**Approved Minutes**

**Staff Governance and Person Centred Committee**

**3 March 2022, 10am**

**Microsoft Teams**

**Members**

Marcella Boyle Non-Executive Director (Chair)

Jane Christie-Flight Employee Director

Callum Blackburn Non-Executive Director

Robert Moore Non-Executive Director

Catherine McAllister Staff Side Representative

**In attendance**

Anne Marie Cavanagh Director of Nursing and AHPs

Christina MacLean Head of Rehabilitation and AHP Lead

Gareth Adkins Director of Quality, Innovation and People

Gerard Gardiner Head of Corporate Governance and Board Secretary

Jann Gardner Chief Executive

Mark MacGregor Medical Director

Sandie Scott Head of Communications

Serena Barnatt Director of HR

Susan Douglas-Scott Board Chair

**Minutes**

Theo Richardson Corporate Administrator

**1 Opening Remarks**

* 1. **Chairs introductory Remarks**

Marcella Boyle opened the meeting and welcomed all attendees.

**2. Apologies**

Apologies were noted as above.

**3 Standing Declarations of interest**

 No Standing Declaration of interest were noted.

**4. Updates from last meeting**

**4.1a Unapproved minutes from 13 January 2022: Public Session**

 The minutes of the previous meeting were agreed as an accurate record.

**4.1b Unapproved minutes from 13 January 2022: Private Session**

Marcella Boyle requested members to read and send their approval to Gerard Gardiner via email.

**4.2 Action Log**

The Committee reviewed the action log and noted the following updates:

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| --- | --- | --- | --- |
| **Action No** | **Action** | **Responsible** | **Progress** |
| SGPCC/130122/01 | **7.1 Board Workforce Plan**  3 year workforce plan to be presented to future committee  | Gareth Adkins Serena Barnatt | **Ongoing -** will feature at Committee in May 2022.  |
| SGPCC/091121/03 | **8.2 iMatter & Staff Engagement** Provide further update on iMatter and Staff Engagement at the next meeting. | Serena Barnett Donna Akhal Lisa Walsh | **Ongoing -** will feature at Committee in May 2022. The Board Secretary will circulate iMatter report to SGPCC group when available to support discussion at the appropriate meeting of the Committee. |
| SGPCC/070721/02 | **5.2 Spiritual Care Update** Further update on the Spiritual Care Audit and Strategy to be presented to the Committee at a future meeting once the work has started to progress. | Tosh Lynch | **Ongoing -** Timeline dependent upon Scottish Government Policy and direction. HR Director will liaise with Tosh Lynch to confirm date. |

**4.3 Matters arising**

**Annual Work plan –** It was noted that this would be progressed by Committee Members via correspondence prior to being presented at the next SGPCC Committee for approval.

It was noted that a new chaplain had been appointed to NHSGJ. The Board Chair and the Chair of the Committee wished a meeting to be arranged with them and the chaplain on his appointment.

**5 Fair and Consistent**

**5.1 Feedback on Blue Print for Good Corporate Governance Self-Assessment**

Gerard Gardiner presented the Feedback on Blue Print for Good Corporate Governance Self-Assessment to the Committee.

In February 2019, the Scottish Government published the NHS Blueprint for Good Governance, which provides a Once for Scotland approach to NHS board governance. In February 2019, NHS Golden Jubilee conducted a self-assessment against the Blueprint. This identified areas of improvement and informed the action plan for Corporate Services.

It had been anticipated that a refreshed suite of national self-assessment materials would be available in time of the February 2022 SGPCC to consider, however relevant national groups have not prioritised this work in the intervening period.

The report summarised Board Development Activities carried out during 2021/2022, including as part of the Board Seminar programme. The report also anticipated future NHSGJ activities in this area, and anticipated review by the Scottish Government Corporate Governance Steering Group of the Blueprint.

The Committee noted the Board Seminar Programme for 2021/2022 and Board Skills Matrix 2021, the latter of which identified areas of development for Non-Executives. Additionally, the Committee noted the completion by the Board Chair of a NES Questionnaire on Local NHSGJ induction arrangements, and updates received relating to ethical standards, particularly the emerging Model Code of Conduct for devolved Public Bodies. The Committee also noted that a Seminar on Active Governance would be delivered as part of the Board Seminar Programme in 2022/23.

The Committee discussed NHSGJ’s strategic partnership with Strathclyde University in the context of Board development, particularly possible opportunities to work with the business school. G Adkins advised this would be further assessed, following executive appraisals to explore opportunities to work with Strathclyde University.

