

Approved at SGC on 08 August 2022

Chief Executive and Chairman's Office
Eglinton House
Ailsa Hospital
Ayr KA6 6AB

Staff Governance Committee
2 pm 3 May 2022
MS Teams

Present: Mrs Margaret Anderson, Non-Executive Board Member (Chair)
Mr Adrian Carragher, Non-Executive Board Member
Dr Sukhomoy Das, Non-Executive Board Member
Mr Ewing Hope, Non-Executive Board Member

Ex-officio Ms Claire Burden, Chief Executive Officer
Ms Sarah Bush, Staff Participation Lead
Ms Allina Das, Staff Participation Lead
Ms Frances Ewan, Staff Participation Lead
Mrs Sarah Leslie, Human Resources (HR) Director

In attendance: Mrs Ann Crumley, Assistant HR Director - Development
Mrs Lorna Kenmuir, Assistant HR Director - People Services
Mr Craig Lean, Workforce Modernisation Manager
Mrs Alison Potts, HR Advisor
Mrs Jennifer Wilson, Nurse Director
Ms Pauline Sharp, Committee Secretary (minutes)

- | | | Action |
|-----------|--|---------------|
| 1. | Apologies and Welcome | |
| 1.1 | Apologies for absence were noted from Mrs Bowie, Councillor Brennan–Whitefield, Mr Currie and Councillor Reid. | |
| 2. | Declaration of Interest | |
| 2.1 | The Committee was not advised of any declaration of interest. | |
| 3. | Draft Minutes of the Meeting held on 14 February 2022. | |
| 3.1 | The Committee approved the minutes of the meeting held on 14 February 2022. | |
| 4. | Matters Arising | |
| 4.1 | The Committee noted the Action Log for previous meetings with all matters complete, on the current agenda or future agendas for updates. | |

Governance

5. Committee Workplan

- 5.1. Mrs Leslie noted the range of topics for consideration by the SGC for the information and assurance of members. She asked all to contact either herself or Mrs Anderson with any additional themes they considered would be appropriate for the Committee to consider.

ALL

Outcome: The Committee noted and welcomed the update, detail and direction of the Forward Planner for 2022/23.

6. Directorate Assurance Report

- 6.1 Mrs Jenny Wilson provided a presentation (please see appendix attached) giving assurance on work being done within the Nurse Directorate. She emphasised they were heavily invested in bringing teams together following redeployment during the pandemic and were working on priorities for the next 12-18 months. She provided a breakdown on data including staff absence and the need for improvement around PDR, iMatter and MAST training.

A Directorate Staff Governance Action Plan had been developed and included the need for improvement around the skill mix and diversity of the workforce. She emphasised the pressures navigating the new normal, how to ensure continuity of service, meet corporate objectives and staff health and wellbeing. In light of the current climate and linking in with iMatter there was a need to ensure colleagues across the directorate were involved in decisions and felt they had a voice.

They valued staff participation but previously had found this to be very hierarchical, therefore, were keen to support all members and a plan to improve iMatter was included in Managers toolkit. As an example of engaging with the workforce they distribute a directorate newsletter. During September/October 2021 the Nurse Directorate had participated in the HSW Talking Toolkit in 2 areas, the Nurse Directorate Support Team and the Complaints Team, where sessions had been delivered via a coaching approach. This had proved to be a very positive experience and provided an opportunity to refocus and consider ways of working differently.

- 6.2 Members thanked Mrs Wilson for the excellent work done by her small directorate under unprecedented circumstances and considered it shone a light on good staff governance. The Directorate Newsletter was considered an example of good

practice which could be copied and consideration was given to how the talking toolkit could be used in addressing the wellbeing of all staff. Mrs Crumley advised she would ask Ms Aileen Boyd to be in touch with Mrs Wilson to follow this up.

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Mrs Wilson thanked all for their support and also thanked Ms Potts and Mrs Das who had been working collaborately with the directorate. Ms Potts advised she had spoken to Ms Boyd and Ms Boyd would attend a future SGC. Mr Hope welcomed the inclusion of the Partnership and wished to see this replicated as best practice in other areas of the organisation.

