

STAFF GOVERNANCE COMMITTEE

Report by Ann Clark, Committee Chair

The Board is asked to:

- **Note** that the Staff Governance Committee met on Wednesday 28th June 2023 with attendance as noted below.
- **Approve** the report and agreed-on actions resulting from the review of the specific topics detailed below.

Present:

Ann Clark, (Chair)
Philip Macrae, (Vice Chair)
Elspeth Caithness, (Employee Director)
Bert Donald, (Non-Executive)
Sarah Compton-Bishop (Non-Executive)
Claire Lawrie, (Staff side representative)
Kate Dumigan, (Staff side representative)
Pam Dudek, (Chief Executive)

In Attendance:

Gaye Boyd, (Interim Director of People & Culture)
David Park, (Deputy Chief Executive)
Katherine Sutton, (Chief Officer, Acute), left 11.30 until 12.20
Heledd Cooper, (Director of Finance)
Louise Bussell, (Nurse Director)
Pam Cremin, (Interim Chief Officer for Community)
Ruth Daly, (Board Secretary)
Kate Patience-Quate, (Deputy Director of Nursing), until 10.15am
Tim Allison, (Director of Public Health & Policy)
Fiona Davies, (Chief Officer, A & B HSCP)
Kevin Colclough, (Head of People Planning, Analytics & Reward), until 11.30am

Karen Doonan, Committee Administrator (minutes)
Nathan Ware, Governance & Corporate Records Manager

Jennifer McAndrew, Guardian Service, Item 6.3
Derek McIlroy, Guardian Service, Item 6.3

1 WELCOME AND APOLOGIES

The Chair welcomed everyone to the meeting. Apologies were received from R Fry and B Summers. The Chair thanked Sarah Compton Bishop for all her work over the years of holding the post and J Boardman for her work as previous Vice Chair. The

Chair went on to thank the Interim Director of People & Culture and the Board Administrator for their work in bringing the papers to committee.

It was noted that the Board had agreed that P MacRae be nominated as Vice Chair, and this would be discussed under AOCB later in the meeting.

It was noted that Agenda Item 5.4 should read substantial assurance and not moderate assurance.

- 1.2 Declarations of Interest** – Members are asked to consider whether they have an interest to declare in relation to any item on the agenda for this meeting. Any Member making a declaration of interest should indicate whether it is for financial or non-financial interest and include some information on the nature of the interest. Advice may be sought from the Board Secretary's Office prior to the meeting taking place.

There were no declarations of interest.

2 ASSURANCE REPORTS & COMMITTEE ADMINISTRATION

2.1 MINUTES OF MEETING HELD ON 10 May 2023

The minutes were **Approved** and agreed as an accurate record.

2.2 ACTION PLAN

The updates to the Action plan were given as:

Action no 72 - Engagement, particularly in regard of PDP's and one to ones. Guidance was issued via the Weekly Round to colleagues along with dates of training that were available within the Turas system. It was agreed to close this action.

Action 100 – Statutory/mandatory training (this action came out of the estates spotlight session), the Nurse Director stated that there is a paper being developed with a proposal for discussion at EDG. This paper will now be completed within the coming few weeks.

Action 104 – EDG for Health & Safety, this discussion is ongoing but has not completed.

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

2.3 COMMITTEE WORKPLAN and HOT TOPICS (Updated)

The Interim Director of People & Culture stated that there would be a review of the workplan as there was a new Chair in place and a new Director of People and Culture, to this end a meeting is in place for August to discuss further.

The Chair noted that the ADP update in the May meeting did not include a forward look but was focused on last year. The Interim Director of People and Culture confirmed a forward look would be considered for inclusion in the proposed agenda item for September.

The Interim Chief Officer for Community asked for an update on the junior doctor's industrial action that was due to take place.

The Chief Executive advised:

- A letter confirming industrial action would take place over 3? consecutive days, these being 12 July to the 15 July inclusive which included a Saturday.
- Local group has been working on this with action planning within the Gold, Silver Bronze arrangement. This is being led both managerially and clinically primarily in the Acute settings.
- Other areas are being checked but the main affected areas are Acute including New Craigs.
- Plans are in place and are revised daily.
- There is a national structure looking at queries regarding pay etc. to ensure a consistent national response
- There will be an impact on service delivery NHS Boards are also looking to a national response for the costs that this will incur.

