executive Elspeth Caithness, Partnership Forum Staff Side Representative

In Attendance:

Fiona Hogg, Director of Human Resources and Organisational Development Gaye Boyd, Deputy Director of Human Resources Kevin Colclough, HR Systems and Project Manager Ruth Daly, Board Secretary Kayleigh Fraser, Committee Administrator Ruth Fry, Head of Communications and Engagement Louise McInnes, Clinical Governance Manager Emma Pickard, External Culture Advisor Bob Summers, Head of Occupational Health and Safety Katherine Sutton, Chief Officer (Acute)

Apologies:

Jean Boardman Etta Mackay

AGENDA ITEMS

- Assurance Report from Meeting held on 10 March 2021
- Action Plan
- Review of Committee Workplan
- Communication and Engagement Update
- Update on Statutory and Mandatory Training
- Ass report from Highland Partnership Forum held on 23 April 2021
- Integrated Performance Report
- Workforce Report
- Workforce Plan 20/21
- Culture Oversight Group Minutes from meetings held on 22 March and 19
 April 2021
- Culture Programme Update
- Colleague Survey Updates IMatter 2021 and May 2021 NHS Highland Culture Survey
- Report on Whistleblowing Standards implementation
- Draft Minutes from the Health and Safety Committee on 23rd April 2021
- Risk Review / Board Assurance Framework
- AOCB

DATE OF NEXT MEETING

The next meeting will be held on Wednesday 7th July 2021.

1 WELCOME, APOLOGIES, AND DECLARATIONS OF INTEREST

Sarah Compton-Bishop welcomed all to the meeting.

Apologies for the absence were noted from Jean Boardman. It was reported during the meeting that Etta MacKay had experienced difficulties in connecting to the meeting and her apologies were also noted.

The Committee was not advised of any declaration of interest.

2.1 ASSURANCE REPORT FROM MEETING HELD ON 10 MARCH 2021

There had been circulated the draft Assurance Report from the meeting on 10 March 2021.

The Committee Approved the circulated draft Assurance Report.

2.2 ACTION PLAN

The Staff Governance Committee Action plan had been circulated. A review of the Action Plan had been undertaken and seven older actions were now proposed to be closed, details of which were highlighted by the Chair. The Action Plan would now be a standing agenda item for future meetings.

The Committee Agreed the updated and revised Action Plan.

2.3 REVIEW OF COMMITTEE WORKPLAN

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

Adam Palmer advised the Committee that a similar Workplan would be created for the HPF to assist with its workflow, and this would be brought to a future meeting of the Committee for information. Fiona Hogg welcomed this approach and confirmed that a similar approach would also be adopted for Health and Safety Committee and the Culture Oversight Group. These developments would assist the Staff Governance Committee to ensure its Work Plan could sequence updates from these groups as appropriate.

The Committee Agreed the latest version of the Staff Governance Committee Workplan 2021 – 2022

3 MATTERS ARISING NOT ON THE AGENDA

E Caithness raised awareness of the need for all three Staff Side Representatives to attend meetings of the Staff Governance Committee It was confirmed that the Employee Director and two other partnership representatives formed part of the membership and that the quorum for meetings was 3 Non-Executive Directors.

ACTION: Staff Side attendance to be added to the Action Plan

4 SPOTLIGHT SESSION

It was noted that Spotlight sessions will recommence in July 2021, with an update from Medical and Dental colleagues.

5 COMMUNICATION AND ENGAGEMENT UPDATE

R Fry spoke to the committee providing an update on key internal and external communications and engagement activity from February to April 2021. She spoke about the progress made in developing the three-year draft Communications and Engagement Strategy and annual communications plan. Specific updates and feedback were provided as follows:

- The weekly-round up email and 'Ask me Anything' sessions continue to be a success.
- Work is ongoing with the higher priority campaigns which include the Covid Vaccine programme and testing, along with Remobilisation, recruitment, and cultural transformation. An update to the Social Media Guidelines had also been commenced.
- Recruitment is underway for two new roles Web Manager and Community Engagement Manager.
- Strategy development All of the feedback has been considered from the various sources including care opinion and feedback from patients as well as the internal communications and engagement survey with colleagues. As expected, it was noted that communications were not reaching as many Clinical staff as those in Corporate and Administrative roles Feedback had identified issues with the proliferation of emails and suggested that a more targeted approach might be helpful. Concerns had also been raised around the accessibility and search ability of both the intranet and internet sites. A three-year approach had been followed for the emerging strategy and details of the priorities for each year were highlighted.

