

## **Orkney NHS Board**

Minute of meeting of the **Staff Governance Committee of Orkney NHS Board** held via **MS Teams** on **Wednesday, 24 May 2023 at 10:30am**

**Present:** Joanna Kenny, Non-Executive Board Member and Chair  
Des Creasey, Non-Executive Board Member  
Lorraine Hall, Interim Director of Human Resources  
Nickie Milne, Staff Side Representative  
Laura Skaife-Knight, Chief Executive  
Jason Taylor, Non-Executive Board Member

**In Attendance:** Christy Drever, Committee Support  
Lawrence Green, Health and Safety Lead  
Steven Phillips, Head of People and Culture  
Carrie Somerville, Planning, Performance and Risk Manager (for S16)

### **S01 Welcome and Apologies**

Apologies for the meeting were noted from Ryan McLaughlin and Ingrid Smith

The Chair welcomed Laura Skaife-Knight as recently appointed Chief Executive of NHS Orkney and Nickie Milne as a newly appointed Staff Side Representative.

### **S02 Declaration of Interests – Agenda Items**

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

### **S03 Minute of meeting held on 23 November 2022**

The minute of the Staff Governance Committee meeting held on 22 February 2023 was accepted as an accurate record of the meeting and approved.

### **S04 Matters Arising**

#### Equality and Diversity Service provided by NHS Grampian

Members were advised that due to timings the NHS Orkney Equality and Diversity Workforce Monitoring Report 2022/23 would be circulated virtually to members, prior to submission to the NHS Orkney Board on 22 June 2023.

Members noted that this work would be included in the Staff Governance Action Plan and work was ongoing to manage the service going forward across the North of Scotland.

#### Statutory and Mandatory Training

Members raised concerns surrounding training rates and were advised that data regarding these would be provided as part of the Workforce Report going forward. It was acknowledged that the change from Learnpro to Turas had meant staff were not aware that training was out of date, however regular communications had been sent out to all staff, and managers were encouraged to monitor compliance within their teams closely. It was also highlighted that all staff were welcome to use the Finna

Room within the Balfour to complete online training, and manager could seek support for staff if required.

**S05      Action Log**

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

**Governance**

**S06      Staff Governance Committee Annual Report 2022/23– SGC2324-01**

The Interim Director of Human Resources presented the Staff Governance Committee Annual Report for members to review and approve.

**Decision / Conclusion**

Members approved the Staff Governance Committee Annual Report 2022/23.

**S07      Remuneration Committee Annual Report 2022/23 – SGC2324-02**

The Interim Director of Human Resources presented the Remuneration Committee Annual Report for members to review and approve.

**Decision / Conclusion**

Members approved the Remuneration Committee Annual Report 2022/23, acknowledging that it would be seen by members of the Remuneration Committee on 1 June 2023 for approval.

**Staff Governance Action Plan**

**S08      Staff Governance Action Plan Approval of End of Year 2022/23 – SGC2324-03**

The Interim Director of Human Resources delivered Staff Governance Action Plan Approval of End of Year 2022/23, highlighting the following key points:

- Good progress had been made in 2022/23 within Health and Safety actions, with work ongoing following the Health and Safety Executive visit in 2020/21.
- A lead had been nominated for each action, which had increased engagement and responsibility, as well as visibility by those responsible.

Members noted that a significant share of sickness absences had been for psychological reasons and were advised that work was in progress to understand these absences and manage any support which could be provided for staff.

Members noted that the Employee Director had previously identified two volunteers for confidential contacts and the Interim Director of Human Resources would ensure that training for these staff members had been progressed.

The Interim Director of Human Resources highlighted that due to the change in Cabinet Secretary there had been a realignment of the National Workforce Strategy, with a refocus on wellbeing, leadership and equality.

### **Decision / Conclusion**

Members approved the Staff Governance Action plan for 2022/23 and acknowledged to great progress on improvement from the position of NHS Orkney in previous years.

#### **S09 Approval for 2023/24 Staff Governance Action Plan – SGC2324-04**

The Interim Director of Human Resources delivered Staff Governance Action Plan for 2023/24, highlighting that, as with previous versions, the Action Plan was a living document, which would change and adapt throughout the year as required, and in agreement with the Staff Governance Committee.

Members asked that the Staff Governance Action Plan for 2023/24 be amended as follows:

- To include an explicit link to the culture and workforce areas of the Plan on A Page for 2023/24
- To ensure all actions were clearly measurable and had clear set timelines, and include a summary page to incorporate this.
- To show five actions picked out as the clear priorities for 2023/24, alongside Business as Usual.

### **Decision / Conclusion**

Members approved the first version of the Staff Governance Action plan for 2023/2024 and looked forward to receiving the next quarterly update which would include the above amendments.

