NHS Orkney

Orkney NHS Board

Minute of meeting of the **Staff Governance Committee of Orkney NHS Board** held **via MS Teams** on **Wednesday, 8 June** at **10:30am**

Present:	Joanna Kenny, Non-Executive Board Member and Chair
	Martha Gill, Vice Chair
	Michael Dickson, Interim Chief Executive
	Lorraine Hall, Interim Director of Human Resources
	Kate Smith, Partnership Representative
	Jason Taylor, Non-Executive Board Member

In Attendance:	Matt Macleod, Health and Safety Manager
	Steven Phillips, Human Resources Manager
	Ingrid Smith, Human Resource's Manager
	Heidi Walls, Committee Support

Observing:	Des Creasey, Non-Executive Board Member (observing)

S1	**Apologies**
	Apologies for the meeting were noted from Mary Moore, Emma West and Ryan McLaughlin
S2	**Declaration of Interests – Agenda Items**
	There were no declarations of interest in relation to agenda items
S3	**Minute of meeting held on 24 November 2021**
	The minute of the Staff Governance Committee meeting held on 24 November 2021 was accepted as an accurate record and approved, subject to the following:
	Item S61, page 3, end of first paragraph amended to read *"Trauma Risk Management (TRiM) practitioners*
	Item S67, page 5, last paragraph amended to read *"J Taylor advised that an update in response to a specific enquiry would be submitted…"*
S4	**4 Matters Arising**
	There were no matters arising
S5	**5 Action Log**
	The Action Log was reviewed, and corrective action agreed on outstanding issues (see Action Log for details).
	Members agreed outstanding items on the action log could be marked as complete as they had been captured at that time to ensure committee members were aware and engaged to show leadership on key areas.

	• Proposed areas for development session work were noted as: • I Matter • Trauma Risk Management (TRiM) • Refresh of role and remit of the committee and Staff Governance Standards • Workforce and recruitment with focus on key areas such as succession planning & ethical recruitment
S6	**Chair's Report from the Board** The Chair provided a verbal update from the meeting of the NHS Orkney board held in April 2022, noting the agile governance arrangements in place earlier in the year. The following key points were highlighted: • An update on DHI which noted the successes and the challenges going forward • Improvements in the visibility of the Executive and Senior Management Teams • Mental Health Team recruitment success highlighted in the Joint Clinical and Care Governance Committee Chairs Report • Dental and GP vacancies and recruitment challenges L Hall confirmed changes to ensure the repeat of identical adverts was avoided had been implemented **Decision / Conclusion** The Committee noted the Chairs update
S7	**Virtual Item Log SGC2223-01** Members received the virtual item log which captured items transacted by committee members during agile governance arrangements implemented on 17 December 2021 **Decision / Conclusion** Members reviewed and ratified the items approved virtually during the agile governance period
S8	**Staff Governance Action Plan 2021/22 – SGC2223-02** The Interim Director of Human Resources presented the end of year 2021-22 Staff Governance Action Plan with focus areas which linked to the 5 pillars of the Staff Governance Standards. It also included a narrative on progress and noted the outstanding elements which would be moved into next year's plan. The following points were also highlighted: • Appointments within the Health and Safety team and examples of work on moving and handling and violence and aggression prevention training across the organisation. • Sickness absence rates which were in line with the national average, with musculoskeletal and stress/anxiety identified as key areas. Interventions such as CBT to upskill staff to enable and support staff to help themselves planned • Significant work on management training bundles to support team leaders and equip them with a range of skills. Noted as particularly important to ensure that additional skill sets that may be required when clinical staff promoted into managerial roles are identified and training provided as appropriate

	• Partnership working with Area Partnership Forum, Occupational Health and Safety Committee, Wellbeing and Communication groups • Actions to ensure staff know where the organisation is going whilst also providing opportunities to listen to what staff think. An additional element of good organisational communication is to empower staff to access systems for raising concerns or whistle blowing. The chair acknowledged the team effort, welcomed the progress made and commended the simplified form and narrative approach of the plan. Members considered whether more proactive advertising of management vacancies to include a requirement to evidence the additional skillsets required would be an option to ensure new staff were appropriately equipped from the start. It was confirmed that specific competency based questions were already used at interviews and individual role induction, separate from Corporate induction, was highlighted as a more appropriate area for improvement. Ensuring new team leaders are welcomed and supported and provided with the information and guidance required to navigate specific role, team, department and organisational systems, procedures and line management responsibilities was noted as vital to successful onboarding. Members agreed that improving first impressions of new staff was key to a positive start and was often an overlooked element particularly for internal appointments as assumptions could be made about levels of pre-existing skills, knowledge and understanding. It was confirmed that further to member feedback, improvements to document formatting and clarification of acronyms had been implemented and education support for chairing meetings was planned and the TURAS module on developing chair skills was highlighted as useful. The chair looked forward to the achievement of a mature learning culture and the opportunities it should provide to grow local talent and succession plan. A recent example of collaborative work on appraisal, where members of the HR and education teams completed a joint test of change and delivered training to nursing teams, was highlighted **Decision / Conclusion** Members approved the end of year Staff Governance Action plan for 2021/2022
S9	**8.2 Staff Governance Action Plan 2021/22 – SGC2223-03** Members received the Draft 2022-2023 Staff Governance Action Plan which included actions in response to Scottish Government Feedback on the Staff Governance Monitoring Return for 2021. The report proposed a stretching draft action plan (with some activities spanning over a one year period) that continued to move the organisation forward. The following points were highlighted: • Improved and more accessible format