C Blackburn asked whether feedback had been provided to Non-Executive Directors following the skills matrix exercise. The Board Chair reminded those present of the appraisal exercise conducted with NEDs in autumn 2021. The Board Chair also reminded those present of the NHSGJ Board meeting on 25 November at which the need to consider the experience of Non-Executives in capital project delivery had been accepted by the Board of NHSGJ as part of a suite of recommendations following from the Montgomery/Fraser Review.

The Committee noted the report.

**6 Well Informed**

**6.1 Communications Update**

Sandie Scott provided a verbal update on Communications Activities to the Committee.

**Upcoming events –** S Scott noted the upcoming Long Service Awards, recruitment events and a National Health Service Event would be held during June 2022 in Aberdeen. A total of 17 posters and 5 session submissions had been organised for the NHS Event. Additionally, there will be three stands: NHS Golden Jubilee, NHS Scotland Academy and Centre for Sustainability and Delivery (CfSD).

**NHS Golden Jubilee 20 year anniversary –** Corporate Communications are organising events for the 20 year anniversary on 27 June 2022. There is a focus on staff events linked to health and wellbeing, for example, a Fun Run and 20km Challenge.

**Projects –** Communications are involved in strategic project work for NHS Scotland Academy, CfSD, National/International Recruitment and Digital Communications.

**Social Media Platforms –** Communications regularly review the effectiveness of social media activity and noted significant engagement potential in Tik-Tok.

A detailed report will be presented at the next SGPCC Committee detailing Corporate Communications activity. The Committee offered its support to organise the NHS Golden Jubilee 20 year anniversary event and noted the Communications update.

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| **Action No** | **Action** | **Responsible** |
| SGPCC/030322/01 | Present a detailed Corporate Communications Activity report at the next meeting. | Sande Scott |

**6.2 Integrated Performance Report**

The Committee were presented with the Integrated Performance Report.

Gareth Adkins advised that in December 2021, the Board’s sickness absence rate was 7.1%, the same as the previous month, the joint highest it has been in five years. This is consistent with the pattern seen across other Boards. G Adkins advised the Executive team would continue to monitor this situation.

Across the Directorates, absence was recorded as follows:

**Sickness absence**

* Corporate: 5.5%, up 0.4%
* Golden Jubilee Conference Hotel: 2.5%, up 0.5%
* Heart, Lung and Diagnostic Services: 7.8%, down 0.2%
* National Elective Services: 8.8%, down 0.3%

Anxiety/stress/depression/other psychiatric illnesses continued to be the highest cause of sickness absence in December, accounting for 27.1% of all sickness absence, 0.2% higher than November’s figure of 26.9%. This was the main cause of absence in three of the four Directorates:

* Corporate: 26.4% (down from 27.4% in November);
* Heart, Lung and Diagnostic Services: 39.2% (up from 38%); and
* National Elective Services: 15.8% (up from 15.6%).

In the Hotel, “Chest and respiratory problems” was the main cause of sickness absence, accounting for 48.5% of hours lost, while “Covid, cough, flu – influenza” was the reason for 26.3% of sickness absence hours.

In December, COVID related absences (which are recorded as special leave) were recorded at 1.9%, up 0.9% from the previous month. The breakdown across departments was as follows:

**COVID-19 Special Leave**

* Corporate: 0.9%
* Golden Jubilee Conference Hotel: 2.7%
* Heart, Lung and Diagnostic Services: 2.2%
* National Elective Services: 2.5%

**Agenda for Change appraisal**

* Corporate: 62%, down 1%
* Golden Jubilee Conference Hotel: 53%, down 16%
* Heart, Lung and Diagnostic Services: 70%, down 3%
* National Elective Services: 65%, up 1%

**Medical appraisal**

As at 31 December 2021, 20 of 159 doctors had either an ARCP or Appraisal for 2021/2022, up by one on the previous month. Gareth Adkins advised of the appraisal rates status across NHSGJ, noting that there tended to be an improvement in completion figures towards the end of financial year.

**Medical Job Planning**

At the end of December 2021, all medical job plans had been closed for 2021/2022, with new job plans started for the year starting 1 April 2022.

