

STAFF GOVERNANCE COMMITTEE

Report by Sarah Compton-Bishop, Committee Chair

The Board is asked to:

- **Note** that the Staff Governance Committee met on Wednesday 9th November 2022 with attendance as noted below.
- **Approve** 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)
Jean Boardman, (Non-Executive) Vice Chair
Bert Donald (Non-Executive)
Elspeth Caithness, (Employee Director)
Kate Dumigan, (Staff side representative) (until noon)
Aileen Gardner, (Staff side representative)
Pam Dudek, (Chief Executive)

In Attendance:

Fiona Hogg, Director of People and Culture
Gaye Boyd, Deputy Director of People
Bob Summers, Head of OHS (10am until 11am)
David Park, Deputy Chief Executive (from 10.15am)
Katherine Sutton, (Chief Office, Acute) (10am until 11am)
Ruth Daly, Board Secretary
Boyd Peters, Medical Director (from 11.15am)
Tim Allison, (Director of Public Health) (until 1pm)
Ruth Fry, Head of Comms & Engagement)
Jo McBain, Director AHP's (until 1pm)
Heledd Cooper, Director of Finance
Margaret Moss, Associate Director AHP's (North Highland)
Louise Bussell, Chief Officer, Highland HSCP

Karen Doonan, Committee Administrator (minutes)
Nathan Ware, Governance & Assurance Co-Ordinator
Helen Freeman, Director of Medical Education (Item 5.5, 6.1)

1 WELCOME, APOLOGIES, AND DECLARATIONS OF INTEREST

The Chair welcomed everyone to the meeting. Apologies were received from D MacDonald, C Lawrie and F Davies. C Lawrie has arranged for A Gardner to attend as deputy.

There were no declarations of interest.

2 ASSURANCE REPORTS & COMMITTEE ADMINISTRATION

2.1 MINUTES OF MEETINGS HELD ON 7th September and 9th November 2022

The Minutes of the Meetings held on 7th September and 9th November 2022 were **Approved** and agreed as an accurate record.

2.2 ACTION PLAN

F Hogg explained that progress is being made on all open actions in the action plan. F Hogg also explained that if an item had been added to the workplan, this would allow us to close the action plan item..

- Action 53 and Action 90 – Both actions can be merged so there is only one action around IPQR. The wording will just need amending, to ensure that the specific items we want to see are clearly set out.
- Action 37 and Action 86 – Items to be closed off and a new action regarding the review of Induction can be created to ensure there is an ongoing review of the induction process.

The Committee **Approved** the updates to the Action Plan.

2.3 REVIEW OF COMMITTEE WORKPLAN and HOT TOPICS (Updated)

The Chair explained the Committee work plan has recently been amended to include the “Hot Topic” section at the top of the page, ensuring that each of these items are considered, even if not a substantive agenda item, until they are no longer required to be a “Hot topic”.

F Hogg stated that the 2023 to 2024 work plan had not been created yet, but the Workplan Standing items section will give an idea what is needed to be included for the upcoming year. It also splits out certain topics that only need to be included in the agenda for certain meetings. The example was given of the Communication and engagement update, due to good progress being made on the area, it will not need to be assured at every meeting, only every 6 months. Having these two types of standard items will give assistance to creating agendas and planning for each meeting.

The Spotlight Session will now include a review of the People risks on the level 2 risk registers. The People team are currently working on a new template to integrate the two, this will allow a discussion around how they are being delivered against the Staff Governance standards and which actions are being taken to ensure level 2 risk registers are being effectively managed.

The Committee:

- **Approved** the minutes of the meetings held on 7th September and 9th November 2022.
- The Committee **Approved** the updates to the Action Plan.
- **Noted** the latest version of the Staff Governance Committee 2022/23 Workplan and that the 2023 to 2024 is a work in progress.

3 MATTERS ARISING NOT ON THE AGENDA

On boarding and Exit surveys

The Chair asked for an update on the launch of the on-boarding and exit surveys. F Hogg explained that these were a key focus for the People team at the moment, aiming to launch them in Feb 2023. Having the surveys will provide good insight and collectively feed into the improvement work the board are currently working on.

