



NHS GRAMPIAN
Meeting of the Grampian Area Partnership Forum (GAPF)
Thursday 20 June 2019 at 1-4pm
Conference Room, Summerfield House

Present:

- Rachael Little, Staff Side Chair/Employee Director (Joint Chair) – Chaired the meeting
- Amanda Croft, Chief Executive (Joint Chair)
- Mike Adams, UCATT
- Paul Allen, Director of Facilities and Estates
- Diane Annand, Interim HR Manager Staff Governance
- Jackie Berry, AHP Lead Mental Health & Disabilities (Deputy for Caroline Hiscox)
- Gail Cook, Assistant Business Manager Mental Health & Disabilities (replacing Chantal Wood)
- Dianne Drysdale, Manager of Chief Executive Board Business Unit (Deputy for Director of Corporate Communications)
- Rob Fairfull, GMB
- Alistair Grant, RCN
- Keith Grant, UNISON (Deputy for Martin McKay)
- Gemma Hood, SOR
- Deirdre McIntyre, COP (VC),
- Cameron Matthew, Divisional General Manager, Acute
- Caroline Moir, Health and Safety Team ASHSCP (deputy for Mike Ogg)
- Jonathan Passmore, Non-Executive Board Member & Staff Governance Committee Chair
- Clark Paterson, Senior Finance Manager, Finance (deputy for Alan Gray)
- Claire Power, Interim Primary Care Lead, Moray Health and Social Care Partnership (VC)
- Sandy Reid, Senior Service Manager, Aberdeen City Health and Social Care Partnership
- Cheryl Rodriguez, Head of Occupational Health and Safety
- Karen Watson, UNITE (deputy for Steven Lindsay)

In Attendance:

- Catriona Downie, Secretary to the Director of Workforce
- Anne Murray, Minute taker

| No. | Subject | Action |
|-----|--|--------|
| 1 | <p>Welcome and Apologies, listed below</p> <p>Joan Anderson, Partnership Support Officer (Anne Murray deputised); Rhona Atkinson, Non-Executive Board Member; Janet Christie, BAOT; Susan Coull, Interim Operational Director of Workforce; Alan Gray, Director of Finance (Clark Paterson deputised); Caroline Hiscox, Acting Director of Nursing, Midwifery and AHPs (Jackie Berry deputised); Annie Ingram, Director of Workforce; Gerry Lawrie, Head of Workforce and Development; Steven Lindsay, Unite (Karen Watson deputised); Lynda Lynch, Board Chairperson; Tracy Miller, RCM; Ruth Lyons, CSP; Martin McKay, UNISON (Keith Grant deputised); Carolyn Venters, Staff Side Health and Safety Chair (no deputy available).</p> | |

| | | |
|---|--|-------|
| 2 | <p>Minutes of Last Meeting held on 25 April 2019</p> <p>The minute of 25 April 2019 was approved after the following amendment</p> <p>Item 3, 3rd paragraph, last sentence amended to read “The Staff Governance return for 2017-18 could also be discussed at the meeting.”</p> | |
| 3 | <p>Matters Arising</p> <p>a. North of Scotland Memorandum of Understanding Update</p> <p>This item had been escalated to National Staff Side and a response/reply was still awaited. Action – remove from future agendas until a reply/response received from national staff side.</p> <p>b. Staff Recognition Short Life Working Group – no update. Action – carry forward to next meeting</p> | RL/JA |
| 4 | <p>Well Informed</p> <p>a. eOPAS / Pilot in Laboratory Medicine</p> <p>Cheryl Rodriguez and Alistair Grant submitted a paper listing frequently asked questions which was distributed to Laboratory staff who were participating in a pilot project relating to eOPAS and the managers portal.</p> <p>Background to the pilot project was provided. In early April 2019 Occupational Health Service (OHS) upgraded their Occupational Health Record Keeping System and were now moving onto the 2nd part of this programme which was the rollout of the eOPAS Pilot in Laboratory Medicine. Using the eOPAS manager’s portal; Lab Managers would be given limited access to individual staff member’s information held in eOPAS e.g. skin health surveillance.</p> <p>The 3 month pilot would be launched in July 2019 and would be used to check if eOPAS was robust within the management structure and link staff details to the correct manager/line manager, as well as checking if the information held within eOPAS reflected what was also held in SWISS, which was one of the key systems that would eventually be updating eOPAS.</p> <p>Points noted:</p> <ul style="list-style-type: none"> • The eOPAS system/database would hopefully replace existing paper based systems for programmes like skin health surveillance or face fit testing | |