Mark MacGregor presented a breakdown of medical appraisal and job-plan figures as follows:

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| --- | --- | --- | --- |
| **Department** | **Completion** | **In Process** | **No Action** |
| Anaesthesia | 13 | 24 | 7 |
| Cardiology | 17 | 11 | 9 |
| CT Surgery | 11 | 12 | 6 |
| Miscellaneous | 1 | 4 | 1 |
| General Surgery | 2 | 1 | 3 |
| Ophthalmology | 2 | 5 | 3 |
| Orthopaedics | 11 | 11 | 5 |
| **Total** | **57** | **68** | **34** |

**Job Plan**

| **Department** | **Complete** | **Await 3rd Sign off** | **Await 3rd Sign off** | **Await 3rd Sign off** | **Await doctor sign off** | **No Action** |
| --- | --- | --- | --- | --- | --- | --- |
| Anaesthesia | 7 | 5 | 1 |  | 20 | 7 |
| Cardiology | 3 |  | 10 | 1 | 3 | 9 |
| CT Surgery |  |  | 9 | 1 | 8 | 5 |
| Miscellaneous | 1 |  |  |  |  | 2 |
| General Surgery | 2 |  | 1 |  | 2 |  |
| Ophthalmology |  |  |  |  | 5 | 1 |
| Orthopaedics |  |  |  | 4 |  | 15 |
| **Total** | **13** | **5** | **21** | **5** | **38** | **39** |

Committee noted an increase of appraisals undertaken and that departments have been advised of implications if job plans are not signed off by 31 March 2022.

Committee discussed sickness absence rates and noted a reduction of sickness absence in January 2022, which was consistent with other NHS Boards. G Adkins advised that “Hotspot” areas would be monitored continuously in HR. The Committee also noted measures taken to ensure staff are receiving support during absence.

The Committee noted the fluctuation of covid absence rates and discussed the ‘Long Covid’ additional category of absence and the potential implications for Special Leave across NHSGJ. The Committee agreed that absences for long covid would follow the same protocols as long-term sickness absence. Process codes for long-covid were noted as under discussion at STAC, and the Committee noted it would review the outcome of those discussions at a later date.

The Committee agreed to continue to monitor the staff absence rates

Marcella Boyle thanked Mark MacGregor for a comprehensive presentation. The Committee was pleased to note that appraisals are forming part of the eligibility process for the discretionary points scheme.

**Other matters discussed**

The Committee discussed positive grievance and disciplinary figures. J Christie-Flight noted the upcoming publication of the iMatter report, and sought assurance that this would be reported to the Committee to provide context to data reported on, for instance, disciplinary processes and grievances.

Marcella Boyle requested that the Board Secretary circulate the iMatter national report to the committee when appropriate to facilitate to discussion at the next available meeting.

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| **Action No** | **Action** | **Responsible** | **Deadline** |
| SGPCC/040322/02 | **6.2 Integrated Performance Report** The Board Secretary to circulate iMatter report to SGPCC group when available to support discussion at an appropriate meeting of the Committee. | Gerard Gardiner | 3 May 2022 |

The Committee noted the Integrated Performance Report.

**7 Well Trained**

**7.1 AHP Workforce**

Christina MacLean presented the Allied Health Professionals (“AHP”) Strategy Update to the Committee.

The Strategy provided a framework for the values, beliefs and vision of NHS Golden Jubilee AHP workforce to deliver high quality, patient centred, safe and effective services.

The key areas of the strategy are:

* Developing our AHP workforce
* Health and wellbeing of staff and patients
* Access and awareness of AHP services
* Delivering excellence through Research, Innovation and Quality Improvement (QI)

Strategy timescales had been extended due to service and workforce pressures caused by the pandemic. However, since the strategy has begun to be implemented positive impacts on local services and workforce had been noted.

**Next steps –** short and medium term plans for AHP services are fully integrated in divisional strategies within both NES and HLD Divisions however, the AHP workforce would like to expand on the progress made over the last 3 years to develop an overarching AHP strategy to drive service improvement and workforce development further. The next AHP Strategy will be developed in collaboration with, and through engagement with, key AHP stakeholders, with a target completion date of end June 2022.

The Committee praised the presentation and noted the wide range of hard work undertaken that had resulted in service improvements. The Committee requested that Christina MacLean attend to present the 5-year AHP Workforce Strategy upon completion to the Committee for discussion.

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| **Action No** | **Action** | **Responsible** | **Deadline** |
| SGPCC/040322/03 | **7.1 AHP Workforce** Present 5-year AHP Workforce Strategy upon completion to the Committee for discussion. | Christina MacLean | N/A |

 Committee noted the AHP Workforce update.

**8 Involved in Decisions**

**8.1 SGPCC Terms of Reference Review**

Gareth Adkins presented the SGPCC Terms of Reference (ToR) to the Committee.