R Fry confirmed that feedback on the strategy had been generally positive, that comments had been made around the need for plain English, and for more information on resourcing to be included.

A Palmer enquired about progress with the re-design of the internet and intranet sites. R Fry assured the committee that the web redevelopment project is a high priority and confirmed that the redesign business case has been approved by EDG. The next stage is to recruit a consultant to undertake an engagement exercise with services and service users that will shape the tender specification.

A Donald took the opportunity to speak about the media work he has contributed to on BBC Radio Scotland and with the Inverness Courier. He made the committee aware that this work was handled by Muckle Media and asked how this is incorporated within the communications structure. R Fry advised the committee that Muckle Media had handled communications around the Healing Process and would also be involved in the roll-out of the implementation of the Whistleblowing Standards, as the budget for the Healing Process communications activity had not been fully utilised, due to Covid restrictions. Further assessment of the skills and resources within the wider team would be undertaken once Muckle Media's work was complete.

P Dudek acknowledged the work of the Communications and Engagement team and emphasised their contribution to the Culture work. From a Staff Governance perspective, it was important to get communications right. F Hogg echoed the discussion and said the focus has been helpful to gain an outside perspective. It has encouraged the leadership structures to consider their responsibilities in terms of communications channels to reach their colleagues directly.

The Chair supported comments raised during the discussion and spoke about a recent 'Ask me Anything' session for Argyll and Bute. The tone and quality of communications between individuals had been raised at the session. A Communication Toolkit might be a useful idea for the future. The session also focussed on the six Culture workstreams and a specific request had been made for a simplified one-page document to list the workstreams.

The Chair drew particular attention to the recruitment of a Community Engagement Manager. She sought further information on how this could be used to support the whole organisation, particularly referencing Argyll and Bute. It was confirmed that a framework for engagement, rather than direct intervention, would be the preferred way forward. Fiona Hogg referenced the recent board development session on assurance, at which it was clear that our infographic on vision, values, and objectives was a very helpful means of communicating.

Fiona Hogg highlighted communication challenges encountered by HR colleagues; this had become apparent through the culture work. It was confirmed that while HR advisors were the guardians of HR processes, they were not responsible for implementing them throughout the organisation. The distinction between the roles and responsibilities of managers and HR advisors required further clarity within the organisation; this point was particularly highlighted by Bert Donald. Adam confirmed that roles and responsibilities were included in the People Processes culture workstream and Pam advised that roles and responsibilities should not lose sight of the human factor; a collective approach would always be of paramount importance. An upcoming session between HR and Partnership was planned to explore how best to use early resolution.

In relation to the 'Ask me Anything' sessions, Bert Donald also sought information on the 'reach' of these sessions and whether this was being factored into future approaches. Ruth Fry confirmed the timescales for arranging the sessions and the levels of participation of the most recent session relating to the Whistleblowing.

The Chair asked for the appendices which were missing in the report pack to be circulated to the Committee separately for information.

After discussion, the Committee Noted the update.

6 LEARNING AND DEVELOPMENT

6.1 Verbal update on Statutory and Mandatory training

A brief update from F Hogg was provided to the committee concerning Statutory and Mandatory training. She advised that discussions and planning sessions were still underway and that a more detailed report would be given at the next meeting in July.

She emphasised how important it is for managers to encourage employees to ensure their elearning is up to date and also ensure all teams are now attached to the Turas Learn system. The organisation expects all employees to be up to date with their online training by the end of August 2021.

There had also been discussions with the Senior Management Teams across the three operational units around the plans to increase compliance with the face-to-face training. A more focussed approach would be adopted to ensure a better understanding of the organisation's training needs and the capacity required to ensure they could be met. A system-wide focus would be necessary.

The Chair sought clarification on how this linked with workforce planning and welcomed the focus given to this area. She queried how achievable the end August date would be, and what effort was being made to reinforce this message throughout the organisation. Fiona advised that a dashboard-style of reporting would be used to track progress and a detailed update would be brought to the next meeting of the Committee.

Action: FH to bring update on Statutory and Mandatory training to the July Meeting

The Committee Noted the update.

7 PARTNERSHIP, WORKFORCE AND ORGANISATIONAL CHANGE UPDATE

7.1 Highland Partnership Forum draft meeting minutes of the meeting held on 23rd April 2021

F Hogg advised that due to the HPF meeting date having been changed only a draft minute was currently available of the meeting held on 23 April 2021. She provided the Committee with an update on the items that were discussed:

- Performance reporting
- Speak Up Listen Up
- Statutory and mandatory training
- Culture work progress

It was confirmed that more regular planning meetings for the HPF were established.

