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NHSGGC SGC(M)23/04

Minutes: 48-63

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 and via Microsoft Teams, on
Tuesday 7 November 2023 at 1.30pm**

PRESENT

K Miles (Co-Chair in the Chair)

A Cameron-Burns (Co-Chair)

Cllr C McDiarmid

M Ashraf

Dr P Ryan

F Shennan

C Vincent

J Grant (Chief Executive)

IN ATTENDANCE

M Allen	Senior Administrator
Dr J Armstrong	Medical Director
K Berchtenbreiter	Head of Human Resources – Corporate Services
F Carmichael	Acute Partnership Forum Representative
Dr U Graham	Secondary Care Appraisal Lead
K Heenan	Chief Risk Officer
D Hudson	Staff Experience Adviser / iMatter Operational Lead
H Jackson	Head of Health and Care (Staffing) (Scotland) Act Programme
T Keenan	Assistant Chief Officer – HR, Glasgow City HSCP
M MacDonald	Head of Learning and Education
A MacPherson	Director of Human Resources and Organisational Development
D Mann	Head of Organisational Development
A McCready	Staff Side Chair, Non City HSCP Staff Partnership Forum
S Millar	Chief Officer, Glasgow City HSCP
C Rennie	Workforce Planning and Information Manager
N Smith	Depute Director of Human Resources
L Spence	Head of Staff Experience
Prof A Wallace	Executive Nurse Director
F Warnock	Head of Health and Safety
S Wilson	Senior Business and Development Manager

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48.	WELCOME AND APOLOGIES	ACTION BY
	<p>K Miles welcomed all to the meeting, introducing K Heenan who has joined the Board as the newly appointed Chief Risk Officer.</p> <p>Apologies were noted for Prof J Brown, A Walton, M McCarthy, B Culshaw, E Quail and Dr M Pay.</p>	
49.	DECLARATIONS OF INTEREST	
	<p>There were no formal declarations of interest intimated.</p>	
50.	MINUTES	
	<p>The Minutes of the Committee meeting held on 22 August 2023 (SGC(M)23/03) were approved as a correct record. The motion to approve was intimated by Dr P Ryan and seconded by A Cameron-Burns.</p> <p><u>APPROVED</u></p>	
51.	MATTERS ARISING	
	<p><u>Rolling Action List</u></p>	
	<p>K Miles referred to the Rolling Action List (Paper 23/27) and advised that there were four items, with 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>	
52.	URGENT ITEMS OF BUSINESS	
	<p><u>Sexual Harassment</u></p> <p>A MacPherson advised that following discussion at the recent Board meeting and in light of UK-wide concerns raised by the Royal College of Surgeons, NHSGGC is looking to enhance the support available to staff across the organisation about what they can do if they have been subject to or witness harassment.</p>	

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	<p>A MacPherson advised that existing resources and options for support, include our Speak Up campaign and resource pack, Bullying and Harassment Confidential Contacts, the Once For Scotland Bullying and Harassment Policy / tools and Active Bystander training.</p> <p>A project team has been established which will take forward ideas designed to raise awareness for staff to feel able to come forward to enable appropriate support and review of any issues.</p> <p>C Vincent asked whether the Whistleblowing Confidential Contacts training could be expanded to include a wider remit, with L Spence confirming that there are bullying and harassment Confidential Contacts who are trained in helping anybody raising sexual harassment concerns.</p>	
<p>53.</p>	<p>ASSURANCE PRESENTATIONS</p> <p><u>Glasgow City HSCP</u></p> <p>S Millar, Chief Officer, Glasgow City HSCP supported by T Keenan (Assistant Chief Officer – Glasgow City HSCP), gave a presentation on the Staff Governance activity within the HSCP. 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.</p> <p>S Millar outlined how the activity streams met the five strands of the Staff Governance Standard and highlighted key achievements, including improved iMatter response and action planning numbers, a programme of Collaborative Conversations with staff, a Business Administration review, launch of a Staff Mental Health and Wellbeing Group and continued progress of the joint Health and Safety Forum.</p> <p>S Millar advised the Staff Governance Committee that there are several continuous improvement opportunities for the HSCP over the next 18 months. These include support for managers and staff in the promotion of KSF / PDP&R discussions, increasing Statutory and Mandatory training compliance, attendance management support and the development of the Parkhead Hub.</p>	

