

# NHS 24 STAFF GOVERNANCE COMMITTEE

28 JULY 2022 ITEM NO. 1.3

Approved Minutes of the Staff Governance Committee Meeting held on 12 May 2022 at 10:00am via Microsoft Teams

#### **REGULAR BUSINESS**

## 1.1 Attendance and Apologies

#### **Committee Members**

Mr Alan Webb Non-Executive (Committee Chair)

Ms Carol Gillie Non-Executive Director

#### In Attendance

Dr Martin Cheyne Chair

Mr Jim Miller Chief Executive

Ms Jacqui Hepburn Director of Workforce
Ms Suzy Aspley Head of Communications
Ms Maria Docherty Director of Nursing U& Care

Mr John Gebbie Director of Finance

Mr Martin MacGregor Partnership Forum Nominated Representative

Ms Helen Meldrum Head of OD, Leadership & Learning

Ms Kerry O'Neill Workforce Information & Development Manager Mr Graham Revie Partnership Forum Nominated Representative

Mr Kevin McMahon Head of Risk & Resilience

Mr Davie Morrison Participation & Equalities Manager

Mrs Chantal Robinson EPA (minutes)

# **Apologies**

Ms Liz Mallinson Non-Executive Director

Mr Kenny Woods Employee Director (Committee Vice-Chair)

Mr Webb welcomed Committee Members and Attendees, he extended thanks to the teams within the Workforce Directorate that had contributed to the papers contained within today's agenda. Mr Webb acknowledged all NHS 24 Nurses for their hard work and dedication, in particularly today, International Nurses Day.

### 1.2 Declaration of Interests

There were no declarations of interest.

# 1.3 Minutes of the Previous Meeting of 3 February 2022

The minutes of the meeting held on 3 February 2022 were approved as an accurate record of discussions.

# 1.4 Matters Arising

The Committee considered actions arising from the minutes of the previous meeting and noted the updates provided against each item.

Accordingly, actions **331, 332, 333 and 334** were considered complete and approved for removal from the Action Log.

#### **BUSINESS ITEMS**

# 2.1 Quarterly Report

Ms O'Neill presented the first iteration of the revised Quarterly Workforce Report. The report would be presented in a concise format with key workforce performance measures reported within the three pillars of the Workforce People Action Plan, and the aim is to highlight key pieces of work or trends to the Committee and provide assurance that areas where improvement is being sought is being actioned. The Committee had been invited to provide any feedback to be considered for future versions.

Ms O'Neill advised that a considerable amount of work had been undertaken during Quarter 4 of 2021/22 by both Workforce and Finance colleagues to improve the quality and consistency of reporting of the Establishment and vacancies. This work had been critical for the implementation of the new Establishment Control Process to ensure that there is an effective and economic workforce structure.

The new process would ensure that an evaluation of any proposed changes that affect the establishment would be undertaken and considered in a wider organisational context before being approved. The Establishment Control Group would provide oversight and scrutiny of vacancy management and changes to the establishment on behalf of the Executive Management Team.

Ms O'Neill brought to the Committee's attention highlights from Quarter 1 including the current vacancy factor had increased marginally with the largest vacancy factor within the Mental Health Hub, recruitment is ongoing within Mental Health and offers are actively being made to PWP's and Mental Health Nurse Practitioners. Turnover remained high within March alone the number of leavers had been greater than that of starters. Work is underway across Workforce, CRT, and the Heads of Clinical Service to take forward the Attrition Action Plan with a deeper analysis of attrition underway to be presented to the ETM.

As part of the Management Essentials Programme key performance indicators had been established and built in which would drive performance in appraisal and mandatory training as they are part of the sign off process. The ER team are working with the Wellbeing Team Managers to look at short term sickness absence and the level of sickness absence amongst new starts. The auditors have completed the Attendance Management audit and the actions identified are now being progressed.

During Quarter 4, the organisation saw a further increase in COVID absence, however as it remains to be reported as Special Leave, we are limited by what we can do around this.

