

NHS GRAMPIAN
Minute of the Staff Governance Committee
held on Monday 12 August 2019 at 11.30
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 Sandy Riddell, Non-Executive Board Member

In Attendance:

Mrs Susan Coull, Interim Operational Director of Workforce
 Professor Amanda Croft, Chief Executive
 Mr Steven Lindsay, Full Time Partnership Representative
 Ms Gerry Lawrie, Head of Workforce Planning and Development
 Mrs Anne Inglis, Head of Organisational Development
 Mrs Jane Ewen, Chief Nurse - Professional Practice, Workforce & Education (Deputy for Ms Hiscox)
 Ms Carolyn Venters, Health and Safety Partnership Representative
 Mr Douglas Andrew, Learning & Development Manager (for item 29/19)
 Mr Gavin Payne, General Manager of Facilities & Estates (for item 29/19)
 Mr Gareth Evans, Property Transactions Manager (for item 31/19)
 Ms Janine Langler, Greenspace Infrastructure & Agile Working Project Manager (for item 31/19)
 Mr Gerry Donald, Head of Property and Asset Development (for item 31/19)

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

Observer: Miss Steffany Dunn, HR Officer

Item	Subject	Action
26/19	Apologies Apologies were received from Dr Lynda Lynch, Chair; Mrs Elizabeth Hancock, Robert Gordon University representative; Dr Mohamed S. Abdel-Fattah, Aberdeen University representative; Dr Annie Ingram, Director of Workforce; Dr Richard Coleman, Associate Medical Director, Education, Training and Workforce; Mrs Caroline Hiscox, Interim Director of Nursing, Midwifery and Allied Health Professionals and Mrs Cheryl Rodriguez, Head of Occupational Health and Safety.	
27/19	Minute of meeting held on 17 June 2019 The Minute was approved as an accurate record.	
28/19	Matters Arising a. Action Log	

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	<p>Mrs Annand reported that the follow up on the Well Informed aspect of the Staff Governance Standard system assurance was included in today's agenda and the internal check following consideration of the Equality Equal Pay Monitoring Report will be presented at the November 2019 meeting.</p>	
	<p>Staff Governance Standard system assurance</p>	
<p>29/19</p>	<p>Employer responsibility – Appropriately trained and developed Employee responsibility – Commit to continuous personal and professional development; and adhere to standards set by their regulatory bodies</p> <p>Ms Lawrie delivered a presentation, on behalf of colleagues, on Appropriately Trained and Developed. Colleagues in attendance were from Nursing and Midwifery education; Organisational Development; Medical Education and Facilities and Estates.</p> <p>Both the Employer and Employee responsibility under the Appropriately Trained and Developed element of the Staff Governance Standard had been reviewed to provide the Committee with assurance on both aspects.</p> <p>Development was outlined as, motivating; supporting retention; a basic public expectation; core for health, safety and wellbeing; essential to resilience and sustainability; a requirement for a learning organisation; and as an attraction to both current and potential employees, the link training and development has to supporting patient care was highlighted.</p> <p>A pathway was presented to illustrate how being appropriately trained and developed is important to an employee throughout their employment. It starts from the interview stage, where candidates are asked if they can identify any development opportunities moving on to on-boarding, where staff attend a corporate induction to ensure statutory and mandatory training is undertaken, prior to local job specific orientation. It continues with the employer supporting development, being trained to a competent and safe standard, all of which assists with retention, resilience and sustainability. Appropriately training and developing staff should be the norm and not seen as an additional task.</p> <p>Ms Lawrie advised the committee that out of a total of 1406 staff booked to attend the corporate induction, 1340 attended. For the balance, an alternative way was found to obtain the learning, for example for full time students who could not attend. Those that did not attend were followed up.</p> <p>The Committee was informed that appraisal completion rates on Turas was currently at 11%. This could be due to various reasons such as time of year, appraisal undertaken but not recorded in Turas and the ability for managers to report and monitor from Turas would not be available until this month. The common aspect of all appraisal processes was highlighted as the need for staff to have a personal development plan.</p> <p>Some development and good practice examples were provided, which included the introduction of toolbox talks; management and leadership</p>	