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S Millar showcased nursing staff engagement sessions as the HSCP's case study, with opportunities for discussion of development work such as Transforming Nursing Roles agenda and input on the associated current workplans within each service. Feedback on all issues raised and work carried out to address these issues is provided by the Chief Nurse at the next session, with many issues raised added to the workplan.

K Miles asked whether there was any benchmarking and best practice undertaken across HSCPs, with S Millar confirming that, supported by A MacPherson, all HR leads in HSCPs, Acute and Corporate are brought together regularly to discuss and share best practice.

A Cameron-Burns asked if any statistics were available in relation to reasonable adjustment requests, with A MacPherson confirming that work on recording and evaluating this data in a way that maintained confidentiality was being progressed.

Professor A Wallace endorsed the case study as being extremely positive, with interactive, proactive sessions that updated on actions taken and next steps.

Nursing Directorate

Professor A Wallace, Board Nurse Director, supported by K Berchtenbreiter, Head of Human Resources – Corporate Services, gave a presentation on the Staff Governance activity within the Nursing 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.

Professor A Wallace outlined how the activity streams met the five strands of the Staff Governance Standard and highlighted key achievements including engagement with Investors in People accreditation, promoting staff wellbeing via proactive Personal Development Planning and Review, initiating weekly huddles and check-ins/outs, fostering collective ownership of challenges and opportunities and collaborating with the HR lead to support staff and reduce absences.

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	<p>Professor A Wallace advised the Staff Governance Committee that there are some continuous improvement opportunities for the Directorate over the next 18 months. These include development of a comprehensive workforce, continuation of the 'Big Conversation' approach to listening and learning and building on the programme of AHP 'collaborative conversations' to facilitate engagement with all levels of AHP staff around the development of future policy and practice.</p> <p>Professor A Wallace showcased the 'Big Conversation' as the Directorate's case study, highlighting how the feedback received on Directorate priorities and working together to achieve them will be used as the foundation for the development of the Nursing and Midwifery Strategy.</p> <p>Dr Ryan asked about timescales for the 'Big Conversation', with Professor Wallace advising that in preparing for the initiative, it was important to take time to connect senior nurses and midwives staff across the organisation and fully understand working environments. Professor Wallace further advised that conversations continued as themes identified were analysed and confirmed, with it being important to balance moving at pace with developing an effective Strategy. Once finalised, the Strategy will progress through appropriate governance routes.</p> <p>K Miles thanked all involved, including partnership representatives, in the delivery of the assurance presentations, noting that the Committee had been fully assured.</p> <p><u>ASSURANCE NOTED</u></p>	
54.	<p>SAFETY, HEALTH AND WELLBEING</p> <p>F Warnock provided an update on Safety, Health and Wellbeing (SHaW) (Paper 23/28), highlighting the range of Safety Health and Wellbeing activities being developed and deployed:</p> <p>Health and Safety Audits – 177 sharps audits have been completed year to date, with an increase of 36 from last month. Partnership work with safety representatives has been really positive in this area. High Risk Audits for Falls, Moving & Handling, Violence & Reduction and Ligature Risk have been designed and are now being tested before being launched.</p>	

SHaW Task Calendar – Following its launch in August 2023, good progress has been made, with work with services across NHSGGC continuing to ensure the calendar becomes embedded within every part of the organisation.

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 still requires improvement, with a comprehensive performance framework in place to allow Directors and Chief Officers in each area to track progress.

Enforcement Activity – There has been no new enforcement action received within the last 12 months. A letter relating to “Recommendations for Managing Violence and Aggression and Musculoskeletal Disorders in the NHS” is being reviewed to consider our position against the national recommendations.

