MINUTE of MEETING of the STAFF GOVERNANCE COMMITTEE	www.nhshighland.scot.nhs.uk Highland	
HIGHLAND NHS BOARD	Assynt House Beechwood Park Inverness IV2 3BW Tel: 01463 717123 Fax: 01463 235189	NHS

## Present:

Ann Clark, (Chair) Elspeth Caithness, (Employee Director) Bert Donald, (Non-Executive) Sarah Compton-Bishop (Non-Executive) Claire Lawrie, (Staff side representative) Fiona Broderick, (Staff side representative)

## In Attendance:

Gareth Adkins, (Director of People & Culture) Gaye Boyd, (Deputy Director of People & Culture) David Park, (Deputy Chief Executive) Katherine Sutton, (Chief Officer, Acute), from 11am Pam Cremin, (Chief Officer HSCP) Ruth Daly, (Board Secretary) Tim Allison, (Director of Public Health & Health Policy) Helen Freeman, (Director of Medical Education) Isla Barton, (Director of Midwifery), attending on behalf of corporate NMAP, noon Megan Glass, (People Partner, HR Services)

Karen Doonan, Committee Administrator (minute)

# 1 WELCOME AND APOLOGIES

The Chair welcomed everyone to the meeting. Apologies were received from Committee member P Macrae. It was also noted that the following would not be in attendance at the meeting: H Cooper, F Davies, K Dumigan, J McBain, K Patience-Quate, and B Summers.

### 1.2 Declarations of Interest

There were no declarations of interest.

# 2 ASSURANCE REPORTS & COMMITTEE ADMINISTRATION

### 2.1 MINUTES OF MEETING HELD ON 28<sup>th</sup> June 2023

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

### 2.2 ACTION PLAN

The Director of People & Culture explained that the most up to date action plan had been added to Committee papers that morning and proposed to close the following actions:

- Item 90 Integrated Performance and Quality Report (IPQR) an updated version of IPQR and metrics were on the agenda for this meeting
- Item 95 Terms of Reference, on the agenda for the meeting
- Item 99 Whistleblowing update, on the agenda for the meeting
- Item 100 Estates Spotlight learning from the Estates case study will go to EDG within the week, proposed to bring this paper to committee
- Item 102 Statutory/Mandatory Training on the agenda for the meeting, short life working group (SLWG) will bring this forward

The Director of People & Culture provided progress updates on the following:

- Item 104 Health & Safety Head of Health & Safety to develop a Corporate Action Plan, this will come back to committee in due course
- Item 106 Education and Training SLWG looking at Statutory/Mandatory Training, a more comprehensive approach to join up corporate and clinical education be picked up with colleagues moving forward
- Item 108 Maternity Business Case work was ongoing and update would be brought to the next meeting
- Items 109 and 110 Induction Review was being considered by the Statutory and Mandatory training SLWG and an update would be provided during the meeting.

The Committee Agreed to close the items as listed and otherwise Noted the updates.

## 2.3 COMMITTEE WORKPLAN and HOT TOPICS (Updated)

Responding to questions from the Committee Chair, the Director of People and Culture provided the following updates:

He was still to establish what staff engagement would be put in place for the Listening and Learning survey. The survey had not been run yet and its contents were still to be determined.

- He would reach an early view on reporting on the Annual Delivery Plan and would liaise with the Deputy Chief Executive to ensure that Committee reporting would align with Scottish Government reporting schedules.
- The Induction Review item planned for this meeting would be included on the workplan for November.

Action: Director of People & Culture to discuss ADP with Deputy Chief Executive.

The Chair asked for updates on the hot topics and noted that item 7.1 was a "hot topic" that was already on the agenda. It was noted that the "hot topics" required to be added into the new format of the workplan.

Action: K Doonan to add "hot topics" to the workplan

The Committee:

- **Noted** the latest version of the Staff Governance Committee Workplan 2023 to 2024 was still a work in progress.
- Agreed to add "hot topics" to the workplan and considered if any updates are needed outside the items on the agenda.

