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

## The Board is asked to:

- **Note** that the Staff Governance Committee met on Wednesday 7 July 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
Pam Dudek, Chief Executive
Elspeth Caithness, Partnership Forum Staff Side Representative

#### In Attendance:

Fiona Hogg, Director of Human Resources and Organisational Development Kayleigh Fraser, Committee Administrator
Ruth Fry, Head of Communications and Engagement
Emma Pickard, External Culture Advisor
Bob Summers, Head of Occupational Health and Safety
Etta Mackay, Staffside Representative
Karen McNicoll, Divisional General Manager
Kate Patience-Quate, Deputy Director of Nursing & Midwifery

# **Apologies:**

Jean Boardman Jane Fowler Gaye Boyd Katherine Sutton Heidi May

#### **AGENDA ITEMS**

- Assurance Report from Meeting held on 5 May 2021
- Action Plan
- Review of Committee Workplan
- Spotlight Session
- Communication and Engagement Update
- Area Partnership Forum Minutes
- Mandatory training progress update
- Integrated Performance and Quality Report; Workforce Report, including update on Family Friendly Leave trends
- Workforce Plan 20/21
- Nursing and Midwifery Workforce review Results
- Culture Oversight Group Minutes from meetings held on 17<sup>th</sup> May 2021
- Culture Dashboard Update
- Health and Safety Policy and Governance update
- Update on Whistleblowing Standards implementation
- Draft Minutes from the Health and Safety Committee on 8 June 2021
- Risk Review / Board Assurance Framework
- AOCB

#### **DATE OF NEXT MEETING**

The next meeting will be held on Wednesday 8th September 2021.

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

The Chair welcomed those present to the meeting and thanked them for attending. Apologies were received from Jean Boardman, Heidi May, Jane Fowler, Gaye Boyd, and Katherine Sutton.

There were no declarations 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 5th May 2021.

The minute was approved.

**The Committee Approved** the circulated draft Assurance Report.

#### 2.2 ACTION PLAN

The Chair presented the Committee with the updated Action plan. It was expressed by the committee that due to the formatting in PDF the action plan was not easy to read. Going forward the Action plan will be circulated as an excel sheet separately to the PDF papers.

**Action:** Update regarding Jobtrain action to be provided at the next meeting.

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. The Chair reminded members that the Workplan is a live document, therefore, could change.

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

#### 3 MATTERS ARISING NOT ON THE AGENDA

There were no matters discussed.

#### 4 SPOTLIGHT SESSION

Louise Bussell, Chief Officer, provided the Committee with a short powerpoint presentation regarding the Community Directorate and gave members an overview on the teams within the structure and current priorities and challenges including:

- Community
- Mental Health and Learning Disability
- Primary Care
- Adult Social Care
- Cross services work
- Inter-relationships

She particularly highlighted the importance of communicating and engaging with staff and management effectively and concisely.

F Hogg added to the discussion and updated the Committee around the recruitment demands and how they are being met, with meetings are taking place and ongoing planning of large scale campaigns.

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

- There were concerns raised about the ongoing situation regarding the ending of the lease Larachan house. Staff expressed their concerns and said there was no engagement, communication, or consultancy concerning the termination of the lease of the building with staff. It was stressed that there needs to be a way to stop repeating the scenarios where apologies are received but then it happens again. It was further highlighted that this had already been experienced at the RNI in summer last year.
- There needs to be visibility of the daily activity in the community not just acute
- There needs to be more sight of what is going on in more rural areas and smaller teams

F Hogg and L Bussell responded with the following information:

- In relation to Larachan House, It was agreed that it is not acceptable for lease ending
  to be communicated without approrpirate communication, engagement and
  consultation with colleagues and staffside. This will be taken to Organisational
  Change Oversight group and we will agree how information is cascaded to managers
  and staff.
- Important to look at the data in Community services to gain a better representation. There is a lot of reliance on MS Teams therefore most engagement is not done face to face. It was suggested that management could set out time in their week where they need to be face to face with other teams.