ACTION: KF to circulate the HPF minute to the committee when approved.

The Committee Noted the position and that the minute of the HPF meeting of 23 April 20211 would be circulated as soon as practicable and would be ratified at the July meeting.

7.2 Integrated Performance and Quality Report – Staff Governance Committee metrics

F Hogg advised the Committee that the version of the IPQR considered by other Committees and EDG within this cycle of meetings did not include and the new Staff Governance data which had been proposed, due to a timing issue. She presented the proposed new set of metrics to be used for the Staff Governance Committee going forward: overall absence, absence by area, short v long term absence and turnover. It was important to ensure there was no duplication with the details contained in the Workforce Report and that the data was appropriate to provide sufficient assurance to the Committee and the Board, without going into too much detail.

Fiona Hogg commented on the proposed metrics as follows:

- From next month, data would be included on absences associated with mental health illnesses versus other health illnesses.
- Further work would be done to set local targets on absences, where these are helpful in showing progress.
- There has been a general decrease in absence over the last year, which was
 possibly attributable to an increase in home working. Overall absence shows the
 tracking against national versus local figures and included commentary on
 improvement actions for managers to take ownership of managing attendance for
 their own teams.
- Data had been included showing absence according to area and clarification was sought on whether this data would assist the Committee to provide assurance.
- The assessment of short versus long term absences might help the Committee to assess the effectiveness of various interventions and actions, to identify the proportions and trends.
- Turnover rates had significantly fallen over the last 2 years and it would be helpful for the Committee to consider if further information on turnover would be helpful and, if so, to what level of detail.

Information would continue to be provided around the number of vacancies in the Workforce report, but it was not considered necessary for this to be reported at Board Level. F Hogg

also noted that the culture survey tool could provide automated reporting at different points of staff on-boarding, and automatically send exit questionnaires. This would be helpful information for the Committee about the experiences in the first 6-9 months for colleagues who were new to the organisation, as well as the motives of those who leave.

The Chair requested that the document outlining the proposed future metrics be circulated to the Committee and for questions or feedback to be directed to F Hogg. While it was important that the information presented in the IPQR for the Committee was not too granular, other additional metrics could be included over time. The Chair welcomed the proposal to include data on absences attributable to mental health illnesses so that the Committee could understand what preventative interventions were in place. It was acknowledged that the Committee needed to focus on assurance rather than seek solutions or 'problem solve'.

Action: KF to circulate updated IPQR report to the Committee

The Committee Noted the updated position and **agreed** that the proposed metrics be circulated to the Committee for their feedback.

7.3 Workforce Report

G Boyd spoke to the circulated report providing relevant Workforce data as of February 2021. She reminded the committee that analysis is usually presented to the Committee on focussed areas however an overall report has been provided for the Staff Governance Committee on this occasion.

A Palmer questioned why there was an increase in vacancies in November 2020 compared to other months. G Boyd it was difficult to comment specifically, however vacancies could have been paused due to Covid and there were a number of fixed-term contracts in place to support Covid. She added that recruitment has steadily increased and the levels will change once the restrictions are lifted. She reminded the committee that staff turnover has decreased significantly therefore there should be a decrease in the number of vacancies. K Colclough echoed the discussion and said the transfer of systems has presented significant challenges concerning data quality, which will be resolved as the system settles in.

B Donald raised concerns around annual PDPs and highlighted that the report only shows data up until November 2020. He sought clarification on the situation around PDPs and asked why the remainder of the data cannot be provided. G Boyd advised this was a result of the change of system and reporting functions within Turas Learn. A Palmer reminded the committee that there have been ongoing discussions and significant challenges around PDPs for several years and suggested a renewed focus and a plan is needed.

B Donald expressed concerns about corporate employee inductions. At a recent Area Clinical Forum (ACF) meeting he suggested that the Whistleblowing Standards are included in the corporate induction. However, it was highlighted by other attendees that corporate inductions were not taking place and he was asked to highlight this to the Staff Governance Committee. G Boyd also expressed concern around this and suggested there was a possibility to capture data with the Learning and Development team. She told the committee there is an online portal whereby staff can access the employee induction electronically; additionally, there is a local induction the manager should go through within 3 months of starting employment. She said there is a need to understand why this had not taken place and what the activity is across the organisation.

