

<b>NHS Greater Glasgow and Clyde</b>	<b>Paper No. 22/45</b>
<b>Meeting:</b>	<b>Staff Governance Committee</b>
<b>Meeting Date:</b>	<b>28 June 2022</b>
<b>Title:</b>	<b>Annual Report of the Staff Governance Committee 2021/22</b>
<b>Sponsoring Director/Manager</b>	<b>Anne MacPherson, Director of Human Resources and Organisational Development</b>
<b>Report Author:</b>	<b>Diana Hudson, Staff Governance Adviser</b>

## 1. Purpose

The purpose of the attached paper is to:

- Assist the NHS Board in conducting a regular review of the effectiveness of the systems of internal control. As such, the Co-Chairs of the Staff Governance Committee are required to submit a formal report to the NHS Board on an annual basis;
- Provide the NHS Board with the approved Annual Report of Staff Governance 2021/22, for noting;
- Support delivery of the Better Workplace Corporate Objectives.

The report will also be submitted to the Area Partnership Forum, for assurance, at the meeting on 22<sup>nd</sup> June 2022.

## 2. Executive Summary

The paper can be summarised as follows:

- The attached draft report describes the purpose and composition of the Staff Governance Committee, the business items considered, and key outcomes identified by the Committee during 2021/22.

## 3. Recommendations

The NHS Board is asked to consider the following recommendations:

- To note the enclosed final Annual Report of Staff Governance 2021/22, which outlines the key business of the Committee during 2021/22.

## 4. Response Required

This paper is presented for awareness.

## 5. Impact Assessment

The impact of this paper on NHS Greater Glasgow and Clyde's corporate aims, approach to equality and diversity and environmental impact are assessed as follows:

- |                        |                 |
|------------------------|-----------------|
| • Better Health        | Neutral impact  |
| • Better Care          | Positive impact |
| • Better Value         | Neutral impact  |
| • Better Workplace     | Positive impact |
| • Equality & Diversity | Positive impact |
| • Environment          | Neutral impact  |

## 6. Engagement & Communications

The content in this paper was subject to the following engagement and communications activity:

- Preparation of this Annual Report was undertaken by the Staff Experience team with relevant stakeholders on the subject matters, and subsequently circulated to the Director of Human Resources and Organisational Development, and the Staff Governance Committee Co-Chairs, for their review and consideration, prior to submission for approval at the Staff Governance Committee.

## 7. Governance Route

This paper has been previously considered by the following groups as part of its development:

As this report details the business of the Staff Governance Committee, initial approval was sought via the Committee. Therefore, no other groups considered this paper prior to submission to the Staff Governance Committee.

Following review and consideration by the Staff Governance Committee, and any required amendments or additions made, the final report was also submitted to the Area Partnership Forum, for assurance, on 22<sup>nd</sup> June 2022.

## 8. Date Prepared & Issued

The Annual report was prepared in March and April 2022 and issued to Board members on 21<sup>st</sup> June 2022.

**GREATER GLASGOW AND CLYDE NHS BOARD****ANNUAL REPORT OF STAFF GOVERNANCE COMMITTEE 2021/2022****1. PURPOSE**

- 1.1 In order to assist the Board in conducting a regular review of the effectiveness of the systems of internal control, Standing Orders require that this Standing Committee submits an annual report to the Board. This report is submitted in fulfilment of this requirement.

**2. STAFF GOVERNANCE COMMITTEE****2.1 Purpose of the Staff Governance Committee**

- 2.1.1 The purpose of the Staff Governance Committee (the Committee) is to provide assurance to the Board that NHS Greater Glasgow and Clyde (NHSGGC) meets its obligations in relation to Staff Governance under the National Health Service Reform (Scotland) Act 2004 and the Staff Governance Standard ('the Standard'). The Staff Governance Committee is a Standing Committee of the NHS Board.
- 2.1.2 The Committee seeks to ensure that Staff Governance mechanisms are in place that take responsibility for performance against the Staff Governance Standard and are accountable for oversight of progress towards achievement of the Standard.
- 2.1.3 The Committee ensures that structures and policies are in place to provide assurance that all staff are:
- Well informed;
  - Appropriately trained and developed;
  - Involved in decisions;
  - Treated fairly and consistently, with dignity and respect, in an environment where diversity is valued; and,
  - Provided with a continuously improving and safe working environment, promoting the health and wellbeing of staff, patients and the wider community.
- 2.1.4 Each Health and Social Care Partnership, Acute Services and Corporate Directorate have their own Staff Governance arrangements and structure. Compliance with the Standard is monitored through the outputs on the workforce performance reports and through presentations, on a rotational basis, from the relevant Chief Officer / Director for each area to the Staff Governance Committee.
- 2.1.5 In addition to the above, NHSGGC compliance with Staff Governance is reviewed through a series of implementation plans and strategies, service presentations, and policy review and regular NHSGGC Workforce Strategy implementation plan updates.