Staff Health Strategy – Work continues to improve the wellbeing of our staff. Key deliverables already in place include Peer Support training and hubs, establishment of Civility Saves Lives Groups, launch of the Staff Hardship Fund and the establishment of the Psychological Service.

Ligature Risk – Following a Management review of ligature suicide risk across the Mental Health estate, a detailed action plan has been created to record the activities being planned or delivered to reduce the risk of suicides and track progress to completion.

A MacPherson advised that improvement activity had paused during COVID-19, due to limited ward access and that we are taking an innovative, streamlined approach, ensuring everybody takes responsibility for health and safety.

K Miles asked about timescale challenges in Acute Services, relating to winter pressures, with A MacPherson advising that the health and safety related task timescales are realistic and have been factored into everyday business as usual.

Dr Ryan acknowledged the amount of work being undertaken and asked about timescales in relation to ligature risk. A MacPherson advised that priority capital works had been completed, with other areas being prioritised via risk assessment, with the full

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	<p>programme of work potentially taking several years to complete, due to complexities and cost.</p> <p>M Ashraf asked whether there was a particular reason for a higher compliance with Sharps in Estates and Facilities, with F Warnock advising this was likely due to lower staff numbers and it being slightly easier to access that staff group.</p> <p>During discussion, it was agreed that a Safety, Health and Wellbeing update will be presented to the Committee twice per year, with A MacPherson and F Warnock to discuss the best format for this.</p> <p>K Miles thanked F Warnock for providing the Committee with assurance around SHaW.</p> <p><u>ASSURANCE NOTED</u></p>	<p>AM / FW</p>
<p>55.</p>	<p>STAFF GOVERNANCE ANNUAL MONITORING RETURN 2022/23</p> <p>L Spence discussed the Staff Governance Annual Monitoring Return 2022/23 (Paper 23/29), updating the Staff Governance Committee on the draft response to the NHSScotland Staff Governance Standard Monitoring Framework 2022-23, following receipt of a request from the Scottish Government on 19 May 2023.</p> <p>L Spence highlighted that the paper provides an opportunity for the Staff Governance Committee to review and approve the draft response, for onward submission to the Scottish Government by 4 December 2023.</p> <p>The Committee noted that the Staff Governance Annual Monitoring Return 2022/23 had been considered by the Area Partnership Forum and Corporate Management team and, approved it for submission to Scottish Government and look forward to receiving feedback.</p> <p>In relation to a question about funding for BME Leadership Development training, L Spence advised that funding for 2023/24 matched the demand and that this will be reviewed annually.</p>	

	<p><u>APPROVED</u></p>	
<p>56.</p>	<p>WORKFORCE STRATEGY ACTION PLAN & LEADERSHIP AND CULTURE UPDATE</p> <p>A MacPherson discussed the Workforce Strategy Action Plan Phase Three (Paper 23/30), updating the Staff Governance Committee on progress to date. A MacPherson advised that the Phase Three Action Plan will continue to build upon the success of the Workforce Strategy 2021-2025, noting that there are no actions identified as not being achievable, although highlighting potential slippage with the Staff Health Strategy, with a further paper to the Board in December 2023.</p> <p>A MacPherson highlighted that the Workforce Strategy Action Plan Phase Three continues to demonstrate alignment of the Workforce Strategy to the Staff Governance Standard and NHSGGC Better Workplace strategic aim.</p> <p><u>Leadership and Culture Update</u></p> <p>D Mann provided an update on Leadership and Culture, highlighting the following:</p> <p>Civility Saves Lives (CSL) – Following a successful pilot of CSL, the programme is being rolled out across NHSGGC in Clusters, with an overarching organisation-wide group established to complement the regional groups. CSL Lead training is scheduled to commence from November 2023.</p> <p>Investors in People (IiP) – The Inverclyde Royal Hospital Cluster, and the Corporate Services Cluster have successfully achieved IiP status. Following a range of development exercises, the four remaining Clusters (West, Clyde, North and South) will be reviewed from October 2023 to April 2024. Working groups continue to monitor the development actions within the four Clusters in preparation for the reassessment.</p> <p>Senior Leadership Development Programme – This programme, targeting General Managers and Clinical Service Managers within the Acute sector was successfully delivered to 84 participants, who will continue to be supported as learning is</p>	

