## Approved Minutes

**Meeting: Staff Governance and Person-Centred Committee**

**Date: Tuesday 12 August 2025, 14:00-16:00**

**Venue: Microsoft Teams**

**Members**

Rob Moore Non-Executive Director (Chair)

Callum Blackburn Non-Executive Director

Jane Christie-Flight Employee Director

Linda Semple Non-Executive Director

Catherine McAlister Unison Representative

**Core Attendees**

Anne Marie Cavanagh Executive Director of Nursing

Laura Smith Executive Director of People and Culture

Mark MacGregor Executive Medical Director

**In attendance**

Donna Akhal Head of Learning and Organisational Development

Jenny Pope Deputy Director of People and Culture

John Scott Director of Facilities and Capital Projects

Lynne Rapson Head of Human Resources

Sandie Scott Director of Strategic Communications and Stakeholder Relations

Scott McAngus Senior Marketing and Communications Officer

Susan Douglas-Scott Board Chair

Carole Anderson Executive Director of Transformation, Strategy, Planning and Performance – Item 3.5.5

John Luck Consultant Anaesthetist / Appraisal Lead - Golden Jubilee University Hospital – Item 3.2.1

Nyree Anderson Organisational Development Consultant – Item 3.5.9

Rob White Equality and Inclusion Lead – Item 3.5.7

**Apologies**

Carolynne O’Connor Chief Executive

**Minutes**

Paula Nugent Senior Corporate Administrator

1. **Opening Remarks**

**1.1 Wellbeing Pause and Chair’s Introductory Remarks**

The Chair welcomed all to the meeting and took the opportunity for a wellbeing pause.

It was noted that this was the first meeting of the Staff Governance and Person Centred Committee since Rob Moore had become the Committee Chair.

**1.2 Apologies**

Apologies were noted as above.

**1.3 Declarations of Interest**

There were no changes requested to the Standing Declarations of Interest.

**2 Consent Agenda – Approval only**

**2.1 Workforce Monitoring Report 2023/24**

**2.2 Communications Strategic Plan 2025-2030**

**2.3 Job Evaluation Annual Report**

The Committee approved the above papers.

1. **Updates from Last Meeting on 1 May 2025**
   * 1. **Minutes**

The minutes of the meeting held on 1 May 2025 were approved as an accurate record.

* + 1. **Action log**

The action log was updated as below.

|  |  |  |  |
| --- | --- | --- | --- |
| Action Ref | Action | Action Lead | Update |
| SGPCC/191124/02 | To provide a further update on Succession Planning to March 2025 meeting. | Laura Smith | A further update would be provided at the November 2025 meeting. |
| SGPCC/040325/02 | Provide update around vaccination plans and vaccine figures | Anne Marie Cavanagh / Laura Smith | A further update would be provided at the November 2025 meeting. |
| SGPCC/040325/03 | Present an update on Kindness Matters programme at the August meeting | Laura Smith / Nicki Hamer | This item was on the agenda - .action closed. |
| SGPCC/010525/01 | Laura Smith would highlight areas with high staff turnover to be discussed further at Board Seminar. | Laura Smith / Nicki Hamer | Board turnover has been trending downwards over the last 12 months. It was therefore not a priority area for deep dive focus at present. Action closed. |

The Committee approved the Action Log.

* + 1. **Matters Arising**

There were no matters arising.

**3.2. Appropriately Trained**

**3.2.1 Medical Appraisal and Revalidation Annual Report**

The Chair welcomed John Luck to present the Medical Appraisal and Revalidation Annual Report.

John Luck presented the highlights for the 2024/25 Annual Appraisal year. NHS Golden Jubilee was the designated body for 175 doctors. Out of that 175, 93.7% had completed their appraisal or had an Annual Review of Competency Progression (ARCP) in place.

One appraisal was outstanding due to mitigating circumstances, but a completion plan had been agreed.

Thirty-three doctors received a positive recommendation to the GMC, with nine doctors recommended to defer. Deferral reasons included incomplete mandatory requirements and date of entry to the organisation.