**2.2 Composition**

## OFFICIAL SENSITIVE

During the financial year ending 31 March 2022 membership of the **Staff Governance Committee** comprised:

### **Joint Chairs:**

Mr A Cowan (Joint Chair)

Mrs D McErlean (Joint Chair until 31 December 2021)

Ms A Cameron-Burns (Joint Chair from 1 January 2022)

### **MEMBERSHIP**

Councillor S Mechan

Mrs R Sweeney (until 31 May 2021)

Mr C Vincent

Ms A Khan

Mr F Shennan

Dr P Ryan (from 1 June 2021)

Prof. J Brown CBE, Chair – NHS Greater Glasgow and Clyde

Ms J Grant, Chief Executive – NHS Greater Glasgow and Clyde

### **IN ATTENDANCE**

Mr J Best, Chief Officer, Acute Services

Mr W Edwards, Chief Operating Office, Acute Services

Ms A Cameron-Burns, Area Partnership Forum (APF) Staff Side Secretary (until 31 December 2021)

Ms F Carmichael, Staff Side Chair, Acute Services Staff Partnership Forum

Ms B Culshaw, Chief Officer, West Dunbartonshire Health and Social Care Partnership (HSCP) (representing HSCPs)

Mrs D Hudson, Staff Governance Co-ordinator/iMatter Operational Lead

Mrs M Macdonald, Head of Learning and Education

Mrs A MacPherson, Director of Human Resources & Organisational Development

Ms P Martin, Head of Staff Experience

Ms M McCarthy, Staff Side Chair, Glasgow City HSCP Staff Partnership Forum

Mr A McCready, Staff Side Chair, Non City HSCP Staff Partnership Forum

Ms N Owens, Depute Director of Human Resources & Organisational Development

Ms E Quail, Area Partnership Forum Staff Side Secretary / Area Partnership Forum Secretariat

Ms C Heuston, Assistant Chief Officer, Human Resources, Glasgow City HSCP

Mr A McCready, Staff Side Chair, APF Delegate to Staff Governance Committee

Mr M Allen, Senior Administrator

Dr M McGuire, Executive Director of Nursing

Ms F Lyall, Trade Union Representative

Mr G Wilson, APF Secretariat

### **AS REQUIRED**

Dr J Armstrong, Medical Director (or delegated representative)

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Ms K Strannigan, Head of Health and Safety  
Ms R Wall, Head of Occupational Health and Safety  
Mr S Munce, Workforce Planning and Analytics Manager / Interim Head of Human Resources, Resources and Development  
Mr K Small, Independent Human Resource Management Specialist (15 April 2021 Whistleblowing Meeting only)  
Ms E Vanhegan, Director of Corporate Services and Governance  
Ms S Blades, Lead Nurse for Professional Governance & Regulation  
Ms J Burns, Consultant, Department of Medicine for the Elderly  
Mr A Reynolds, Head of Human Resources – Service Development and Support  
Ms J Haynes, Corporate Services Manager – Governance  
Dr L Donaldson, Director of Medical Education  
Dr C Perry, Consultant, Endocrinology  
Ms T Carrey, Interim Workforce Planning & Analytics Manager

### 2.3 Meetings

2.3.1 During the period 1 April 2021 to 31 March 2022, the Committee met on five occasions, on the undernoted dates:

- 15 April 2021 (formal review of Whistleblowing Procedures)
- 11 May 2021
- 3 August 2021
- 2 November 2021
- 1 February 2022

The attendance schedule is attached at Appendix 1.

2.3.2 All meetings of the Staff Governance Committee were quorate.

### 2.4 Business

The Committee considered both routine and specific work areas during the financial year 2021/2022. Outlined below are details of some of the key areas of work considered, along with a brief summary of each, with full details of all Committee business items considered are attached at Appendix 2. With the Board continuing to operate on a modified governance basis, in light of the COVID-19 circumstances, it was agreed to place Service Assurance Presentations on hold for the duration of 2021/22.

The Committee gave due consideration to the priorities outlined by the Board Chair around Wellbeing, Workforce Planning, Partnership Working & Staff Engagement while also seeking assurance that the work programme was aligned to the Board Objectives.

