NHS GRAMPIAN Minute of the Staff Governance Committee held on Tuesday 25 February 2020 at 1pm in the Conference Room, Summerfield House

Present:

Mr Jonathan Passmore, Non-Executive Board Member (Chair) Mrs Rhona Atkinson, Non-Executive Board Member Ms Rachel Little, Employee Director Mr Bert Donald, Whistleblowing Champion

In Attendance:

Mrs Susan Coull, Interim Operational Director of Workforce Professor Amanda Croft, Chief Executive Mrs Kim Cruttenden, Chair of the Area Clinical Forum Ms Gerry Lawrie, Head of Workforce Planning and Development Mr Ian Cowe, Health and Safety Manager Mrs Anne Inglis, Head of Organisational Development Ms Laura McDonald, Unison/Partnership/Health and Safety Rep, Aberdeen City CHP Mr Sandy Reid, Lead, People and Organisation, Aberdeen City CHP (Item 4/20) Mr Paul Allen, Director of Facilities and Estates (Item 10/20)

Minute Taker:	Mrs Diane Annand, Interim HR Manager Staff Governance and
	Catriona Downie, Secretary to the Director of Workforce
Observer:	Victoria Campbell, HR Officer

Subject	Action
Apologies	
Apologies were received from: Dr Lynda Lynch, Chair; Mr Sandy Riddell, Non-Executive Board Member; Mr Steven Lyndsay, Full Time Partnership Representative; Dr Richard Coleman, Associate Medical Director, Education, Training and Workforce; and Dr Mohamed S Abdel-Fattah, Aberdeen University Representative.	
Minute of meeting held on 26 November 2019	
The Minute was approved as an accurate record.	
Matters Arising	
a. Action Log	
Sturrock Report Update - Mrs Coull to provide an update under item 6/20.	
Strategic plan for communication/engagement - Mrs Coull updated that in relation to the action to develop a strategic plan for communication/engagement, work was in progress with the Annual Operational Plan and the Clinical Strategy, suggesting that Lorraine Scott be invited to the next meeting to provide an update.	DA
	 Apologies Apologies were received from: Dr Lynda Lynch, Chair; Mr Sandy Riddell, Non-Executive Board Member; Mr Steven Lyndsay, Full Time Partnership Representative; Dr Richard Coleman, Associate Medical Director, Education, Training and Workforce; and Dr Mohamed S Abdel-Fattah, Aberdeen University Representative. Minute of meeting held on 26 November 2019 The Minute was approved as an accurate record. Matters Arising a. Action Log Sturrock Report Update - Mrs Coull to provide an update under item 6/20. Strategic plan for communication/engagement - Mrs Coull updated that in relation to the action to develop a strategic plan for communication/engagement, work was in progress with the Annual Operational Plan and the Clinical Strategy, suggesting that Lorraine Scott

	Constitution - Mr Passmore reported that the Constitution would be reviewed once the Committee had completed a cycle of the redesigned agenda. Mrs Coull advised of the link between the Committee and the SLT Workforce Sub Group (now named the PAIR People and Culture Sub Group), and of the work in progress to define the information flow from the Sub Group to the Committee.	
	Professional Framework - Ms Lawrie advised that the Professional Framework, which was originally only clinical, is included on day one of Corporate Induction following the SLT presentation. It was agreed that this action could now be closed.	DA
	Sector Focus – Staff Governance Standard Monitoring	
4/20	Sector Attendance – Aberdeen City H&SCP	
	Aberdeen City H&SCP was attending to provide assurance to the Committee of the compliance with the Staff Governance Standard, presenting both what was going well and not so well. The presentation was delivered by Sandy Reid, Lead, People and Organisation, Aberdeen City CHP and Laura McDonald, Unison/Partnership/Health and Safety Rep, Aberdeen City CHP, joint chairs of the Partnership Forums.	
	The presentation outlined their structure of partnership working which includes a Joint Staff Forum, in addition to the Partnership Forums with the hope that within the next year, Mental Health hosted by Aberdeen City will also feed into the partnership structure. The Joint Staff Forum has a remit covering both NHS and Aberdeen City Council employees, with management and Trade Unions/Professional Bodies membership from both.	
	The joint chairs work closely with the Chief Officer on the agenda content, with the joint chairs meeting on a monthly basis as a mechanism to highlight any issues and decide on the input required. Ms McDonald acts as a link between the H&SCP and the NHS Grampian Staff Side, in order that appropriate information is fed both ways.	
	Ms McDonald advised that following a gap analysis of Health and Safety, the decision was made to have a joint Health and Safety Committee within each IJB. Aberdeen City had made this change one year ago also incorporating Wellbeing, with good progress being made with consolidating arrangements in the Partnership. The governance arrangements remained in the employers of NHS Grampian and Aberdeen City Council. Pre- meetings were held with the Health and Safety representatives to build relationships and highlight common ground.	
	Mr Reid reported that learning from previous experience, partnership colleagues will be involved from the start. Ms McDonald re-iterated work was underway to reaffirm the working relationship with Trade Unions. It had been agreed that the H&SCP will work with Trade Union colleagues, involving that as early as possible.	

