

## **Orkney NHS Board**

Minute of meeting of the **Staff Governance Committee of Orkney NHS Board** held in the **Saltire Room, Balfour Hospital, Kirkwall** on **Wednesday 28 August 2019** at **10.30 am**.

**Present:** David Drever, Non Executive Board Member  
Caroline Evans, Chair  
Fiona MacKellar, Vice Chair  
David McArthur, Director of Nursing, Midwifery and Allied Health Professionals  
Gerry O'Brien, Chief Executive  
Kate Smith, Partnership Representative

**In Attendance:** Ashley Catto, HR Manager  
Julie Colquhoun, Head of Corporate Services  
Lauren Johnstone, Committee Support (Minute taker)

### **376 Apologies**

Apologies were received from I Grieve, C Werb and N Firth.

### **377 Declaration of Interests – Agenda Items**

There were no declarations of interest in relation to agenda items.

### **378 Minute of meeting held on 29 May 2019**

The minute of the Staff Governance Committee meeting held on 29 May 2019 was accepted as an accurate record and approved.

### **379 Matters Arising**

#### 780 Health and Social Care Staff Experience Report 2018

The Vice Chair queried if Orkney Health and Care staff had partaken in this year's iMatter survey. It was confirmed that two integrated teams had, and a commitment had been made to ensure all teams were given the opportunity to complete next year.

### **380 Action Log**

The Action Log was reviewed and corrective action agreed on outstanding issues (see Action Log for details).

### **381 Chairman's Report from the Board**

The Chair highlighted the points from the Board meeting on the 26 June 2019

- Sturrock review and update given to members
- Strengthening the Staff Governance Committee
- New position of Non-Executive Whistle blowing Champion

The Chair highlighted the points from the Board meeting on 22 August 2019

- Board iMatter report
- Update on Clinical Strategy – very good update and hard work imputed so far
- Risk Management and the position on managing these.

The Vice Chair noted that the iMatter directorate reports looked significantly different from the overall Board report, which she was keen to explore in greater depth. Members agreed but were cautious that the information submitted remained anonymous.

It was confirmed that since the implementation of iMatter five years ago, some teams had never reached a 60% response rate and therefore had not had a report produced.

K Smith queried who was responsible for wider organisation issues. The Head of Corporate Services advised that feedback should be submitted to the iMatter email address which would be responded to by a senior manager.

### **Decision / Conclusion**

The Committee noted the Chairs reported highlights from the Board meetings.

### **Governance**

#### **382 Workforce Report**

The HR Manager delivered the Workforce Report to members. She advised that a new dashboard style report had been produced with thanks given to L Berston.

The first page covered the highlights which included;

- Good news stories
- Reduced sickness absence
- Increase in spend
- Vacancies and how many of these had been successfully recruited to
- Increase of overall headcount (19)

Members were asked for feedback and comments on the report.

The Chief Executive commented that it would be useful to know the timescales behind the post becoming vacant, advertised and the recruited to. The HR Manager advised that a report could be published from vacancy authorisation forms. K Smith added that it would be interesting to know the timescales behind notice received and advertisement of that post.

Members noted the increase in headcount within the organisation.

Members feedback that the layout of the report was easy to follow giving the option of highlights or further in-depth details. The report was found to be very informative and members commended L Berston for his work in producing it.

It was commented that the following could be improved upon;

- Increase in font size of headings

- Larger text boxes
- Absence percentage was also shown in WTE

The Vice Chair commented that the report should include the impact of maternity leave on teams. The HR Manager advised that this had been considered, however due to the small number of some teams, there was the potential for a breach in confidentiality.

It was agreed that in future this report would be fully discussed within SMT before attended in the Staff Governance Committee.

### **Decision / Conclusion**

Members noted the report.

## **383 Annual audit of compliance with locum appointment arrangements**

The HR Manager delivered the annual report, noting her thanks to D Lewsley for her contribution in preparing the paper.

Members were informed that this audit was completed annually when a 20 percent cross check was completed against all appointed locums to ensure that pre employment checked had been completed. The HR Manager took assurance from the 20 percent selected that these checks were being met.

The Chief Executive queried as to how the 20 percent of locums were selected. The HR Manager agreed to investigate further and feedback to the Committee.

Members suggested that reporting of the completed statutory and mandatory training could be incorporated within next year's report. The Head of Corporate Services advised that training was monitored throughout the year, however agency locums were required to complete training through the agency rather than NHS Orkney.

The Chief Executive noted his desire for this report to cover all registrants.

### **Decision / Conclusion**

Members were assured that all checks were being completed and noted the report.

*Post meeting note: The HR Manager confirmed that an online generator called random.org was used to randomly select the 13 files from the 67 agency locums.*

## **384 Partnership Forum Chair's Report**

The Vice Chair delivered the report for information.

### **Decision / Conclusion**

The Committee reviewed the report from the co-chair of the Area Partnership Forum and took assurance that matters of importance were being progressed.

## **385 Minutes of the Partnership Forum meetings held on 21 May 2019 and 16 July 2019**

The Committee noted the minutes of the Area Partnership Forum meetings.

### 386 **Annual Report on Workforce Equality Measures**

The HR Manager delivered the annual report on Workforce Equality Measures on behalf of N Firth, Equality and Diversity Manager.

Members were informed that it was requirement for the Board to produce and publish the report and that feedback received from N Firth gave no cause for concern within the report.

D Drever queried the statement “the 2011 Census showed that only 0.8% of the population of Orkney came from an ethnic community other than White Scottish.” A Catto agreed to look into this further.