During the discussion, the matter of Inductions was raised by P Dudek who assured members that this would be raised through the System Leadership team and taken forward to EDG. She was disappointed to hear that staff are not receiving their corporate inductions, however said it would be useful to know if this is an access issue, she added that it is important to know if this system is right for the Culture Programme and if it is fit for purpose.

A Palmer referred to the report and mentioned the reduction in staff taking employee-friendly leave and questioned if this is a result of the pressures across the organisation. G Boyd advised that they will look back to see if there is a trend year on year.

F Hogg concluded the discussion and agreed on the importance of induction. She added that recruiting managers need to understand what their responsibilities are. There is an accessible corporate induction available which sets out some of the standards.

Action: GB to raise Induction with Systems Leadership Team and an action plan to be created

Action: GB to provide further information to July committee on trends in Family Friendly Leave

The Committee Noted the content of the report and that further information would be provided on any trends associated with a reduction in staff taking employee-friendly leave.

7.4 Workforce Plan 2021/22

K Colclough provided a brief update in relation to the Workforce Plan 2021/2. Due to its late release, K Colclough advised all members if they retrospectively had any comments or questions to bring these back to himself.

NHS Highland is required by the Scottish Government to develop and publish a workforce plan which sets out the strategic direction for workforce development and the resulting changes to the workforce over the next year and beyond. He added that previously Scottish Government indicated it would move to a 3-year plan to link in with operational and financial planning from 2022 and a 2021/2 plan would not be needed.

However, at short notice Boards were asked to produce a Workforce Plan to go alongside the 2021/2 remobilisation plan. Along with the Board workforce plan, he confirmed that the Scottish Government have also requested that an IJB plan is produced. P Dudek emphasised how important it is for the plan for the Health & Social Care Partnership reflects their own strategic plan.

The Chair asked what the next step was; K Colclough confirmed the report is behind schedule. He advised that once comments are received the final draft will be shared with the Scottish Government; thereafter the final report will be shared with members at the next Staff Governance committee meeting for formal noting.

Reference was made by P Dudek around the circumstances the team has been working in and appreciated the efforts to get this report together in a tight timescale.

Action: Final version of the 2021/2 workforce plan to be included in the July papers for noting

Following discussion, the Committee **noted** the position on the 2021/22 Workforce Plan and that the submitted plan would be brought before the Committee for noting at the next meeting

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

8.1 Culture Oversight Group Minutes from meetings held on 22 March and 19 April 2021 There had been circulated the minutes of meeting of the Culture Oversight Group held on 22 March 2021.

It was confirmed that the minutes of the meeting of 19 April 2021 were not yet ready to distribute to the committee.

The Committee Approved the minute of the meeting held on 22 March 2021

8.2 Culture Programme Update

F Hogg spoke to the committee about the Culture Programme and specifically provided an update around the format of reporting. She presented the proposed dashboard-style of reporting which will help monitor and measure the success of the Culture Programme. The data collected would show clearly how we are progressing a planned programme of continual improvement of the culture within NHS Highland. Overall the programme was sitting at an amber status.

Detail was provided on the key themes captured; she discussed the overall status of the programme and highlighted the key areas that continue to be the main focus. She spoke about People Processes which remains at red status which is a result of a capacity issue, but noted that action is progressing within the HR team particularly around the Once for Scotland policy training which was being successfully delivered with good attendance from managers. Some of the actions and milestones under People Processes would be revisited. The was a high priority to ensure the Culture Metric workstream was on track to ensure the survey was delivered in time.

Our culture priorities and objectives form a key part of the one year strategy, as a means of reinforcing that culture change is embedded throughout the strategy and does not sit in isolation.

Members considered the dashboard style was an excellent piece of work and welcomed the Culture Programme update. Adam Palmer raised his concerns on the red status of People Processes and urged that progress be made to move this element of the Programme forward.

P Dudek commented on the capacity to deliver the programme and stated that to ensure the programme is supported and delivers then there is a need to understand how much investment is needed.

Action: F Hogg to update July committee on progress with resources for the Culture Programme

The Committee Approved the content of the report.

8.3 Colleague Survey Updates – IMatter 2021 and May 2021 NHS Highland Culture Survey

F Hogg provided a summary position on iMatter 2021 and the proposed Culture Survey and advised that the first culture survey will launch on 1st June. The main part of the culture survey is a standard question set developed Culture Amp, however there was also an opportunity to add other questions.

