

## Orkney NHS Board

Minute of meeting of the **Staff Governance Committee of Orkney NHS Board** held via **MS Teams** on **Wednesday, 22 November 2023** at **11:20am**

**Present:** Joanna Kenny, Non-Executive Board Member and Chair  
 Ryan McLaughlin, Employee Director and Vice Chair  
 Des Creasey, Non-Executive Board Member  
 Linda McGovern, Interim Director of People and Culture  
 Laura Skaife-Knight, Chief Executive (until 1pm)  
 Karen Spence, Staff Side Representative  
 Jason Taylor, Non-Executive Board Member

**In Attendance:** Lawrence Green, Health and Safety Lead (until 11:35am)  
 Steven Phillips, Head of People and Culture  
 Ali Sabiston, Talent and Culture Manager (for S53)

Christy Drever, Committee Support (Minute Taker)

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| S44 | <p><b>Welcome and Apologies</b></p> <p>Apologies for the meeting were noted from Sam Thomas, Ingrid Smith and Nickie Milne. Members welcomed Linda McGovern as Interim Director of People of Culture and Karen Spence as Staff Side Representative for the committee.</p> <p>Members were advised that the meeting would be recorded for the purpose of transcribing a minute only and then deleted.</p> |
| S45 | <p><b>Declaration of Interests – Agenda Items</b></p> <p>There were no declarations of interest in relation to agenda items.</p>   |
| S46 | <p><b>Minute of meeting held on 23 August 2023</b></p> <p>The minute of the Staff Governance Committee meeting held on 23 August 2023 was accepted as an accurate record of the meeting and approved.</p>  |
| S47 | <p><b>Matters Arising</b></p> <p>There were no matters arising raised that were not covered on the agenda.</p>   |
| S48 | <p><b>Action Log</b></p> <p>The Action Log was reviewed, and corrective action agreed on outstanding issues (see Action Log for details).</p>  |
|     | <p><b><u>Risk</u></b></p>  |
| S49 | <p><b>Risk and Assurance Report – Paper not received.</b></p> <p>The Chief Executive expressed apologies that this paper was not received by the deadline. She advised that she and the Planning, Performance and Risk Manager had almost completed a complete review of the current risk register. This review was on</p>   |

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|     | <p>track, desire the aspects relevant to the Staff Governance Committee not being available for review at this time, and would be presented to the Senior Leadership Team, Audit and Risk and Board in December. The most updated versions would be presented at each, acknowledging the 9-day deadline for papers to be provided for these committees.</p> <p>In light of the formal escalation in recent days, the risk register had been updated in this aspect, however the Chief Executive added that this had now been elevated to stress that there was a risk to organisational culture, improvements, staff morale and overall staff experience and engagement. She stressed that this risk was no longer solely relating to finance but was an all-encompassing risk and that this would be captured in the risk register.</p> <p><b>Decision / Conclusion</b></p> <p>Members noted the verbal update and were assured of progress.</p>  |
|     | <p><b><u>Staff Governance Action Plan</u></b></p>  |
| S50 | <p><b>Staff Governance Action Plan Priorities 2023/24 – SGC2324-22</b></p> <p>The Interim Director of People and Culture presented the update, highlighting the following key points:</p> <ul style="list-style-type: none"> <li>• Work continued with the access to the Second Nature App</li> <li>• The TRiM work was ongoing and further rollout of this had been part of the September wellbeing event.</li> <li>• The National Imatter reports were due to be released soon, which would allow further analysis across NHS Scotland.</li> <li>• The Employee Assistance App had been launched in September and use of this would be continually monitored with an update coming in January on the trends of use for the App.</li> <li>• Discussion had been held regarding the Equality SLA with NHS Grampian, and a paper would be brought to the committee surrounding this.</li> <li>• The Wellbeing Coordinator had been appointed and would commence in post on 11 December 2023. She would play a huge part in recognition efforts throughout the organisation, including long service and Team Orkney Awards.</li> <li>• There's been a huge amount of progress on Health and Safety which had made a big difference to the organisation.</li> <li>• The team had been working with Developing the Young Workforce, which had given great insight into what pupils were interested in and to provide awareness of the roles available within the NHS.</li> <li>• The Once for Scotland policies had gone live across the organisation and had been well received. A Menopause and Menstrual Health Policy had also been launched and discussions had taken place at Wellbeing Committee surrounding additional support which could be put in place across the organisation.</li> <li>• A deep dive was underway into the absence rates across the organisation to extract and utilise the data available. A new colleague had joined the team</li> </ul> |