John Luck demonstrated the new appraisal dashboard Turas SOAR.

An appraiser recruitment drive was underway and two new appraisers recently completed training. There would be future provision of appraisals for Physician Associates and Anaesthetist Associates to comply with new GMC requirements.

John Luck detailed 2025/26 objectives and considerations, which included achieving a 90% appraisal completion rate by 31 March 2026.

Linda Semple asked what support was offered to appraisers. John Luck discussed establishing a Teams channel to share examples of best practice and arranging in-person discussions during CME days.

Mark MacGregor highlighted the lingering impact of the Covid-19 pandemic on appraisal design.

Staff Governance and Person Centred Committee approved the Medical Appraisal and Revalidation Annual Report.

**3.3. Treated Fairly and Consistently**

**3.3.1 People Strategy Timeline**

Laura Smith provided a verbal update on the People Strategy Timeline.

Laura Smith advised that the name would be changed to “People Delivery Plan” and highlighted how the Board Strategy and Kindness Matters Culture programme would be incorporated into the Plan.

Susan Douglas-Scott complimented the reflective nature of the work and the fact that it incorporated existing programmes within the organisation.

Staff Governance and Person Centred Committee noted the People Strategy Timeline

**3.3.2 Staff Governance Action Plan**

Lynne Rapson presented the Staff Governance Action Plan, explaining that the Plan was a live document and would be updated to reflect the reviewed iMatter feedback. The Plan would align with the Board Strategy and the Corporate Objectives.

Lynne Rapson confirmed that the paper had been presented to Staff Governance Group and Partnership Forum.

Staff Governance and Person Centred Committee approved the Staff Governance Action Plan.

**3.4 Involved in Decisions**

* + 1. **Facilities Time Report**

Laura Smith and Lynne Rapson presented the Facilities Time Report.

A total of 893.3 hours of Facilities Time had been recorded for 2024/25. It was highlighted that only five members of staff reported Facilities Time on SSTS, despite having 19 Staff Side members. Rob Moore asked why this was the case. Jane Christie-Flight advised that there was no mandatory requirement to report Facilities Time, defined the specifics of Facilities Time from Business as Usual and highlighted the new Once for Scotland Policy around recording Facilities Time.

Staff Governance and Person Centred Committee noted the Facilities Time Report.

**3.5 Well Informed**

* + 1. **Performance Report**

Laura Smith presented the Performance Report for June 2025.

The sickness absence rate was 6.3%, 0.4% higher than May 2025.

“Anxiety, Stress and Depression” remained the highest cause of absence and accounted for 29% of absences. “Other known causes – not otherwise classified” was the second top cause of absence and accounted for 12% of sickness absence.

Agenda for Change appraisal compliance reporting had been transferred to the PowerBI dashboard during the month of June. Managers were advised of the move and figures would be reported again for August 2025, in order to allow the new system to take over.

Staff Governance and Person Centred Committee approved the Performance Report.

**3.5.2 Agenda for Change**

**Reduced Working Week -** Jenny Pope presented a timeline of activity carried out to date and highlighted the Scottish Government mandated date of 1 April 2026 to implement the Reduced Working Week.

**Band 5 Review –** There were 193 review requests in the portal, with 98 review requests received and 95 still to be fully submitted.Lynne Rapson and Jane Christie-Flight discussed existing job descriptions for Band 5 nurses and emphasised that a review of these may be necessary. The Committee discussed the challenges of Job Evaluator capacity.

**Protected Learning Time –** Phase Two of the programme was underway. The underlying assumption was that the amount of Protected Learning Time required would increase. The Governance process for approving statutory and mandatory training was under review.Callum Blackburn asked whether there would be provision to add further organisational mandatory training. Laura Smith advised this process was still being developed and was aware of requirements on workforce capacity with increased mandatory modules and a reduced working week.

Staff Governance and Person Centred Committee noted the Agenda for Change update.

* + 1. **People Highlight Annual Report**

Laura Smith presented the People Highlight Annual Report.