The following challenges were outlined:	
 working in an organisation with staff employed by NHS Grampian and Aberdeen City Council and the need to find a way to work in an integrated way in for example for recruitment, redeployment; time due to the volume of partnership meetings annually; and staff partnership continuity if/when Mr Reid or Ms McDonald is not in attendance. Colleagues per locality will be encouraged to take part to bring into the forefront the staff that are working there, which will aid succession planning. 	
The Committee expressed their thanks to both Ms McDonald and Mr Reid.	
The Committee asked what action was being taken to reduce the reliance on two dedicated individuals of Ms McDonald and Mr Reid. Mr Reid responded that attendance is good at forums and new attendees are invited to meeting and such events as the GAPF Development day for succession planning purposes and others are encouraged to take on roles, traditionally done by the joint chairs. Ms McDonald added that there was a need for roles such as Team Leaders to understand what a partnership forum stands for, what it delivers and from which it is then hoped there will be increased participation in forums.	
The Committee was in the favour of the idea of developing participation from each locality and from this undertaking the issues that affect them using an informal approach. This would feed into the more formal local partnership forum and GAPF.	
The Committee shared concerns that if Mr Reid is not available to attend for example GAPF, no alternative Aberdeen City management representative attend. Mr Reid responded that additional support would come from increasing the knowledge of what partnership does for the H&SCP.	
The Committee recalled that there may not have been discussion at the IJB regarding their connection with the sector partnership forum including the joint chairs attending, however there should be a commitment to consider how partnership working can feature more on the IJB agenda. Ms McDonald explained that the Clinical Care Governance Committee included Staff Governance with the joint chairs attending.	
The Committee discussed the challenges of change management and the process to agree a change process used for all staff in the H&SCP, using the principles from the NHS Grampian Organisational Change Policy was explained. Governance and any action related to terms and conditions were taken forward by the employers.	
Ms McDonald advised in response to a query, that Local Authority Staff Side/Trade Unions feed in through the Joint Staff Forum. It is not a decision making body but a forum for sharing of experiences and difficulties. Over time more Local Authority Trade Union Representatives	

	Three months on there is not too much to update; the iMatter cycle is underway again and so we will have new results later in the year. For strategic intent we are thinking about our review of the clinical strategy and the outcomes framework and how these bits fit together. We will be ensuring we have very wide involvement in this ensuring people are involved in this future direction. At an individual level we continue to develop our approach to the culture work of the organisation and would hope to bring something to this Committee later in the year".	
	"Mike Adams and Adam Coldwells presented to you at the end of November 2019 providing an update on what we were doing at strategic, organisational and individual level to support the "involved in decisions" part of the Staff Governance Standard.	
	issues that affect them either directly or via their trade union/professional organisation As Dr Coldwells was unable to attend in person, Mrs Annand read the provided update:	
5/20	Employer Responsibility – Involved in Decisions Employee responsibility – Actively participate in discussions on	
	Staff Governance Standard System Assurance	
	The Committee commended the successes of a joint Health, Safety and Wellbeing Committee and the Clinical Care Governance Committee. The Committee was encouraged that there had been a recent reaffirming of the working relationship with Trade Unions/Professional Organisations with the H&SCP. The Committee concluded by acknowledging the dedication of Ms McDonald and Mr Reid.	
	 the progress of widening the participation in partnership working and iMatter action plan numbers and the difference made through action plans. 	
	The Committee asked that when Aberdeen City H&SCP return to a future meeting that an update be provided on:	
	The Committee raised the value of iMatter in the H&SCP, given it was implemented across all staff. Ms McDonald advised that iMatter is an agenda item at the partnership forum and Joint Staff Forum, with the outcomes used as a baseline of how it is to work in the H&SCP. Action plans are devised by the team structure, irrespective of employer.	
	and a working relationship to be developed.	

