

BOARD OFFICIAL

NHSGGC SGC(M)24/02

Minutes: 17-35

NHS GREATER GLASGOW AND CLYDE

Minutes of a Meeting of the NHS Greater Glasgow and Clyde Staff Governance Committee

**held in the JB Russell House Boardroom Annex & via Microsoft Teams, on
Tuesday 21 May 2024 at 9.30am**

PRESENT

K Miles (Co-Chair in the Chair)
M Ashraf
Dr P Ryan
C Vincent
Dr L Thomson KC (Board Chair)
J Grant (Chief Executive)

IN ATTENDANCE

M Allen	Senior Administrator
R Anderson	Partnership Representative – UNISON
F Carmichael	Staff Side Lead, Acute Partnership Forum
K Donald	Corporate Services Manager
Dr U Graham	Consultant Psychiatrist, Chief of Medicine MH & ADRS
K Heenan	Chief Risk Officer
H Jackson	Head of Health and Care (Staffing) (Scotland) Act Programme
M MacDonald	Head of Learning and Education
A MacPherson	Director of Human Resources and Organisational Development
D Mains	Health and Safety Manager
M McCarthy	Staff Side Lead, Glasgow City HSCP Staff Partnership Forum
A McCready	Staff Side Lead, Non City HSCP Staff Partnership Forum and East Renfrewshire HSCP Staff Partnership Forum
E McFadyen	Human Resources Manager – Corporate Services
Dr C McKay	Deputy Medical Director – Corporate
Dr M Pay	Workforce Strategy Manager
E Quail	Staff Side Partnership Lead
C Rennie	Workforce Planning and Information Manager
K Rocks	Chief Officer, Inverclyde HSCP (representing HSCPs for B Culshaw)
N Smith	Depute Director of Human Resources
J Somerville	Head of Occupational Health and Safety

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L Spence	Head of Staff Experience
Prof T Steele	Director of Estates and Facilities
Prof A Wallace	Executive Nurse Director

17.	WELCOME AND APOLOGIES	ACTION BY
	<p>Due to technical issues with the Audio-Visual equipment in the Boardroom, the start of the meeting was delayed by 20 minutes, with some attendees returning to their offices to join remotely and others, including Committee members present joining from the ante-room.</p> <p>K Miles welcomed all to the meeting. Apologies were noted for A Cameron-Burns, Cllr McDiarmid, Cllr McGinty, F Shennan, Dr Armstrong, B Culshaw, A Walton and F Warnock.</p>	
18.	DECLARATIONS OF INTEREST	
	There were no formal declarations of interest intimated.	
19.	MINUTES	
	<p>The Minutes of the Committee meeting held on 20 February 2024 (SGC(M)24/01) were approved as a correct record. The motion to approve was intimated by Dr Ryan and seconded by C Vincent.</p> <p><u>APPROVED</u></p>	
20.	MATTERS ARISING	
	<u>Rolling Action List</u>	
	<p>K Miles referred to the Rolling Action List (Paper 24/09) and advised that there were three items, all marked for closure.</p> <p>The Committee noted the updated Rolling Action List and agreed the items proposed for closure.</p> <p><u>APPROVED</u></p>	

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21.	URGENT ITEMS OF BUSINESS <u>NHSScotland Staff Governance Standard Monitoring Framework 2023/24</u> A MacPherson advised that the Scottish Government, with Scottish Workforce and Staff Governance Committee (SWAG) approval, has made the decision to pause the Staff Governance Monitoring exercise for 2023-2024. This time will be used to form a working group to review the annual monitoring exercise and bring recommendations back to the SWAG. A MacPherson clarified that this is only a pause of the monitoring aspect of the Staff Governance Standard and Boards are expected to continue with their ongoing commitments and local assessment through their Staff Governance Committees. In response to a question from Dr Ryan about whether this was a positive update, A MacPherson confirmed that it was, as it allows consideration to be given to alternative models of sharing best practice or concerns.	
22.	ASSURANCE PRESENTATION <u>Estates and Facilities Directorate</u> Prof Steele, Director of Estates and Facilities, supported by E McFadyen, Human Resources Manager and R Anderson, Partnership Representative (UNISON) gave a presentation on Staff Governance activity within the Estates and Facilities Directorate. This provided an overview of key workforce metrics, including sickness absence, Statutory and Mandatory training, KSF compliance and iMatter participation, outlining the actions being undertaken within the Directorate to meet the agreed targets. Prof Steele outlined how the activity streams met the five strands of the Staff Governance Standard and highlighted key achievements, including improvements in iMatter response rates and engagement in Investors in People accreditation, catering awards and a focus on employability, through Foundation / Modern Apprenticeship Programmes and the establishment of a new 'Facilities Academy'.	