## 3 MATTERS ARISING NOT ON THE AGENDA

None

# 4 SPOTLIGHT SESSION – Highland HSCP

Pam Cremin, Chief Officer (HSCP)

The Chief Officer HHSCP provided a presentation focussing on a range of staffing matters relating to the Highland Health and Social Care Partnership. She commented on the age and banding profile, and priorities to upskill and redesign posts to create multidisciplinary teams. She described increases in the workforce profile for psychological therapies and adult support and protection. Sickness absence rates in the HHSCP were above average for the Board and were being monitored closely. There was a long-standing issue of Statutory and Mandatory training compliance. She commented also on colleague appraisals and PDPs, the relatively high overall response rate to iMatter, and that employee relations cases were relatively low within the sector.

The Director of People & Culture gave some context to the presentation by outlining that he was working closely with the Chief Officer as they were both new in post in order that the changes that were required to be made were identified going forward.

During discussion, Committee members raised the following issues:

- An explanation for the high long-term sickness absence rates was sought, together with an outline of the actions being put in place to address them. The Director of People & Culture advised that the Health & Wellbeing strategy required further development and he expected this to be completed by the end of the year.
- Concern was expressed about the low uptake of corporate induction and details
  of the plans to address this were sought. Corporate induction was now an
  organisational policy and there were risks associated with colleagues not being
  fully inducted before performing in their roles. The Director of People and Culture
  advised that delivering corporate induction would be a priority going forward and
  there would be engagement with partnership colleagues. Setting start dates on
  agreed days of the month and aligning with the corporate induction process would
  be of assistance. He would work closely with the Chief Officer to deliver on
  collective and individual responsibilities.
- The presentation had highlighted ongoing issues relating to the need for higher priority being afforded to appraisals, management of sickness absence, and training. It was noted that the responsibility for these matters rested with managers and leaders and the Director of People and Culture confirmed he was working closely with the Chief Officer to make the necessary improvements.
- The presentation raised many issues on which the Committee had been keen to see improvements for some time in all Directorates. A suggestion was made that timescales and targets for improvements should now be considered. The Director of People & Culture highlighted the societal issues that all Boards were affected by: the effects of the pandemic, the cost-of-living crisis, and consequential heightened anxiety levels within society. It was important to both reflect that context and identify what the organisation could put in place, and this would help with identifying timescales as requested.

The Chief Officer welcomed the comments made and the support she had received recently to address a range of issues of concern. Regarding sickness absence there was good support from the Occupational Health department. There was an area of focus on the absences that had "no identified reason" and this would be addressed going forward. It was vital that reasons for absences were known so that appropriate support could be put in place.

The Committee **Noted** the terms of the presentation and the specific workstreams highlighted during discussion.

### 5 ITEMS FOR REVIEW AND ASSURANCE

### 5.1 Area Partnership Forum minutes of the meeting held on 18 August 2023

There were no questions nor comments.

The committee **noted** the minutes of the Forum

#### 5.2 Health and Safety Committee Minutes of meeting held on 13 June 2023

The Chair highlighted that there was no assurance level within the minutes for the Acute Report and asked if this was an error or if there was no assurance level that had been offered.

Action: Director of People & Culture would investigate this further

The Chair queried the reference in the minutes to the date of the Action Plan for New Craigs. The Director of People & Culture stated that a meeting of the Oversight Committee had since taken place and this information would be reflected in the Health and Safety Committee minutes going forward. He highlighted the complexity of the work involved with the regulator and gave assurance that there was a plan in place. He went on to advise committee that he had asked the Head of Health & Safety for a Corporate Plan that would outline the longer-term work and the necessary short-term actions.

Action: Director of People & Culture would provide a progress update on this situation at the next meeting.

The Committee **noted** the minutes of the Health and Safety Committee

### 5.3 IPQR / Metrics

The Director of People & Culture presented two slides with commentary on current performance data which included a wider range of metrics than had previously been provided to the Committee. He briefly highlighted the following:

- The Board's sickness absence rates were sitting at 6.16% which was above the 4% national target. The ageing staff profile may correlate with a higher rate of longer-term conditions and higher than average absence rates. There may be a need to look at how to support staff and put in reasonable adjustments.
- Reduction in the overall time to fill vacancies was a priority area of work. An
  improvement plan had been developed and would go to EDG next week. He
  confirmed that a Short Life Working Group had been established to accelerate
  progress. The processes for approval required to be streamlined and recruiting
  managers needed to understand how to engage with the process to reduce
  obstacles and delays. Enhanced communication about the processes would be
  put in place and an item brought to the Committee for further assurance in due
  course.
- There was an action plan in place aiming to improve statutory and mandatory training compliance. E-learning modules needed to be differentiated from practical training such as manual handling and management of violence and aggression. It was important to direct the focus of the work to areas of greatest risks to staff and patients.