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<p>development on a local, regional and national basis including mentoring and coaching; introduction of the Nursing and Midwifery Electronic Passport and medical education.</p> <p>Mandatory and Statutory training was being reviewed both locally and nationally, and a Doctors and Dentists in Training pilot was being undertaken by NHS Highland, which will allow trainees to carry training information over to each placement Board.</p> <p>Mr Andrew shared the encouraging news in relation to developing the young workforce, that the foundation, modern and graduate apprenticeship programmes now have the highest number ever, with 30 foundation, 32 modern and 11 graduate.</p> <p>Ms Lawrie concluded with the risk and gaps for action of capacity issues to release staff; the need to finalise the statutory and mandatory work; refreshed Health, Safety and Wellbeing training; consideration of financial support; needs of supplementary staff being reviewed nationally; access; digital literacy; future proofing learning through investment; develop a learning strategy for NHS Grampian and all HSCPs; and embedding a single learning management system in Grampian.</p> <p>Ms Lawrie and colleagues were thanked by the Committee for their comprehensive overview of systems in place from which the Committee took assurance.</p> <p>The Committee raised that there should not be separate learning strategies developed in Grampian, as this would not assist with changing roles. Ms Lawrie accepted this would be challenging advising that Local Authorities have different learning management systems but more than 600 external organisations had been offered access to TURAS Learn. The North East Learning Collaborative (NELC) gave good opportunity for learning across the region. Mrs Inglis informed the Committee that the HSCP's are developing their own strategies and the challenge was to help pull the work together. NELC aims to avoid duplication of effort, share resources and venues, winning a national award due to its unique arrangement in Scotland. The Chief Officers had a role in identifying what learning can be run jointly, for example mentoring. The Committee noted that the development of a learning strategy is not undertaken in isolation and other partners such as academia and NES would be involved. Ms Lawrie advised that it would be a Grampian Strategy, not a NHS Grampian strategy and that NES provides national direction and support however consideration was required to be given as it was not solely a NHS initiative. Mrs Ewen outlined the work with the unregistered workforce and NESCOL regarding the changing role and need for a structured career framework for Agenda for Change bands 2 to 4, for example the Assistant Practice Educator Band 4 role. Ms Lawrie explained that work had been commissioned to devise a learning strategy, following a proposal taken to the System Leadership Team, which connected with other strategies, for example the Research Strategy, Strategic Workforce Intent and Digital Transformation.</p>	
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<p>The Committee raised the mechanisms available to know where the development areas were, such as iMatter. In response Ms Lawrie advised that iMatter reports cannot be shared however the involvement with teams by the Learning and Development and Organisational Development Teams would be known. This prompted discussion on how was it known what NHS Grampian needed to achieve in terms of training and development. Ms Lawrie responded that this would be through for example evaluating learning undertaken; evaluate competencies required to do roles; and analysis of near misses in Datix. Mrs Ewen responded for Nursing and Midwifery, there would be analysis of patient outcomes and work with new graduates to monitor their progress and support them through postgraduate/masters education. In addition there is a number of monitoring systems such as the quality management practice learning tool which gave a Board wide view of learning placements, helping to identify areas of good practice and weaknesses. For all staff, managers should feed up training and development needs from new recruits, the appraisal process and from an analysis of Health and Safety incidents. Mrs Coull added that feedback on learning needs is expected in order to develop appropriate courses etc. Interventions required to be promptly arranged but run flexibly to adapt to the needs of the organisation.</p> <p>The Committee highlighted that the presentation did not provide data to support the identification of areas of weakness nor success, to give assurance that the systems and interventions are effective and that the correct individuals are undertaking the development. Ms Lawrie responded that reporting abilities in Turas were imminent and this would allow managers to analysis competencies against the six core dimensions of the Knowledge and Skills Framework (KSF). In addition the Workforce Plan identified areas of development.</p> <p>Mr Payne explained that Facilities and Estates was the biggest category of staff after nursing and midwifery. Within the service the value of development was recognised and this was used in conjunction with high retention rates and to encourage movement between bands. There would be a return to monitor the core competencies quantitative data through Turas. With regard to iMatter, Facilities and Estates had not achieved a Sector report however analysis of team reports gave a good indication of areas of focus. Mr Andrew informed the Committee that a learning needs analysis had taken place, in order to focus the limited resource available to deliver training and development. The main focus had been Mandatory and Statutory training, however it also gave the opportunity to identify personal development. Mr Andrew outlined a positive indicator from the Modern Apprentices for Engineering programme which had a retention rate of 95%. There was the need to be creative and innovative with solutions due to the high number of locations where Facilities and Estates staff are based, which included working with other departments/colleagues such as the Health and Social Care Partnerships.</p> <p>The Committee raised the mandatory training requirements and whether there were gaps in the provision of development time. Ms Lawrie</p>	