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	<p>Prof Steele advised the Staff Governance Committee that there are some continuous improvement opportunities for the Directorate over the next 18 months. These include the development of Workforce Development Action Plans, and providing additional educational opportunities for staff.</p> <p>Prof Steele showcased the winter planning recruitment drive as the Directorate's case study, highlighting how creating a centralised recruitment function to recruit solely to Facilities posts allowed a more streamlined approach, together with quicker onboarding and induction of new recruits. This collective approach to recruitment is considered to be hugely beneficial, with a total of 76 staff employed during winter on a Fixed Term basis and 51 staff retained into permanent roles across the Board.</p> <p>Dr Thomson asked what the communication arrangements were around the hospitality awards, with Prof Steele confirming that good news stories were circulated to staff via monthly team briefs and more widely through the Directorate Communications lead.</p> <p>During discussion, it was noted that the assurance presentation template is currently being refreshed and will be agreed by the Committee Co-Chairs.</p> <p>K Miles thanked all involved in the delivery of the assurance presentation, noting that the Committee had been fully assured.</p> <p><u>ASSURANCE NOTED</u></p>	
23.	<p>SAFETY, HEALTH AND WELLBEING</p> <p>J Somerville provided an update on Safety, Health and Wellbeing (SHaW) (Paper 24/10), highlighting the range of Safety Health and Wellbeing activities being developed and deployed:</p> <p>Health and Safety Audits – the NHSGGC average compliance score for Sharps self-audits is 92%, with five additional areas due to commence undertaking self-audits in 2024. The average Moving and Handling self-audit compliance score for Acute is 97%, with these being rolled out to HSCPs in 2024.</p>	

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SHaW Task Calendar – Following its launch in August 2023, 773 of 1,591 departments are now using the Task Calendar, with work underway to support further increase in its use.

Statutory and Mandatory Health and Safety Executive (HSE) Training Compliance – Non-compliance relating to health and safety training programmes for Sharps, Falls and Moving and Handling competency assessments continues to be an area of focus for improvement.

Enforcement Activity – the HSE visited the West of Scotland PET Radiopharmaceutical Production Unit on the Gartnavel site and issued an Improvement Notice on 21 February 2024. The schedule of the Improvement Notice was around the classification of the designated employees who work with radiation in the facility and ensuring they were “fit to work”. Progress to meeting the schedule has moved at pace with 108 of the 113 identified employees now certified as “Fit to Work”. The Chief Executive sent NHSGGC’s formal response to the HSE on 22 April 2024, with A MacPherson confirming that the HSE are satisfied with the actions taken and have closed the case.

Staff Support – Staff are being appropriately supported by the Occupational Health team following two patient suicides in November 2023 and April 2024. The HSE are currently investigating both of these.

Mental Health and Wellbeing – In line with the Staff Health Strategy, work continues to improve the wellbeing of our staff. Key deliverables already in place include Peer Support training and hubs, Civility Saves Lives Groups, the Staff Hardship Fund, Psychological Service and well-attended events / consultations to support menopause commencing in January 2024. A new Staff Health Survey is being planned for launch in November 2024.

Ligature Risk Reduction – The activities within the Integrated Strategic Plan are being progressed, with 15 of the 33 activities now delivered. Thirteen are in progress and five have still to be planned. All activities will be implemented within the agreed timescales.