Outcome: The Committee noted and were assured by the work being done in relation to all themes within the People Plan.

7. Staff Governance Committee Annual Assurance Report and Self-Assessment

- 7.1 Mrs Leslie referred to the letter received from Catriona Hetherington, Head of Staff Governance, Scottish Government. This had included appreciation as good practice of the Daring To Succeed work, in particular the programme for leaders to support bite size learning, reflective practice handbook, psychological safe environment and Whistleblowing.

The importance of getting the SGC right was emphasised and to start mapping and developing the Workplan for 2023/24. Mrs Leslie listed a number of topics including:

- Work on culture of compassion.
- Use of VMA and taking PDP as an opportunity to focus on value of staff and their wellbeing.
- Employability strategy sign off by Corporate Management Team.
- Modern apprenticeships.
- Development of speak up staff networks.
- Build on success of ethnic group.

- 7.2 **Annual Report** – Mrs Leslie thanked Mrs Kenmuir for her assistance drafting the report setting out the key achievements of the SGC and providing assurance to the NHS Board the Committee were fulfilling their remit. There had been some fluidity in the membership with Mr John Burns departing, Professor Hazel Borland attending as Interim CEO and now the attendance of Ms Clair Burden as new Chief Executive since the February 2022 SGC Committee. She thanked Mr John Rainey for his chairmanship and also Mrs Margaret Anderson for chairing the Committee after Mr Rainey standing down.

Due to the COVID focus Governance Committees had been encouraged to have lighter agendas, therefore, Director Assurance Reports had not been sought but these were included in the Forward Planner. The SGC priorities for 2022/23 included back to basic work particularly attendance management, Mandatory and Statutory Training, Personal Development Review and workforce planning and registrant supply.

Outcome: The Committee approved the Annual Report and self-assessment for submission to the NHS Board.

8. Staff Governance Monitoring

- 8.1 The letter detailed the impact of the pandemic and ongoing service pressures on NHS Boards with the Scottish Government, therefore, taking a different approach, with NHS Ayrshire & Arran required to take no further action for 2021/22.

Outcome: The Committee noted the letter from the Scottish Government and that no further action was required for the 2021/22 submission.

9. People Plan 2021/22

- 9.1 Mrs Leslie emphasised the impact of the pandemic and the current situation on the ability of NHS Ayrshire & Arran to progress some of the aspects of work. The Central Employment Services (CES) had doubled recruitment compared to pre-pandemic without consequential changes in delivery of resource which would be challenging and unsustainable in the long term. With the employment climate being different from pre-pandemic, also a priority for 2022/23 relating to “attract” would be to optimise other ways of marketing including Facebook and virtual Job Fairs.

Other actions include:

- Focusing on improving digital skills of staff and Managers competence in using Job Train.
- Maximising workforce supply which was a registered risk for NHS Board and working with the Employability Team eg Kickstart, restarting apprenticeships in hard to fill posts.
- The Workforce and Planning Group continue to meet and had been looking at International Recruitment for clearly defined shortages and alternative roles supporting Clinicians based on good practice within NHS Grampian.
- Working with the West of Scotland Recruitment Plan.

Moving forward focus was also being given to the strategic mission of Caring for Ayrshire with a look at modelling support services. This was challenging due to increasing and ever changing demands and the time bomb of lack of consultants. Scottish Government had provided funds which would support the Workforce Planning Team in their planning of new reformed services and recruitment needs. There was a need to look at the future and modernise services in a competitive market. Mrs Leslie thanked her team personally for their significant efforts over the past 2 years with unprecedented demands. Mrs Crumley added the importance of there being a solid national approach and the ability of NHS Ayrshire & Arran to feed into any national discussions.

Outcome: The Committee welcomed and noted the report on actions against the “Attract” programme of work.