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|     | <p>who would support colleagues going into the conversations in the early stages of absence.</p> <ul style="list-style-type: none"> <li>• Work was ongoing to make a more simplified process and support managers with Joiners, Movers and Leavers across the organisation.</li> </ul> <p>The Head of People and Culture advised that with the HR Manager leaving her post in January, the team would have reduced capacity, and therefore this might slow down progress. The team were meeting in the coming week to review what work was currently in progress to get a full overview and agree priorities.</p> <p>K Spence advised that staff had enquired about the replacement of the Spiritual Care Lead, highlighting that they had noticed the absence of this role within the organisation. The Chief Executive advised that interim support was being put in place, and a review of the best model for NHS Orkney was underway which would be concluded by the end of quarter 4, and in the meantime this had been added to the risk register to reflect the absence of the support from this role.</p> <p><b>Decision / Conclusion</b></p> <p>Members noted the update and were assured of progress on the action plan.</p>  |
|     | <p><b><u>Organisational Culture</u></b></p>   |
| S51 | <p><b>Quarter 2 Workforce report – July - September 2023 – SGC2324-23</b></p> <p>The Head of People and Culture presented the Workforce report for Quarter 2, highlighting the following key points:</p> <ul style="list-style-type: none"> <li>• The Team came together in October to review the workforce report and how it could be improved. The report now contains a progress review, which shows areas under review and how it was planned to move forward.</li> <li>• Discussions had been scheduled with NHS Highland to explore how they use their systems and the potential of investing in Power BI.</li> <li>• There had been an increase in the WTE and head count across the organisation.</li> <li>• A full 6-month review of individual and departmental bank and overtime usage had been sent to Executive Directors to allow them to review this as part of the financial spend on a case-by-case basis. In line with this, the establishment review was also underway with finance colleagues.</li> <li>• Absence rates had decreased for the period, though there were high rates in some departments. A deep dive had taken place with the Finance and Performance Committee, and further areas to explore had been identified.</li> <li>• The team had been busy with a number of investigations across the organisation, which were often time consuming for staff involved. A review was underway to understand the full duration of an investigation.</li> <li>• Due to significant work from the team to ensure reminders were sent, there had been a positive increase in training rates.</li> </ul> <p>Members praised the updated version of the workforce report, acknowledging the improved accessibility of the document. They also highlighted the improved rates for</p> |

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|     | <p>training and recording of absence reasons, as well as the reduced absence rates overall.</p> <p>The Chair highlighted that when appraisals were opened in Turas, they would automatically show as in progress, which could skew the numbers.</p> <p>The Employee Director highlighted that whilst absence rates had improved, there were a handful of departments which had consistently shown around 20% absence rates for several years. He highlighted that these levels of absence could create a domino effect, causing staff to become overworked and generate further absence. He encouraged a focus on these particular areas, to understand the absence in these areas, and what changes could be made to improve absence rates. The Interim Director of People and Culture advised that this work was underway following the Finance and Performance Committee session.</p> <p>It was highlighted that the reported 386 applicants for medical and dental was not the correct figure, and the Head of people and Culture would circulate the correct figures following the meeting. He also expanded that this figure was reported for Nursing and Midwifery applicants, and this had been due to AI applications which did not meet the criteria.</p> <p><b>Decision / Conclusion</b></p> <p>Members noted the update and were assured of progress.</p> |
| S52 | <p><b>Staff Governance Monitoring Return – SGC2324-24</b></p> <p>The Head of People and Culture presented the Staff Governance Monitoring Return, highlighting the following key points:</p> <ul style="list-style-type: none"> <li>• The request was received in May with the return was due in December and was reviewing the period for 2022/23.</li> <li>• He had worked with teams across the organisation, including the Employee Director.</li> <li>• Due to amended schedules, the return was received by Staff Governance Committee for approval today and would be seen at Area Partnership forum the following week for noting, prior to submission to Scottish Government on 4 December 2023.</li> </ul> <p>Members praised the work put in by the team to produce the return.</p> <p><b>Decision / Conclusion</b></p> <p>Members approved the Staff Governance Monitoring Return for 2022/23.</p>  |
| S53 | <p><b>Succession Planning Toolkit - Update – SGC2324-25</b></p> <p>The Talent and Culture Manager joined the meeting to present the Succession Planning Toolkit. She highlighted the following key points:</p> <ul style="list-style-type: none"> <li>• The toolkit would complement the ongoing work in appraisal conversations, workforce planning and organisational training plan.</li> </ul>   |