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	<p>responded that for all staff approximately 7 hours in the first year of employment was required, reducing in subsequent years to 2.5 hours. For Nursing and Midwifery staff 187 hours in the first year of employment, reducing to 125 hours in subsequent years. There was a significant gap in the study leave provisions therefore the release of staff was challenging. In the future Safe Staffing Legislation also needed to be considered. Within Facilities and Estates there was role specific mandatory training to maintain formal competencies, for example in relation to asbestos and water safety.</p> <p>The Committee raised the risks from mandatory training not being completed. Ms Ewen advised that the risks were variable, with the Nursing and Midwifery Education Passport being monitored. Individual services would have in place risk mitigation processes based on key deliverables. The risk of non-release was acknowledged by the Committee, with discussion on how assurance was obtained for the Board. This was reliant on service management to undertake learning needs analysis and access the systems in place. It was acknowledged that as service management, except from Facilities and Estates, was not present at the meeting the management of the risk in a Sector could not be explored further.</p> <p>The Committee sought assurance that talent spotting/succession planning is being actively promoted. Mrs Inglis confirmed that high flyers are identified and provided with support along with providing development to those who wish it. She met monthly with the co-ordinator of Project Lift, a national succession planning programme used to help identify individuals with potential.</p> <p>Mr Andrew informed the Committee that he led the Employability agenda for the organisation. This involved visiting schools, nurseries, career events, advertising good educational pathways to help develop a young workforce. NHS Grampian had received an award for the Foundation Apprentice programme and the Modern Apprentice programme was being utilised in a number of departments such as MARS, Medical Physics and Finance.</p> <p>Mrs Ewen outlined that in Nursing and Midwifery there was a number of pathways. There was the Advanced Care Academy developing advanced practice. In addition, talent spotting will be utilised for a pathway recently validated for Band 2 to Band 4 Health Care Support Workers. With regard to graduate nurses talent spotting occurred early in a clinical career.</p> <p>It was acknowledged that there was a strong line management role in ensuring staff are informed of the opportunities for development.</p> <p>The Committee expressed their thanks to Ms Lawrie and colleagues for the excellent presentation, which assured the Committee that good systems are in place, along with a recognition of areas for further work, such as use of data to assess the effective of interventions and the risk assessment process in Sectors to manage compliance with statutory and mandatory training. An update would be provided in 12 months time as part of the Committee cycle.</p>	
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	<p>Mr Lindsay reminded the Committee that KSF implementation had previously been a HEAT target until 2012. After removal of the target performance significantly reduced, therefore learning should be carried forward in order to improve compliance now.</p>	
30/19	<p>Follow up</p> <p>Employer responsibility – Well informed Employee responsibility – Keep themselves up to date with developments relevant to their job within the organisation</p> <p>Mrs Coull reported that as agreed at the previous meeting, Professor Croft was tasked with taking the development of a Strategic Plan regarding communication and engagement to the System Leadership Team from which two actions had taken place. There was to be further development of the role of the Director of Communications and a paper had been brought to the System Leadership Team regarding the development of a new web page. A working group with key attendees had been formed. A formal update will be provided at a future meeting.</p> <p>The action regarding establishing the meaning of well informed for staff when answering their iMatter questionnaire would be incorporated into the work already being taken forward by the System Leadership Team.</p>	
	<p>iMatter focus – Involved in Decisions</p>	
31/19	<p>Agile Working & Office Optimisation</p> <p>Gareth Evans, Property Transactions Manager attended along with Janine Langler, Greenspace Infrastructure & Agile Working Project Manager and Gerry Donald, Head of Property and Asset Development. Mr Evans delivered a presentation entitled “Woodhill House Business Case and Agile Working”, outlining that these were two separate but linked projects.</p> <p>A detailed Business Case is to be prepared, in liaison with Aberdeenshire Council and in line with the Scottish Government’s Capital Investment Manual for the relocation of the main administrative offices in Aberdeen to Woodhill House. This would include rationalisation of a number of existing buildings which do not match NHS Grampian’s current desires for a supportive and flexible environment and promotion of Agile working. To establish formal governance arrangements, a dedicated Programme Board, will oversee implementation of smarter working principles.</p> <p>Mr Evans advised the group that as NHS Grampian and University of Aberdeen sold the Woodhill House Site to the Council in the 1960’s, there was the right of pre-emption to protect the ownership for retention within the public sector. This was a one time opportunity to expand the campus and locate all support functions to one location, creating a better feeling of unity. Existing property stock was failing NHS Grampian employees and was costly to maintain and operate therefore there was a desire to provide an appropriate quality of workplace environment; provide more flexible</p>	