Laura Smith discussed the origins of the Report and shared key highlights but confirmed that more detailed reporting existed internally. The Report contained high level updates from each department within the People and Culture remit.

Jane Christie-Flight and Susan Douglas-Scott complimented how concise the report was and its general accessibility.

Staff Governance and Person Centred Committee approved the People Highlight Annual Report

* + 1. **Communication and Marketing Annual Report**

Sandie Scott presented the Communication and Marketing Annual Report and provided a high level overview of the Department’s activity in 2024/25.

Highlights included Our People Awards in November 2024 and the premiere of the Channel 5 programme “Our Hospital: Life on the Line” in June 2024.

There were now 15 active social media channels across the organisation. These channels had seen a 2.1% increase in followers and a 5% increase in engagement.

The Chair and Linda Semple complimented the accessibility and aesthetics of the Report. Sandie Scott highlighted that members of the Team were members of a National Working Group that were developing National Standards on accessible Communications.

Staff Governance and Person Centred Committee noted the Communication and Marketing Annual Report.

**3.5.5 Corporate Objectives 2025/26**

The Chair welcomed Carole Anderson to present the Corporate Objectives 2025/26.

The Objectives had been designed around four key thematic areas – Better Care, Better Collaboration, Better Workplace, Better Value and would incorporate the Board Values and Mission Statements, as well as findings from the Kindness Matters Culture Programme.

Following Board approval, the Objectives would be cascaded across the organisation and departmental and personal objectives would be aligned accordingly.

Susan Douglas-Scott complimented the accessibility of the document.

Staff Governance and Person Centred Committee approved the Corporate Objectives 2025/26.

**3.5.6 Kindness Matters – Values and Behavioural Framework**

Laura Smith presented the Kindness Matters – Values and Behavioural Framework.

The paper listed supportive and unsupportive behavioural framework examples and emphasised that the organisation would continue to receive input from staff, If any changes were required then the item would be added to the agenda for further discussion and approval.

The project would be rolled out from 25 August 2025 after extensive work with Committees and the input from across the organisation.

Staff Governance and Person Centred Committee approved the Kindness Matters – Values and Behavioural Framework

**3.5.7 NHS GJ Anti-Racism Plan**

The Chair welcomed Rob White to present the NHS GJ Anti-Racism Plan.

Rob White confirmed the Plan was intended to launch in October 2025 to align with Black History Month and detailed the governance process for the Plan, prior to its implementation.

Rob White discussed engaging Dr Gwenetta Curry to participate in the launch event at the October 2025 CME day and welcomed the attendance of all Senior Leadership at the event.

The Committee discussed the intersectional nature of racism aligned with the protected characteristics of religion/belief in addition to socio-economic disadvantage. It was agreed these factors would be considered and managed sensitively throughout the delivery of NHS GJ’s Anti-Racism Action Plan.

Staff Governance and Person Centred Committee approved the NHS GJ Anti-Racism Plan.

**3.5.8 AHP Strategy Annual Update**

Anne Marie Cavanagh presented the Allied Health Professional (AHP) Strategy Annual Update.

This was the first year that the Strategy had been implemented and was designed to improve the capacity, capability and sustainability of the Allied Health workforce within the organisation.

Anne Marie Cavanagh highlighted a number of initiatives that had been developed to upskill and support AHPs. Staff Governance and Person Centred Committee noted the AHP Strategy Annual Update.

**3.5.9 iMatter Update**

The Chair welcomed Nyree Anderson to present the iMatter Update.

The overall response rate for the organisation was 59%, with 89% of teams generating a report. The deadline to submit an action plan was 15 September 2025.

Nyree Anderson highlighted shift in specific team results and mentioned one team that had shifted their overall result from Red to Amber since 2024. The Organisational Development team were working with this team to continue to build on the improvement.

Jane Christie-Flight and Nyree Anderson discussed the challenges of implementing action plans with larger teams and the difficulties involved in tracking results year on year as the organisation continued to expand and restructure.