- Further developments to this new system would eventually allow electronic referrals using the system and two way transfer of information, etc
- The OHS Programme was supported by a Programme Board, maintaining an Action Plan and Risk Register
- Grampian was the first Board in Scotland to introduce a Portal Process using eOPAS

b. Staff Flu Vaccinations

Cheryl Rodriguez reporting that each year after the Seasonal Flu period ends the uptake by staff and/or patients is discussed at both local and national levels. NHS Grampian performance is fair when compared with other Health Boards, but there was always room for improvement.

So what more, if anything, can be done to improve uptake? - this question prompted Cheryl Rodriguez to look at the vaccination options offered in/by other Health Boards and she noted that one option not offered in Grampian was "Peer to Peer Vaccination".

After discussion with NHS Grampian Public Health it was agreed to continue with the existing Grampian options but also rollout a pilot Peer to Peer option in some of the high risk acute clinical areas e.g. Woodend, ARI, etc.

Point noted/discussed re Peer to Peer Vaccination:

- This would be more convenient for staff e.g. no travelling, etc.
- There was one concern around this option, namely would this take staff away from frontline services and the simple answer was no.
- Vaccination was being delivered as a medical professional not as a peer.
- There is need to ensure that staff retain the right to decline being vaccinated, uptake remains optional. No one should be bullied into something they do not want to do.
- GDPR will apply. Confidentiality is key and will be assured.
- Vaccination needs to be recorded, so there is need to ensure that the required codes are in place, all forms are completed and submitted timeously.
- Appropriate clinical procedures and/or protocols apply e.g. vaccine storage, etc.
- If the pilot is successful, resources allowing this approach could be rolled out to other staff groups e.g. HSCPs, Care Homes, Pharmacies, GP Practices, etc.
- Champions required to support staff and/or the pilot and training will be provided.

| | |
|---|------------------|
| <p>It was noted that the level of services that could be delivered by GO Health Services was restricted by the level of vaccine, manpower and/or funding available. Where possible and required it was important that NHS Grampian, the Local Authority and the HSCP services link in with each other.</p> <p>It was highlighted that the UK should note the Seasonal Flu Campaign may start earlier this year. This based on Australian Flu Campaign experience.</p> <p>Action - Cheryl Rodriguez to feedback to Public Health, consider delivery of the peer to peer model within the HSCPs and also take updates to future GAPF meetings.</p> <p>c. Once for Scotland (OfS) Workforce Policies</p> <p>The consultation period had concluded on 17th May 2019, with the work to review the feedback underway nationally.</p> <p>Policy on Management of Sickness Absence (promoting attendance)</p> <p>GAPF was asked to approve the recommendation proposed by the Policies Sub-Group with regard to the implementation of a circular on the management of sickness absence.</p> <p>The work of the Scottish Terms and Conditions Committee (STAC) Promoting Attendance Working Group will, in large measure, be incorporated into the OfS Promoting Attendance Policy. However, in advance Boards were asked to apply three recommendations from 1st April 2019. These were detailed in the paper in relation to a target to reduce sickness absence; introduce common NHS Scotland trigger points to prompt and inform the first formal discussions in relation to sickness absence; and introducing a paper based appeal process at the 1st formal stage.</p> <p>It was proposed not to implement the recommendations of the circular and await the OfS Policy. This would ensure all changes in relation to attendance management would be made at the same time i.e. post July 2019.</p> <p>The paper outlined the changes necessary in relation to the trigger points and the difficulty to implement one part of a new process in isolation, as it would not fit current processes. The new OfS policy at this stage will create the most change for NHS Grampian, as the process used to manage attendance through a formal process will change from the Employee Conduct Policy to a new three stage formal process. This is a significant change of practice hence the recommendation.</p> | <p>CR</p> |
|---|------------------|