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	<p>working conditions to help NHS Grampian be an employer of choice; and to achieve the organisations and national government objectives such as the Smart Office Programme. The OccupEye exercise undertaken in 2018 had provided invaluable data on the efficiency of offices and meetings rooms, to inform the type of space required. The early initial business case had been provided to the System Leadership Team, who made recommendations to the NHS Grampian Board. The Board authorised the work to write the detailed Business case referred to above.</p> <p>The NHS Scotland 20:20 Vision; the Quality Strategy; Clinical Strategy; and the NHS Scotland Smarter Offices Programmes were highlighted as relevant to the achievements and outcomes of the projects.</p> <p>The Regional Asset Management Plan underpins all NHS Grampian business, whilst looking after the wider needs of staff, including the improved utilisation of office accommodation, increased agile working and shared space with other public sector partners.</p> <p>Agile Working was described as the appropriate task at the appropriate time in the appropriate environment in order to provide the best benefit to patient, individual and organisation. It questions the traditional 9-5 office based focus as well as the traditional style office. Positive examples were given of Southfield in Elgin and CAMHS at City Links, Aberdeen. Learning and Development had recently completed a very successful move to Woodhill House, using both office space and a training facility.</p> <p>Personal wellbeing; environmental impact, improving efficiency and cost reduction were given as reasons for change, however people, process, ICT (PC, infrastructure, ability to connect remotely), space and communications required to be in place. An explanation of the types of work spaces had been given at the fourteen Q&A sessions conducted for staff in the locations covered by the project to dispel the concerns of staff and provide context. A global with the updated Questions and Answers will be disseminated to all staff and there is a specific email which staff can use of nhsq.agileworking@nhs.net</p> <p>A Project Board had been created with regular updates to GAPF and the Asset Management Group. There would be liaison with Aberdeenshire and H&SCP colleagues to learn from their experiences of worksmart and agile working respectively.</p> <p>The presentation described how the projects linked to the Staff Governance Standard elements of Well Informed; Involved; Treated fairly; and Provided with Safe environment, including ensuring discretion was maintained for example for the Occupational Health Service. It was key for staff to understand that one size does not fit all and work will be done with each area on for example, ratio of desks to staff. Considerations for the floor plan of Woodhill House were workstations to access natural light; different meeting spaces; storage; and the essential provision of kitchen facilities.</p>	
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	<p>The presentation concluded with outlining next steps. The projects will continue to engage, support, advise staff and communicate. If the business case is approved an intranet page will be developed for updates and provision of best practice examples and learning from initiatives carried out.</p> <p>The Committee acknowledged the benefit of staff being kept well informed and the difference with involving staff. In response to a request for a Staff Side opinion, Miss Little advised that this had and will continue to be very challenging, given the spread of staff and buildings with individual at different stages of the change. She asked how staff expectations would be managed if the move to Woodhill House did not go ahead. Mr Donald confirmed that at this stage there was not an alternative location being considered. It was a once in a lifetime opportunity for NHS Grampian to utilise the Woodhill House site and it would be disappointing if the Business Case could not demonstrate that it was possible to effectively use the good office space in comparison to the high cost of maintaining current estate. Ms Lawrie advised the Committee that the feedback from the Learning and Development staff who had already moved to Woodhill House was positive.</p> <p>Mr Evans advised that if the Business Case was approved, the preparations for the move could take up to two years, to allow for time to work through the cultural change it was acknowledged to be. It was important to manage the moves correctly and there had been offers of help from Mr Evans and Ms Langler to teams to work through the different requirements. There was already learning from use of the OccupEye sensors and the negative behaviour encountered from this.</p> <p>Professor Croft stated that the System Leadership Team were committed to agile working, that the OccupEye data had been useful and agile working was more than a change of building, for example it included paper free working.</p> <p>Mr Lindsay stated that staff were only consulted on OccupEye and not how it was linked to this project, therefore it was important for the complete process to be communicated to staff. He welcomed the timescale of the project as he was aware change management issues remained in Southfield.</p> <p>The discussion closed with agreement that shared ownership of the projects were required to complete them successfully.</p>	
	<p>Statutory Information, Reports and Returns</p>	
<p>32/19</p>	<p>Partnership and Staff Governance a Staff Governance Standard Monitoring</p> <p>Mrs Annand outlined that the agenda item was to discuss how the Committee wished Action Plan progress reported in order to receive assurance from the Staff Governance monitoring process.</p>	