10. Area Partnership Forum (APF) update

10.1 Mr Hope provided the following highlights from the APF meeting held on 7 March 2022:

- Public Holiday – Following lengthy discussions with varying outcomes between Mr Hope and SGC the 3 June 2022 public holiday would remain.
- SSTS calculator – the APF were focused on resolving issues experienced to ensure all staff were paid appropriately over the course of the year.
- Job Evaluation – Now that the Staff Hub had closed this would free up Human Resources staff to concentrate on job evaluations and help clear backlog. A new Job Evaluation Policy was to be presented to the APF for ratification at the next meeting.
- Health and Safety – the APF had an update.
- APF were going to hold a development day with Ms Burden, Mrs Leslie and Mr Hope discussing ideas.

Outcome: The Committee noted the update from the APF and the reassurance that NHS Ayrshire & Arran were progressively supporting staff during remobilisation.

11. Strategic Risk Register

11.1 Mrs Leslie provided an overview on the risk detailed in the paper “Competent Health and Safety Service Provision” and the back to

basics program approach to ensure there was a focus on necessities. To fulfil this and ensure NHS Ayrshire & Arran were meeting their legal duties there would be an increase in staffing including a Band 7. Other risks highlighted with action plans in place were under Patient Experience Outcome Registrant Workforce supply and capacity and under Staffing and Competence "Personal Development Review Process". The range of risks detailed were absolutely essential to the safety of the NHS Board and in supporting people to fulfil their roles. Mrs Leslie wished to thank Mr Currie and Ms Gargan for producing the paper.

Outcome: The Committee were assured with the work being done to manage the strategic risks under the governance of the SGC

Key Updates

12. Whistleblowing

- 12.1 Mrs Wilson noted that NHS Ayrshire & Arran were now a year into reporting on the Whistleblowing Standard and considered there was still learning to be done. One area where work was being done was regarding anonymous complaints and a paper on this would be submitted to the SGC at a future meeting. No whistleblowing concerns had been reported for this quarter which was to be welcomed but raised a concern that the organisation might not be engaging as best they could. Work was continuing to ensure the Whistleblowing message remained strong within the organisation. There had been a real interest and engagement from Managers including accessing training. At the request of some Mrs Karen Callaghan, Corporate Governance & Whistleblowing Co-Ordinator was undertaking some bespoke training. The number of investigations closed had been 5 in total with 3 Improvement Plans in progress and 1 Learning Plan.

Dr Das sought assurance on how as an organisation NHS Ayrshire & Arran could get a feel that the Whistleblowing message was actually reaching people and that people felt confident to speak-up. Mrs Leslie acknowledged there had never been such a time to ensure people felt listened to and treated with compassion and that this linked well into work being done on the organisation's culture. Mrs Crumley noted the 7 step psychological safety measure that could be adapted into a pulse survey that could build on the work being done under culture. Mrs Wilson considered there were 2 perspectives to getting the organisations temperature, 1) the Whistleblowing Standards themselves and how well these messages were being disseminated and advised she would take this to the next Whistleblowing Meeting and then 2) how to assess the culture of

NHS Ayrshire & Arran as an organisation. Dr Das thanked Mrs Wilson and Mrs Leslie for the perspective and noted there was still work to do to understand pulse.

Outcome: The Committee noted the current performance for whistleblowing concerns received and supported NHS Ayrshire & Arran's process going forward.