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|  | <ul style="list-style-type: none"> <li>• Through development of the training plan, it was acknowledged that managers in teams did not have tools for training in succession planning.</li> <li>• Succession planning should start with good conversations between managers and colleagues at appraisal level. The team reviewed appraisal statistics and found that on average 15.4% of appraisals had been signed off between quarter 1 in 2022 and quarter 1 in 2023, and only 4% had PDP signed off. To embed these discussions at appraisals, it was important to understand training requirements and learning needs of individuals.</li> <li>• The Succession Planning Toolkit had been adapted from the NHS Leadership Academy toolkit, which had been developed by the NHS for the NHS. The guidance document was there to support managers at all levels through the organisation across every stage of the planning process.</li> <li>• The team would be working closely with managers across the organisation to look at appraisals and any barriers to appraisals, merging in the succession planning and then showing them how it all fits in to the training plan which was vital for that critical role.</li> </ul> <p>Members praised the huge amount of work involved in developing the Succession Planning Toolkit and expressed disappointment at the low percentage of appraisals and PDPs completed.</p> <p>The Chief Executive acknowledged the need for this work to take place, however she felt it was important to focus on appraisals for now as the figures were not where they need to be. She felt it would be best practice for succession planning to start with the CLT, then move down to SLT and through the organisation in a really logical way. She also felt it would be beneficial for the substantive Director of People and Culture to have input into the whole piece of work around appraisals, succession planning, leadership development and training. She felt that it would be more appropriate to build on this work and aim to launch this properly in April.</p> <p>Members agreed with the Chief Executive and felt that it was important to focus on increasing appraisal rates before launching the Succession Planning Toolkit.</p> <p>Members felt that it was important to discuss the poor appraisal rates at this point of the agenda, with the Talent and Culture Manager present.</p> <p>The Chair reminded members that it had been agreed at a previous meeting that members hoped to see a significant improvement in appraisal rates by November 2023. She acknowledged the great efforts made by the Talent and Culture team; however, it was highlighted that there were still significant problems.</p> <p>J Taylor highlighted that discussions surrounding poor appraisal rates had been ongoing for several years with very little positive movement in the figures. He acknowledged that the Executive Directors had been set an objective surrounding appraisals within their directorate and felt it would be beneficial for the Chair to contact the Remuneration Committee Chair seeking an update on why rates had not been improving.</p> <p>Members discussed the importance of holding managers to account for undertaking appraisals, as well as contacting staff who had not received an appraisal and encouraging them to ask for their appraisal to be undertaken.</p> |
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|  | <p>D Creasey raised that in other Boards there were well communicated implications for non-compliance with appraisals and statutory and mandatory training, including no incremental increases or banding changes. Members agreed that the organisation was not in a position at present to do this, but that it could be an option for the future.</p> <p>Some members had received feedback directly from staff and managers surrounding appraisals, with various reasons being provided by different staff groups, and that perhaps performance management would not solve the problem across all areas. It was also highlighted that the Turas system presented a barrier for some staff, and that's whilst there was a great volume of helpful information contained on it, some felt it was not accessible and difficult to navigate.</p> <p>The Chief Executive stressed that the poor figures were related to the culture and poor leadership across the organisation. She agreed that the Turas system could be difficult to work with, and that it might be helpful to develop a simple one-page appraisal with three questions to form the structure of the conversation. She felt it was important to explore this option, and how this could link into Turas to reduce the barrier for staff. She also acknowledged her own role in the shared objective set for Executive Directors and advised that she had picked this up with each individual Executive Director, as well as the figures for each directorate being brought to CLT on a monthly basis.</p> <p>The Interim Director of People and Culture advised that she had contacted colleagues in other NHS Boards who had high compliance rates to obtain any learning from them. She highlighted that in those Boards they had used Turas, however felt that conversations could happen regarding other methods for appraisals and how to record and monitor data. She added that care should be taken to ensure that the appraisals undertaken were logged in some way, to allow NHS Orkney to evidence any work which was being undertaken out with the Turas system.</p> <p>R McLaughlin highlighted that APF had made retention of staff a core focus for the coming six months, so it might be beneficial to delegate the improvement plan and ownership to them, with feedback on progress to the next meeting.</p> <p>The Head of People and Culture stressed the importance of feeding back to NES on the Turas system and source any suggestions from them on how to improve the use of the system. The Talent and Culture Manager highlighted that she felt increasing training and conversations directly with managers and staff would be hugely beneficial and encouraging all those with appraisal responsibility to attend training, rather than expecting staff to proactively attend it. It was agreed that the team should go out to all managers with a list of those in their team who had not had an appraisal, to encourage these to take place.</p> <p>The Chair noted that although there had been progress over the last year, Executive Directors and Senior Managers need to be held accountable for their Directorates, and not only for their Direct Reports. The Chief Executive advised that from April 2024, every clinical speciality and every corporate service would be held accountable against every indicator as part of performance review meetings.</p> <p>Members discussed the performance management of managers and Executive Directors, highlighting that undertaking appraisals for staff was included within their job descriptions and was an essential part of the role they were paid to do so this needs to be tackled efficiently.</p> |
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|     | <p>The Chair suggested that individual Executive Directors be invited along to future meetings to discuss their appraisal rates and give feedback on the reasons behind poor appraisal rates, as well as what actions were being taken to remedy this.</p> <p><b>Decision / Conclusion</b></p> <p>Members praised the huge amount of work involved in the Succession Planning Toolkit and thanked The Talent and Culture Manager for joining to present and discuss appraisal in more depth.</p> <p>The Employee Director and Chief Executive would lead on the work on appraisals and develop an Improvement Plan to make the process simpler, easier and quicker and would bring back this to the next meeting. The Chair would write to the Chair of the Remuneration Committee for an update on the progress for the shared Executive Director objective.</p>  |
|     | <b><u>Well Informed</u></b>  |
| S54 | <p><b>CEO 100 Day Report – progress update – SGC2324-26</b></p> <p>The Chief Executive provided the progress update.</p> <p><b>Decision / Conclusion</b></p> <p>Members noted the update.</p>  |
|     | <b><u>Appropriately Trained</u></b>  |
|     | No items in addition to those covered in the Staff Governance Action Plan  |
|     | <b><u>Involved in Decisions that Affect them.</u></b>  |
| S55 | <p><b>Area Partnership Forum Chair's report and approved minutes – SGC2324-27</b></p> <p>The Employee Director presented the Chair's report from the Area Partnership Forum and approved minutes for noting by members. He provided a verbal update following the meeting on 17 October 2023, which had focused on renewing and updating the core documentation. The following key points were highlighted:</p> <ul style="list-style-type: none"> <li>• The constitution had been updated, with a view to aligning with Staff Governance Committee and taking an increased role in the Staff governance Action Plan going forward.</li> <li>• The Employee Director and Interim Director of People and Culture were working on a process to ensure more robust support for facilities time, including backfill arrangements where appropriate to avoid current pushback on requests.</li> <li>• Discussions were ongoing regarding a resolution to an issue where staff might be paid incorrectly during sickness absence due to potentially be rostered incorrectly.</li> <li>• The Managing Organisational Change Policy was currently being refreshed jointly by Staff Side and People and Culture staff.</li> </ul> |