	that a written paper on progress will be required prior to the next meeting, to include the link to the Annual Operational Plan and the work with the Area Clinical Forum and GAPF.	A Coldwells
	The Committee discussed the involvement of the Engagement and Participation Committee. Mrs Cruttenden and Ms Little confirmed that both were members of this Committee. Mrs Cruttenden in her role as a Non- Executive Director, not Chair of the Area Clinical Forum, and Ms Little as Employee Director, which linked to her role with GAPF.	
6/20	Employer responsibility – Treated fairly and consistently, with dignity and respect, in an environment where diversity is valued; and provided with a continuously improving and safe working environment, promoting the health and wellbeing of staff, patients and the wider community.	
	Employee responsibility – Treat all staff and patients with dignity and respect while valuing diversity; and ensure that their actions maintain and promote the health, safety and wellbeing of all staff, patients and carers.	
	Mrs Annand asked the Committee to review the self-assessment for assurance purpose that mechanisms are in place and effective and that the principles of the Standard are being applied equitably and fairly to all staff. The self-assessment detailed the organisation wide initiatives/action and the challenges to achieve the specific commitments under the broad descriptors.	
	Ms Lawrie highlighted that there is a slight increase in the iMatter response rate but the action plan rate could be further improved, a focus of the coming year. Facilities and Estates had undertaken significant work to increase the return of paper copies. Pending developments for iMatter was the ability to complete the survey on a phone or tablet and the inclusion of Doctors and Dentists in Training.	
	The Committee acknowledged the theme of training and discussed whether an audit of training should occur, covering for example what training is done; manager training including the time and the impact on other priorities; impact of doing and not doing the training; and identifying gaps of expertise. Ms Lawrie advised that the learning outcomes for training requires to be clear, and where a need has been identified that staff are able to be released. Training would require to be defined in devising an audit.	
	Mr Cowe highlighted that firstly the number of staff requiring particular training requires to be identified and then after training, a follow up to measure the impact of the training.	
	Mrs Inglis advised that a North East Learning and Development Turas page has been developed to hold all information in one place. A group comprising of Organisational Development, Learning and Development and Practice Education are working to ensure the whole pathway of information	

is held together. The Committee outlined that progress of this could be presented as part of the evidence of the achievement of the Appropriately Trained part of the Standard.	
The Committee discussed that training required to be person centred and relevant to the individual, placing an importance on appraisal, agreeing that training should be a separate subject for a broader Committee discussion.	
The Committee discussed the importance of the inclusion in Corporate Induction of instilling behaviours and values but there was the need to reinforce these going forward to avoid unacceptable behaviours.	
The Committee agreed that there was value and relevance in the initial self-assessment requesting that the template be developed to enhance future self-assessment. For each specific commitment the information/data source should be recorded (or detail where none exists) that informs for example how well the initiatives/actions are working and whether the commitment is being delivered. In addition concerns and where action is needed should be recorded.	DA
Mrs Coull provided a synopsis of the creation of the Sturrock Review Short Life Working Group. This group was created following a request for information from the Scottish Government, focusing on the dignity at work aspect of the published Sturrock Report. A ministerial group was also formed, currently developing a behavioural charter/framework to promote good behaviour. In addition there was the soon to launch Once for Scotland Workforce Policies and the current work on new national Whistleblowing standards.	
The NHS Grampian questionnaire distributed at the end of 2019 was voluntary, completed by 1481 members of staff, providing good data, enhanced by the 2239 entries in the free text fields. Ms Coull provided the Committee with a copy of the Grampian Wide Staff Views Culture Report containing the questionnaire results. Members of the Group had taken the report to the advisory committees of Area Clinical Forum, GAPF and BMA JNC.	
Mrs Coull advised that the Short Life Working Group wished to distribute the Report as part of a Global Message and to offer a variety of opportunities to help and raise awareness. She would like to encourage areas to discuss further and identify what improvement can be made in each area, linking to their iMatter action plan. The aim was also to organise roadshows across the region to allow staff to drop in and influence action. Mrs Coull requested advice and guidance from the Committee on the next steps.	
The Committee stated that the Chief Executive and SLT should lead on the decision with regard to next steps as the role of the Committee was to be assured by the action taken. The Committee asked that if roadshows were to be held that they be appropriately resourced and delivered a clear message on acceptable behaviour.	