#### 2.4.1 Health, Safety and Wellbeing

2.4.1.1 The Committee welcomed updates in relation to the Staff Health Strategy, which was written with a specific focus on mental health, health and safety and supporting staff with long term/chronic health conditions. This also included updates on the specific action plan through the Mental Health and Wellbeing Group established for COVID purposes. The key areas of focus and progress on these, are set out below:

## **Support for Staff with Long COVID**

- 2.4.1.2 The longer-term impact of COVID-19 upon staff wellbeing is well recognised. The Board has established additional dedicated support within the HR Support and Advice Unit, to ensure managers and employees are supported in dealing with COVID-19 related absences. In particular, guidance has been developed to assist in managing the previously unknown condition of Long COVID.
- 2.4.1.3 The guidance offers initial support via employee wellbeing calls when they first commence Long COVID absence and then follows the process and principles of NHS Scotland Attendance Policy to offer further support.
- 2.4.1.4 Furthermore, work has been undertaken in conjunction with Occupational Health Services to ensure there is an appropriate and detailed management referral process for any employee absent due to Long COVID.
- 2.4.1.5 A specialist team of occupational therapists, physiotherapy, psychology and occupational health nursing is established within the Occupational Health service. This service is for staff and will provide individual assessment and treatment plans to support staff to return to work.
- 2.4.1.6 On average, there are 280 staff absent due to the effects of long-COVID on a daily basis. This number has been reasonably constant since September 2021. The Long COVID team have undertaken 175 referrals to date, and further referrals are expected.

## **Mental Health Check-in**

- 2.4.1.7 The Staff Wellbeing and Mental Health group has reviewed the anonymised data available from the initial three runs of the Staff Mental Health Check-in to ascertain the format to be used going forward, and determine how best to point staff in the right direction of appropriate services and long term support.
- 2.4.1.8 Three cycles of the check-in were completed, during which a total of 4,308 surveys were completed and, from those, 1,750 employees across all three cycles have received follow up contact.
- 2.4.1.9 Staff who required further intervention were provided with this via self-directed support, counselling, cognitive behavioural therapy or psychology from the in-house service. Some staff were directed to local mental health teams.

## **Peer Support programme**

- 2.4.1.10 The Peer Support Framework will be available across all our services. This is provided across three levels:
  - Universal – Level One: Online programme to support staff to increase their knowledge and skills

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- Peer Supporter – Level Two: two day programme building on the online skills programme enabling participants to be a nominated “Peer Supporter”
- Trainer – Programme designed to enable a small cohort to be trained to a level that would allow them to provide the “Peer Supporter” training thus ensuring the longevity and sustainability of the supports available.

2.4.1.11 To date, the first group of non-medical staff have been trained as peer supporters, and the level one online training now available to all staff, with a full programme of training planned for 2022.

2.4.1.12 Medical staff had previously been trained in a slightly different model and the aspiration is to combine both programmes. The medical teams have trained a range of medical staff and have established a specific route for access to peer support.

### **Wellbeing Bus**

2.4.1.13 Work commenced to convert a former coach, donated by “First Bus”, to provide the equivalent mobile Relaxation resources as those in the Rest and Recuperation (R&R) Hubs based on sites. The bus is expected to be made available in early 2022/23.

### **Next Steps**

2.4.1.14 The current Staff Health Strategy will be completed in 2023 and a further staff survey will be undertaken to identify key themes for the period of 2023–2026. An action plan for 2022/2023 is being finalised.

2.4.1.15 The Committee look forward to receiving regular updates on the plan and progress on activity, and the positive impact on staff, at Committee meetings.

### **2.4.2 NHSGGC Workforce Strategy 2020-2025**

2.4.2.1 The Committee welcomed the opportunity to review progress of the Workforce Strategy 2020-2025. Notably, a defined Implementation Plan focusing on the first phase (April 2021 – December 2022) was created and presented to the Committee, which provided an assurance of progress.

2.4.2.2 Specifically, during 2021/22, the Committee received an update on the provision of personal development planning and appraisals within NHSGGC.

2.4.2.3 Appraisal activity is recovering from the impact of the COVID-19 pandemic, with the focus being on supportive discussions with staff to reflect on the previous year and the impact of COVID-19 on wellbeing, requiring support for the year ahead.

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- 2.4.2.4 Furthermore, a Communications and Engagement Action Plan to improve the uptake to Personal Development Plan (PDP) and TURAS reviews was completed and promoted across NHSGGC.
- 2.4.2.5 Additionally, the initial phase of developing and evaluating leadership development programmes was scheduled to be completed by the end of September 2021. Unfortunately, due to COVID-19 circumstances, the development has been paused, however, the Committee were reassured that it would resume as soon as possible when the current pressure permits, and looked forward to future updates.
- 2.4.2.6 Finally, despite the pandemic and the associated staffing challenges NHSGGC has continued to involve staff with the implementation of Investors in People (IiP).
- 2.4.2.7 During 2021, the Inverclyde Royal Hospital site IiP workforce group focussed on progressing the recommendations made following an initial assessment in 2020, and achieved IiP accreditation when re-assessed in December 2021. The subsequent assessment of our corporate offices and facilities units in early 2022, also resulted in successful accreditation.
- 2.4.2.8 Further progress against the roll-out schedule will be made throughout 2022 with the target for overall accreditation across Acute and Corporate Services by the end of 2022/23.
- 2.4.2.9 The Committee was assured of the progress of the Strategy during 2021 despite the impact of the COVID-19 pandemic, and looked forward to further progress in 2022/23.