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	<p>applied. A second cohort of the programme is scheduled to commence from December 2023.</p> <p>Success Register – Following the launch in August 2023, the Success Register has already been visited by hundreds of staff within NHSGGC. New entries are being reviewed and added to the Register weekly.</p> <p>Ready to Lead – This middle manager leadership development programme has been refreshed and the programme will be relaunched under new branding and with a revised syllabus in 2024.</p> <p><u>Leadership and Culture Video</u></p> <p>D Mann introduced a video that showcased leadership and culture at Inverclyde Royal Hospital, with positive feedback from staff given on their experiences.</p> <p>Committee members noted their support of the positive examples reflected in the video and agreed there is benefit in sharing with all Board members. A MacPherson and L Spence will confirm the most appropriate mechanism for this.</p> <p>K Miles thanked A MacPherson and D Mann for the update, noting that the Committee had been fully assured.</p> <p><u>ASSURANCE NOTED</u></p>	<p>AM / LS</p>
<p>57.</p>	<p>HEALTH AND CARE STAFFING SCOTLAND ACT PROGRAMME</p> <p>Professor Wallace introduced H Jackson who provided an update via a cover paper (Paper 23/31) and a presentation.</p> <p>H Jackson advised that NHSGGC has agreed to test all chapters of the Act, translating what Act compliance means to our professions and services, with other Boards testing Chapters in parallel to NHSGGC. This provides an opportunity for NHSGGC and our Delivery Partners to understand more fully what the Act means to us, influence secondary regulations surrounding the Act and plan our implementation.</p>	

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The presentation included the current position in relation to the timeline of the Act; enactment, subsequent reporting, reach and requirement across professions, governance, approach to and testing of the Act's Chapters and plans to implement evidence collection and implementation workplans. The presentation also included a summary of the eRostering Early Adopter evaluation status.

H Jackson advised that the engagement, education, resources and facilitated training opportunities will be open to all professions covered by the HCSSA.

H Jackson highlighted the importance of ensuring that all health and social care services are suitably staffed and that this will provide our patients and service users with the same level of service provision regardless of where they live, as there will be equitable distribution of staffing resources within the Board.

H Jackson advised that following consideration of a final evaluation report in mid-November, a fully costed options appraisal is expected to be finalised in early 2024, with identified risks kept under review.

Dr Ryan asked whether the Act applies to contractor groups, with H Jackson confirming it applies to all services commissioned by NHSGGC, HSCPs and Local Authorities, but going forward, rather than retrospectively.

During discussion, the following was agreed or noted:

- NHSGGC is the only Board testing all 14 chapters, with many requirements embedded as business as usual. Being involved in extensive testing has put the Board in a strong position to positively influence throughout.
- To reflect the Acute Partnership Forum within references to the strategic arm of the Programme Board.

K Miles thanked H Jackson for the update, noting that the Committee had been fully assured.