4 ITEMS FOR APPROVAL

4.1 Staff Governance Committee ToR approval

Fiona Hogg, Director of People and Culture

The Chair stated that the Staff Governance Terms of Reference had been amended prior to the previous meeting in November. Since November there has been a further update to the statement of best value. F Hogg explained that more people are getting involved in the Staff Governance Committee and members who cannot attend often send a deputy in their place.

F Hogg expressed the importance of Non-Executive Directors, Chief Executives and Professional Leads attending Staff Governance, and if they cannot attend to have a deputy attend in their place. E Caithness highlighted the importance of finding a deputy who could attend the full meeting.

<p>The committee reviewed the amendments made and approved the revised Terms of Reference for this Committee.</p>

4.2 Integrated Performance and Quality Report for Board - People & Culture

Fiona Hogg, Director of People and Culture

F Hogg explained that the summary presented will be added into the Integrated Performance and Quality Report for Board for January. F Hogg spoke to her presentation. There has been a review of how metrics are going to be used going forward, it was highlighted that there are three key areas sickness areas, turnover and vacancies.

- **Sickness absence** increased between October and November 2022 to above 6% for the first time in NHS Highland. Long term resource gaps are a factor, as well as an aging workforce and the sustained level of pressures as we also see winter levels of illness. Currently working with teams to provide support and ensure leave and breaks are being taken and long term absences and return to work are managed effectively.
- **Turnover** rose in November after falls in the previous 3 months, there's no specific reason other than typically less people are actively job hunting in summer and less posts are advertised, and this is the end of the process. On boarding and exit surveys will launch shortly and help us centrally gather feedback on the issues people experience in joining us, as well as why they leave.
- **Vacancies** fell in October and November with more balance between the numbers at advert, shortlisting and interview stage, so workload is more stable and positions are progressing through the process.

Discussion was had regarding the data gathered to provide the figures for sickness absence and turn over. F Hogg explained the turnover was based on those who have externally left NHS Highland and that includes taking retirement. P Dudek explained that it is important to look further into the data gathered to establish further understanding of what it means for the organisation. Further discussion was had around adding aggregated data about workforce availability that takes into account levels of vacancies as well as sickness absence report as this is a useful tool for work force planning and how data is presented to the board. K Sutton stated it would also be useful if the IPQR data was presented with any actions that are being taken based on the data, in addition to the background to the figures.

D Park explained that data can be divided in different ways, but from a Staff Governance perspective, data needs to be used to provide assurance that the processes and controls in place are effective. Data needs to be presented at different operational levels to make the appropriate change required, and then this can be overseen in terms of the governance. Caution is needed around data as it can easily become unmanageable operationally.

F Hogg explained there is ongoing work to provide the correct operational levels with the right detail at the right frequency that gives the assurance of what we are doing.

The committee **reviewed** the report and **approved** for submission to the Board.

5 ITEMS FOR REVIEW AND ASSURANCE

5.1 Area Partnership Forum minutes of meeting held on 9th December

Minutes were not available for review. The Chair asked for them to be made available for review at the next Staff Governance Committee meeting.

Action: K Doonan to add to the papers for the next meeting

The Committee were **unable to approve** the minutes of meeting.

5.2 Health and Safety Committee Minutes of 13th December 2022

Minutes are not available for review. The Chair asked for them to be made available for review at the next Staff Governance Committee meeting alongside the minutes from the 11th October 2022, which had not yet been to the Committee for review.

Action: K Doonan to add to the papers for the next meeting.

The Committee were **unable to approve** the minutes of meeting.

5.3 Strategic Risk Review

Fiona Hogg, Director of People and Culture

The Strategic Risk Review will be an item for every Staff Governance meeting as this will feed into the board reporting. In November the focus of the report was to review the wording, levels and action plans. This went to the board and was approved; the only work needing to be completed for this review is the update of the online Datix tool.

For the culture risk 632, Two actions are on track and being delivered, however, there has been a slight delay in setting up the People and Culture programme board.

The workforce risk 706 has received a very high rating and will be monitored through the People and Culture programme board which hasn't been set up yet. There are structured workforce reviews with each executive and their SLTs around their workforce risk, opportunities and challenges, enabling them to set up their own action plans.

The Statutory and Mandatory training risk 1056 is covered elsewhere on the agenda, and remains a very high risk

For the new Socio Economic Risk (number yet to be allocated) there were two initial actions which were around winter planning and checklist & contingency planning for strike action, both have been completed. Further actions will be considered.