### **2.4.3 Workforce Equality**

- 2.4.3.1 Regular updates were provided to the Staff Governance Committee to provide assurance around overall progress and activity from the Workforce Equality Group, and its associated Action Plan 2021/2022. Details in relation to Equality and Diversity data across NHSGGC is also provided to the Committee via the Workforce Analytics Storyboard, circulated at each meeting.
- 2.4.3.2 Specifically, during 2021-2022, the Committee welcomed updates regarding the Equalities and Human Rights Commission (EHRC) Report published in November 2020, the newly developed NHS National Ethnic Minority Network, and, from this, the alignment of the NHSGGC Workforce Equality Action Plan with EHRC Report recommendations and NHS National Ethnic Minority Network work streams.
- 2.4.3.3 The EHRC report, published following a consultation across public sector organisations, established recommendations for progress, together with conclusions and a request for a commitment to three new actions from each public authority organisation. The details are outlined in the below table, including the action areas identified for NHSGGC:

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Recommendations	Conclusions	Minimum of three new actions
1. Assessment of barriers 2. Recruitment 3. Training 4. Equal Pay 5. Consultation 6. Ethnic representation 7. Positive action 8. Data 9. Three new Actions	1. Ethnicity employment gap remains unacceptable, reduce pay gap and occupational segregation 2. Chief Executive and Senior Leaders to demonstrate leadership in this area	1. Consistency 2. Data 3. Attraction 4. Equal Pay 5. Engagement and Contribution

2.4.3.4 In addition, the recently established NHS National Ethnic Minority Network has three established priority work streams detailed below:

- **Employment:** Recruitment, selection, development and career progression
- **Workplace Culture:** Race conversations, lived experiences, recognising barriers, clear messages, race equality
- **Mental Health:** Practical advice, signposting, support, communications, governance

2.4.3.5 The collaboratively developed NHSGGC Workforce Equality Action Plan includes local action to address and align the recommendations and priority work streams outlined above.

2.4.3.6 Governance and assurance on progress of this action plan is provided initially via the NHSGGC Workforce Equality Group, with regular updates at the Staff Governance Committee. Furthermore, the Non-Executive Board Equality and Diversity Champion is a member of the Staff Governance Committee, and provides further assurance and scrutiny to the progress of activity.

2.4.3.7 The Committee look forward to receiving progress updates in relation to the Workforce Equality Action Plan, during 2022/23.

**2.4.4 Medical Education**

2.4.4.1 The Committee welcomed the Board Medical Director and Director of Medical Education’s regular updates on Medical Education throughout 2021/22, as training our doctors of the future is a crucial and important role for NHSGGC.

2.4.4.2 Outlined below is a summary of the key work streams covered, throughout 2021/22:

**Medical Trainee wellbeing**

2.4.4.3 The Medical Wellbeing Group, chaired by the Director of Medical Education (DME), focuses on several workstreams informed by the GMC publication: ‘*Caring for Doctors: Caring for Patients*’.

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- 2.4.4.4 All workstreams are progressed utilising the expertise of this multidisciplinary group and key outputs are: the establishment of a peer support network, supporting the R&R hubs, medical staffing leads and trainee engagement around rotas and rostering, and supporting the Civility Saves Lives work.

### **August 2021 Induction**

- 2.4.4.5 Transition from medical student to doctor and employee, are challenging and particularly so during COVID-19. The trainees joining NHSGGC in August had their 4<sup>th</sup> year studies curtailed, but, in mitigation, started earlier in their 5<sup>th</sup> year, and were involved in a University of Glasgow initiative to immerse 5<sup>th</sup> year students in placement units and becoming part of the team.
- 2.4.4.6 In recognition of the potential disruption to training the Scottish Government funded an additional optional five days of shadowing in 2021/22. NHSGGC welcomed around 250 new FY1s during July who undertook the optional additional induction and shadowing.

### **Impact of COVID-19 on training**

- 2.4.4.7 All trainees were affected by the impact of COVID-19 to some extent. In the first wave 160 trainees were redeployed to emergency and acute medicine, in the second around 20 trainees were redeployed.
- 2.4.4.8 In addition to a physical disruption to training, there were changes to how training was delivered. Utilisation of online training platforms has brought many positive aspects to training. Prior to COVID-19 there was sector and site-based teaching, moving online has allowed the majority of training to be accessed across the Board.