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|     | <ul style="list-style-type: none"> <li>• APF agreed 3 main key areas of focus for the remainder of 2023/24: Financial position in association with the workforce and service development; Retention of staff including succession planning, exit interviews, appraisal and staff wellbeing; and implementing the work life balance policies.</li> <li>• To allow actions to be taken forward between meetings, the frequency of the sessions had been changed to 6 weekly for a 6-month trial.</li> </ul> <p>Members agreed that APF working alongside Staff Governance Committee to develop the Staff Governance Action Plan would be incredibly beneficial, noting that the ownership of the Action Plan should be clearly set out.</p> <p><b>Decision / Conclusion</b></p> <p>Members noted the update and approved minutes provided from the Area Partnership Forum.</p>  |
|     | <p><b><u>Treated Fairly and Consistently</u></b></p>  |
| S56 | <p><b>The Health and Care (Staffing) Scotland Act 2019</b> - Paper not received.</p> <p>The Chair expressed disappointment that this paper was not received, and that no representation from that directorate was available to join the committee. Not only was the Health and Care (Staffing) Scotland Act 2019 a key area of concern and regular updates were vital to the committee, but this directorate encompassed a high percentage of the workforce meaning regular involvement and updates to this committee was incredibly important. The Employee Director advised that he had been involved in meeting surrounding The Health and Care (Staffing) Scotland Act and was concerned by the lack of representation at the group, and the significant number of verbal updates to the group, rather than reports on progress. It was raised that perhaps this was a lack of leadership or administrative support, and the Chief Executive would feed the concerns back and ensure work was progressing as it should be, and updates were provided to the appropriate committees in future.</p> <p><b>Decision / Conclusion</b></p> <p>The Chief Executive agreed to feed back the disappointment of the members of the committee as appropriate.</p> |
| S57 | <p><b>Workforce Policy Implementation – Update – SGC2324-28</b></p> <p>The Head of People and Culture presented the update, highlighting the following key points:</p> <ul style="list-style-type: none"> <li>• 11 new workforce policies had been implemented and had gone live from 1 November 2023.</li> <li>• Colleagues had provided training sessions across the organisation to inform managers and staff around the important changes included.</li> <li>• A draft of the next phase of policies was expected in February/March 2024.</li> </ul> <p><b>Decision / Conclusion</b></p>  |