Whilst it is not the remit of the Staff Governance Committee's to manage the level 2 risks, there is a need to have some oversight and assurance that the level 2 risk registers are being actively managed at the correct level and that progress is being made for each item. Therefore, the level 2 risks will be included in the Spotlight sessions.

The Committee reviewed the report and progress made and decided to take moderate Assurance from the report.

5.4 Update on Whistleblowing visits and our approach / next steps

Verbal update by Bert Donald, Non-Executive Director

It was stated that whistleblowing is an integral part of culture in the organisation; if the culture is not right colleagues will not feel confident in speaking up. B Donald stated that he has been visiting sites across the board area over 21-days to date. It has been noticed that not all concerns brought forward were whistleblowing issues but more concerns around certain areas and that further work within the organisation was required to improve staff knowledge of the whistleblowing standards.

P Dudek explained the need to be cautious with concerns raised ensuring that they are validated, managed correctly and investigated thoroughly. Discussions were had around the whistleblowing standards and how they can be promoted organisation wide to increase awareness and understanding. F Hogg stated that it could be possible to begin workshops with the senior leaders, this would allow them to share information within their teams about the whistleblowing standards. The Chair highlighted that the use of data is important to validate concerns raised whether they are deemed whistleblowing or not.

B Donald explained by the end of February each year he has to write to the Cabinet Secretary, providing them with an update on the whistleblowing process within NHS Highland. This includes how the board continue to actively support and promote openness and transparency within the organisation; demonstrate how staff are encouraged to speak up and reporting arrangements that provide assurance to the Board.

The Committee **reviewed** the information and progress made and **noted** the next steps.

5.5 Medical Education Annual report

Report from Helen Freeman, Director of Medical Education

H Freeman spoke to her presentation. Highlighting the challenging period since Covid and explained that Scottish Government are aiming to increase the number of medical students across all Scottish Health Boards.

- Core remit of Medical Education is to ensure the quality of training and experience for medical students and to support trainers with their teaching activities. This is managed through the educational structure and committee.
- Workforce planning needs to be reviewed to assess how capacity can be increased to contribute to the increase of medical students. If trainee numbers are to increase this will have an impact on trainers and consultants who support them.
- NHS Highland have placements available across all sites including Primary care and RGH's. Currently we have 190 Doctors in training, this is likely to increase due to Scottish Government proposals.
- Shortage of availability to place trainees into primary care at Foundation level. This reflects the huge service pressures that colleagues are facing. There is an option for NHS to create this capacity and this is something that is being looked into.
- Increase in International recruitment has resulted in the Health Education England and GMC producing the International medical graduate pilot.
- Accommodation still challenging for medical students as there is limited availability – especially for international graduates. NHS Highland have invested in accommodation renovation including the medical education room at Raigmore Hospital.
- Quality processes in place are effective - early indication of staff concerns at a medical surgery in Oban due to red flags. Two visits led to an SBAR being raised into the senior leadership team and an agreement for an action plan and additional recruitment.
- New Craig's Hospital had a visit triggered last year due to red flags. There has been a lot of work with the medical education team, local leadership and trainees. Positive visit which highlighted the hand over the newly developed simulation boot camp.
- Funding has allowed for the introduction of high-fidelity simulation equipment for post graduate surgical training. Some immersive and VR equipment and some ultrasound device simulation equipment for our medical and ascetics trainees.
- Bootcamps have been introduced for Graduate Development, Psychiatry, Unconscious Bias and Equality & Diversity.

H Freeman explained that the priority going forward is to promote a supportive learning culture, to continue work around equality and inclusion. The question was raised as to how to increase the capacity for more medical students. H Freeman explained that there is a review of the workforce planning and there is a close liaison with existing clinical teams within NHS Highland and the partner education provider.

Discussions were had around the challenges with accommodation for training and for students and F Hogg and H Freeman agreed they would collaborate at a future point due to both experiencing similar challenges.

B Donald enquired about the issues faced in Oban and the reporting of issues to the Deanery and whether steps taken are sustainable. H Freeman outlined the anonymous feedback session carried out by the Deanery each year and explained that by the time the feedback is provided the organisation is already aware of the majority of the issues and have a plan already in place to resolve the issue. H Freeman stated that there is recruitment for a rural emergency practitioner role with a view for creating a tier system within the emergency department to allow more support.

