

## Orkney NHS Board

Minute of meeting of the **Staff Governance Committee of Orkney NHS Board** held via MS Teams on **Wednesday, 22 February 2023** at **10:30am**

**Present:** Joanna Kenny, Non-Executive Board Member and Chair  
Ryan McLaughlin, Employee Director and Vice Chair  
Michael Dickson, Interim Chief Executive  
Lorraine Hall, Interim Director of Human Resources  
Jason Taylor, Non-Executive Board Member  
Bob Walker, Partnership Representative

**In Attendance:** Christy Drever, Committee Support  
Ingrid Smith, Human Resources Manager

S67 **Apologies**

Apologies for the meeting were noted from Des Creasey, Lawrence Green, Nickie Milne and Steven Phillips.

The Chair welcomed R. McLaughlin as the newly appointed Employee Director and Vice Chair, and expressed thanks to M. Gill for her hard work when in the role.

S68 **Declaration of Interests – Agenda Items**

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

S69 **Minute of meeting held on 23 November 2022**

The minute of the Staff Governance Committee meeting held on 23 November 2022 was accepted as an accurate record of the meeting and approved.

S70 **Matters Arising**

Action Log 01-2022/23

The Chair noted that she had discussed the potential inclusion of appraisal compliance rates within performance reports to the board, however the decision had been made that this would not be suitable and would be reviewed in future if required.

**Acknowledgement**

The Interim Director of Human Resources acknowledged the recent tragic passing of a member of NHS Orkney nursing staff whilst in service. She highlighted that she and other senior staff had been working to support colleagues within the department and expressed deep sorrow for the loss.

S71 **Action Log**

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

**Governance**

S72 **Committee Terms of Reference 2023-24 – SGC2223-31**

The Interim Director of Human Resources presented the updated Terms of Reference 2023/24 for the Staff Governance Committee for approval.

#### **Decision / Conclusion**

Members approved the Terms of Reference for 2023-24.

#### **S73 Committee Business Cycle and Workplan 2023-24 – SGC2223-32**

The Interim Director of Human Resources presented the updated Business Cycle and Workplan 2023/24 for the Staff Governance Committee for approval.

#### **Decision / Conclusion**

Members approved the Business Cycle and Workplan for 2023-24.

#### **S74 Staff Governance Action Plan 2022/23 – SGC2223-33**

The Interim Director of Human Resources presented the 2022-2023 Staff Governance Action Plan, which provided an update on activity, under the five Staff Governance pillars. The following key points were highlighted:

- The Health and Safety Lead had been engaging with colleagues in various ways and it was hoped to produce a Health and Safety Newsletter which would be sent out to colleagues.
- Item 2 “Plan and introduce Behavioural Safety Programme” had been delayed due to significant reduction in capacity within the Health and Safety Team.
- The Health and Safety Lead had created a Principles of Risk Assessment Module which would be uploaded to Turas for staff to undertake online learning.
- The Occupational Health, Safety and Wellbeing Committee had received the quarterly update against KPIs and members were pleased to see a significant increase in updated policies and procedures.
- There were significant levels of sickness absence within the organisation, and work was ongoing to support managers and staff to promote attendance. The Human Resources and Occupational Health Teams were working hard to understand any potential trigger points, and ensuring absence was handled equitable.
- GREATix had been distributed to staff throughout the organisation, which was system to celebrate successes. Managers would be encouraged to use the system to express gratitude to colleagues.
- The 3 year workforce plan had been resubmitted in November following feedback. No response had been received to date, so this would be flagged to Scottish Government.
- It was acknowledged that NHS Grampian colleagues who manage equality and diversity for NHS Orkney were coming close to retirement. It was noted that discussions were needed to decide how best for NHS Orkney to provide this in future, and whether it would be appropriate to manage this in partnership with another NHS Board.

Members raised concerns regarding the capacity within the Health and Safety Team. It was noted that one member of the team was on long term sickness absence, and recruitment was in process for 1.5 WTE positions. These positions had been previously advertised however there had been no suitable applicants.

### **Decision / Conclusion**

Members noted the information and assurance contained within the 2022/2023 Staff Governance Action plan and looked forward to receiving the next update.