	• The plan was a live document drafted against the 5 pillars within the Staff Governance Standard and any developments and changes would be completed in partnership • The Importance of workplace assessments and coaching to ensure learning carried forward and maintained It was confirmed that moving and handling training had been classroom focussed but as noted in point 5 on page 7 of the plan, workplace observation, assessment and intervention was also a vital part of the process. The Health and Safety manager explained that workplace assessment and coaching was a requirement of the Scottish Moving and Handling Passport scheme to ensure staff remained up to date with their skills. Suggestions regarding the inclusion of performance metrics around grievance and other related processes, requests for clarity regarding the roles of equality diversity and wellbeing champions were noted and it was agreed further information on the RGU biannual symposium could be provided. **Decision / Conclusion** Members approved the 2022/2023 Staff Governance Action plan and looked forward to receiving the next update.
	Governance
S10	**9.1 Remuneration Committee Annual Report – SGC2223-04** Members received the Remuneration Committee Annual Report **Decision / Conclusion** Members reviewed the update and took assurance
S11	**9.2 Area Partnership Forum Annual Report– SGC2223-05** The Vice Chair presented the Area Partnership forum Annual Report, which along with the included minutes provided a good overview of the business undertaken. It was noted that the forum was now back up and running after being stood down during agile governance arrangements. **Decision / Conclusion** Members reviewed the update and took assurance
	Organisational Culture
S66	**10.1 Workforce report – SGC2223-06** The Human Resources Manager presented the Workforce report for quarter 4, highlighting the key points noted in the assessment section on page 2 of the update provided.

Meetings with managers and targeted sickness absence training were some of the mitigations described to improve data accuracy which had led to 'unknown' being recorded as the most common reason for sickness absence.

It was confirmed that sick notes including absence reason were received and that data logging issues had been identified as the main issue. An improvement in the next update was anticipated.

Improvements in statutory and mandatory training compliance were welcomed.

The Human Resources Manager confirmed additional data to support understanding of the following highlighted issues could be provided going forward: the impact of missed Occupational Health appointments on staff absence, the relationship between the number of job applicants versus the number of staff appointed and appraisal rate expectations.

Members were advised that appraisals were on a 12 month cycle and as a two way process it was everyone's responsibility to engage. However, it was also important to understand the barriers in place and be aware of an underlying culture that appraisals don't get done. It was confirmed that NHS Orkney were in the bottom half of the table for appraisal rates across the country and that further work around engagement, delivery and monitoring was required.

Members noted the rise in long term sickness absence (longer than 29 days) and were advised the figures did not include long covid special leave data. It was also confirmed that a national move away from recording covid absence under special leave was anticipated by the end of August or September 2022. Members were assured that a person centred approach and staff side involvement would be central to any transition plans.

Members welcomed the dashboard format but sought clarification of the colour coding plus additional vacancy information noting it would be useful to see how many posts remain unfilled. Identification of areas with absence issues was also requested.

Members were advised that the purpose of a dashboard report was to provide a high level overview and were cautioned against steering reporting down a disproportionately time consuming and data driven route to represent individual's areas of interest. Annually identified areas for more specific and detailed analysis was a suggested alternative option to finding a balanced approach.

In response to queries regarding the offer to start date timescale in table 5 on page 17 of the workforce report members were advised that the recruitment team took a proactive approach to seeking reference and associated employment checks and that local processes outwith the team had an impact.

Decision / Conclusion

Members noted the update.

10.2 Draft Integrated Workforce Plan– SGC2223-07

The HR Manager presented an update on the Draft Integrated Workforce plan noting the partnership working with Health and Social Care and the timeframe for submission to Scottish Government by 31 July with feedback expected by early Autumn 2022.

	The operational workforce plan template, produced to help service leads, had been well received and the HR Manager continued to support colleagues through the process.

It was noted that some teams had been very clear on their direction whilst others were less so, but the template had proved helpful and all involved had been aware and mindful of the financial restraints, the clinical strategy and the Healthcare Staffing Act.

Decision / Conclusion

Members noted the update. |
| S67 | **10.3 Whistleblowing Annual Report – SGC2223-08**

The Interim Director of Human Resources presented the Whistleblowing Annual report which showed the total number of concerns raised and the subsequent activity and actions undertaken.

Further work was progressing to assess how best to engage with staff and ensure individuals feel enabled to raise issues so that data accurately represents the number of concerns. A joint Whistleblowing Steering group with Shetland had been established to identify shared learning.

