

# Core brief

## Daily update

(30 April 2024, 12.25pm)

Topics in this Core Brief:

- Reduced Working Week (RWW) update
- Highlight report from the Urgent and Unscheduled Care Oversight Board, March 24
- Update from the Area Partnership Forum

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[GGC-Staffnet Hub - Home \(sharepoint.com\)](#)

## Reduced Working Week (RWW) update

### Rostered Staff

In all areas where the reduction in the working week has not been implemented all managers should now be engaging with staff and staff side and dates should now be agreed on when the reduction in hours should begin, this should be implemented as soon as possible.

All rotas should now be built upon a 37-hour week (SSTS/ E-Rostering, payroll and WTD compliant), hours can be averaged over the period of the rota.

Any rotas currently in place can continue until the end of the rota period and staff will be paid the RWW Transitional Allowance unless an interim arrangement can be put in place to ensure staff reduce their hours to 37 until the new rota is effective.

### Non-Rostered Staff

The expectation is that all non-rostered staff should now be working a reduced working week and that this should be achieved with a 30 minute reduction each week (pro-rata for part time staff). This should now be implemented as soon as possible with staff side involvement.

Where part time staff have less than 30 minutes per week of a reduction, they may wish to agree with their manager how best to average their hours over a number of weeks to achieve a meaningful benefit of up to 30 minutes reduction at a time.

### **SSTS Calculation for Part Time Staff**

The Scottish Terms and Conditions Committee have provided a [conversion list](#) for part time hours however this is an interim approach while the National Reduced Working Week group identifies a solution. In the meantime, please use the conversion list to identify the number of minutes part time staff should reduce their weekly hours by and keep a note of the reduction applied in case any changes are required. Further advice will be provided in due course. The conversion list should be used from w/c 29 April 2024.

### **Overtime Payments**

As overtime is paid in arrears staff who have continued to work 37.5 hours per week should be aware that the RWW Transitional Allowance payment for any hours worked in April 2024 will be paid in their May 2024 pay. For teams that have not implemented the reduction, staff on annual leave or sick leave should be paid the transitional payment, until a reduction in hours has been agreed.

Managers should ensure that the transitional allowance payments are input to SSTS, using the correct code, prior to the May payroll cut off. These should be entered in the same way as all other excess/overtime hours, but using the new additional hours reason of "Addtl Hours – Reduced Working Week"

[SSTS SharePoint](#)  
[Additional Hours Reason](#)

### **Staff Side Engagement**

Staff side engagement should be identified and agreed through local partnership forums. For information on local partnership forum staff side leads and deputies please see the [Employee Directors Office](#) page on HR Connect.

### **Frequently Asked Questions**

Please note the [FAQs](#) have now been agreed in partnership and are available to view on the [RWW SharePoint site](#), and will be updated as more information becomes available. All managers and staff are encouraged to read these.

If you have any further questions please contact the HR Support and Advice Unit via the HR Self Service portal: [HR Portal - NHS GGC HR \(service-now.com\)](#) or on 0141 278 2700 option 2.

## **Highlight report from the Urgent and Unscheduled Care Oversight Board, March 24**

The Oversight Board, which includes acute and HSCP representation, with planning, eHealth and communications colleagues, continues to meet monthly to progress changes and improvements to urgent and unscheduled care across NHS GGC.

The latest meeting of the Programme Board took place on Wednesday, 24 April. Key highlights reported at the meeting included:

### **Flow Navigation Centre (FNC)**

In March, the FNC recorded 1,529 consultations with a 41 per cent discharge rate.

The GP In Hours to MIU pathway via FNC which has been set up using Consultant Connect has now gone live (March 4) and an update on activity will be presented to the next Oversight Board.

Call Before Convey continues to be utilised with the latest weekly data showing that out of 48 patients discussed with FNC resulted in just 15 requiring ED conveyancing and 22 were discharged directly by FNC, with 11 requiring scheduled follow up appointment. Work is underway to increase the calls to FNC by Scottish Ambulance Service.

### **Redirection**

A total of 935 patients were redirected in March. Work is ongoing with teams to ensure outcomes are reported accurately to facilitate analysis of the impact of the redirection policy.

The groups thanked all those working at our front doors and across all our sites for all their efforts.

### **Discharge without Delay (DwD)**

South sector's DwD work was highlighted, with upward trends in pre-noon discharge and accuracy of Predicted Day of Discharge.

While other sectors are showing similar trends in some of the KPIs associated with DwD, it was agreed that local teams taking "ownership" of DwD processes was a key factor in improvements with learnings from the QEUH teams in how they manage DwD on a day-to-day basis to be shared.

## **Virtual Pathways**

While some elements of redirection are performing well, the need for accurate coding of outcomes was again highlighted. There was agreement that workstreams overlapping with those of the Rapid Acute Assessment group would be reviewed and streamlined as required.

## **Update from the Area Partnership Forum**

The Area Partnership Forum (APF) provides staff, through their trade unions and professional organisations, with a forum to engage formally with NHSGGC as an employer. This ensures staff views can be raised and can influence the work of our health board. This is a key way in which the voice of our staff influences the way we work.

The APF operates jointly with senior leader representation from NHSGGC and staff side representatives from our recognised trade unions and professional organisations, who, together, work in partnership to the benefit of our staff and our patients.

Once a month, the APF focusses on NHSGGC workforce issues. These APF sessions are co-chaired by Director of Human Resources and Organisational Development, Anne MacPherson and Employee Director, Ann Cameron-Burns.

The most recent Area Partnership Forum Workforce meeting took place on Wednesday 17 April 2024. A number of important matters were discussed at the Forum and the following is an overview for staff of the key discussion points.

### **Agenda for Change**

The APF discussed the recent changes to Agenda for Change terms and conditions agreed as part of the national 2023 pay deal. Updates were provided by each of the working groups, formed in partnership, overseeing the reduction in working hours, protected learning time and the review of Band 5 nursing roles. Communications will continue to staff and other stakeholders, including ensuring national guidelines and best practice is implemented consistently across NHSGGC.

### **Transforming Nursing Roles**

Doctor Mark Cooper gave a presentation on the Transforming Roles Programme. This programme provides strategic oversight, direction and governance to:

- Develop and transform Nursing, Midwifery and Allied Health Professions roles to meet the current and future needs of Scotland's health and care system
- Ensure nationally consistent, sustainable and progressive roles, education and career pathways.

The APF welcomed the opportunity to continue to work in partnership on this programme and ensure the voice of staff continues to be reflected in this important programme.

### **Stakeholder Communications & Engagement Strategy**

Daniel Connelly, Deputy Director of Public Engagement & Communications gave an overview of the new Stakeholder Communications and Engagement Strategy 2024-27.

The strategy outlines key priorities including delivering insight-driven communications, empowering stakeholder voices, and ensuring accessibility across diverse communities.

The Draft Strategy was to NHS Greater Glasgow and Clyde's Board on 30 April 2024.

### **Sustainability and Value**

Paul McKenna, Head of Financial Improvement, provided an update explaining that NHSGGC was forecasted to meet its 2023/24 year-end savings target which was a significant achievement for the Board, and had been boosted by additional non-recurring funds received from the Scottish Government.

Looking ahead to 2024/25 and noting savings required, the need to identify sustainable measures was discussed and a plan was being drafted to encompass a system wide approach.



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