 Appraisals and Personal Development Plans (PDPs) –The Chief Executive is on a national group reviewing protected learning time arrangements and the requirements for developing Turas appraisal and PDP processes so that appraisals cannot be completed without linkage to completing a PDP and mandatory training modules

B Donald asked for more information around international recruitment and what was in place to support these colleagues. The Committee was advised that it was beneficial to have other recruits volunteer to help support new international recruits as lived experience was a valuable tool. There had been five internationally recruited nurses in Raigmore Hospital with professional and pastoral support being supplied by the nursing team. A regional model was being applied with education and induction coming from NHS Grampian. From January 2024 it was hoped to have some international recruits within mental health and the processes were currently in place to support this.

The Employee Director highlighted the benefit of employee networks being in place prior to recruitment taking place. She highlighted that unions already had networks in place and at present staff side had not been approached to support. The Director of People & Culture stated that he was happy to discuss this further. It was noted that further work was necessary on employee/employer relationships.

The Chair clarified the level of assurance that was being asked for this item and it was agreed that in future an SBAR should be submitted to Committee along with the report.

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

### Comfort Break 11.25 until 11.40am

### 5.4 Whistleblowing Annual Report 2022-23

Report from Gareth Adkins, Director of People and Culture

The Committee had received the Whistleblowing Annual Report 2022-23 which represented the second annual report since the inception of the National Whistleblowing Standards in April 2021. The Annual Report had been presented to the Area Partnership Forum.

The Director of People & Culture outlined that both Item 5.4 and Item 5.5 had been reflected upon at a recent Board development session which all members of the Committee present had attended. He highlighted the following:

- There was a need to ensure not only that there was compliance with the Whistleblowing process but that actions were monitored and tracked. This would be supported by a refinement of administrative and support processes as a priority.
- In total, five concerns had been closed over the year, one being upheld, two partially upheld and 2 not upheld.
- Several Whistleblowing cases were aligned with patient safety, there was a need to increase the link to clinical and care governance work streams and Executive leads in those areas.
- Both the annual report and the Quarter 1 report proposed moderate assurance.

The Chair highlighted the importance of raising awareness of the standards and asked if there was any way to collate hard data in respect of staff awareness of these across the organisation. The Deputy Director of People & Culture suggested that data could be collated from the TURAS module. The Director of People & Culture explained that gathering data to gauge awareness of the policy would involve surveying colleagues. Response rates were typically low and may not provide sufficient information to give the Committee assurance.

B Donald highlighted the recent 'pause and reflect' which he thought had been useful and issues arising would be considered by The Director of People and Culture. It was important that enabling people to speak up by any method was seen as 'everyone's business. Staff needed to know a few key messages about the process not the details of the standards.

E Caithness suggested that staff did know about the Whistleblowing process but a greater consistency of response from the organisation would be helpful and how to generate that should be considered by the culture oversight group.

The Deputy Chief Executive highlighted the importance of inclusion of the Whistleblowing Standards in corporate induction and an immediate proactive response when a concern is raised.

The Chair suggested the key points made in the discussion be considered in the work following up the pause and reflect session.

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

#### 5.5 Whistleblowing Q1 Report

Report by Gareth Adkins, Director of People & Culture

The Committee had received the Whistleblowing Standards report for Quarter 1 covering the period April - June 2023. The report confirmed that since May 2023 Heledd Cooper, Director of Finance, had provided Executive leadership.

The Chair referred to the interim arrangement with the Director of Finance holding the Executive lead for Whistleblowing during the transition period prior to Gareth Adkins taking up his post as Director of People and Culture. She asked if the hand-over of Executive leadership had now taken place.

The Director of People and Culture clarified that the Executive lead remained currently with the Director of Finance and that a final decision had not yet been taken on where accountability would sit going forward.