The Committee:

- **Approved** the minutes of the meeting held on 10th May
- The Committee **Approved** the updates to the Action Plan.
- **Noted** the latest version of the Staff Governance Committee Workplan 2023 to 2024 was still a work in progress.
- **Noted the updates to 'hot topics' ?**

3 MATTERS ARISING NOT ON THE AGENDA

None

4 SPOTLIGHT SESSION – Acute Services

Presentation by Katherine Sutton, Chief Officer, Acute

The Chief Officer spoke to her presentation. Discussions were had around the need for more work to be done to make sure that managers were appropriately managing colleague absence. The Chief Officer explained that when there is repeated short time absence there is often a situation where the managers are not comfortable with contacting the absent member of staff to enquire further as to the reason. However, there are policies that can be put in place and often managers who are given support with implementing the policies are then able to manage the absence more effectively. New managers especially are helped by this strategy. There are some areas that have been highlighted through the data regarding colleague absence through muscular skeletal issues, when the risks have been addressed these absences tend to reduce. It is important that the risks are identified and addressed to protect and support colleagues working in these areas.

Statman training for medical colleagues has been ongoing, nurses and midwives have an approach to this that allows for more colleagues to be given the appropriate time to complete this training. Medical colleagues are now addressing this and changing the way that this is approached. Appraisals are also being addressed with the importance of those giving appraisals having the necessary support and confidence to complete them.

B Donald asked if an update could be given to committee regarding the Statman training to ensure that committee were kept informed of the process as it was rolled out.

Discussions were had around the need to identify the areas in which there were high colleague absence rates, low appraisal rates and low Statman training completion. The Chief Officer explained that this information was being revealed when the information

was broken down further into the different directorates and down to ward levels. Areas could then be identified, and strategies could then be put in place to address.

Information regarding vacancies and impact was identified as something that the Chief Officer could include in further updates to committee.

Discussions were had around the capturing of data for absence and the question of duty of care was raised in respect of those absences where the reason for absence was not captured. S Compton-Bishop asked how colleagues could be supported when the reason for their absence was not being identified and raised the issue of managers being held responsible for managing colleague's absence. The Head of People Planning, A & R explained that often it was a data collection issue and not a management issue as the software used to capture absence was not always updated by the manager after the initial recording of absence. Work was ongoing to address this issue. S Compton-Bishop highlighted the risk this posed to committee being able to take assurance that absence data was being recorded accurately.

The Chief Executive agreed that the recording of absence was an issue but agreed that responsibility still sat with the managers to make sure that the absence was being captured correctly and that colleagues were being supported. With support for management being put in place these figures should start to reflect the changes that are implemented across the organisation. Discussions were had around the pressures on colleagues not just locally but nationally. Project Wingman was discussed with it noted that colleagues who had interacted with this project had had a positive response.

The Interim Chief Officer for Community raised the issue of delegation and that what could be expected as 'Leader standard work' was not being practiced. This had been discussed in other meetings with managers and highlighted that there is work that cannot be delegated to other colleagues. The example of recording of absences was given with it being noted that due to confidentiality, delegation of this work would see the reasons for absence not being noted on the system. It was noted that there was a survey of colleagues who had interacted with the Project Wingman bus and that this data could be used to look at other ways to help support colleagues. The Interim Director of People & Culture confirmed that a position paper would be written when the data was collated from this survey and this paper would come to committee in due course.

Discussions were had around appraisals and how these would be increased with colleagues. The Chief Officer explained that the ambition was to have all colleagues going through the appraisal process. It was hoped that an increase in the percentage of colleagues going through the process would occur in due course and this information when collated would be brought back to committee. Discussions were had around risk assessments in areas where there were higher colleague absence and where stress and anxiety were pinpointed as the cause of absence. It was noted that often the stress and anxiety aspect affected teams as well as individuals and it was important that risk assessments were carried out to address this issue. There is work ongoing regarding Health & Safety and risk assessments and how these are to be done. As this work is done it should see a clearer picture forming of what requires to be put in place.

The Chief Executive stated that she was involved in the Protected Learning Time negotiations nationally and this would also influence the requirements of what colleagues needed to fulfil their roles and Statman training. There is a nationally recognised challenge in putting in place the necessary requirements, but it was something that had to be done as it was part of the pay deal.