The Committee noted no proposed changes to the Terms of Reference. Marcella Boyle queried whether consideration should be given to specific changes to the ToRs to reflect the importance of recruitment as part of NHSGJ’s expansion programme.

J Christie-Flight sought assurance that the references to statutory Staff Governance requirements of the Committee were consistent with equivalent Committees in other NHS Boards.

J Gardner agreed that the statutory Staff Governance requirements of the Committee required sufficient emphasis within the ToRs. J Gardner and AM Cavanagh noted the importance of emphasis on the Committee’s Person Centred responsibilities as part of NHSGJ’s values and organisational culture.

Marcella Boyle requested Gareth Adkins and Gerard Gardiner to compare language in reference to Staff Governance with other Boards and consider the appropriateness of inclusion of the Expansion Programme into the Committee’s Terms of Reference before presenting to Committee at the next meeting.

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| **Action No** | **Action** | **Responsible** | **Deadline** |
| SGPCC/040322/04 | **8.1 SGPCC Terms of Reference Review** Compare Terms of Reference language regarding Staff Governance to other Boards and to consider inclusion of the Expansion Programme before next Committee meeting.  | Gareth Adkins Gerard Gardiner | 3 May 2022 |

Committee noted the SGPCC Terms of Reference Review.

**9 Safe Working Environment**

**9.1 Board Risk Register**

The Committee were presented with the Board Risk Register.

The Committee noted updates to the Risk Register, including the reducing from three-workforce risk to two by merging two risks. Marcella Boyle requested Risk Register controls be updated, with feedback provided by Gareth Adkins prior to the next Committee.

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| **Action No** | **Action** | **Responsible** | **Deadline** |
| SGPCC/040322/05 | **9.1 Board Risk Register** Update Risk Register controls and provide feedback.  | Marcella BoyleGareth AdkinsSusan McLaughlin | 3 May 2022 |

The Committee noted the Board Risk Register.

**9.2 Health and Safety Report**

Gareth Adkins presented the Health and Safety Report to the Committee.

The Report summarised Health & Safety activity across the organisations. It included information reported to the Health & Safety Committee on safety incidents, including relating to RIDDOR. Health and Safety related adverse incidents remain low with no significant trends in terms of type of incident or location within NHSGJ. One incident has the potential to be a high risk, and may be reported to the Committee in due course pending further scrutiny by the Health & Safety manager.

Gareth Adkins, Jane Christie-Flight and David Wilson, Head of Health & Safety, will meet to discuss Datix report findings to analyse incident themes during the last two years. This is with a view to improving incident reporting processes and closures. Prevention measures and further work on values, workplace culture and behaviour were reported to the Committee. Committee noted the PPE risk update and plans to progress the Information Asset Register.

Committee noted the Health and Safety Report.

**9.3 Health and Safety Risk Register**

Gareth Adkins presented the Health and Safety Committee Risk Register.

The Committee were informed no new risks had been added. Updates were provided on the following actions:

* **HS2 –** Electrical Safety Policy will be sent to H&S Committee for review following submission to H&D Divisional Forums. The policy is currently with Estates Management for review.
* **HS7 –**current training provision had been reviewed and updated, including consideration of development of new topics. This will include development of training matrix covering all H&S training for identified staff groups.
* **HS11 –** A comprehensive Asset Register and aligned policy/protocol is being progressed to ensure all relevant items are registered appropriately at point of purchase/entry to site.
* **HS14 –** A short-life working group has been established to review car parking management options.

G Adkins advised that Health and Safety staff numbers have increased since the last report to Committee. The team now have capacity to take work forwards to further progress work on health and safety risk register

 Committee noted the Health and Safety Risk Register update.

**9.4 Occupational Health Report**

Gareth Adkins presented the Occupational Health update to the Committee.

The Committee noted the following key points from the report summary:

**Staff Vaccination Programme –** although official guidance is awaited for any future vaccination plans, training has taken place to extend NHSGJ’s pool of trained vaccinators. Staff have attended a study day organised by the clinical educators and await future clinics in order to be deemed fully competent.

**Occupational Health Pre-employment and Managing Skin at Work Procedure/Policies** These have beenrewritten and approved by Partnership Forum at the end of 2021 and are available for staff and managers via StaffNet and HR connect. Plans are progressing effectively to move to an online pre-employment process by the start of the financial year.

The Employee Assistance Program (EAP), launched on 1 October 2021 with AXA Health, continues to be a support service for staff. In order to access the service staff must quote NWTC (National Waiting Time Centre) as their employer. This has been communicated as part of Communications activities.