H Freeman explained there is a challenge with the increase in the number of trainees and how the organisation manages this – there is a need for this to be monitored as the requirements for education are becoming more defined. B Peters summarised that the ongoing debate in respect of how medical education is reported to the Board – through Staff Governance, Clinical Governance or whether it is reported directly to the Board. Medical Education is regulated through the General Medical Council (GMC), NHS Education for Scotland (NES) and the Scottish Education system, meaning there are certain regulations that need to be adhered to regarding future workforce planning and staffing. B Peters explained that the feedback gives an insight of the way things will work at an operational level.

The Committee reviewed the report and progress made and agreed to take **Moderate Assurance** from the report.

6 ITEMS FOR INFORMATION AND NOTING

6.1 Update on approach to Compassion and Values

Presentation by Helen Freeman

H Freeman spoke to a presentation. Everyone has a role to play in culture change and it was highlighted that there was different cultures and environments across different departments and teams. To bring these cultures together the organisation as a whole need to agree shared values together and to work toward these.

- Engagement is a key marker in understanding the how the care and quality of an organisation. Driven by a sense of being valued and how we interact with each other.
- External stressors can contribute to incivility in the environment which could mean people may not realise the impact of their behaviour.
- NHS Highland are using a compassion focussed approach as this leads to better health outcomes, appears to protect from burnout. Treating healthcare staff compassionately has a huge impact on patient care quality and safety.
- We have developed the caring with compassion framework that can be used in how we communicate as an organisation and through our teams. These key themes are - Safety, Belonging, Respect, Trust, Supported, Valued, Thriving.
- To promote the compassion framework and encourage discussion about how it lands with colleagues, there will be an engagement programme and a schedule of events for colleagues to find out more information regarding each framework item and will allow staff members to provide any feedback and for the framework to be updated appropriately

The question was raised as to how to engage with colleagues in a way that they feel safe enough to speak up and feedback. H Freeman explained that it may be challenging to

evaluate, raising awareness may have a direct or indirect effect. Raising trust and engagement may build a culture where people feel happier to speak up.

D Park highlighted the importance of having managers and supervisors on board with this, having clear expectations would make this easier. P Dudek expressed that it is important to have engagement from all operational levels, without this we will fail to support the work being done.

B Peters explained that the change may be difficult for some colleagues and it may be a long process. H Freeman stated that this is not a launch this is the introduction of engagement sessions to promote and receive feedback on the proposed framework.

The Committee **reviewed** and **commented** on the proposed approach outlined and plans for progressing this work.

6.2 Health and Care Staffing Act Implementation update

Update from Fiona Hogg, Director of People and Culture

While presenting, the following was highlighted:

- In late December 2022, colleagues from NHS Highland attended a virtual roadshow from colleagues in HIS and Scottish Government setting out more information about the act.
- NHS Highland needs to be aware of this Act and the Committee will need to understand the timescales and scope and what our role will be, in terms of assurance and oversight.
- There will be ongoing support from HIS and Scottish Government through implementation, including guidance, learning communities, working on staffing tools and we linked into all of this through various colleagues.
- NHS Highland will oversee progress with the implementation through an integrated governance approach as this is aligned to our strategy and ADP, not a separate piece of work.
- The actions in the unfilled shift audits related to two key areas; data, systems and processes and the work needed to redesign roles that are hard to fill and review establishments. This is a core part of the workforce efficiencies that people partners, and finance colleagues are supporting with each of the leadership team.
- People and Culture Programme board will oversee the work of the workforce oversight group. This is being put in place throughout January and February 2023.
- Health and Care Staffing Act also applies to Care Services as well as the Health Boards. Due to the nature of the work, they have slightly different duties under the Act.
- Regular updates will be made to the Staff Governance Committee on progress with implementation of the Act.
- As the detailed plan develops towards implementation date, appropriate development and committee papers will be scheduled into the work plan to give the Committee appropriate information and support to fulfil oversight and assurance role.
- The Governance arrangements will be in place for the workforce group and the People and Culture Programme Board will be in place by March committee.