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|     | Members noted the update and were assured of progress on implementation.   |
|     | <b><u>Provided with a Safe and Improved Working Environment</u></b>  |
| S58 | <p><b>Occupational Health, Safety and Wellbeing – Chairs Assurance Report – SGC2324-29</b></p> <p>The Employee Director presented the report from the Occupational Health, Safety and Wellbeing Committee for noting by members, highlighting that the stress survey had been well received so far.</p> <p><b>Decision / Conclusion</b></p> <p>Members noted the update provided from the Occupational Health, Safety and Wellbeing Committee.</p>   |
| S59 | <p><b>Health &amp; Safety Lead Update August/September 2023 – SGC2324-30</b></p> <p>The Health and Safety Lead presented the update, highlighting the following key points:</p> <ul style="list-style-type: none"> <li>• There had been a slight reduction in slips trips and falls over the period. Due to the number of inpatient falls within the hospital the team would engage more with clinical staff following Datix reports of these occurrences to ensure a clearer understanding of the incident and reporting requirements.</li> <li>• There had been a RIDDOR report following an incident with an item of medical equipment resulting in a staff member being absent from work for more than 7 days. An investigation was also underway with the manufacturer of the equipment.</li> <li>• The Health and Safety Control Book System had been fully implemented throughout the organisation, with initial visits made by the team to the Control Book owners. An audit of the control books was now underway including assisting owners in moving forward and updating risk assessments as required.</li> <li>• Violence and aggression training had begun again, with the delivery of foundation level training ongoing and advanced level training taking place in the coming weeks.</li> <li>• Training was in process for teams who had received the People Safe fobs, to ensure that staff had the protocols in place should an emergency response be required.</li> <li>• Moving and handling training was on going across the various levels required by the organisation.</li> <li>• The team were confident that lone working training should be completed across the organisation by the end of 2023.</li> </ul> <p>J Taylor asked whether the team would follow up on the implementation of changes from lessons learned following a reported sharps injury from a diabetic needle. The Health and Safety Lead advised that while this was the line managers responsibility, he would ensure his team follow up with the line manager to ensure protocols had been put in place to prevent this type of incident in future.</p> |

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|     | <b>Decision / Conclusion</b><br><p>Members noted the update and were assured of progress being made by the team.</p>  |
| S60 | <b>Items to be included on the Chairs Assurance Report</b><br><p>The Committee agreed that the following items should be reported to:</p> <p><b><u>Board</u></b></p> <ul style="list-style-type: none"> <li>•</li> </ul>  |
| S61 | <b>Any Other Competent Business</b> <ul style="list-style-type: none"> <li>• Members agreed to trial a 9.30am start for the February 2024 meeting, to avoid diary clashes for members.</li> <li>• The Head of People and Culture advised that one of the figures from the iMatter results had been calculated incorrectly for the staff governance standard - treated fairly and consistently and as a result of the recalculation, the organisation had gone from 74 to 75 and would be reflected in the full report.</li> </ul> |
|     | <b><u>Items for Information and Noting</u></b>  |
| S62 | <b>DL (2023) 28 - Interim National Menopause and Menstrual Health Policy for NHS Scotland</b><br><p>Members received the circular for noting.</p> <p><b>Decision / Conclusion</b><br/> <p>Members noted the circular</p> </p>   |
| S63 | <b>SPPA - NHS Pension Schemes 2023/11</b><br><p>Members received the circular for noting.</p> <p><b>Decision / Conclusion</b><br/> <p>Members noted the circular</p> </p>   |
| S42 | <b>Schedule of meetings</b><br><p>The schedule of meetings for 2023/2024 was noted.</p>   |
| S43 | <b>Record of Attendance</b><br><p>The record of attendance was noted.</p>   |