### **Organisational Culture**

#### **S10 Quarter 4 Workforce report – January – March 2023 – SGC2324-05**

The Head of People and Culture presented the Workforce report for Quarter 4, highlighting the following key points:

- A working group would be set up with representation from both Staff Governance Committee and Area Partnership Forum, to discuss the development of the Workforce Report, and what information members would like to see contained in it. Members agreed that a front cover showing key areas of focus would be beneficial.
- There had been an increase in sickness absence over the period, with People and Culture team members working closely with staff and managers to support returning to work.
- There had been an increase in online applications, despite a reduction in vacant posts.
- Organisational compliance with Annual Appraisals was at 18.27% for the period of Apr 2022 to Mar 2023, which was an increase of 3.25% on the third

quarter of 2022/23. The Committee had also received figures for “in progress” appraisals, which when combined provides an organisational rate of 43.42%.

Members raised concerns surrounding sickness absence figures, and the increased pressure on other members of teams who might be picking up more work and hours. It was also highlighted that vacant posts might be covered in this way, with recruitment being delayed or not completed.

Members also raised concerns surrounding flexible working requests, and the need to monitor how many of these had been received, and the reasons for rejecting. The Head of People and Culture advised that there currently was no means to capture this data, however he would review this as an option for the future.

### **Decision / Conclusion**

Members noted the update and were assured of progress towards.

### **Well Informed**

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

### **Appropriately Trained**

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

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

#### **S11 Area Partnership Forum Chair’s report – SGC2324-06**

The Chief Executive presented the Chair’s report from the Area Partnership Forum for noting by members.

### **Decision / Conclusion**

Members noted the update provided from the Area Partnership Forum

#### **S12 Minutes of the Area Partnership Forum meetings in January, February, March and April – SGC2324-07**

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**

#### **S13 Report on Status of Once for Scotland Policy**

Members were advised that work was ongoing, and a local soft launch was expected to take place in Autumn 2023, prior to the full launch throughout Scotland.

**S14 Safety Policies for Approval – SGC2324-08**

Members had received the following policies for final approval following review by the Area Partnership Forum and Occupational Health, Safety and Wellbeing Committee:

- First Aid Policy
- RPE Policy
- Control of COSHH Policy
- Management of Violence and Aggression Policy
- Display Screen Equipment & Eyesight Testing Policy

**Decision / Conclusion**

Members approved the policies.

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

**S15 Health & Safety Lead Annual Report 2022/2023 – SGC2324-09**

The Health and Safety Lead presented the Annual Report for 2022/2023, acknowledging that going forward it would include a comparison graph for current and previous years data. He highlighted that moving and handling training would be moving to a passport scheme model, where training and assessment would take place within departments. This would reduce the time for staff to be relieved from duties on wards, and also allow trainers to adapt training to suit the needs of individuals and departments. Members felt that this form of “on the job” training could be adopted for other skills, and the Head of People and Culture and Health and Safety Lead would monitor progress and advise if they felt it might suit other training provided.

**Decision / Conclusion**

Members noted the annual report and praised the work of the Health and Safety Lead and Team over the previous year.

**Risks**

**S16 Risk and Assurance Report – Circulated Virtually**

The Planning, Performance and Risk Manager attended to present the Risk and Assurance Report. The following key points were discussed:

- Risk 655 had been updated to reflect the appointment of a substantive Chief Executive.
- Members queried whether risk 722 should be resolved as it looked as though it was closed. The Health and Safety Lead advised that the Control Book System would resolve this issue in future.
- Members noted that risk 383 was outstanding and should have been closed in March 2023.

- Members asked that the Statutory and Mandatory training and Appraisal compliance rates be added to the register, due to the risks associated with inappropriately trained staff

The Planning, Performance and Risk Manager agreed to feedback on members queries outwith the meeting.

Post meeting note

*Risk 383 – this had now been updated.*

*Risk 722 – This was managed at a departmental level, however as a statutory Health and Safety Risk this must be captured on the organisations risk registers to provide oversight.*

**Decision / Conclusion**

Members noted the update and were assured of progress. It was agreed that the report would be provided to each Staff Governance Committee meeting, to ensure oversight.

**S17 Cross Committee Assurance**

D Creasey provided feedback from the Finance and Performance Committee, following the Cross Committee Report provided to their meeting on 23 March 2023.

He advised that due to the absence of the Director of Finance this had not progressed at the March meeting, however would be discussed at the 25 May 2023 meeting and feedback would be provided to the Staff Governance Committee.

**S18 Agree any issues to be raised to Board/ Governance Committees**

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

**Board**

- Staff Governance Action Plans 2022/23 and 2023/24
- Quarter 4 Workforce Report
  - Sickness Absence
  - Annual Appraisals
- Statutory and Mandatory Training Risk

**S19 Any Other Competent Business**

**iMatter**

Members acknowledged the considerable work from People and Culture colleagues to ensure increased compliance rates compared to previous years. The team were working closely with managers to ensure staff could access the survey both virtually and in paper form where required., and to provide support for action planning following results being released.

**Items for Information and Noting**

**S20 Schedule of meetings**

The schedule of meetings for 2023/2024 was noted.

S21 **Record of Attendance**

The record of attendance was noted.