Workshops – The Health and Safety Team continue to deliver a range of coaching and upskilling sessions to our Human Resources colleagues, to support managers in dealing with

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	<p>absences relating to work related stress. Fifteen workshops have been delivered with over 100 staff, including HR Advisors and a variety of Service Managers, attending the workshops.</p> <p>E Quail asked whether the coaching sessions could be rolled out to Staff Side and about access to trauma informed training / first aid. A MacPherson confirmed that Learning and Education is undertaking a wider review of delivering training across the whole organisation.</p> <p>During discussion, the following was agreed or noted:</p> <ul style="list-style-type: none"> • Capital Planning activities as part of the Integrated Strategic Plan for ligature risk are being progressed; • F Warnock will provide information on the percentages key within the High Risk Audits and Self-Audits in terms of how the figures originate and how the tolerances are set; • Safety, Health and Wellbeing information will be added to the Workforce Performance Report which is reported at each meeting; • The Committee will be provided with additional information about the incidents highlighted under 'Staff Support', including mitigating measures and immediate learning. A MacPherson will consider the most appropriate way of sharing this information; • A MacPherson will arrange for additional information to go to Dr Thomson about the Scottish Environmental Protection Agency warning letter received due to the radioactive gaseous discharge which occurred on the Gartnavel site in October 2023. <p>K Miles thanked J Somerville for the update, noting that the Committee had been full assured.</p> <p><u>ASSURANCE NOTED</u></p>		<p>FW</p> <p>CR</p> <p>AM</p> <p>AM</p>
24.	<p>WORKFORCE STRATEGY 2021-25 PROGRESS & WORKFORCE EQUALITIES UPDATE</p> <p>Dr Pay discussed the Workforce Strategy 2021-25 (Paper 24/11), advising the Committee that the Strategy has entered its concluding phase (April 2024 - March 2025) and the corresponding Phase Four Action Plan is currently being</p>		

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developed. This Phase Four Action Plan will be considered by the Corporate Management Team for approval in June 2024 and then be presented to the Staff Governance Committee for assurance in August 2024.

Dr Pay advised that of the 40 actions identified in the Workforce Strategy 2021-25, 31 had been completed or established as business as usual, with eight currently in progress and one no longer a commitment. There are no actions identified as not being achievable.

Workforce Equalities Update

L Spence provided an update on Workforce Equalities, highlighting the following:

- All actions in the 2023/24 Workforce Equality Group Action Plan are complete, with the exception of one, which has been paused whilst data protection issues are explored. The refresh of the Workforce Adjustment Placement, successful Equalities Conference, and Carer Positive accreditation are key successes from the 2023/24 Plan.
- The 2024/25 Workforce Equality Group Action Plan is currently being finalised, in partnership, and key priorities will be aligned with the Workforce Strategy.
- A key area of focus in 2024, will be a programme of activity to tackle sexual harassment and any associated sexual discrimination. This will be delivered through a blend of staff training, communications and a commitment to meeting the national Equally Safe At Work standard.
- A key action for 2024/25, will be working jointly with the Equality and Human Rights Team on the workforce elements of the new 'A Fairer NHSGGC' document. This document will provide the long term vision and inform the development of the annual Workforce Equality Group Action Plan.

In response to three questions raised by M Ashraf, L Spence advised as follows:

- The Discretionary Points process previously had low return rates for staff recording their protected characteristics. This meant that limited monitoring was possible. The process

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	<p>has been improved so that now we are capturing 90% of information. This will facilitate the identification of any unconscious bias and allow improvements to be identified.</p> <ul style="list-style-type: none"> • Supporting staff with protected characteristics to gain promotion is done in a number of ways, including the BME Leadership Programme, rollout of the Recruitment Policy and coaching / mentoring. • The BME Leadership programme had 60 applications for 30 places in 2022/23 and 33 applications for 30 places in 2023/24. Subject to funding, consideration will be given as how best to increase the number of applicants for 2024/25. <p>During discussion later in the meeting, it was noted that participation in Active Bystander training numbers will be included in the Sexual Harassment Programme update in November 2024.</p> <p><u>Workforce Equalities Video</u></p> <p>L Spence introduced a video that highlights the importance of celebrating Pride for the LGBTQ+ Forum and how the Forum is actively supported by the Board to do this. The Chair and Vice-Chair of the Forum speak passionately about their own experiences and encourage all staff to show support for the community as allies, by supporting and attending events. Due to technology issues, a link to the video will be circulated following the meeting.</p> <p>K Miles thanked Dr Pay and L Spence for the update, noting that the Committee had been fully assured.</p> <p><u>ASSURANCE NOTED</u></p>	<p style="text-align: center;">LS</p> <p style="text-align: center;">LS</p>
25.	<p>HEALTH AND CARE STAFFING SCOTLAND ACT PROGRAMME</p> <p>Prof Wallace introduced H Jackson, who provided members of the Staff Governance Committee with an update on the Health and Care (Staffing) (Scotland) Act (HCSSA) programme, noting that NHSGGC previously agreed to test all chapters of the Act, which supports the translation of what Act compliance means to our professions and services.</p>	