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

### 5.6 Staff Governance Committee ToR Annual Review

Report by Board Secretary

The Committee had received a report inviting consideration of revisions to the Committee Terms of Reference relating to the list of individuals who would normally be invited to attend meetings.

The Committee:

(a) **Agreed** the proposed changes to its Terms of Reference as shown in the appendix to the report and

(b) **Noted** that any further revisions would be brought to the Committee before the end of the financial year for inclusion in the 2024 update to the Code of Corporate Governance.

#### 5.7 Imatter23 Engagement Report

Report by Gareth Adkins, Director of People & Culture

The Committee had received a report on the 2023 Staff Experience Survey which ran for a three-week period from 15 May to 5 June 2023.

The Director of People & Culture highlighted that the overall response rate to the 2023 iMatter survey was 50%. While the weighted responses were positive, there was a noticeable difference in engagement with questions focussing on the wider organisation compared with staff's personal experience and their responses in relation to their team and line manager, for example how involved staff feel they are in decisions. It would be an important role therefore for the Culture Oversight Group to consider how to engage with staff to understand how to improve in the areas with weaker scores. It was noted the Guardian Service annual report showed an increasing number of colleagues who were happy to share their information with line managers, which was a positive development and demonstrated confidence in the process.

The Director of People & Culture confirmed that it was not possible to break down the results from the survey. The report was designed to maintain confidentiality however it was noted that this did present a challenge in identifying areas of most concern.

The Chair asked what sort of improvement in the scores would be realistic and what would be considered 'Best in Class'. The Director of People and Culture responded that it would be possible to benchmark against other Boards. The response rate, whilst encouraging could perhaps be improved. The Deputy Chief Executive suggested that improvement effort should be focused on those areas we think are most impactful for the organisation's current needs.

The Director of People & Culture stated that the issues raised during discussion would be taken to the Cultural Oversight Group for consideration and then taken back to committee in due course.

The Committee noted the content of the report and took Moderate Assurance.

#### 5.8 People and Culture Strategic Risk Review

Report by Gareth Adkins, Director of People & Culture

The Committee had received a report on the People and Culture Strategic Risk Register which had been updated and was presented for review and approval.

The Director of People & Culture advised he had taken the opportunity to strengthen the approach to risk and to review the presentation of the risk register. The risks had been better described and the cover paper highlighted key areas for consideration and trends over time. He went on to explain the importance of identifying timescales against the risks in order that work can be done to follow through on actions. He sought confirmation from the Committee that the wording reflected the risks accurately and that there was clarity around the mitigating actions and controls.

The Committee **noted** the content of the report and took **Moderate Assurance** from:

- The review and refresh of the people and culture strategic risks
- the plan to review level 2 people and culture risk management

### 5.9 Leadership & Culture Programme

Report by Gareth Adkins, Director of People & Culture

The Committee had received a paper describing a proposed framework to build on the previous work to develop leadership capability and ensure leadership behaviours are consistent with the values of the organisation. The proposals outlined in Appendix 1 to the report had been discussed and endorsed by the Cultural Oversight Group at their meeting on 26th July 2023. The Staff Governance Committee was now asked to review and approve the refreshed approach to the leadership and culture programme.

The Director of People & Culture apologised for the lateness of paper and highlighted:

- The membership of the Culture Oversight group had been updated and refreshed, with a view to strengthening the strategic role of the group and to maintain operational and staff side input.
- The report demonstrated the significant progress made over the last few years and it was now important to be intentional about the key areas of focus going forward. The proposals for the direction of travel and the leadership and culture framework had been agreed at the Area Partnership Forum and the Committee was asked to approve the approach.
- The proposed direction of travel focussed on three interconnected elements: Leadership and culture programme; workforce plan and Annual Delivery Plan, and Staff Governance Standards.
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- The purpose of the Culture Oversight Group would be to focus on the leadership and culture framework, Assurance on this would be brought to Committee.
- Establishing a Workforce board/group was also being considered to provide oversight of delivery of the ADP.
- Staff governance standards would be monitored through existing governance for performance management across the organisation

Committee members queried what support was in place for colleagues wishing to move into leadership roles and what evidence of their leadership attainment was required during the selection process. The Director of People & Culture highlighted the importance of ongoing development of gateway progression and the appraisal and PDP process.