### **Organisational Culture**

#### **S75 Quarter 3 Workforce report – October - December 2022 – SGC2223-34**

The Human Resources Manager presented the Workforce report for quarter 3, highlighting:

- There had been a reduction in both the whole time equivalent (WTE) and the headcount of the workforce since January 2022 with 21.52 WTE and a headcount of 27 respectively.
- The total rolling year bank hours was 58,670.99 reduced from 71,063.96 hours compared to the same period last year. The total additional hours recorded with bank, overtime and excess hours equated to an average of 39.03 WTE staff.
- The sickness absence rate was higher than the Scottish average at 6.14% compared to 5.97%.
- From October - December 2022 there had been 19 new starts and 16 leavers.
- From July - September 2022 72 posts were created on the recruitment system with a total of 360 applicants and 27 offers made.
- The Human Resources team had regularly run five different managers training bundles this quarter and created one new one.
- Redeployment had been particularly busy this quarter with 13 people removed from the register.
- The appraisal rate for Agenda for Change staff had increased to 15.02% as at 31 December 2022 and all medical appraisals completely up to date.
- Between October - December 2022 163 appointments were undertaken by Occupational Health.

The Human Resources Manager reassured members that sickness absence rates were a top priority for her team and being managed closely. It was noted that the nursing directorate had significantly high sickness absence rates compared to other areas, and the human resources team were working closely with the managers within this directorate. The Employee Director would discuss this with the Human resources Manager and try to assist the managers with this.

Members noted staff concerns that bank nurses were not being utilised for shifts, as agency or locum workers had been recruited. It was noted that there were many staff on the nursing bank who had not taken a shift with NHS Orkney in several years, and there had been suggestions from staff that they had struggled to get onto the nursing bank or obtaining shifts.

It was queried whether an increase in use of NHS Orkney bank staff could provide a saving for the Board, compared to the use of agency/locum staff. Concerns were also noted surrounding staff working extra hours rather than overtime within their department, which presented difficulties in recording the number of hours worked, which could affect wellbeing and possibly staff or patient safety.

Members agreed to seek assurance from the Finance and Performance Committee that bank versus locum use and financial cost were monitored to ensure the appropriate use of bank staff where available and recruitment of locum and agency staff only where absolutely necessary.

The Interim Chief Executive advised that a piece of software had been mandated by Scottish Government, which would manage rostering electronically, meaning additional shifts could be managed more effectively. He suggested that it would be a significant cost and resource intensive to adopt, however it might be suitable to adopt it in collaboration with other Boards and split the costs. He advised that he had responded to Scottish Government to suggest this and had no response to date, nor any view of the timeframe for adoption of the software. It was noted that the Head of Transformation and Engagement had been involved in the initial consultation, and attended national meetings for the project.

Members highlighted the need for exit interviews to be conducted and were reassured that the procedure was being reviewed, alongside production of a policy covering staff joining, leaving and moving within the organisation.

Members noted that appraisal rates had increased slightly, however work was ongoing and conversations were beginning to take place within directorates. The Human Resources Manager would enquire with the Workforce Systems Manager whether it was possible to provide the data on number of appraisals in progress, as well as those completed. It was hoped to receive a clearer picture of progress within appraisal rates in the next update to the committee.

### **Decision / Conclusion**

Members noted the update and information provided, and looked forward to a response from the Finance and Performance Committee on bank and locum staff costs.

## **S76 People, Wellbeing and Culture Strategy – Update – SGC2223-35**

The Interim Director of Human Resources presented the update, highlighting the following key points:

- Work on the strategy had progressed further since the production of the update report.
- The strategy would follow three key elements:
  - NHS Orkney as a great place to work
  - NHS Orkney as a better place to work
  - NHS Orkney as a thriving place to work
- A particular emphasis would be on wellbeing, proactive leadership and role modelling and delivering services with care and compassion.

Members asked that an addition be made to cover the need to ensure that staff had appropriate workloads and time available for professional development

The Chair queried the terminology, noting that “a better place” perhaps didn’t convey a positive message. The Interim Director of Human resources highlighted that this term had come from discussions with staff and reflected how many employees were feeling.

### **Decision / Conclusion**

Members noted the update, and looked forward to further updates in the near future.

### **Well Informed**

No items in addition to those covered in the Staff Governance Action Plan

### **Appropriately Trained**

#### **S77      Staff Statutory and Mandatory Learning/Induction Statistic awareness – SGC2223-36**

The Talent and Culture Manager presented the report highlighting the following key points:

- Significant work was underway to review the training needs within the organisation, including different departments and roles. This was proving to be a complex piece of work to gather appropriate data and present it in an informative way.
- 168 colleagues had not been included within the reported turas compliance data for a variety of reasons, and there had been a number of duplicates which had been amended.
- Due to the move from Learnpro, reminders to complete online training were not being sent to staff until they had undertaken the course on Turas, which meant that some staff were unaware that their training was overdue unless they manually check their own records.
- Compliance with face to face training continued to be poor, with work ongoing to manage this with managers, individuals and directorates.
- It was hoped that the introduction of a new training and induction dashboard within the first quarter of 2023/24 would improve attendance and monitoring of compliance going forward.