13. Promoting attendance and Workforce Capacity Impact

- 13.1 Mr Lean acknowledged the pandemic continued to exert a significant pressure on workforce capacity. Non COVID sickness absence rates had reduced but in March there had been an increase in absence (30% of workforce unavailable) with COVID positive cases, Special Leave and Annual Leave requests. On page 3 the table detailed sickness absence according to each directorate with separate COVID absence rates. Anxiety and depression remained the main reasons within general absences, then musculoskeletal and provided a focus when moving into the normalising phase. Staff, along with the general population were experiencing delays for procedures or interventions which was also playing into the figures. They were acutely aware that changes in population level will have an impact on absences and, therefore, will continue producing reports with more granularity. Mr Lean acknowledged sickness levels were down from pre-pandemic and better than other Scottish NHS Boards.
- 13.2 Mr Lean also acknowledged that the pandemic had a significant impact on large numbers of staff accumulating carried over leave from multiple leave years. The importance of staff utilising their annual leave in order to rest and recuperate was fundamental, however, due to prevailing service pressures Mr Lean had worked with Mr Hope to develop a process for staff to avail themselves of buyback. The paper provided data on the use of annual leave across the organisation comparing the last 3 years, staff groupings and grades. A short-life working group had been established to look at back to basics Annual Leave utilisation. Note had been taken of the vast array of ways of recording Annual Leave, inconsistencies between Public Holidays and Annual Leave and also financial inconsistencies when recording on SSTs. The short-life working group has been tasked with producing a piece of work providing guidance to managers on how to encourage staff to take their Annual Leave appropriately.
- 13.3 The Committee thanked Mr Lean, considered the report provided an excellent overview of the Annual Leave and sickness levels and acknowledged the stress experienced by staff over the past couple of years. Mr Hope highlighted the stress the “cost of living crisis” was having and will have on staff and their wellbeing. He

noted that prior to the pandemic “mental health workplace” had been introduced for Managers and queried what mechanism was being considered to be put in place moving forward. Mrs Kenmuir assured Mr Hope and the Committee that they were focussed and working on this. With the Staff Hub having closed she would discuss with Mrs Liz Bacon, who works with OH colleagues on long term sicknesses and possibly set up a sub group looking at the “Anxiety” category. Mr Hope advised he would be happy to be involved. Mrs Leslie also noted work currently being done and thanked Mr Lean for his report which allowed HR to shine a light into what could be done better including supporting staff’s mental health. The role of Managers and the responsibility they had to ensure the wellbeing of their staff was highlighted. Members also queried the figure of 7.64% of “not otherwise classified” cases and why the reasons had not been picked. Mr Lean advised he would remind all to pick a specific classification and that possibly this had been due to the Staff Hub not having full information.

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Outcome: The Committee noted the update on the Attendance Position and Impact on Workforce Capacity.

14. Internal Audit Reports

14.1 IT Controls – User Access.

Mrs Leslie highlighted the main outcomes and ratings from the Grant Thornton Internal Audit Report 2021/22. This focused on the controls in place between HR and IT to ensure staff had access to the right data and systems particularly starters, leavers and those on long term sick.

Outcome: the Committee welcomed the update on the progress against the actions relating to IT controls – user access.

15. PDR/Value Management Approach (VMA)

- 15.1 Mrs Crumley provided an update on the current position with the core responsibility, included in the People Strategy, that all staff require to have an annual PDR. The primary purpose of PDR conversations was to build a psychologically safe space in which to reflect on how an individual was working and build on their strengths. Although emphasis on quality of conversation rather than the process had been encouraged in October 2021 unfortunately over 2021/22 service pressures relating to the pandemic had impacted on the PDR process. The current position for PDR was in March 2022 26% (down from 31% in March 2021) and falling further in April 2022. In order to get the process back on track Mrs Crumley detailed the

recommendations to relaunch monthly compliance reporting to CMT and Directors from 1 May 2022, together with local Directorate/HSCP updates and RAG reports. Also Directorates and HSCPs to review PDRs via local senior management team meetings and agree actions to ensure improved compliance. It was intended to also promote PDR champions and run 90 minute PDR compliance sessions targeting managers making clear what expectations were and what support was available for managers to do this.

- 15.2 Members welcomed the proposals to improve the PDR process and acknowledged the relaunch would be an ideal opportunity to refocus on the importance of undertaking PDRs annually. The slide had been understandable due to a concentration over the pandemic period on service provision but PDRs should be fundamental and part of NHS Ayrshire & Arran's culture. Note was also made that members were aware that good conversations were being held but not recorded on TURAS. The SGC also acknowledged that currently staff were in some ways busier than during the pandemic period and to improve PDRs would require much support.