HJ

<p>58.</p>	<p>MEDICAL REVALIDATION</p> <p>Dr Armstrong introduced Dr Graham to discuss a report (Paper 23/32), which provides the Committee with a summary of progress made on the key objectives set for the appraisal year 2023/24. The following update summaries were provided to the Committee:</p> <ul style="list-style-type: none"> • NHSGGC continue to ensure that the appraisal process is supportive and person-centred and have developed a number of resources for staff well-being, in particular Peer Support, which is now accessible to all medical staff. • The recently published, updated version of Good Medical Practice will come into effect on 30 January 2024 and the aim is for all medical appraisals to be carried out using the 2023 edition by April 2025 at the latest. • There are 254 appraisers across Secondary Care appraising approximately 2260 appraisees. The revalidation team continue to support the recruitment of new appraisers, as appraisers retire and/or demit from the role. • A new appraisal process system for Clinical Fellows will be implemented in November 2023. This will ensure that all Clinical Fellows are given sufficient time to complete their appraisal and supporting documentation. • Feedback from the Electronic Patient Questionnaire pilot from clinicians who used the electronic tool was positive and recommendations for improvements to the electronic system are being taken forward. <p>During discussion, the following was noted:</p> <ul style="list-style-type: none"> • 95% all NHSGGC Doctors have a valid appraisal which is in line with pre-COVIS-19 figures. • Appraisal for Doctors in Primary Care are also on track. • The updated version of Good Medical Practice will ensure a focus on the importance of colleagues, culture, safety and not being a bystander. 	
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	<p>K Miles thanked Dr Armstrong and Dr Graham for the update, noting that the Committee had been fully assured that NHSGGC has a robust appraisal and revalidation process.</p> <p><u>ASSURANCE NOTED</u></p>	
<p>59.</p>	<p>STAFF GOVERNANCE PERFORMANCE REPORT</p> <p>C Rennie discussed the Staff Governance Performance Management Report (Paper 23/33), providing an update on workforce data and performance as at 30 August 2023. The following was highlighted:</p> <ul style="list-style-type: none"> • Establishment position trends and projections for Nursing and Midwifery staff – Registered Nurses and Health Care Support Workers; • Establishment position overview for Nursing and Midwifery, Senior Medical and Dental, Allied Health Professionals, Administrative Services and Support Services staff; • Staff turnover, starters and leavers trends and projections, including exit interview data; • Sickness absence trend and projection, with this now including Covid absence; • Statutory and Mandatory training compliance; • Personal Development Plan and Review completion; • Workforce Equality Information and the reduction in the amount of missing information; • iMatter 2023 update. <p>K Miles asked about establishment ahead of winter pressures, with A MacPherson advising that whilst recruitment challenges remain due to current market conditions, the establishment position is stabilising, supported by reducing absence.</p> <p>Professor Wallace noted that there is a need to further reduce reliance on temporary staff to support the Board’s financial position.</p> <p>K Miles thanked C Rennie for the update, noting that the Committee had been fully assured.</p> <p><u>ASSURANCE NOTED</u></p>	

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<p>60.</p>	<p>HUMAN RESOURCES RISK REGISTER</p> <p>K Miles welcomed K Heenan to the first Staff Governance Committee meeting since being appointed as Chief Risk Officer. K Heenan discussed the Human Resources Risk Register (Paper 23/34), highlighting that the risks were reviewed by the Human Resources Senior Management Team in October 2023.</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>The Committee approved the Risk Register.</p> <p><u>APPROVED</u></p>	
<p>61.</p>	<p>AREA PARTNERSHIP FORUM</p> <p>A Cameron-Burns discussed the Area Partnership Forum (APF) update (Paper 23/35), highlighting productive partnership discussions in many areas, with all relevant information contained within the report.</p> <p><u>ASSURANCE NOTED</u></p>	
<p>62.</p>	<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 preparing papers.</p> <p>Key messages to the Board will be included in the Co-Chairs' report to the 19 December 2023 Board meeting and include the Assurance Presentations, Workforce Strategy Action Plan update, Medical Revalidation, Health and Care Staffing Scotland Act Programme assurance and approval of the Staff Governance Annual Monitoring Return 2022/23 and Human Resources Risk Register.</p> <p>In his absence, Committee members expressed thanks to Professor John Brown for his contributions to the Committee during his time with the Board.</p>	

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63.	DATE & TIME OF NEXT MEETING The next meeting of the Staff Governance Committee will be held on Tuesday 20 February 2024 at 1.30pm.		
	The meeting ended at 1540hrs.		