Members were advised that the Whistleblowing Champion was an assurance role so a response to the report would be provided at the next board meeting.

Decision / Conclusion

Members reviewed the report and recommended it for submission to the Board. |
| | **Involved in Decisions that Affect them** |
| S69 | **13.1 Area Partnership Forum Chair's report – SGC2223-09**

Members received the Chair's report from the Area Partnership Forum highlighting the output from the first development session which members agreed had been invigorating and had helped to create a collaborative direction. The work of the forum was reviewed and areas for improvement and issues to address going forward had been identified.

Decision / Conclusion

Members noted the update provided from the Area Partnership Forum. |
| S70 | **Minutes of the Area Partnership Forum meetings in February, March and April 2022**

Members noted the approved minutes as submitted. |
| | **Policies and Procedures** |
| S71 | **14.1 Report on Status of Once for Scotland Policy – SGC2223-10** |

Members received the letter regarding the Status of the Once for Scotland Policy noting that paused work was now back up and running.

Decision / Conclusion

Members of the Committee noted the national position.

14.2 Manual Handling Policy – SGC2223-11

The Interim Director of Human Resources presented a suite of Health and Safety Policies for Staff Governance Committee approval noting that recommendations from colleagues had been taken on board and all had been through the Occupational Health and Safety Committee. Members were advised that the main elements of all the policies was around ensuring legal requirements were met, roles and responsibilities were clear, and the design and format was user friendly.

The Health and Safety Manager noted the policies as live documents that would evolve over time but confirmed colleagues from the HSE had been happy with changes made to ensure compliance with the requirements of the improvements notices received.

Members were advised that as an organisation we had been found to fall short and in addition to the requirement for legal compliance there was a moral duty of care which shouldn't be compromised.

It was noted that here was a focus on two different types of training – violence and aggression prevention and moving and handling and although some elements could be completed online, in person interventions were also essential. It was confirmed that compliance with this element was not where it needed to be, but it was hoped that all required training would be completed by October 2022.

The Health and Safety Manager advised that there had been no real change since last week with only 29 per cent across the board for both sets of training. He acknowledged that the target had been ambitious, but it was confirmed that more than enough training had been made available to achieve it, but there had been a significant volume of non-attendance without a reason narrative.

It was confirmed that the key message going forward was that regardless of any previous narrative, if colleagues were booked on a course they needed to attend and if there were service issues they would be addressed. The Health and Safety team were also looking to adapt so more flexible training delivery options could be provided.

Recent in department training, where flexible, high quality and face to face expert advice had been provided was highlighted as a good example of improvements made and had been much appreciated by the staff involved. The tangible benefits of having on floor Health and Safety champions was also noted.

The challenge of following best practice guidance when colleagues encountered pressured situations alongside staff shortages was highlighted. Colleagues were also cautious about the reality of the timescales noting that provision of meaningful and appropriately tailored training across the varied range of staff groups would take time.

Decision / Conclusion

	The Manual Handling Policy was approved
	14.3 Management of Violence and Aggression Policy – SGC2223-12 Members received the Management of Violence and Aggression Policy **Decision / Conclusion** The Management of Violence and Aggression Policy was approved
S72	**14.4 Lone Working and Working in Isolation Policy – SGC2223-13** Members received the Lone Working and Working in Isolation Policy **Decision / Conclusion** The Lone Working and Working in Isolation Policy was approved
	Provided with a Safe Working Environment
S73	**15.1 Occupational Health and Safety Annual Chair's Report – SGC2223-14** The Interim Director of Human Resources presented the report highlighting clarified roles and responsibilities, refreshed terms of reference and key performance indicators. Members also noted the identification of the corporate level risk and the mitigations. It was confirmed that the current membership of the committee was appropriate to allow the two way communication required to improved safety culture, but a shift towards a more streamlined and agile approach could be anticipated within the next 12 -18 months. **Decision / Conclusion** Members noted the report, acknowledged and welcomed the work and were assured on the current position
	Risks
S74	**16.1 Corporate Risks aligned to the Staff Governance Committee – SGC2223-15** The Interim Director of Human Resources presented the report noting its purpose was to ensure committee members were aware of current risks and that all were content with planned actions to mitigate going forward. **Decision / Conclusion** Members noted the report and were assured
S75	**17 Issues Raised from Governance Committees**

	Members received and noted the Audit and Risk Committee Chair's report
S76	**18 Agree any issues to be raised to Board/ Governance Committees** The Committee agreed that the following items should be reported to the Board: **Board** • Approval of policies • Conclusion of last year's action plan and introduction of new one • Work being done in partnership about the integrated workforce plan and the timeframe and that will be fedback on later in the year
S77	**Any Other Competent Business** There was no other business for discussion.
S78	**Schedule of meetings** The schedule of meetings for 2022/2023 was noted.
S79	**Record of Attendance** The record of attendance was noted.

Meeting closed at 13.00