### **Quality management of medical education**

- 2.4.4.9 The NHSGGC DME noted there has been a marked change in the way in which the Deanery and the Directorate of Medical Education progress the recommendations after GMC Enhanced Monitoring visits. From discussions, it was clear the collective aim was to implement SMART objectives in a deliverable and measurable way.
- 2.4.4.10 All NHSGGC sites currently subject to the GMC's Enhanced Monitoring processes, have had a recent Deanery / GMC visit. Some areas were recognised to be stubbornly resistant to management action but the Committee were pleased to note that most of the recommendations made by the GMC were on a positive trajectory and, with the newly implemented SMART objectives, there is a clear focus on timescales and what is achievable within the recommendations for each site.
- 2.4.4.11 The Committee welcomed the updates regarding the work undertaken during 2021/22 to support trainees. The Committee will continue to receive updates and assurance of progress during 2022/23.

## **2.4.5 iMatter: The Staff Experience Continuous Improvement Tool**

- 2.4.5.1 The Committee welcomed an update on the outcome of iMatter 2021. Overall, NHSGGC achieved a response rate of 51%, with over 23,000 staff taking part and results generating an Employee Engagement Index (EEI) score of 74.
- 2.4.5.2 Following review of the Board iMatter report, key areas of strength were identified including clarity of roles, having confidence and trust in team managers and staff having a sense of understanding how their role contributes to the organisation.
- 2.4.5.3 The feedback also highlighted opportunities for continuous improvement that are being progress through the development of the Internal Communications and Employee Engagement Strategy, which will focus on visibility, ownership, inclusion, collaboration and excellence.
- 2.4.5.4 The Committee noted that, despite COVID-19 challenges, it was encouraging that 51% of the workforce had completed the iMatter survey and that the overall EEI Score was positive and within the green 'strive and celebrate' score matrix.
- 2.4.4.5 Further updates regarding the progress of the Internal Communications and Employee Engagement Strategy will be brought to the Committee, along with year on year progress of the iMatter programme.

## **2.4.6 Safe Staffing**

- 2.4.6.1 The Committee were pleased to be provided with an overview of the key priorities of the Health and Care (Staffing) (Scotland) Act (2019), and the progress being made across NHSGGC.
- 2.4.6.2 The Safe Staffing programme supports the delivery of safe and high quality care by enabling NHS Boards to deliver effective workload and workforce planning so they have the right people with the right skills in the right place at the right time. This is in response to the Scottish Government committing to enshrining safe staffing in law through the Health & Care (Staffing) (Scotland) Act.
- 2.4.6.3 Locally within NHSGGC, an inaugural meeting of the NHSGGC Health & Care Staffing Programme Board took place in September 2021. The Board is chaired by the Executive Director of Nursing and co-chaired by the Deputy Medical Director.
- 2.4.6.4 The Programme Board reports and makes professional recommendations to the Staff Governance Committee and ultimately to the NHSGGC Board. In order to fulfil its function the Programme Board undertake a range of duties, which will include:
- Providing assurance to NHSGGC Board that the Nursing, Midwifery and Allied Health Professionals (NMAHP) workforce is safe and effective
  - Developing and monitoring processes to identify levels of risk

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- Ensuring that there are clear escalation processes in place and that appropriate resulting feedback is disseminated
- Developing, directing implementing, reviewing, overseeing and monitoring of NMAHP workforce provision across NHSGGC
- Reviewing and monitoring vacancies and turnover and monitoring the trends across hospitals/departments
- Reviewing the provision of supplementary staffing across NHSGGC to ensure safe and effective cover
- Implementing, monitoring and reporting on effective rostering
- Promoting and supporting the use and application of national mandated workload workforce planning tools
- Reviewing the outcomes to aid in the development of the annual national report for Scottish Government from NHSGGC
- Considering and validating any proposed changes in workforce as a result of service change.

2.4.6.5 The Committee particularly welcomed the encouragement of staff to escalate safe staffing concerns timely, and via DATIX, as appropriate. Where further support is necessary and where it is appropriate, the NHSGGC Whistleblowing policy is available, for all staff to utilise.

2.4.6.6 The Committee were assured that robust safe staffing processes exist and will seek further assurance during 2022/23 on the consistent application of safe staffing regulations and policies across the Board and understood by staff.

### **2.4.7 Whistleblowing**

2.4.7.1 At meeting of the Committee in April 2021, the NHSGGC Whistleblowing Review was fully scrutinised, and subsequently approved by the Board. Following the review, a working group, in place to progress implementation of the National Whistleblowing Standards, also considered the Review recommendations as part of the NHSGGC Whistleblowing action plan.