| | | |
|---|--|--|
| | <p>GAPF approved that circular PCS(AFC)2019/2 would not be implemented from 1 April 2019 instead the OfS policy would be awaited to enable all changes to be undertaken at the same time.</p> <p>d. Finance Update</p> <p>Clark Paterson updated the group on the NHS Grampian April/May 2019 Financial Report. The report noted an overspend of £2.2m which was significantly greater than had been expected.</p> <p>The main pressure points of concern are listed below:</p> <ul style="list-style-type: none"> i. Medical Staffing overspend was sitting at £1.6million, this was mainly due to ongoing issues with non-compliant rotas and the increased use of Medical Locums (£3.16million spend in first two months). ii. Nursing overspend was just under £1million, mainly due to use of agency nurses (£1.6million spend in first two months). iii. Non Pay Budget overspend is £1million. Mainly on medical supplies/equipment. <p>An update on financial performance for each of the Health and Social Care Partnerships (HSCP's) is awaited however NHS Grampian was aware of financial pressures within the HSCP's to whom they had an on-going commitment to contribute to a share of any overspend.</p> <p>At the end of 1st quarter (April-June) the Finance Team intend to carry out a full review of financial performance for each area as the current level of overspend is not sustainable and corrective steps may need to be considered/taken.</p> | |
| 5 | <p>Treated Fairly and Consistently, with Dignity and Respect, in an environment where Diversity is Valued</p> <p>a. Sturrock Review</p> <p>Diane Annand gave GAPF an update on NHS Grampian actions and the request from the Scottish Government further to the publication of the Sturrock Report. The report was highlighted by Professor Croft in her digital Chief Executive report distributed on 7th June 2019 along with a link to the report provided.</p> | |

The Cabinet Secretary had sent Boards a letter dated 20th May 2019 asking, by 28th June 2019, for responses to the following questions

- Details of immediate actions your Board have taken/plan to take on the back of the recommendations made in the Sturrock Report.
- What support your Board have put in place/will put in place for any member of staff who has been affected by bullying and harassment.
- Details of your Board's plan for staff engagement to consider these recommendations and a timeline of when this will be carried out.

A draft letter had been considered by the System Leadership Team (SLT) on 3rd June 2019, draft two at the Scottish Governance Committee on 17th June 2019 with draft three due to be finalised at SLT on 24th June 2019.

Under the Board's plan for staff engagement, the Sturrock Report would feature at a future meeting where feedback would be requested. A set of questions will be developed in order to request feedback on a consistent basis.

A short life working group had met once. The membership was still being formed but currently consisted of Diane Annand, Susan Carr, Susan Coull, Fiona Findlay, Anne Inglis, Rachael Little and Emma Pettis. In addition there would be Sector representatives.

The need to respond to staff quickly when concerns are raised was acknowledged, ensuring management teams are supported to do so. GAPF was a key committee to discuss what can be done differently in the future. When feedback is sought from GAPF it could be done using a workshop format.

b. Brexit Update

Diane Annand was able to report that the actions following the EU Nationality Survey had been completed.

The NHS Grampian intranet site remained the source of up to date information, with the site advertised on the banner of the intranet home page. The generic email account of grampian.eucitizens@nhs.net continued with emails answered by Agnieszka Stephen, Assistant HR Manager.

6

Involved in Decision Making

a. GAPF Development Day 15 May 2019

The focus was on revisiting the approach used for partnership working. All confirmed it was a good day. Feedback received was being collated to be fed back to GAPF.