The Deputy Chief Executive highlighted the importance of workforce planning due to the age profile of the organisation. It was vital that the recruitment process was also robust to address the challenges faced by the organisation.

The Chair commented on the numerous groups associated with this work and highlighted the potential increase in workloads for staff in an already pressured system. The Director of People & Culture acknowledged the challenges and stated that identification of the work was necessary so that timescales could be managed and prioritised.

Following discussion, the Committee:

- **Noted** the progress to date to address the issues arising from the Sturrock report including progress in the development of leadership and the work to support cultural change;
- **Approved** the proposed structure for governance and delivery of the approach to cultural change through:
  - A leadership and culture programme with oversight and governance by the Chief Officer Group (COG), focussed on leadership and staff development within a refreshed leadership and culture framework;

- The Workforce Plan and Annual Delivery Plan with oversight and governance by the Workforce Oversight Group with updates to COG on agreed focus areas, e.g., recruitment, onboarding processes, health and well-being
- Performance management through staff governance standards and existing staff governance arrangements and organisational performance framework
- **Approved** proposal to review the cultural measurement framework and present to COG for further discussion and consultation.

#### 6 ITEMS FOR INFORMATION AND NOTING

#### 6.1 Statutory/Mandatory Deep Dive

Report from Louise Bussell, Nurse Director

A paper was presented to the Committee providing an overview of the current position in relation to both statutory and mandatory training, and wider learning and development. The paper had received prior consideration by the Area Partnership Forum and set out several recommendations to achieve sustainable improvements.

The Director of People & Culture highlighted the need for staff side engagement and discussion and drew attention to the following:

- A short life working group would be established to address the actions in the paper.
- There were clear links to the induction process, and proposals were being made to align start dates with inductions at a given point in any month.
- It would be important to ensure training for certain skills such as managing violence and aggression were proportionate and linked to risks.
- It was understood that the colour coding used in the report represented progress against the actions within the original internal audit action plan.

The Director of Medical Education highlighted the challenges for medical colleagues regarding the induction programme, stating that there is a very different pattern of change over regarding medical staff throughout the year. This was noted and would be given consideration by the SLWG.

During discussion, while welcoming the contents of the report, a view was expressed that the recommended 'moderate' level of assurance was too high and should be reduced to 'limited'. Once the Committee could see progress being made against clearly articulated target dates, a higher level of assurance might be more appropriate.

A suggestion was made that discussions with partner organisations might prove helpful in terms of identifying suitable venues for certain training courses.

Discussion took place around the term "violence and aggression" and how this was interpreted by colleagues. It was noted that most instances involved behaviour challenges involving patients and the Director of People & Culture agreed the terminology was not helpful and should be considered nationally.

The complexities around building in "non-clinical time" was also discussed as this was often difficult when the system is extremely pressured. The Employee Director highlighted that "non-clinical" time was available but was perhaps not being used as it should be. National and local discussions were on-going around this complex issue.

Following discussion, the Committee **noted** the report and agreed to take **Limited Assurance** and that an action plan be taken back to committee.

### 7 AOCB

### 7.1 Patient Safety in the Wake of the Lucy Letby Verdict

Correspondence from Michael Matheson MSP, Cabinet Secretary for NHS Recovery, Health & Social Care had been circulated to the Committee.

The Director of People & Culture highlighted that he and the Deputy Director of People and Culture were working closely with the Nurse Director and Medical Director to meet the timescales for a response to the correspondence received from Scottish Government in reaction to the Lucy Letby case.

The Chair commented that the necessary actions to address the requirements of the letter should be part of longer-term programmes of work already underway wherever possible. It was her expectation that there would be an overview of whatever actions were proposed in the response. The Board Chair highlighted that the actions of all Boards would contribute to a national response and that that this would be the beginning of a larger piece of work.

#### 8 Date of NEXT MEETING

The next meeting of the Committee will take place on Wednesday 8<sup>th</sup> November 2023 at 10.00 am on MS Teams.

#### 8.1 Meeting dates for 2023

8 Nov 23

### 9 Meeting Schedule for 2024

### Tuesdays at 10am

16 January 2024 5 March 2024 7 May 2024 9 July 2024 3 September 2024 5 November 2024

The meeting closed at 13:15