2.4.7.2 The launch of the standards have afforded NHSGGC the opportunity to review and improve the whistleblowing service, in terms of the handling, rigour, compassion and reporting. This has resulted in a more consistent approach.

2.4.7.3 The Committee noted there had been a small number of new cases, following the launch of the National Standards in 2021, that the Whistleblowing Implementation Group had reviewed these cases and the new procedure was successfully applied.

2.4.7.3 Further updates will be brought to the Committee during 2022/23 to summarise Whistleblowing cases from across NHSGGC, and progress of the action plan in place.

### **2.4.8 Remuneration Committee**

2.4.8.1 As detailed within the Terms of Reference, the Staff Governance Committee provides assurance that systems and procedures are in

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place through the Remuneration Committee to manage Executive and Senior Manager pay.

2.4.8.2 During 2021/22, verbal updates on the Remuneration Committee meeting of 30 July 2021 and 20 August 2021, were given. These updates highlighted that the Remuneration Committee had:

- Been assured by the update on Executive and Senior Manager Appointments, Leavers / Interim Arrangements and Changes;
- Noted Consultants' Discretionary Points 2019/20 Outcomes;
- Approved the Terms of Reference which will be presented to the September meeting of the Board.

2.4.8.3 The Staff Governance Committee will continue to receive updates and assurance from the Remuneration Committee (where both Staff Governance Committee Co-Chairs are members) in line with the Committee remit.

2.4.9 Full details of all of the business items considered by the Committee during 2021/22 are attached at Appendix 2, including Medical Revalidation, NMC Referrals and Assurance, Workforce Information storyboard reports, Area Partnership Forum reports, and Risk Register updates.

2.4.10 Minutes of the meetings of the Committee and the Committee Chair's Report have been timeously submitted to the Board for its information.

### 3. OUTCOMES

3.1 During 2021/22, the Board operated on a modified governance basis, due to the COVID-19 pandemic. Therefore, no service assurance presentations were delivered to the Committee during that time.

3.2 Given the modified governance approach taken during 2021/22, presentations, along with verbal updates, were encouraged by those attending to provide updates to the Committee. The topics and summaries outlined in section 2.4 above, cover the range of items presented.

### 4. CONCLUSION

#### STATEMENT OF ASSURANCE

4.1 As Joint Chairs of the Staff Governance Committee during financial year 2021/22, we are satisfied that the integrated approach, the frequency of meetings, the breadth of the business undertaken, and the range of attendees at meetings of the Committee has allowed us to fulfil our remit as detailed in Standing Orders. As a result of the work undertaken during the year we can confirm that adequate and effective Staff Governance arrangements were in place across NHS Greater Glasgow and Clyde during the year.

4.2 We pay tribute to the dedication and commitment of fellow members of the Committee and to all attendees. This past year has seen many positive changes to the Staff Governance Committee. We thank all those members of

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staff who have prepared reports and attended meetings of the Committee and NHS Greater Glasgow and Clyde for their excellent support of the Committee.

Ms Ann Cameron-Burns

Mr Alan Cowan

**Joint Chairs**

**On behalf of the STAFF GOVERNANCE COMMITTEE**

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Appendix 1

**STAFF GOVERNANCE COMMITTEE ATTENDANCE RECORD – 2021/22**

<b>NAME</b>	<b>POSITION</b>	<b>ORGANISATION</b>	<b>Date</b> 15/04/21	<b>Date</b> 11/05/21	<b>Date</b> 03/08/21	<b>Date</b> 02/11/21	<b>Date</b> 01/02/22
Mr A Cowan	Co-Chair	NHSGGC	P	P	P	P	P
Mrs D McErlean	Co-Chair	NHSGGC	P	P	P	P	-
Ms A Cameron-Burns	Co-Chair		-	-	-	-	P
Mr C Vincent	Member/NED	NHSGGC	P	P	P	P	P
Mr F Shennan	Member/NED	NHSGGC	P	P	P	AA	AA
Councillor S Mechan	Member/NED	NHSGGC	AA	P	P	P	AA
Mrs R Sweeney	Member/NED	NHSGGC	AA	P	-	-	-
Ms A Khan	Member/NED	NHSGGC	P	P	P	P	P
Dr P Ryan	Member/NED	NHSGGC	-	-	P	P	P

<b>NAME</b>	<b>POSITION</b>	<b>ORGANISATION</b>	<b>Date</b> 15/04/21	<b>Date</b> 11/05/21	<b>Date</b> 03/08/21	<b>Date</b> 02/11/21	<b>Date</b> 01/02/22
<b>IN ATTENDANCE</b>							
Mrs A MacPherson	Director of Human Resources & Organisational Development	NHSGGC	P	P	P	P	P
Ms N Owens	Depute Director of Human Resources & Organisational Development	NHSGGC	P	P	P*	P	AA
Ms C Heuston	Assistant Chief Officer, Human Resources, Glasgow HSCP	Glasgow HSCP	P	P	P	P	P
Mrs B Culshaw	Chief Officer, West Dunbartonshire HSCP	West Dun HSCP	AA	P	AA	P	P