The Chair welcomed the approach and urged that all colleagues could have access to the survey, particularly those not using PCs. A Palmer emphasised how essential it is to gain wide engagement throughout the organisation as it was important to know what colleagues think about these matters. Additionally, the organisation needs to take responsibility for what messages are communicated throughout. B Donald also highlighted the importance of this

piece of work and added that it will be a benchmark against other organisations. E Caithness emphasised how important it is to need to get the message clear if not the survey could be disregarded, she added it is essential staff know the importance of the survey.

F Hogg echoed the discussion and emphasised how important it is to communicate the work and the benefits of the app and survey across the organisation in an effective way to ensure staff participate.

The Committee Noted the approach to measuring employee experience in 2021.

9 HEALTH, SAFETY AND WELLBEING, ABSENCE AND WHISTLEBLOWING

9.1 Report on Whistleblowing Standards implementation

F Hogg provided a positive update on the implementation of the Whistleblowing standards and r informed the committee there is still a lot of work to do. She added there is a good level of engagement and the message has reached colleagues but further attention is needed to the contractor / non-employee population.

During the discussion, Committee members enquired about the following:

- How compliance will be looked at in terms of the reports that have been received
- How will the other elements of the standards be implemented
- How will the information be communicated and the need for assurance that this will be a focus.
- How will this be reported to the Board and whether a draft of the Board report should be considered by the Committee
- Is there a communications plan to reach external candidates

In response to the above, F Hogg confirmed the following:

- It is important to ensure there is a process for matters that are not whistleblowing issues, which is why the Guardian service are supporting our front end reporting of concerns.
- A draft Board report will be brought back to the next meeting so that the quarterly report could be submitted to the Board in July.
- Communications it was known that some staff are more likely to hear our messages through social media, local newspapers or local radio. It was important to stress that the process is for employees or former employees raising concerns, rather than a route for patient concerns.

The Committee welcomed the Whistleblowing process and considered it vital for all staff to be aware and comfortable with the reporting pathways. There was a need to ensure staff had confidence to speak up.

Action: The draft Board report on Whistleblowing (April – June 2021) will be brought to the Staff Governance Committee in July for review.

The Committee noted the content of the report.

9.2 Draft Minutes from the Health and Safety Committee on 23rd April 2021

Due to the meeting having been rearranged, there was no minute available to circulate. Meetings of the Committee were now scheduled every two months to sequence the assurance to the Staff Governance Committee.

It was also noted that due to the recent governance review a stand-alone Health and Safety annual report would not be submitted to the Board but formed part of Staff Governance Committee assurance report.

It was proposed that an annual report would be formally provided to the Staff Governance Committee, to ensure visibility of the Health and Safety Committee work over the year. This was proposed to cover the calendar year and so the first report brought to the January 2022 meeting and could then feed into the Staff Governance Committee annual report at the end of the financial year.

Action: Health and Safety Committee annual report to be added to the workplan for the January 2022 meeting

The Committee Noted the position.

9.3 Risk Review / Board Assurance Framework

L McInnes provided an update specifically around the HR workforce risks. She advised that EDG had undertaken development sessions in March to look at the overarching strategic risks which identified many operational risks that could be de-escalated and looked at against the new strategic objectives.

Risks associated with culture and general recruitment and retention were largely unchanged. Risks associated with mental health nursing would move to the North Highland Community risk register. A workshop was being planned to consider what would sit on the corporate HR risk register. The next iteration of the report should show the updated strategic risks and movement on corporate risks.

The Chair asked about the risks associated with Statutory and Mandatory training. F Hogg said there needs to be specific risks around this and further discussion on this would be undertaken with EDG and Systems Leadership to ensure any significant board level risks were properly articulated and that operational risks were clearly defined and linked to broader compliance and regulation.

The Chair suggested that a Staff Governance Committee development session be held to help the committee understand where risks sat within the various registers in relation to one another.

L McInnes agreed that a development session would be a good idea and reminded the committee that there is draft guidance for governance groups in terms of risk management responsibilities. The aim was for the Committee to feel confident to scrutinise the risks owners and consider if there were any gaps in the registers.

The Committee Noted the position.

10 AOCB

There were no matters discussed concerning this Item.

11 DATE OF NEXT MEETING

The next meeting of the Committee will take place on **Wednesday 7 July at 10.00 am** in the **Board Room, Assynt House, Inverness.**

The meeting closed at 12.55 pm