The Committee requested that a definition of what skill sets sit within each staff groups be included going forward.

Action: KO

# 2.2 Ways of Working & Planning

## **Establishment Control Group Update**

Ms Westwood provided an update to the Committee advising that the aim for NHS 24 would be to put in place the right skills and roles to enable the organisation to enhance services offered and to ensure there is the right blend of clinical and support staff to deliver safe, effective, and efficient services. Compliance with the Establishment Control Procedure provides a basis to demonstrate the achievement of this requirement. Ms Westwood highlighted that a monthly meeting took place with each Director, to ensure a transparent process.

The Committee agreed that a meeting be scheduled between Workforce and staff side colleagues to clarify any implications.

**Action: MW/KW** 

### **Recruitment Marketing**

Ms Westwood presented the paper to the Committee and advised that within the RMP4, one of NHS 24's deliverables is to: Recruit resource required to meet the continuing demand. Exploring the use of both internal and external Nursing Banks, outsourcing and other feeder programmes. Ms Westwood outlined the work currently underway to fulfil the requirement. A proposal had been presented to the EMT in relation to current underspend. A Recruitment Company, TMP had been engaged to develop NHS 24's employer brand and promote NHS 24 within the labour market. They will also build a microsite to host our key skillsets, it is aimed that the site be live for 12 months and would be live by end of June 2022.

The Committee noted the paper.

# **Health & Safety Quarterly Report**

Ms Westwood presented the Health & Safety Quarterly Report and provided an update for the Committee. The Committee requested that the minutes of Health & Safety meetings be added to future papers and a review of the Terms of Reference first paragraph be taken to ensure clear understanding.

**Action: MW** 

# **Organisation and Culture**

#### iMatter National and Board Results 2021

Ms Meldrum presented the comparison of findings shown within the <u>Health and Social</u> <u>Care Staff Experience Report 2021</u> and iMatter NHS 24 Board report. She advised that all directorates had completed and returned their Action plans.

The Committee noted the National and Board Results for 2021 and approved the proposed recommendations.

# **Mandatory Training Improvement Plan**

Ms Meldrum presented the Improvement Plan and asked the Committee to approve:

- Creation of a short life working group including key stakeholders to review Mandatory Training and establish if all Training categorised as 'Mandatory' is indeed Mandatory, in line with the Annual Review Process.
- Move from 12 month rolling reporting period to a 24-month static Mandatory Training reporting period, commencing 1<sup>st</sup> May 2022
- The Mandatory Training Improvement Action Plan

The Committee discussed the review of mandatory training and the introduction of the Corporate Induction Programme, the Committee approved the Mandatory Training Improvement Plan.

#### **Training Prospectus and Leadership Development Framework**

Ms Meldrum presented the paper and advised that implementation would take place on 1 August 2022, the Committee approved:

- The NHS 24 Training Prospectus
- The Leadership Development Framework
- Formal Organisational Implementation in August 2022

# 2.3 People Services

# **Attendance Management Improvement Plan**

Mrs Docherty provided an overview of the 2021/22 plan and advised that a new plan had been developed for 2022/23, highlighting the following:

- The role of the Wellbeing Team Managers in supporting line managers manage attendance at work.
- A new plan of support and training for all line managers.
- A recent audit of Attendance Management undertaken by Grant Thornton.
- Feedback from the Trade Unions on attendance management.
- Implementation of the Reasonable Workplace Adjustment Policy.
- Links to Health and Wellbeing Action Plan

• A focus on Mental Health absence and support to our staff.

The Committee noted the updated Improvement Plan.

# **Corporate Health & Wellbeing Plan**

Mrs Docherty provided an overview of the updated plan, providing highlights:

• the focus will be to engage with staff on a more regular basis and in different ways, (e.g., digital notice boards). This will help understanding of the wellbeing support that would be most beneficial so that this can built into our offering. It will include wellbeing questions in a future cultural survey to understand, in more detail, what sort of wellbeing support employees would find beneficial. Our action plan will be updated once the results of the survey are available.