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Ms S Strachan	Interim Chief Officer. Renfrewshire HSCP	Renfrewshire HSCP	P	-	-	-	-
Professor J Brown CBE	Chair – NHS Greater Glasgow and Clyde	NHSGGC	P	A	P	P	A
Ms J Grant	Chief Executive – NHS Greater Glasgow and Clyde	NHSGGC	P	P	AA	AA	A
Mr J Best	Chief Officer, Acute	NHSGGC	AA	P	P	A	P
Ms A Cameron Burns	APF Staff Side Secretary	NHSGGC	P	P	P	P	-
Ms F Carmichael	Co-Chair Acute APF Representative	NHSGGC	A	AA	AA	A	AA
Ms M McCarthy	Glasgow HSCP PF Representative	NHSGGC	P	P	A	A	P
Mr A McCready	Co-Chair, Non City HSCP SPF	NHSGGC	P	P	P	P	AA
Mrs D Hudson	Staff Governance Co-ordinator	NHSGGC	P	P	P	P	P
Mr S Munce	Workforce Planning and Analytics Manager / Interim Head of Human Resources, Resources and Development	NHSGGC	-	-	P*	P	P
Mrs M Macdonald	Head of Learning & Education	NHSGGC	-	P	P	P	P
Ms K Strannigan	Head of Health & Safety	NHSGGC	-	P*	P	P	-
Mrs P Martin	Head of Staff Experience	NHSGGC	P	P	P	P	P
Ms R Wall	Head of Occupational Health & Safety	NHSGGC	A	P*	-	P	-
Mr M Allen	Senior Administrator	NHSGGC	P	P	P	P	P
Mr K Small	Independent Human Resource Management Specialist	N/A	P	-	-	-	-
Ms E Vanhegan	Director of Corporate Services and Governance	NHSGGC	AA	P*	P*	A	A
Ms E Quail	Staff Side Secretary / APF Secretariat	NHSGGC	P	P	P	P	P

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Dr J Armstrong	Medical Director	NHSGGC	-	P*	P*	P	P*
Ms S Blades	Lead Nurse for Professional Governance & Regulation	NHSGGC	-	P*	P*	-	P*
Ms J Burns	Consultant, Department of Medicine for the Elderly	NHSGGC	-	P*	-	-	-
Mr A Reynolds	Head of Human Resources – Service Development and Support	NHSGGC	-	P	P	-	-
Dr M McGuire	Nursing Director	NHSGGC	-	P*	AA	A	A
Ms J Haynes	Corporate Services Manager – Governance	NHSGGC	-	P*	-	-	-
Dr L Donaldson	Director of Medical Education	NHSGGC	-	-	AA	-	P*
Ms F Lyall	Trade Union Representative	NHSGGC	-	-	-	P	-
Dr C Perry	Consultant, Endocrinology	NHSGGC	-	-	-	P*	-
Ms T Carrey	Interim Workforce Planning & Analytics Manager	NHSGGC	-	-	-	-	P*
Mr W Edwards	Chief Operating Officer, Acute	NHSGGC	-	-	-	-	P
Mr G Wilson	APF Secretariat	NHSGGC	-	-	-	-	P

**Key**

- P – Present
- P\* – Present for relevant agenda item only
- A – Absent – no apologies received
- AA – Absent – apologies received
- Attendance not required

**STAFF GOVERNANCE COMMITTEE  
SCHEDULE OF BUSINESS CONSIDERED 2021/22**

<b>DATE OF MEETING</b>	<b>TITLE OF BUSINESS DISCUSSED</b>
<b>15 April 2021</b>	<b>Matters Directly Related to the Staff Governance Standard:</b> <ul style="list-style-type: none"><li>• Whistleblowing Review</li></ul>

**STAFF GOVERNANCE COMMITTEE  
SCHEDULE OF BUSINESS CONSIDERED 2021/22**

<p><b>11 May 2021</b></p>	<p><b>Minutes of Meeting held on 3 November 2020 (noting) Minutes of Meeting held on 15 April 2021</b></p> <p><b>Matters Arising:</b></p> <ul style="list-style-type: none"> <li>• Rolling Action List</li> </ul> <p><b>Matters Directly Related to the Staff Governance Standard:</b></p> <ul style="list-style-type: none"> <li>• Staff Governance Workplan</li> <li>• Health, Safety and Wellbeing Update</li> </ul> <p><b>Reports that Support Compliance with the Staff Governance Standard:</b></p> <ul style="list-style-type: none"> <li>• Annual Review of Terms of Reference</li> </ul> <p><b>Other Relevant Reports:</b></p> <ul style="list-style-type: none"> <li>• Safe Staffing Legislation</li> <li>• Medical Revalidation: NES Report – Medical Appraisal and Revalidation</li> <li>• Equality and Human Rights Committee Recommendations</li> <li>• COVID-19 Response Workforce Summary and Workforce Analytics Storyboard</li> <li>• Area Partnership Forum Report</li> <li>• Corporate Risk Register</li> <li>• Whistleblowing Standards and Review</li> </ul>
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**STAFF GOVERNANCE COMMITTEE  
SCHEDULE OF BUSINESS CONSIDERED 2021/22**