#### 5 COMMUNICATION AND ENGAGEMENT UPDATE

Ruth Fry, Head of Community and Engagement, provided the Committee with a summary of the main points contained in the circulated reports.

During the discussion, committee members made the following comments and suggestions:

- Committee members are happy with the progress that has been made.
- In regards to the Intranet, members' highlighted sections are out of date.
- It was suggested the Communication and Engagement strategy should be on the intranet.

In response to queries, it was confirmed that:

• The Communications and Engagement strategy will be on the Intranet when other committees have had sight of it.

The committee expressed how pleased they were to see the progress with the Strategy and congratulated R Fry and the Community & Engagement team on the progress with this.

# After discussion, the Committee Noted the update.

# 6 LEARNING AND DEVELOPMENT

# 6.1 Verbal update on Statutory and Mandatory training

L Bussell provided the Committee with a summary of the main points contained in the circulated report. She advised the report was written by K Sutton and reported the following information:

- Managers need to have better access to the data to see where their staff is in terms of Mandatory training.
- Face to Face training remains a challenge however in terms of the planning still showing green with progress. We will also explore other options such as shorter training initially and then follow up with extensive training.
- Managers need to ensure communication with staff around this area is effective. Must ensure staff are given the time and space to complete the training.

F Hogg further highlighted the following information:

- Current TURAS reporting is not fully functional although this is being progressed nationally, therefore leaders do not have a true understanding of what is happening in their wider areas.
- Additional resources and capacity have been added in the face-to-face teams for some of the Health and Safety led training

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

- Members sought clarity on what is required by the organisation in regards to the Mandatory training.
- Concerns were raised that there is not enough assurance that the timescales will be met.
- Members are concerned that progress is not being made quickly enough and asked for assurance.

F Hogg updated the Committee on the current processes that are in place and assured members that although assurance cannot be offered based on completion rates; improvement measures continue to drive improvements and create the conditions for this to improve. She clarified that a majority of the training is high-risk Statutory training, with Mandatory training consisting of predominately online modules that employees can complete on Turas Learn.

L Bussell advised the committee that timescales will not be extended however deadlines will be reviewed closer to the deadline.

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 18<sup>th</sup> June 2021

The minute was approved.

A Palmer updated the Committee on the following:

- The Highland Partnership has agreed to rename the group as the Area Partnership Forum (APF).
- The annual workplan is continuously under review.
- The APF is reviewing the Terms of Reference and Membership to ensure both documents are up to date.

The Committee Approved the circulated draft Assurance Report and noted the update.

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

The Director of HR, Fiona Hogg provided the Committee with a summary of the main points contained in the IPQR as well as the workforce report in item 7.3. She highlighted the key areas of assurance and focus to the Committee and the detailed information on the family friendly leave.

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

- There has been a significant reduction in special leave granted despite there being a large number of employees isolating.
- There has not been a reduction in redeployment and is going up slightly. The number for North Highland has increased significantly.
- The statistics seem low for sexual orientation, there are a low number (1.1%) of employees identifting that they are Gay, Lesbian, or Bisexual. This does not reflect National figures.

- Annual Development and review process what mitigation is in place whilst we improve our position on this over the coming years?
- Concerns were expressed about the length of time it was taking for staff to have their corporate induction. Has this been looked into and what is the update?
- Only 70% of the workforce is on the SSTS system therefore it is hard to accurately report who is out of the business.

In response to gueries F Hogg provided the following information:

- The special leave item was focussed specifically on family friendly leave by request, however, will report on the covid special leave uptake at a future meeting
- Detailed redeployment analysis will be reported back at the next meeting.
- Regarding statistics around LGBT, this question is a one-off exercise at the point of recruitment and people can decline to answer. There will be an option to accurately capture the data through the Culture Amp Surveys, but people can choose not to provide this information. We need to focus on ensuring we create the conditions for colleagues to feel comfortable to disclose this.
- The organisation is committed to rolling SSTS to wider groups this will help with live data and reporting as there are groups within the organisation that do not have access which means there is no real-time data.
- With regard to appraisals, there is a 3 year plan on how to get to a stage where there
  is a consistent process and we've started well this year with Senior Managers and
  Executives
- There is no "corporate induction event", there is a corporate employee induction
  portal that Line Managers should work through with colleagues. There is a need to
  ensure managers and staff are aware of what is there and who's responsible work
  through this.