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	<ul style="list-style-type: none"> • Testing is being delivered through strong governance, a Board-wide commitment, multidisciplinary approach and partnership engagement. • Of the 14 Cluster Groups, at 22 April 2024, testing in 11 is complete, with one currently in testing (the role of HIS) and two awaiting further guidance from the Scottish Government (Commissioning in Health & Care). • With testing almost complete, the programme will move in parallel to its Implementation Phase. • Next steps include continually risk assessing, reporting and monitoring progress, completion of the Implementation Action Plan and continuing to internally assess assurance levels ready for the first formal reporting submission. <p>Following a discussion on what the Act means for independent Pharmacy contractor (and others), it was agreed that M Ashraf will discuss this offline with H Jackson and that a worked example will be considered for inclusion with the next update.</p> <p>Dr Thomson expressed her thanks to H Jackson for the update, noting appreciation that NHSGGC is a key part of the testing and that it is critical that staff have the right knowledge and numbers to deliver safe care and treatment.</p> <p>K Miles thanked H Jackson for the update, noting that the Committee had been fully assured.</p> <p><u>ASSURANCE NOTED</u></p>	HJ
26.	<p>STAFF GOVERNANCE COMMITTEE ANNUAL REPORT 2023/24</p> <p>A MacPherson highlighted the draft annual report (Paper 24/13) which describes the purpose and composition of the Staff Governance Committee, the business items considered, and key outcomes identified through the presentations heard by the Committee during 2023/24.</p> <p>K Miles highlighted that the report reflects a well-supported Board Committee and that neither of the Co-Chairs had any amendments to recommend.</p> <p>Subject to amending attendance by M Ashraf at the 23 May 2023 meeting, the Staff Governance Committee approved the draft</p>	

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	Annual Report of Staff Governance 2023/24, for submission to the Area Partnership Forum and NHSGGC Board in June 2024. <u>APPROVED</u>	
27.	<p>AGENDA FOR CHANGE UPDATE</p> <p>N Smith provided an update on NHSGGC's implementation of the Agenda for Change non-pay aspects of the 2023/24 pay deal (Paper 24/14), highlighting that it was agreed to conduct a review of the Agenda for Change system in NHS Scotland and the Scottish Government had instructed NHS Scotland employers to implement the non-pay elements of the pay deal.</p> <p>N Smith advised that a Programme Board has been established to ensure the implementation of the programme is applied consistently and fairly and provide oversight around any impact on patient safety, patient quality of care and staff wellbeing.</p> <p>N Smith advised that in order to deliver the programme of work consistently, three Implementation Groups have been initiated:</p> <p>Protected Learning Time – This wide-membership group will take forward the NHS Scotland Protected Learning Time circular (PCS(AFC)2024/1), which outlines procedures, advice and timescales to be followed for implementation. Focus to date has been on the approach to gathering information on core and professional essential training identified. The focus will move to agreeing the information gathering tool and guidance to facilitate discussion with profession education leads.</p> <p>Review of Band 5 Nursing Roles – This group has wide representation from Staff Side, Nursing and Human Resources, with a number of the members trained job evaluators. A forecasting model is under development to allow for a timeline to be predicted, based on the number of applications received, number of panels and evaluators. National guidance is awaited before further actions locally.</p> <p>Reduction in the Working Week – This group provides advice and guidance on how to implement the reduction in hours and feedback on how the change is being implemented. A smaller decision-making group has been initiated which will agree principles for implementation, with further escalation to the</p>	