The Committee approved the updated Corporate Health & Wellbeing Plan.

## Reasonable and Workplace Adjustment Policy Update

The Scottish Government fund a partnership between NHS Scotland and the Business Disability Forum (BDF). This partnership is intended to support Health Boards to improve the experience of their staff who are disabled.

In 2020, the Scottish Government and the BDF invited NHS 24 to support the development of a Reasonable Adjustment Policy, with a view to this being the beginning of the development of a Once for Scotland policy approach to reasonable adjustments. Due to the COVID-19 pandemic, this work was delayed until 2021.

Mrs Docherty advised that the policy was scheduled to be introduced in July 2022, with two training sessions planned to be delivered by the BDF to managers. Training sessions will be recorded for any managers unable to attend.

Thereafter, information about the policy would be included as part of the Management Essentials Programme.

# 2.4 Stakeholder Engagement

Mr Morrison provided an overview in relation to the current position on some of the steps being taken within NHS 24 to meet equality legislation.

- It recommends a series of activities intended to strengthen the delivery of equality led initiatives across directorates
- It provides an overview of equality considerations from a national perspective, and
- Provides a view on the Scottish Government's intention to revise the Public Sector Equality Duty

The Committee noted the updated.

## 2.5 EMT Portfolio Review

Ms Hepburn presented the paper to the Committee, highlighting the proposal to review the Executive Team's portfolios utilising an external consultant/company to allow an independent assessment of portfolios. This will also enable effective consultation and engagement and allow for external benchmarking against other organisations both in the health and care sector but also with other sectors. An update will be provided at the next Committee meeting.

Action: JH

# 2.6 Staff Governance Risk Register

The Committee discussed the risks contained within the report and requested that an update on the actions contained within the report be provided at the July meeting.

**Action: KMcM** 

## 2.7 Communications Delivery plan 2022

Ms Aspley presented the Delivery Plan and advised that it had been refreshed in light of the forthcoming directorate portfolio review and the development of corporate objectives for 2022/23, the plan would also be aligned with these core pieces of work during the year.

The Committee thanked Ms Aspley and asked her to pass on congratulations to the Communications Team given their achievements during the past year. The Committee also asked Ms Aspley and her team to provide an update in relation to the ongoing staff engagement activities.

Action: SA

# 3.1 Area Partnership Forum Update

Mr MacGregor provided an overview and advised that the APF had formally met on 17 February, 17 March, and 21 April 2022.

The Committee noted the update provided and asked to be kept informed of developments within the APF Workplan.

# 3.2 Committee Schedule & Workplan

The Committee approved the Staff Governance Committee Workplan

# 3.3 Annual Report to the Board

The Committee approved the Annual Report to the Board.

## 3.4 Any Other Business

There being no further business, the meeting was closed.

## 3.5 Date of Next Meeting

It was noted that the next meeting of the Staff Governance Committee would be held on 28 July 2022 at 10:00am.

#### **ACTIONS**

## **Quarterly Report**

The Committee requested that a definition of what skill sets sit within each staff groups be included going forward.

Action: KO

# **Establishment Control Group Update**

The Committee agreed that a meeting be scheduled between Workforce and staff side colleagues to clarify implications.

Action: MW/KW

# **Health & Safety Report**

The Committee requested that the minutes of Health & Safety meetings be added to future papers and a review of the Terms of Reference first paragraph be taken to ensure clear understanding.

**Action: MW** 

### **EMT Portfolio Review**

An update will be provided at the next Committee meeting.

Action: JH

#### Staff Governance Risk Register

The Committee discussed the risks contained within the report and requested that an update on the actions contained within the report be provided at the July meeting.

**Action: KMcM** 

#### **Communications Delivery Plan 2022**

The Committee also asked Ms Aspley and her team to provide an update in relation to the ongoing staff engagement activities.

**Action: SA**