The Chair advised members if there are any further questions regarding the data to use the MS Teams channel to ask any further questions.

**Action:** Redeployment analysis to be reported back at the next meeting.

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

#### 7.3 Workforce Report

The committee welcomed the report, with discussion points captured in 7.2 above.

**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 Nursing and Midwifery Workforce review Results

The Deputy Director of Nursing & Midwifery, Kate Patience-Quate provided the Committee with an overview and update on the Nursing and Midwifery Workforce review Results.

The report provides a summary of the NHS Highland Nursing & Midwifery workforce reviews which have been undertaken in 2020/2021 in accordance with the mandate from the Scottish Government— describing the rationale, revised methodology, quality assurance checks, and agreed outcomes for nursing and midwifery establishments for review by the NHS Highland Staff Governance Committee and Financial Recovery Board Group.

Committee members asked if there was any update on progress since the paper was issued, K Patience-Quate noted that approval had been given to recruit to these positions and a process was being developed. We've also approve 84 WTE of newly qualified recruitment.

A Palmer questioned the predictable absence calculation which includes 4% sickness absence, included no allowance for family friendly allowances. This was noted and agreed that the basis for this in the workforce tools does need to be reviewed.

P Dudek appreciated all the efforts and work that has gone into the review and is pleased to see the progress. F Hogg echoed the discussion and assured the committee the organisation is in the process of devising a refreshed approach around recruitment,

## The Committee is asked to note the update

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

# 8.1 Culture Oversight Group Minutes from meetings held on 17th May 2021

The circulated Minutes were approved

The Committee Approved the minute of the meeting held on 17th May 2021

# 8.2 Culture Dashboard update

F Hogg gave the committee a brief update and informed the committee the program is currently reporting amber and substantial work is underway.

The Chair assured the committee that the Culture programme will be looked at in depth at the Staff Governance committee meeting in September.

## The Committee Noted the update.

#### 8.3 Annual Staff Governance Monitoring

F Hogg informed the committee of the Staff Governance Monitoring process timescales, and what is expected of us, by the Scottish Government.

The Committee is asked to **discuss** the report and **agreed** the way forward to complete the monitoring document.

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

# 9.1 Health and Safety Policy and Governance update

F Hogg updated the committee on the changes to policy and processes and how the team is continuing to work to ensure there are robust assurance arrangements for Health and Safety.

### The Committee noted the content of the report.

# 9.2 Update on Whistleblowing Standards

F Hogg provided a verbal update on the implementation of the Whistleblowing standards and advised the committee that the first quarterly report will be ready for the next meeting.

B Donald advised the report will be worked on and be brought to the NHSH Board meeting in September. He told the committee he is in the process of providing a report to IMWO by the end of July providing an update of progress where the organisation is in implementing the

Whistleblowing Standards. One of the expectations from the IMWO is to take the opportunity to highlight the benefits of the online training modules that are available to staff.

# The Committee Noted the position.

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

F Hogg confined the minute was issued for the Chair review yesterday therefore will be circulated at the next meeting.

## The Committee Noted the position.

#### 10 Risk Review / Board Assurance Framework

F Hogg updated the committee around the Board Assurance Framework and provided an update on progress in embedding risk management across NHS Highland and the progress of the overall Board Assurance Framework.

The Committee noted the content of the report and approved the current risk ratings and Workforce elements of the Board Assurance Framework.

#### 11 AOCB

There were no matters discussed concerning this Item.

#### 12 DATE OF NEXT MEETING

The next meeting of the Committee will take place on **Wednesday 8th September at 10.00** am on **MS Teams**.

The meeting closed at 12.45 pm