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	<p>Programme Board as required. As at 11 May 2024, 50.4% of the NHSGGC Agenda for Change staff have reduced their working week by 30 minutes (pro-rata for part time staff). Those who have not been able to reduce their working week are being paid the Reduced Working Week Transitional Allowance.</p> <p>There was a discussion about whether the review of Band 5 roles applies wider than Nursing staff, with E Quail indicating that Nursing was the start of a wider Band 5 review. A MacPherson advised that this is not the Scottish Government's or national employer's position and NHSGGC is focussed on Band 5 nurses only.</p> <p>C Vincent asked about whether the impact on productivity due to the reduced working week would be monitored, with N Smith and A MacPherson confirming that this will be discussed initially by the Corporate Management Team. They further confirmed that whilst there is Scottish Government funding for the Reduced Working Week Transitional Allowance, the Board's financial position means that funding for additional hours beyond this is not possible.</p> <p>K Miles thanked N Smith for the update and for keeping the Committee updated with progress.</p>	
28.	<p>MEDICAL REVALIDATION</p> <p>Dr McKay introduced Dr Graham, who discussed a report (Paper 24/15), summarising the progress made in relation to appraisal and revalidation. Dr Graham highlighted the following:</p> <ul style="list-style-type: none">• Despite a challenging period, the Board successfully revalidated 628 out of 678 doctors during 2023/24, representing a revalidation rate of 90%, which is a 5% increase from the previous year.• There continues to be a large cohort of junior doctors who are employed as Clinical Fellows by the Board within Secondary Care. There has been an increase in the number of Clinical Fellow appointments made within the last year and this is reflective of a national trend in which approximately 35% of junior doctors do not immediately enter a training post on completion of their foundation training.	

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- There are a total of 122 doctors who work exclusively via the Medical Staffbank and require to be appraised. This represents a reduction from 2022/23 of 14%.
- If a doctor is unable to complete their appraisal prior to their revalidation date, the Responsible Officer has the option to defer a recommendation with no detriment to the doctor. NHSGGC's deferral rate for 2023/24 is 10%. This represents a positive and significant improvement since 2023/23 when it sat at 15.2%.
- Patient feedback is of key importance and the Patient Questionnaire is the subject of reflection during appraisal and is robustly examined during the revalidation process. In 2023/24, 412 doctors carried out the exercise via the previous paper based system and 115 electronically.
- Following introduction of the General Medical Council (GMC) Good Medical Practice guidelines in January 2024, work is underway by the national team to communicate updates to SOAR (Scottish Online Appraisal Resource) in May 2024.
- Dr Graham highlighted key objectives for 2024/25, which include:
 - Continue to ensure that all appraisals carried out in 2024/25 meet the GMC core requirements, whilst continuing to focus on the doctor's wellbeing.
 - Continue to promote and encourage established consultants to undertake the role of appraiser and ensure there are a sufficient number of trained appraisers to undertake appraisal and that this is reflected in agreed job plans.
 - Confirm with sector leads that all Clinical Fellows are paired with an appraiser on appointment and have sufficient information, training and support to complete their appraisal within the given timeframe.
 - Continue to refine and promote the electronic system for gathering patient feedback as an alternative to the paper based system to support.

The Committee noted that NHSGGC has a robust appraisal and revalidation process and that local guidance is in accordance with that provided nationally. Appraisal and revalidation rates are in-line with other Health Boards in Scotland.

K Miles thanked Dr Graham for the update.

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	<u>ASSURANCE NOTED</u>		
29.	<p>STAFF GOVERNANCE PERFORMANCE REPORT</p> <p>C Rennie discussed the Staff Governance Performance Management Report (Paper 24/16), providing an update on workforce data and performance as at 31 March 2024. The following positive trends were highlighted:</p> <ul style="list-style-type: none"> • Nursing and Midwifery job family establishment position has remained consistent over the last quarter whilst facing the usual winter pressures. 1159 applications have been received for the Newly Qualified Practitioners campaign which launched in March 2024 and the current Internationally Educated Nurses recruitment campaign has seen offers of employment made to 89 successful candidates so far. • Staff turnover has continued to reduce as forecast – the 2022 turnover was 12.2%, while rolling 12 months to December 2023 is 9.1%. • Staff availability decreased over the October to December period. While sickness absence is above national and local targets, it is lower than for the same period last year and there is a continued focus by managers, supported by Human Resources, to bring this down. • Compliance rates for all Statutory Mandatory training courses have improved. At Board level, seven out of nine courses are now at 90% or above. • Personal Development Planning and Review completion rate is at 53%, an increase of 8% since December 2022. <p>During discussion, the following was agreed or noted:</p> <ul style="list-style-type: none"> • It is expected that there will be an ability to drill down into the “other” reason staff choose when completing exit interviews, with trend data available in the near future; • N Smith will investigate the possibility of using anonymised QR codes for exit survey collection, as used in other Boards, following a suggestion from C Vincent; • C Rennie will review the annualised turnover percentages for Executive and Senior Manager staff, to ensure the low number in that staff group does not skew the data. 		CR