Discussions were had around the figures that were in the presentation regarding the high number of absences that had no further information as to the reasons for the absence. It was noted that the two main categories were stress & anxiety and muscular skeletal.

The Head of People Planning, A & R explained that part of the issue of capturing the reasons for colleague absence was in the software systems that were in place. He went on to explain that a new system was being rolled out, but this was not available across the entire organisation at present. There are also departments that use rostering and time sheets, and this also affects the recording of absence. It was noted that further data could be shared at future meetings.

Action: Chief Officer to report back to committee with further information regarding Statman training and how medical colleagues are addressing this.

Action: Deputy Director of People & Culture to report back to committee with further data regarding Project Wingman.

5 ITEMS FOR REVIEW AND ASSURANCE

Due to time constraints the items were not taken in the order presented on the Agenda.

5.1 Area Partnership Forum minutes of the meeting held on 6 June 2023

The Interim Director of People & Culture highlighted:

- Band 2/3 programme, this is now concluded and payments are now being made
- Exit Interviews – the policy has been reviewed and ratified and the survey has now been launched

The Chair asked if the potential missing whistleblowing case discussed in the minutes had been resolved. It was confirmed that this will be reported in the Q1 Whistleblowing report which is not yet available to committee.

The committee noted the minutes of the Forum

5.2 Health and Safety Committee Minutes of the meeting held on 6 June 2023

These minutes were not available and will come to the next meeting.

5.3 Whistleblowing Q4 Report

Report from Report from Gaye Boyd, Interim Director of People and Culture

The Interim Director of People & Culture highlighted:

- Report covers Jan – March 2023 and will be included in the annual report when this is available
- H Cooper is in the Executive Lead Role until new Director of People & Culture takes up post
- Guardians and B Donald have continued to promote the whistleblowing standards and processes
- Training materials available on TURAS

- New investigation documents are being launched nationally; these will be considered within the awareness training done within the organisation
- Revised guidance as to what will be included in the annual reports: B Donald, H Cooper, and the Interim Director of People & Culture have met to discuss this to make sure that the document being written meets this guidance. There will be a further check to the report before circulation to committee
- Q4 – one case was closed, one remained open, and one case continued with the appropriate communication in place every 20 days to keep those involved updated

B Donald stated he felt it was time to “pause and reflect” on the work that had been done. This would allow for learning to be identified and further processes to be put in place. Discussions were had around the figures in the report and how adequate assurance can be taken that learning and feedback to managers was being done and actioned. The Chief Executive explained that there was a development session planned for August that would be looking at this with the new Director of People & Culture.

The Chair asked for clarification regarding the other approaches to investigations mentioned in the report. The Interim Director of People & Culture stated that this was linked to the new national documentation guidance on investigation. This guidance came out in March 2023 and there is work ongoing to identify how this will be implemented in the organisation given the low numbers of cases involved.

The Committee **reviewed** the report and took **Moderate Assurance** from the report

5.4 Staff Governance Standard Monitoring

Report from Gaye Boyd, Interim Director of People and Culture

The Interim Director of People & Culture highlighted:

- Annual compliance monitoring for Scottish Government
- Last year the reporting format was changed, and a small working group was set up to look at the report. This worked well so the proposal is to do the same again this year
- Work together to look at the options to respond to the questions by November
- Due date for response is December

Discussions were had around any potential issues in reporting back to Scottish Government, it was noted that the feedback from Scottish Government was only received a few weeks ago. The feedback was very positive, there are areas of good practice, and this has been shared

There were no anticipated issues with responding to Scottish Government it was a question of collating the examples necessary across the organisation to respond in the timescales set

The Committee **reviewed** the report which gave confidence of compliance with policy and objectives and took **Substantial Assurance**

5.5 Staff Governance Metrics

Report by Kevin Colclough, Head of People Planning, Analytics & Reward

The Interim Director of People & Culture stated that there had been work done on metrics and today's presentation is a proposal for how these will be presented going forward. Workforce data has always been presented to committee and this data has been improving continually.

The Head of People Planning, A & R spoke to his presentation and explained that dashboard information was continuing to be developed not only for internal use within the analytics team but also for managers across the organisation. Dashboards are continuing to be rolled out across the organisation.

The Nurse Director stated that she would be keen to see data regarding new starts and how the induction process has been completed. Discussions were had around whether data could be obtained around the induction package and statutory and mandatory training. This would identify areas where colleagues are not interacting and are not fulfilling what is asked of them.