**Student Vaccinations –** student nurses’ pre-employment health screening, initial course of hepatitis b vaccinations and serology have been completed. This project has generated a considerable amount of income for NHSGJ.

**Track and Trace –** community transmission of Covid-19 has eased slightly since the last report to the Committee. The current SOP was recently updated by the PCIC team for which the OH department held drop in sessions via teams for both clinical and non-clinical managers. These offered guidance and support with their role in the track and trace process. These sessions appeared to be very well received with a plan to re-run the hand hygiene and sharps/splash management process.

**Management of sharps and inoculation injuries –** A training session was carried out within the eye centre, which resulted in 15 new-trained source counsellors. This process appears now to be managed well within the organisation due to the support and cooperation of clinical teams.

**Mental Health First Aid Awareness Training –** There has been a significant increase in the number of medics wishing to attend the training and awareness session from MHFAA Trainer. This was considered extremely positive in helping to support the mental health and wellbeing of NHSGJ staff. Future dates for training are being discussed at present- once finalised these will be available to be booked via eESS

**Health Surveillance –** staff have now been fully trained in carrying out spirometry training. E-Health have successfully added the necessary software to NHSGJ systems while awaiting calibration clarification of the machine by medical physics and air change room assessment by Estates. Once these factors have been complete and a risk assessment carried out for the surveillance room, it is planned to launch an active lung function health surveillance programme for all of on-site engineers in line with HSE recommendations.

 Committee noted the Occupational Health Report.

**10 Person Centred**

**10.1 Q3 Feedback Report**

The Committee were presented with the Feedback Report.

Committee noted the key points of the report:

* Twenty four complaints received, a decrease of 45% on the previous quarter
* All complaints during quarter 3 had been closed.
* Of remaining complaints received: ten had been upheld, two were partially upheld and eight were not upheld.
* Seven stage 1 complaints had had an extension granted. Six were responded to within agreed timescales.
* Eight stage 2 complaints were over 20 working days due to multi factorial reasons.
* Forty-one compliments logged in Datix during Quarter 3.

Committee were informed a new Head of Clinical Governance has been appointed and will start in May 2022 and a re-examination of patient care will follow.

The Committee noted the Feedback Report update.

 Committee noted the Quarter 3 Feedback Report.

**11 Any Other Competent Business**

 No other competent business noted.

**12 Items for Board Update Report**

Marcella Boyle gave a summary for the Board Update Report:

**Safe Working Environment**

Committee welcomed the comprehensive report from the Health & Safety Committee. In particular, Committee welcomed the granular level of detail provided on risk management, and the opportunity the report provided to scrutinise hospital wide risks. Committee also considered the governance arrangements in place to ensure appropriate reporting of risks to the Committee, and to the Board’s Audit & Risk Committee.

**Well Informed**

Committee noted that face-to-face events, including Long Service Awards, recruitment events, and national NHS events would return during 2022. The Committee specifically noted the evolving programme of events to celebrate the 20-year anniversary of NHS Golden Jubilee.

Committee discussed the Integrated Performance Report findings. The Committee noted measures aimed at raising appraisal rates and job plan completion in time for financial year-end. Committee expressed optimism regarding staff absence rates, and noted the position of NHSGJ relative to NHS Health Boards throughout Scotland.

NHS Golden Jubillee grievances and disciplinary rates remain low when compared with other NHS Scotland boards. Committee noted the upcoming publication of NHSGJ’s iMatter report, and the opportunity the Committee will have to place data reported to the Committee (including on grievances and disciplinary matters) in the context of that report.

**Well Trained**

Committee welcomed the presentation by Christina MacLean of the AHP draft Strategy Workforce Plan. The Committee commended the comprehensive work undertaken in preparation of the Strategy. The final strategy plan will be presented at a future Committee for discussion.

**Involved in Decisions**

Committee noted no changes to Terms of Reference at present. The Committee recognised that Terms of Reference would require to remain under consideration due to the evolving and growing nature of NHSGJ services.

**Fair and Consistent**

Committee noted a comprehensive report prepared by the Board Secretary on work undertaken and programmed in implementation of the Blue Print for Good Governance. The Committee noted likely national activity in further evolution of the Blueprint, and noted the upcoming Board Seminar on Active Governance, delivered by National Education Scotland. Committee noted further opportunities for partnership working with strategic partners, such as the University of Strathclyde, in this area.

**13 Date and Time of Next Meeting**

The next scheduled meeting of the Staff Governance and Person Centred Committee is 3 May 2022 at 9:30am.

**The meeting closed at 11:55am**