<p><b>3 August 2021</b></p>	<p><b>Minutes of Meeting held on 11 May 2021</b></p> <p><b>Matters Arising:</b></p> <ul style="list-style-type: none"> <li>• Rolling Action List</li> </ul> <p><b>Matters Directly Related to the Staff Governance Standard:</b></p> <ul style="list-style-type: none"> <li>• Workforce Equality</li> </ul> <p><b>Reports that Support Compliance with the Staff Governance Standard:</b></p> <ul style="list-style-type: none"> <li>• Medical Education Governance</li> <li>• NMC Referrals and Assurance (Annual Report)</li> <li>• Annual Staff Governance Report to NHS Board</li> <li>• Staff Governance Monitoring Return</li> <li>• Workforce Strategy (Action Plan)</li> <li>• Summary Workforce Information Report and Storyboard</li> <li>• Whistleblowing             <ul style="list-style-type: none"> <li>○ Annual Report and Monitoring Update</li> <li>○ Quarterly Performance Report</li> <li>○ Closed Cases – 1 April 2017 to 31 May 2021</li> </ul> </li> </ul> <p><b>Other Relevant Reports:</b></p> <ul style="list-style-type: none"> <li>• Area Partnership Forum Report</li> <li>• Human Resources Risk Register</li> <li>• Annual Review of Terms of Reference</li> <li>• Remuneration Committee             <ul style="list-style-type: none"> <li>○ Report from meeting held on 30 July 2021</li> </ul> </li> <li>• Cycle of Business</li> </ul>

**STAFF GOVERNANCE COMMITTEE  
SCHEDULE OF BUSINESS CONSIDERED 2021/22**

<p><b>2 November 2021</b></p>	<p><b>Minutes of Meeting held on 3 August 2021</b></p> <p><b>Matters Arising:</b></p> <ul style="list-style-type: none"> <li>• Rolling Action List</li> </ul> <p><b>Matters Directly Related to the Staff Governance Standard:</b></p> <ul style="list-style-type: none"> <li>• iMatter 2021</li> <li>• Health, Safety and Wellbeing Update</li> </ul> <p><b>Reports that Support Compliance with the Staff Governance Standard:</b></p> <ul style="list-style-type: none"> <li>• Medical Education – Enhanced General Medical Council Monitoring Update</li> <li>• Workforce Strategy Implementation Plan – Update</li> <li>• Summary Workforce Information Report and Storyboard</li> </ul> <p><b>Other Relevant Reports:</b></p> <ul style="list-style-type: none"> <li>• Area Partnership Forum Report</li> <li>• Human Resources Risk Register</li> <li>• Whistleblowing Standards and Review</li> <li>• Remuneration Committee             <ul style="list-style-type: none"> <li>○ Verbal update of meeting held on 20 August 2021</li> </ul> </li> <li>• Cycle of Business</li> <li>• Safe Staffing Legislation</li> </ul>

*Appendix 2*

**STAFF GOVERNANCE COMMITTEE  
SCHEDULE OF BUSINESS CONSIDERED 2021/22**

<p><b>1 February 2022</b></p>	<p><b>Minutes of Meeting held on 2 November 2021</b></p> <p><b>Matters Arising:</b></p> <ul style="list-style-type: none"> <li>• Rolling Action List</li> </ul> <p><b>Matters Directly Related to the Staff Governance Standard:</b></p> <ul style="list-style-type: none"> <li>• Medical Education Enhanced General Medical Council Monitoring Update</li> </ul> <p><b>Reports that Support Compliance with the Staff Governance Standard:</b></p> <ul style="list-style-type: none"> <li>• Workforce Update             <ul style="list-style-type: none"> <li>○ Workforce Performance Report</li> <li>○ Wellbeing – COVID-19 Workforce Update</li> <li>○ Safe Staffing and Whistleblowing</li> </ul> </li> </ul> <p><b>Other Relevant Reports:</b></p> <ul style="list-style-type: none"> <li>• Area Partnership Forum Report</li> <li>• Human Resources Risk Register</li> </ul>