S Compton-Bishop asked for clarification of the period involved in the "time to fill" section of the data shown. Discussions were had around the vacancies that are re-advertised and how this data is used. It was noted that it was important to identify these vacancies to understand why they remained unfilled in order that role redesign could be considered or job descriptions updated. The Head of People Planning, A & R explained that the "time to fill" information starts from the point that the vacancy is advertised. There are plans to move towards online approvals within Job Train, this would then give more accurate information to be worked with.

Discussions were had around the frustration and anxiety with advertising vacancies and the length of time it takes for an advert to go live. It was noted that there are different stages involved in putting a vacancy to advert and work was ongoing to identify the stages and break down the information in ways that identified where the process could be streamlined and sped up. Updates for the various stages would then be fed back to committee through various spotlight sessions. It was noted that this data helps with redesign as it is important to make sure that work that is being done is focused in the correct areas and is addressing the issues in the most appropriate way.

Discussions were had around the data for exit interviews and whether it was possible to identify the number of colleagues who declined exit interviews as well as the number who went through the process. This was important from a culture point of view and a question that was asked regularly at various other committees.

It was noted that this paper had been discussed at EDG and the Interim Director of People & Culture stated it was important that the correct level of detail was given. There were further discussions to be had at EDG but it was important that committee agreed that this gave the correct level of assurance.

The Committee reviewed the report, agreed to progress with the proposal presented and took moderate assurance

Comfort Break from 11.35 until 11.45am

5.6 Whistleblowing Annual Report

Report by Gaye Boyd, Interim Director of People & Culture

It was noted that Agenda Item 5.6 had not been completed in time for the meeting. The Interim Director of People & Culture stated that this paper would be circulated round committee in due course asking for members feedback and this would then go to the Board, before coming back to committee for further discussion in September.

6 ITEMS FOR INFORMATION AND NOTING

6.1 IMatter High Level Results

Report from Gaye Boyd, Interim Director of People & Culture

The Chair stated that this report is for noting, there was no assurance being offered at this time as it was providing the detail on the position at this time. There will be a report submitted to the September committee meeting which will be for assurance.

The Interim Director of People & Culture highlighted:

- Reports have been sent out to teams since 19th June
- Teams are being asked to consider what action is required
- Response rate has increased slightly
- Appendices have been included in the papers detailing the board report, board components and responses to the raising concerns question added this year
- which received a very positive response

Discussions were had around the response rates, and it was noted that it was good to see the responses to raising concerns. Teams will look at their actions plans and determine how to update them. It was noted that due to the pressures in the system it may be challenging for some conversations to be had and this would have to be looked at and addressed by the broader leadership teams.

Discussions were had around whether to take assurance from this report as the report could be considered very positive. It was noted that the assurance would come from the actions from the report and the report was written as a position paper. The next paper to come to committee would be for assurance as it would detail what the actions were and who was responsible for them.

The Chair stated that the results of the Listening and Learning Survey scheduled for later this year along with this report and further discussion would reveal a clearer picture of the resilience within the organisation given the pressures in the system. The Chief Executive agreed and stated that this report was only part of the picture, and it was important that there were further discussions at EDG and with partnership to understand this further. It was important to understand the cultural conversation about what the results meant for a team and how to improve it further.

The Committee noted the report

6.2 Culture Progress

Verbal Report from Pam Dudek, Chief Executive

The Chief Executive explained that a lot of work has been done having conversations with colleagues to create the proposal as to how to move this work forward. It is important

that the next steps taken are appropriate. A formal paper will come to committee in September.

It was highlighted:

- Leadership and management – this is the most crucial component having being highlighted repeatedly within the conversations looking at how can colleagues thrive within the workplace and what requires to be put in place to support this
- .
- Management programmes are being reviewed - all managers and leaders need to have right skills, capability, and confidence to undertake role and will apply to all regardless of length of time in post
- Compassionate leadership is something that is required, and managers require to be trained in what this involves as well as the technical qualities that are required to fulfil the role.
- Work requires to be done to challenge the default position of “formal procedure” in order that early resolution can be achieved
- There is a position paper being developed which will be presented to the Chief Executive by the end of July. This work is already in place in other areas of the UK which allows NHS Highland to look at this work in context and localise this over the coming few years.
- Expectation of every leader and manager to engage with this and this will be part of the proposal.
- Work continues to be done by H Freeman around civility. Trying to create some movement from the ground up with, for example, guest speakers such as Michael West
- There will be a look back at the Culture programme and what needs to be progressed – for example People processes – onboarding, exit interviews and grievances
- Work being done on partnership and how this can be addressed and how employee engagement can be improved.
- Continual challenging of leadership management and style to address issues and provide support across the organisation.
- Culture Oversight Group will be re-instated, will refresh this once the workplan and position paper have been completed. In A & B the relevant group is more open to a wider staff group, and this will also be looked at. It is envisaged that this will be launched in the Autumn.