	The Committee thanked Mrs Coull for the update, asking for a further update at the next meeting.	SC
	Statutory Information, Reports and Returns	
7/20	Staff Governance Committee Board and Performance Governance Reports content	
	The Board report would provide a summary on Staff Governance Standard Monitoring with Aberdeen City H&SCP the self-assessment presented under Staff Governance System Assurance; the update provided on the Transport Workers; and that Mr Donald attended his first meeting as the Whistleblowing Champion.	
	For Information	
8/20	a. GAPF Minutes – 17 October and 14 November 2019 – noted.	
	 b. BMA Joint Negotiating Committee (JNC) Minutes – 2 September 2019 – noted. 	
	 c. Staff Experience Steering Group minutes 10 June, 19 August and 16 December – noted. 	
9/20	2020 Meeting Dates	
	The amended 2020 dates were noted by the Committee.	
10/20	AOCB	
	a. Update on Transport Workers	
	Mr Passmore introduced Mr Allen, advising that he was attending to provide the Committee with assurance that the Transport Workers knew how to raise concerns following an article in the local press.	
	Mr Allen advised that the process to raise concerns was reiterated following the press article, both verbally and in a letter from himself, Mrs Catto, HR Manger and Mr Adams, Full Time Partnership Representative. However to date no calls had been received through the confidential route provided.	
	Mr Allen gave assurance that the committed to actions were progressing and by working together improvement would be achieved. Appropriate forums were in place to enable two way dialogue, including the establishment of a partnership forum, which had met for the first time.	
	The Committee was briefed on the issues within the team and an example of a commitment made.	
	The Committee discussed the routes of raising concerns internally, which not been used in this instance and the merit of asking the Union involved	

 why this was the case, as there were examples successfully. The Committee was assured that all appropriate undertaken by management. b. Whistleblowing Champion Mr Passmore introduced Mr Donald, Whistleblo his appointment effective from 1 February 2020 Committee for the opportunity to outline his role. Mr Donald outlined his role as the following: a Non-Executive Board Member with a d Whistleblowing Champion, which formed Whistleblowing Standards effective from to promote a culture of openness and tragentiate to raise incurse. 	e actions were being wing Champion, following . Mr Donald thanked the lefined role as the l part of the new 27 July 2020; insparency so all staff feel
 confident to raise issues, in the knowledge and the matter properly investigated; no operational role in investigating whistle seek assurance for the Board from the ENHS Whistleblowing Standards are comsystems and policy in place and that they of good practice will be provided to the Bassurance; responsibility to seek assurance that stat raise concerns and are not inhibited to de ensure any detriment to the whistleblower work closely with the Independent Natior (INWO) once established, hosted by the Ombudsman (SPSO). 	eblowing complaints; xecutive Directors that the plied with, with appropriate y are being followed. Areas coard to evidence If are actively encouraged to o so. er is properly addressed; nal Whistleblowing Officer
Mr Donald and Mrs Aitchison was attending a n at which he hoped to receive more information role would be implemented in Boards.	and direction on how the
Mr Donald felt that the role should be a welcom independence, scrutiny, fairness, governance a out of the role. He confirmed visibility of his role was also the Whistleblowing Champion for NHS	nd integrity in the carrying e was important and that he
Mrs Coull thanked Mrs Atkinson, on behalf of the work in carrying out the role of the Whistleblowi	
The Committee agreed that a paper be prepare where the Standards would be hosted in the org mechanisms.	
11/20 Date of next Meeting	

APPROVED

Due to the Covid-19 pandemic the meeting scheduled for Thursday 11	
June 2020 at 1pm in the Seminar Room, Summerfield House did not take	
place. A Special Covid-19 meeting did take place on 9 April 2020.	