Points noted/discussed:

- All who attended and/or participated were thanked for their contributions.
- The “take 2 new people to the meeting” was an excellent idea. There was still staff unsure about what “partnership” is, what it can do, etc.
- Recognition of staff service, work, etc. – there were a lot of separate projects and it was important for the organisation to show that it appreciated all staff, especially those with long service.
- NHS Grampian Partnership Model has had some successes but there is still room for improvement, including the need for more resource. This was to be picked up for further development and taken to GAPF by the Big Rocks Working Group.

b. GAPF Decision Making – Facilities Arrangements for Trade Unions and Professional Organisations Policy and GAPF Constitution

Two historic versions of the GAPF Constitution and a proposed updated Constitution had been circulated.

Due to confusion around what constituted the GAPF “quorum” there was the need to review and confirm the GAPF quorum and check for any other changes.

The amendments submitted were discussed and agreed as follows:

- i. Scope and Functions (2.4 j) – there is need to add reference to the Staff Governance Standard. Add to end of the sentence.
- ii. Membership (2.5, bullet points 4 and 5) – Delete reference to a Deputy Director of Workforce as no position in the Workforce Directorate structure and amend “Two Senior Staff from the Workforce Directorate” to “Three Senior Staff from the Workforce Directorate”.
- iii. Membership (2.13, last sentence) – to be amended to read “...no later than five working days before each meeting”

| | | |
|---|---|--------------------------------------|
| | <p>iv. Membership (2.15) – to ensure clarity the first sentence is to be amended to now read ... “A quorum at each meeting of the GAPF will be of six each of Staff Side and Management Members, this will not include Joint Chairs”.</p> <p>It was suggested that the Membership (2.15) section should have a further amendment to limit to the amount of deputies allowed.</p> <p>Action – Changes discussed and listed above to be processed and taken back to July meeting for further discussion.</p> <p>c. Public Holidays 2021 onwards</p> <p>It was noted that a number of agreed Public Holidays were not aligned with some of the Local Authority School Holidays and this unfortunately inconvenienced some staff.</p> <p>The Grampian, Local Authorities and the Partner holidays, both within and outwith the region would continue to be considered when determining NHS Grampian public holidays. This is not an easy task and whatever is agreed would not suit everyone. Noted that Public Holidays were currently set up to 2021, but further discussion will focus on Public Holidays 2021 onwards.</p> <p>The 2020 May Day of 4 May was being moved for one year to 8 May in order to allow the public to mark the 75th anniversary of VE Day. The position of the Scottish Government on this was unknown. GAPF agreed in principle to this change. It was also noted and confirmed that Corporate Communications will help advertise the change to Grampian workforce, once a final decision was made.</p> <p>Action – Rachel Little to provide a definitive position at the July meeting, or if possible before, on the change of public holiday for VE day.</p> | <p>RL/JA</p> <p>RL</p> |
| 7 | <p>Sector and Local Partnership Reports</p> <p>a. Moray – points highlighted from the Sector report listed below:</p> <ul style="list-style-type: none"> • 2020 May Day Holiday – noted that this public holiday may be moved to coincide with 75th VE day anniversary. NHS Grampian to confirm the move to enable staff leave planning. • ID Badges - plans were being developed to offer a service within the Dr Gray’s Hospital Library, possibly on designated days. • Dr Gray’s Hospital 200 year celebrations – confirmed that the visit from the Princess Royal was a great success. • GAPF Away Day – confirmed the need to raise awareness of GAPF, the work it does, the meetings, etc. | |

b. Aberdeenshire (May & June)

Points highlighted from the Sector report listed below:

- School Nursing – this group of staff approached Staff Side with concerns around their capacity to carry the local immunisation/vaccination programme workload and their involvement in the plans. A meeting was arranged and was well attended by staff. Mike Ogg and Jenny Gibb (for Nursing) also attended. An Action Plan and Risk Register have now been setup. Discussion ongoing linked to the funding to allow the setup of an “Immunisation Team”.

c. Mental Health and Learning Disabilities

Points highlighted from the Sector report listed below:

- Ligature Reduction Programme – all staff thanked for their patience and tolerance of extensive building work that is ongoing on Cornhill Site.
- CAMHS relocation - to the Links Unit City Hospital is still on target to open 1st July. A thank you was extended to all staff for all of the extra work they may have had to take on on-top of their everyday work.
- Joy at Work project – aimed at improving staff morale and wellbeing had commenced at Drum Ward. Improvement team discussing measurement plans and agreed outcome measures, information/data being captured at the end of every day.

d. Facilities & Estates

Points highlighted from the Sector report listed below:

- Supervisory Programme – cohort 1, the first part of the Supervisory Development and Career Succession commences 24th June. This will be a 6 month programme. This programme is assessed, evaluated with updates on progress taken to GAPF and the SLT. Paul Allen and some other Managers attend various workshops, etc. to promote and encourage staff to consider becoming a Supervisors and/or Managers. Douglas Andrew was commended, by all, for his work in this area both within and out with his directorate.
- Environmental Health/Listeria – recent outbreak reported by the media have necessitated the need to raise awareness and the health & safety bar linked to this area. This week NHS Grampian have had daily visits from Environment Health who have taken swabs and samples from various pieces of kitchen equipment for testing but no problems and/or issues have been found.

- Linen Services – the National Linen Programme has been ongoing for a number of years and is about to be extended for further consultation through the Area Partnership Forums. Discussions and engagement are at both local and national levels, the process to date has been both open and transparent. Locally the Chief Executive and Partnership have both been involved.
- Decontamination Service - action plan is in place and ongoing with positive feedback from staff.
- Joint Equipment Service – the date for the service to be operational has been moved to 19th August 2019. There are still some challenges that need to be discussed but it is hoped that the “Team” at the end of this process will be a good example of an “Integrated Team” of NHS Grampian and Bon-Accord Care staff managed by a Bon-Accord manager, without the need to resort to the use of TUPE.
- Public Health & Wellbeing – project lead by Public Health based at Domestic Department at Woodend. Progress has been good and includes Fairs to promote these services, etc.
- Site Building works/Closed Window Policy – this was being led by Dr Bateman and she is carrying out walkrounds and assessments. Feedback is imminent. The rollout of this policy was a precautionary step associated with duty of care, infection control, etc. Noted that some of the areas have now been risk assessed as “low risk” so they can consider opening windows again.

e. Acute

Points highlighted from the Sector report listed below:

- The April Sector Report missed the April meeting so taken to today’s meeting.
- Rock Choir – was a huge success, 90 staff involved, lifting morale.
- Surgical Friday Walkrounds – the closed window policy was raised but staff understand why it was necessary; however the lack of ventilation in some rooms has affected room temperatures. Mobile air-conditioning/ventilation units have been used to help regulate the temperature in affected rooms e.g. ITU, Theatres, etc.
- Eye Out Patients – had issues with dust but this has been managed with help from Estates and Facilities.
- Risk Assessment Reports – when received the Acute Sector will be working with Health & Safety looking at any infection control risks, etc.

It was noted that both locally and nationally the level of in-patients in hospital, for this time of year, had increased dramatically. In previous years in Acute Sector the number of boarded patients was below 10 but this year it has increased to 60. Professor Croft commented that it was a similar position across NHS Scotland.

f. Corporate – no update, take to next meeting.

g. Aberdeen City Health and Social Care Partnership (ACHSP)

Points highlighted from the Sector report listed below:

- Recruitment and retention – remained a challenge.
Examples tabled:
 - 8 podiatry vacancies, when advertised there was only 1 applicant
 - 2018/19 there were 43 Physiotherapy Graduates and only 1 is working in Grampian. Bulk moving to other Scottish cities or further afield.
- Healthy working Lives – ACHSP decided to roll out staff activities during work time. It is thought that this approach will show staff that they are valued. Also noted recently that the North East College Complimentary Therapist Course required its students to complete a set of practical hours treating clients before they could graduate so ACHSCP opened its doors to these students and over a period of two weeks ACHSCP staff had access to free complimentary therapy sessions. Feedback from staff was good.
- Personal Development Plans (PDP) – the organisation should consider approach for this.
- Staff Retention – the organisation needs to have a committed focus on retention to ensure existing staff are happy and remain in post and not leave and/or retire early.