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	<p>K Miles thanked C Rennie for the update, noting that the Committee had been fully assured.</p> <p><u>ASSURANCE NOTED</u></p>		
30.	<p>HUMAN RESOURCES RISK REGISTER</p> <p>K Heenan discussed the Human Resources Risk Register (Paper 24/17), highlighting that the risks were reviewed by the Human Resources Senior Management Team in April 2024 and the Corporate Management Team in May 2024.</p> <p>K Heenan advised that there are no proposed amendments to the Risk Register based on mitigation measures and actions in place, that three of the five risks had reached their target scores with all actions complete and there are currently no plans to de-escalate the risks.</p> <p>K Heenan advised that in addition to the monthly review of Corporate Risks, a number of detailed Corporate Risk Reviews are ongoing or have been planned with Risk Leads and the Corporate Risk Register will be updated following these reviews. The review includes all aspects of the risk including controls, future mitigations and risk score. The “Delivery of medical training to the General Medical Council required standards” risk is currently undergoing review, with the other four risks to be reviewed over the next three to four months.</p> <p>K Miles thanked K Heenan for the update, with the Committee content to approve the Risk Register, with no changes.</p> <p><u>APPROVED</u></p>		
31.	<p>AREA PARTNERSHIP FORUM</p> <p>E Quail discussed the Area Partnership Forum update (Paper 24/18), highlighting that all relevant information is contained within the report. E Quail shared that the Area Partnership Forum was a robust format in which to discuss and engage, with potential for some conversations to be mitigated, via early discussions at Local Partnership Forums.</p> <p><u>ASSURANCE NOTED</u></p>		

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32.	<p>ANNUAL REVIEW OF COMMITTEE TERMS OF REFERENCE</p> <p>K Donald discussed a report (Paper 24/19), highlighting that there were no proposed changes to the Terms of Reference. The Committee approved the Terms of Reference, as presented.</p> <p><u>APPROVED</u></p>	
33.	<p>STAFF GOVERNANCE COMMITTEE VISITS</p> <p>K Miles advised that as part of the Board Members' visiting programme, on 10 May 2024, members of the Staff Governance Committee visited the Radiotherapy Physics team at the Beatson West of Scotland Cancer Centre.</p> <p>Members attending noted some staff concern as a result of recruitment challenges and wish to formally express their thanks to all those involved in organising and taking part in the visit, with the Committee noting that the opportunity to hear first-hand what is happening in different areas across the Board is invaluable.</p> <p>Committee members will next visit the Human Resources and Organisational Development teams based at West Glasgow ACH on 5 June 2024.</p> <p><u>ASSURANCE NOTED</u></p>	
34.	<p>CLOSING REMARKS AND KEY MESSAGES TO THE BOARD</p> <p>K Miles thanked all presenters, contributors to discussions during the meeting and those involved in preparing papers.</p> <p>K Miles extended a special thank you to F Shennan, who leaves the Committee and Board in June 2024, with his input to the Committee over recent years greatly appreciated.</p> <p>Key messages to the Board will be included in the Co-Chairs' report to the 25 June 2024 Board meeting and include the Assurance Presentation, Workforce Strategy Action Plan update, Safety, Health and Wellbeing, HCSSA, Medical Revalidation, Site Visits and approval of the Human Resources Risk Register.</p>	

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35.	DATE & TIME OF NEXT MEETING The next meeting of the Staff Governance Committee will be held on Tuesday 13 August 2024 at 09.30am.		
	The meeting ended at 1145hrs.		