Callum Blackburn asked for further clarity around responses to the questions related to Whistleblowing. Nyree Anderson confirmed she would share this information in advance of Speak Up Week 2025.

Staff Governance and Person Centred Committee noted the iMatter Update.

**3.5.10 Workforce Monitoring Report 2024/25**

Jenny Pope presented the Workforce Monitoring Report.

Key findings from the Report highlighted that the workforce continued to expand throughout 2024/25.

In addition, the Report highlighted the changing age demographics in the workforce. Particularly, that the proportion of staff working over the age of 60 had doubled in 2024/25.

The turnover rate for 2024/25 was 7.8%. This marked a decrease of 1% from 2023/24.

Jenny Pope highlighted the improvement in Data Quality, with a significant decrease in the proportion of the workforce for whom no protected characteristics information was provided.

Staff Governance and Person Centred Committee approved the Workforce Monitoring Report 2024/25.

* 1. **Safe Working Environment**
     1. **Health and Safety Quarter One Report**

John Scott presented the Health and Safety Quarter One Report.

Linda Semple asked for further clarity around the “Violence and Aggression” figures and asked whether a deep dive needed to be considered. John Scott confirmed that a Short Life Working Group had been established to investigate this in more detail.

Jane Christie-Flight asked whether this feedback was being reflected in the Kindness Matters analysis. Laura Smith confirmed themes had been identified around the differing dynamics between the Medical workforce and the Corporate workforce.

Staff Governance and Person Centred Committeeapproved the Health and Safety Quarter One Report.

* + 1. **Strategic Risk Register**

Laura Smith presented the Strategic Risk Register.

There had been no changes to the Risk Register since the previous Committee meeting.

Staff Governance and Person Centred Committee approved the Strategic Risk Register

* + 1. **Health and Care Staffing Report Quarter One Update**

Anne Marie Cavanagh presented the Health and Care Staffing Report Quarter One Update.

The Report provided a high level summary on the progress the organisation had made in meeting the duties of the Health and Care (Staffing) (Scotland) legislation The Health and Care (Staffing) (Scotland) Act (2024). The Act applied to all clinical professional groups and put requirements on each Health Board. One of these requirements, the submission of annual reports that detailed compliance with the Act, was submitted to Scottish Government on 30 April 2025.

There were 13 clinical professional groups within the organisation that the legislation was applicable to. Returns on progress were received for all of the groups.

Staff Governance and Person Centred Committee noted the Health and Care Staffing Report Quarter One Update.

**4 Consent Agenda Items – For Awareness Only**

The Committee received the following Consent Agenda items:

**4.1.1 Whistleblowing Annual Report – including Quarter Four.**

**4.1.2 Appraisal Measurement**

**4.1.3 Once for Scotland Policies**

**4.1.4 Partnership Forum Approved Minutes – June 2025**

**4.1.5 Organisational Change Protection Data**

Staff Governance and Person Centred Committee noted the above papers.

**5 Update to the Board**

No issues of concern were identified.

| **Item** | **Details** | |
| --- | --- | --- |
| Consent Agenda - Approval | | The Committee approved the Workforce Monitoring Report 2023/24, Communications Strategic Plan 2025-30 and Job Evaluation Report. |
| Appropriately Trained | | The Committee approved the Medical Appraisal and Revalidation Annual Report and commended the improvement work on Appraisal figures |
| Treated Fairly and Consistently | | The Committee approved the Staff Governance Action Plan. |
| Well Informed | | The Committee received an update on Agenda for Change and noted the continued excellent progress of the Band 5 Review.  The Committee approved the People Highlight Annual Report.  The Committee approved the Corporate Objectives 2025/26. |
| Safe Working Environment | | The Committee approved the Health and Safety Q1 Report.  The Committee approved the Strategic Risk Register. |

**6 Any Other Competent Business**

No other competent business was raised.

**7 Date and Time of Next Meeting**

The next scheduled meeting of Staff Governance and Person-Centred Committee was noted as Thursday 6 November 2025.