Following points were discussed by GAPF:

- Aberdeen City IJB commissioned the roll out of a 12 week project to look into the problems being encountered by a local team currently under great stress. Unfortunately the project had a difficult start but apologies and assurances that the problems encountered would not be repeated again have been received from both the Chief Officer and the Senior Manager involved.
- Concern has been expressed around the external company commissioned to do this work and the lack of involvement and engagement with staff. This concern is based on work previously carried out in other Boards and/or Grampian which anecdotally reported it had not met the required standard.

| | | |
|---|---|--------------------------------|
| | <ul style="list-style-type: none"> - RCN wished for their concerns regarding Meridian to be formally recorded. - The Local Authority and NHS Grampian need to work together and ensure that information is shared. - It was proposed that the learning from this could be a case study at either the August 2019 or November 2019 NHS Grampian Staff Governance Committee with regard to the “involved in decisions” and “safe and improved” aspects of the Staff Governance Standard. | |
| 8 | <p>Provided with a continuously improving and safe working environment, promoting the health and wellbeing of staff, patients and the wider community</p> <p>a. GAPF Endowment Fund Update</p> <p>Rachael Little gave the annual report. This fund has an annual allocation of £50,000, split £15,000 to training (non-core but with a benefit to patients) and £35,000 non-training activity.</p> <p>During 2019/20 it was hoped the fund will be refreshed, re-promoting the fund, what it can be used for, rules/restrictions that may apply, and when applications for funding should be submitted.</p> <p>2018/19 spend had been training £9,500, non-training £19,000. Any underspend is put back into the Central Endowment Fund.</p> <p>Rachael Little asked GAPF to consider highlighting Management Representatives from each Sector to join the GAPF Endowment Sub Group. Dianne Drysdale volunteered to join the group to represent Corporate.</p> <p>b. Dress Policy Review Group Update</p> <p>Cameron Matthew reported that this group had met virtually by email. Draft agreed amendments to the footwear section had been forwarded to the Policies Sub-Group. Advice had been taken from specialists concluding that it was not PPE and for example from Podiatry on why a closed heel was necessary.</p> <p>The group had become aware of work within one sector for one professional group. GAPF was unsure why no one around the table had been aware of this work, noting it would be helpful if the various groups worked closer together. It was clear that the Dress Policy was the overarching policy.</p> | <p>Managmt Reps</p> |

| | | |
|----|--|-------------------------------------|
| | <p>c. iMatter Case Studies</p> <p>i) Caron Thomson was looking for case study stories positive and/or negative. Sharing experiences will help the organisation improve the care and services delivered. Action – Case studies to Generic email – nhsg.imatter@nhs.net</p> <p>ii) GAPF were asked to promote iMatter and encourage all staff to complete the questionnaire. For iMatter to be meaningful staff need to see that outcomes do effect change. Susan Coull and Adam Coldwells are leading on work for SLT regarding the iMatter Board Report. iMatter would be included in the next Chief Executive’s podcast.</p> | <p>ALL</p> <p>ALL</p> |
| 9 | Appropriately Trained and Developed – none | |
| 10 | <p>Dates for 2020 Meetings</p> <p>Provisional dates to be circulated to next meeting</p> | JA |
| 11 | Any Other Competent Business – none | |
| 12 | <p>Communication Messages to the Organisation</p> <p>The following items would be included the July Board Report:</p> <ul style="list-style-type: none"> a) eOPAS/Pilot in Laboratory Medicine b) Staff Flu Vaccinations c) Health & Wellbeing highlighted at GAPF/Rock Choir d) NHS Grampian commitment to work in Partnership – suggestion for a refresher at a Board seminar or meeting e) Next Chief Executive Podcast to include GAPF and a link to the new people who attended the GAPF Development Day. | RL |
| 13 | <p>Date and Time of Next Meeting</p> <p>The next meeting of GAPF will be held on Thursday 18 July 2019 at 1pm to 4pm in Conference Room, Summerfield House</p> | ALL |