The Head of Corporate Services highlighted that the feedback address required changing to reflect the move to the new premises.

#### **Decision / Conclusion**

Members noted the report

*Post meeting note: N Firth, Equality and Diversity Manager clarified that the error identified by D Drever had since been rectified and advised that;*

- 1. At the Census, the population of the Orkney Islands was shown as 21,349*
- 2. Of these 21,349 people, 21,193 or 99.269% were in the “White” category*
- 3. People in the “White Scottish” category numbered 16,960 or 79.44%*

### **Report on status of PINs and progress against Human Resources policy timetable**

The Human Resources Manager delivered the report to members providing assurance on performance with regards to progress.

The Key points highlighted to members included:

- Cohort one due to be reviewed at the SWAG Committee on 23 October
- Approved policies will follow a implementation process which will be taken forward in Partnership
- Appendix A provided an update on each policy within each cohort. All policies within cohort one had been formally reviewed.

The Head of Corporate Services along with the HR Manager had taken part in a teleconference around the implementation of an electronic web based system. Feedback received from both was positive, bearing in mind that it was still a working progress. It was hoped that a link from the blog would be available for staff to access this service going forward.

#### **Decision / Conclusion**

Members noted the report.

### 387 **Board iMatter Report**

The annual iMatter Board Report was presented by the Head of Corporate Services.

The points highlighted to members were;

- There had been a significant drop in response rate. It was thought this could have been partially down to timing and the move to the new facility.
- Maintained engagement level
- It was hoped that NHS Orkney could maintain the highest percentage of completed action plans for a third year running.
- Table two identified the areas which required the most improvement. It was noted this had not changed over the last three years.

Members requested that the next report was displayed by directorate using the green, red and amber coding. It was agreed that this would better understanding, and directorates would remain anonymous.

### **Decision / Conclusion**

Members noted the report.

### **Policies and Procedures**

#### **388 Implementation of Ionising Radiation**

The Head of Corporate Services advised members that specialist advice from Grampian had been taken before this policy had entered the approval process. The Chief Executive suggested that 'this policy complies with current legislation' was stated on the document.

### **Decision / Conclusion**

The Committee approved the policy.

#### **389 Business Continuity Management**

The Chief Executive stated that the policy had been significantly updated, taking into account the move to the new Hospital and Healthcare Facility. He added that ongoing discussions with auditors were being held in relation to testing the plans. It had been suggested that desktop exercises and on spec situations were presented to teams allowing staff to train in a non-emergency scenario.

### **Decision / Conclusion**

The Committee approved the policy

#### **390 Risks**

No items this meeting.

### **Governance**

#### **391 Sturrock Report**

It was agreed further discussions were held within the Staff Governance Standards.

## **Decision/Conclusion**

Members noted the Board response to the Cabinet Secretary.

### **392 Staff Governance Standards**

A discussion was held around the future reporting of Staff Governance Standards. The aim of the discussion was to reach agreement on how best the Committee could be provided with the necessary assurance that the Staff Governance Standards were well embedded within the organisation.

Key themes highlighted within the workshop were;

- Gather evidence and feedback received within the iMatter report and Sturrock work to bring assurance
- Use clinical engagement to support dignity at work which would then feed into the workforce report
- Agreement that assurance was not given through figures
- Suggestion that staff members were invited to Committees to speak about individual experiences relating to the standard focus for that meeting (good and bad)
- Evaluate paper/report necessity when submitting to Committees
- Encourage two way conversation
- Re-introduction of patient and staff story boards
- Ensure staff are not promoted beyond their capabilities
- Emphasis on the human factors, kindness, empathy, compassion
- Increase non committee member attendance at committee meetings
- Giving staff the space and ability to make changes within teams
- Bottom up approach

The HR Manager advised that the paper presented today was produced to bring back to the forefront what the standards were. Members were reminded that these standards were the responsibility of both staff and managers to implement. Members were in agreement that sharing of successes would give assurance of many of the standards; an example given was the recent enrolment of six nurses to complete their degrees.

Members were in agreement that this was a continuous process which would be led by success. It was suggested that the four items highlighted for improvement within the iMatter report were reviewed and worked on as a starting point.

## **Decision/Conclusion**

The Chief Executive, The HR Manager, The Director of Nursing, Midwifery and Allied Health Professionals and the Head of Corporate Services agreed to meet again to discuss further.

### **393 Issues Raised from Governance Committees**

There had been no reports from the Chairs of the Governance Committees regarding cross committee assurance.

### **394 Agree any issues to be raised to Board/ Governance Committees**

The Committee agreed that the following items should be reported to the:

**Board**

- Staff Governance Standards – review of assurance reporting

**395 Any Other Competent Business**

**Staff Conference**

The Head of Corporate Services reminded members of the annual Staff Conference was due to be held on the 31<sup>st</sup> October and 1<sup>st</sup> November. It was hoped that conversations held today would be developed and contribute well to the dignity at work theme. The Chair advised of her availability to help facilitate if required.

**Our Health Heroes**

The Head of Corporate Services informed members that a staff member had been successful in winning the Scottish regional award and was through to the national final. More information would be available once the staff member had been informed.

**396 Schedule of meetings**

The schedule of meetings for 2019/20 was noted.

**397 Record of Attendance**

The record of attendance was noted.

**398 Committee Evaluation**

Members concluded that it was a well timed meeting with good discussion around Sturrock.

Meeting closed at 12:34