Members acknowledged that the figures within the report were not as positive as would have been preferred, however they praised the significant work behind the report and expressed appreciation to the team for progress made. It was acknowledged that this work would take time, however assurance was taken that a cohesive plan of action was now in place.

Members agreed the need for an organisation wide push surrounding training and induction going forward. It was noted that the topic of organisational statutory and mandatory training and induction had been added to all Executive Directors Objectives via the Remuneration Committee to provide transparency from a directorate level.

### **Decision / Conclusion**

Members noted the update and looked forward to seeing positive improvements in the first and second quarter of 2023/34.

### **Involved in Decisions that Affect them**

#### **S78 Area Partnership Forum Chair's report – SGC2223-37**

The Employee Director presented the Chair's report from the Area Partnership Forum highlighting:

- A development session had been held in January surrounding the work of the Financial Sustainability Office. The session had been well received and had allowed members to make suggestions for potential savings opportunities.
- Discussion had taken place surrounding change management and a review and consultation following the move from the Health centre had begun.
- Members had noted the low compliance levels with Staff Statutory and Mandatory Learning & Induction. Discussions were had surrounding ways to enforce compliance however members were wary of doing so until recording systems were more developed and appraisals were being appropriately undertaken. It had been acknowledged that non compliance might not be solely down to staff, as team capacity, manager compliance and time pressures might play a factor. Further enforcement measures including paused promotions or increasing pay increments might be considered in future.

### **Decision / Conclusion**

Members noted the update provided from the Area Partnership Forum

#### **S79 Minutes of the Area Partnership Forum meetings in October, November and December 2022 – SGC2223-38**

Members noted the approved minutes as submitted.

### **Treated Fairly and Consistently**

No items in addition to those covered in the Staff Governance Action Plan

### **Policies and Procedures**

#### **S80 Report on Status of Once for Scotland Policy**

Members were advised that there had been no change or update since the last meeting.

#### **S81 Ventilation Systems Policy – SGC2223-39**

Members had received the Ventilation Systems Policy for final approval following review by the Area Partnership Forum.

#### **Decision / Conclusion**

Members approved the policy

#### **Health and Safety Policy**

The Interim Director of HR presented the updated Health and Safety Policy, noting that unfortunately the policy had been omitted from the committee papers sent out to members and had been circulated separately.

Members stressed the need for staff to be aware of safety related policies and understand the role of Health and Safety colleagues.

#### **Decision / Conclusion**

Members approved the policy

#### **Provided with a Safe and Improved Working Environment**

##### **S82 Introduction of H&S Control Book System – SGC2223-40**

The Interim Director of HR presented the report, noting that the introduction of a Health and Safety Control Book System had been recommended for approval by the Occupational Health, Safety and Wellbeing Committee, and the Area Partnership Forum.

It was highlighted that the system was already in place in NHS Shetland and would be adapted to suit NHS Orkneys needs. It was hoped that this would provide an accessible platform to support and educate managers.

#### **Decision / Conclusion**

Members approved the introduction of a Health and Safety Control Book System.

#### **Risks**

##### **S83 Corporate Risks Aligned to the Staff Governance Committee – SGC2223-41**

Members received the report on corporate risks aligned with the Staff Governance Committee.

Members felt that the risk surrounding appraisal rates and compliance with induction and statutory and mandatory training should be included within the risk register. It was acknowledged that this might be captured elsewhere within the risk register, and should be effectively articulated and realigned to the Staff Governance Committee if suitable. It was agreed that the risk of inappropriately trained staff aligned to Health and Safety, therefore the Health and Safety Lead would liaise with the Clinical Governance and Risk Facilitator to construct this.

#### **Decision / Conclusion**

Members noted the update and agreed that the Health and Safety Lead would input to clearly articulate the risk surrounding appraisal rates and compliance with induction and statutory and mandatory training.

S84 **Agree any issues to be raised to Board/ Governance Committees**

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

**Finance and Performance**

Workforce Report Quarter 3 – Bank and Locum Cost Concerns

**Board**

Health and Safety Policy  
Health and Safety Control Book System  
Staff Statutory and Mandatory Learning/Induction progress

S85 **Any Other Competent Business**

There was no other business for discussion.

**Items for Information and Noting**

S86 **Circular - DL (2023) 04 - Carry Forward of Annual Leave**

Members received the circular for noting.

**Decision / Conclusion**

S87 **Schedule of meetings**

Members noted the circular

The schedule of meetings for 2022/2023 and 2023/2024 was noted.

S88 **Record of Attendance**

The record of attendance was noted.