Outcome: The Committee noted the current position and welcomed the proposed corporate actions to be delivered during 2022/23.

Items for Information

16. iMatter

- 16.1 Mrs Crumley provided a brief overview of the analysis included within the paper for 2021 which included:
- Overall response rate in 2021 was 53% with the national response rate being 56%.
 - A lot of areas had struggled during the pandemic capturing action plans with there being a 15% decrease from 2019.
 - A newsletter was issued in March 2022 capturing how NHS Ayrshire & Arran had performed and giving key messages timescales and requirements for 2022.
 - The top 3 scores for 2021 were 1) 84% of staff stated their line manager cared about their health and wellbeing, 2) 82% of staff stated they are treated with respect and dignity and 3) 71% of staff stated the organisation cares about their health and wellbeing.
 - The lowest scores proved to be the same across Scotland and were 1) 56% felt board members were sufficiently visible, 2) 56% felt involved in decisions regarding the organisation and 3) 62% stated that they had confidence in board members.

- During 2022 there would be 3 iMatter runs with timescales detailed in the paper.
- Key areas – 1) promoting the survey and encouraging an increase in the number of staff completing survey during 2022, 2) encouraging the use of SMS in place of paper based responses, 3) monitoring and supporting managers to complete action plans and update storyboard and 4) capturing good news stories.
- Deadline for action plans was reduced from 12 to 8 weeks in 2021 and this will continue for 2022.
- Report provides the ability to compare how NHS Ayrshire & Arran scores against other NHS Boards in Scotland and their own responses by year since 2017.

Outcome: The Committee noted the 2021 Outcomes and analysis.

17. Employee Relations Reports

- 17.1 **Q4 2021/2022** – Mrs Leslie informed the Committee the paper detailed the number of cases broken-down by categorisation for the end of Quarter 4 alone. The 2021/22 reports had been improved allowing analysis of individual themes, this would allow directorates to identify if there was a case to answer and map out actions required. It was important to keep a person centred approach with some cases delayed due to criminal issues and capacity of managers. Particular focus was also being given to any issues relating to patient safety.
- 17.2 **2021/2022 Annual Report** – Mrs Leslie briefly highlighted the Employee Relations Report for Year End 2021/22 with detail on overall ER activity (conduct, grievance, bullying and harassment), analysis by Directorate and outcomes. Referring to a bullying and harassment case which was upheld Dr Das asked for assurance and, therefore, knowledge on what actions are taken in such a case and how this played into the culture of the Department and personnel involved. Mrs Leslie replied at the heart of culture within NHS Ayrshire & Arran was that it was a learning and improving organisation. Reports are sent back to the service involved and support offered to implement change including debriefs. Acknowledgement was made that there was room for improvement and now the Staff Hub had closed they would be able to concentrate more time and focus on learning and action plans.

Outcome: The Committee considered and noted the Employee Relations position in the Quarter 4 Report plus the Annual Report for 2021/2022.

Governance Arrangements/Reporting to NHS Board

18. Risk issues to be reported to the Risk and Resilience Scrutiny and Assurance Group (RRSAG)

- 18.1 The Committee agreed there were no risks requiring to be reported to the RRSAG.

Outcome: The Committee noted there were no risks they wished to be reported to the RRSAG.

19. Key issues to report to the NHS Board

- 19.1 The Committee agreed to highlight the following key issues from the current discussions, using the template provided, at the next NHS Board on 23 May 2022:

1. Workforce capacity and assurance report on NHS Ayrshire & Arran plans to move forward.
2. PDR - NHS Ayrshire & Arran's current baseline position, commitment and proposed work with CMT, APF and directorates to ensure there was positive improvement.
3. iMatter summary and where NHS Ayrshire & Arran stand in relation to the national position.

Outcome: The Committee agreed the key issues to be reported to the next NHS Board summarising the SGC discussions.

20. Any Other Competent Business

- 20.1 There was no further business.

21. Date of Next Meeting

Monday 8 August 2022 at 2.00 pm, MS Teams

Chair Date