The Committee **noted** the update on implementation of the Health and Care Staffing Act and on the recent Unfilled shifts audit.

6.3 Update on Progress and Approach to Statutory and Mandatory training

Presentation from Fiona Hogg, Director of People and Culture

While presenting the following was highlighted:

- Statutory and Mandatory Training compliance is on the work plan, allowing timely updates or issues to be raised at any meeting.
- Strategic risk reports will cover progress on this Very High Risk and the Directorate spotlight sessions will include details of how this is managed on their level 2 risk registers.
- 6 monthly deep dives into the subject have been added to the March and September SGC agendas and this will also go to Board in March.
- There are specific actions within our Annual Delivery Plan on this topic, so updates on progress with the ADP and the People and Culture Programme Board assurance reporting will cover this area.
- Health & Safety indicators will also be added to our IPQR and Staff Governance work force report on a regular basis.
- The Audit plan status states there were 17 actions, 5 have been completed, 6 have the RAG status of Green (they are on track and progressing well) and 6 have been paused or delayed. The oversight group are actioning 4 from the 'paused / delayed' group.
- The Audit Plan actions are currently being tracked through the Annual Delivery Plan (ADP), another report is expected in October – December
- Enablers – developed and delivered training videos including 'Day 1 corporate induction', an enabler which introduces tone and Culture for new staff joining NHS Highland.
- The systems team run regular communication and training for colleagues and managers to access the learning platform.
- Violence & Aggression have tailored training to start using scenario-based training and are monitoring the effectiveness and outcomes.

The Committee **noted** the progress made to date with improving compliance and the approach being taken moving forward.

6.4 Staff Governance Committee workforce report

Lori Pattison, People Planning and Analytics Manager

L Pattison provided an overview on the Workforce Report SGC December 2022 Presentation and Excel Spreadsheet SGC Metric Examples.

While presenting the following was highlighted:

- The SGC Metric Example spreadsheet provides examples of some potential metrics around workforce planning, availability and performance.
- There will be two styles of reports available to be viewed on the Dashboard. There will be a static report and a live feed. The Live feed will provide more details than

the static report and will also provide more flexibility as it allows filters to be applied to the data. An example was provided and the filtering by job families and professional groups highlighted.

- The Metric Dashboards are still being developed as there is further discussions around what information needs to be displayed on each dashboard, who will benefit from seeing that information and why will displayed information be required.
- There is a current discussion around retirement age, metric dashboards have helped produce data to inform the discussion. The dashboard highlighted that the retirement age is reducing in all professions. Trend analysis to show that over 2000 employees are age 57 and over with the average retirement age being 63.4. The professions with a lower age of retirement are Allied Health Professionals, Medical, Medical Support, Pharmacy and Psychiatry. Having this information available allows planning easier for managers to understand potential gaps in service with a third of the workforce being over 50.
- The Supplementary Staffing Dashboard will help understanding where the supplementary staffing is increasing. This will aid the understanding of the overall staff-force availability, spend ratio and how this maps to the current vacancies. This is still in the scoping phase of how it needs to be presented to staff governance.

The Chair commented on the presentation and explained that this is the first time this information has been presented to the committee and that some of the information on the presentation would not be relevant to the Staff Governance Committee.

F. Hogg explained that having the metric dashboards available to all staff at any operational levels will allow staff to see data for themselves and might reduce actions being taken that will not have an impact on improving the service.

Action: Feedback will be provided to L. Pattison by F. Hogg regarding which data would be relevant to present to the Staff Governance Committee.

The Committee noted the update and took moderate assurance from the report
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6.5 Update on progress with the Annual Delivery Plan

Verbal update from Fiona Hogg, Director of People & Culture

The ADP is continuing to progress. A report is currently being compiled which will be presented to Scottish Government to confirm what was delivered between October and December 2023. Some items have been deliberately paused as further work is required to refocus and re-plan including promoting professionalism and team conversations.

The Committee noted the update on progress with delivery against the ADP People and Culture elements.
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7 AOCB

There was no further business discussed.

8 Date of NEXT MEETING

The next meeting of the Committee will take place on Wednesday 8th March 2023 at **10.00 am** on **MS Teams**.

8.1 Meeting dates for 2023

10 May 23
28 June 23
6 Sept 23
8 Nov 23

The meeting closed at 1.15pm