B Donald noted the amount of work done and the time reflecting which has been important to identify the next steps. It was heartening to see this data and information and stated that the key to addressing these issues were the managers and how they are trained and supported in their roles.

The Committee noted the update

6.3 Guardian Annual Report

Report from D McIlroy and J McAndrew, Guardians

The Chair introduced the item by highlighting that, although it was for noting as an independent report from the Guardian Service, the report was a very significant item on the Committee’s agenda.

J McAndrew spoke to the presentation and D McIlroy highlighted:

- The two main questions to be asked – “what does speak up mean to you” and “what does speaking up mean to your colleagues”
- Aware that not all managers believe their colleagues when someone does come forward to speak up, often work to do to address this
- Aware of areas that are underrepresented due to colleagues not feeling that they can raise concerns

The Chief Executive stated that NHS Highland was the only Board in Scotland that has a Guardian service, and it would be interesting to compare the report with other Boards out with Scotland who use this service and who are of similar size to NHS Highland. Discussions were had around the need for early intervention to resolve issues and how this has worked to support those involved. There has been an increase in medical colleagues accessing this service and early intervention preventing the issue becoming a formal process. It was noted that a formal process is not a process that anyone would like to be involved in due to the procedures it follows and often it can be a destructive process. It was noted that the increase in numbers within the report is a sign that the process is working, and colleagues feel that they can access this service and be heard.

The Interim Director of People & Culture meets with the Guardians monthly to go through the calls and to identify any learning that requires to be implemented because of the information. This report is part of the data that is gathered to clarify the picture of how the organisation supports colleagues and what is in place to maintain this support. Work is ongoing with the learning and making sure that appropriate measure and procedures are in place.

The Employee Director raised the question around staff safety in the report and the indicators used as colleague safety appeared to be in two categories. D McIlroy explained that colleague safety should be in both categories, namely red and amber. If colleague safety is highlighted to the Guardians, then this is escalated to the organisation with an expected response within 48 hours from the organisation. Where there are colleagues in crisis, this is dealt with immediately hence this appears in both categories.

The Employee director challenged the categorisation in the report that stated that the biggest colleague group were nursing and midwifery, this needed to break down the information to get a clearer picture. a. J McAndrew stated that if it was possible to break down this information further and if confidentiality allowed it, then it would be helpful to do this and report back.

It was noted there is work to be done to support managers to prevent issues going into a formal process straight away. D McIlroy agreed that there is more work to be done. It was important that colleagues who move into supervisory and managerial roles are given appropriate training and guidance to support them.

Discussions were had around triangulating the IMatter Survey, Listening and Learning Survey and the Guardians report to give a fuller picture of what was going on within the organisation.

D McIlroy agreed that information regarding other organisations of similar size to NHS Highland who use the service could be presented to give further context. He went on to state that there is further information available from the National Guardian Office. It was noted that there were more escalated cases within NHS Highland than there are in other organisations who use the Guardian Service and this could be looked at positively in that employees were able to contact the service with their concerns.

The Chair agreed that the report would help in the triangulation of data to get a clearer picture of what was happening within the organisation. Committee agreed to note the report and that assurance would be looked at in due course. It was noted that at present

the Guardian service was able to cope with the capacity of calls, whilst busy they were still able to deal with the workload.

The Committee noted the report

7 **AOCB**

Appointment of Vice Chair

It was noted that P MacRae was appointed to Vice Chair of committee.

8 **Date of NEXT MEETING**

The next meeting of the Committee will take place on **Wednesday 6th September 2023 at 10.00 am on MS Teams.**

8.1 **Meeting dates for 2023**

8 Nov 23

The meeting closed at 12.55 pm