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	<p>Mrs Annand summarised the points raised at the last meeting:</p> <ul style="list-style-type: none">• For some Sector commitments no clear objective documented nor how success would be measured.• Concern that more effort was directed to the activity rather than ensuring outcomes were achieved.• What the information presented informed the Committee of.• No assurance that there was a coherent process in place within Sectors encouraging individuals to deliver.• If outcomes and measures were known the Committee would have a greater understanding of the level of achievement.• There was no benefit to Sectors in the actual act of completing the mid and full year returns as they were recording mechanisms. The benefit was achieved from carrying out the commitment but this could be reduced by the level of Sector ownership, failure to engage the Local Partnership Forum and lack of actually concluding the commitment made.• Mrs Annand and Ms Little had proposed future engagement with the Local Partnership Forums to ensure progress was being made with the commitments.• There would be a review of the outcome from the GAPF workshop session as Sectors had been asked how Local Partnership Forums can increase the link with Staff Governance monitoring and improve Sector GAPF reports. <p>Mrs Annand outlined that the Annual Return was the only requirement for the Scottish Government. The questions in the Annual Return were set nationally and when issued to Boards, it was accompanied by a Sector return with provides good examples for the Annual Return. An action plan for the forthcoming year was for local use only as a tool from which the Committee receive assurance of compliance with the Staff Governance Standard and was not required for the Scottish Government.</p> <p>The Committee noted the requirements for the Scottish Government however felt that the current local process did not give system assurance. Two options were discussed for future Staff Governance Monitoring of either changing the current process to be more prescriptive or an alternative process by building on the iMatter focus – Involved in Decisions agenda item, by developing a programme by Sector. A remit would require to be developed however a Sector would be asked to give examples of how the Staff Governance Standard was functioning in a Sector, using the iMatter focus, to give the Committee assurance. The Committee agreed the latter approach and that the current system could cease with immediate effect. Mrs Annand to conclude the current system with Sectors; continue with the work to ensure the Staff Governance Return is submitted to the Scottish Government annually and draft a remit for future Committee use.</p> <p>b Workforce Plan 2019/2022</p>	<p>DiA</p>
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	<p>Ms Lawrie advised the Committee that the publication of a Workforce Plan was an annual requirement, with revised guidance hopefully available in September 2019, which would better reflect how health and social care was working. The Workforce Plan had been informed by all Sectors and gives a high level picture. The Committee noted the Plan.</p>	
<p>33/19</p>	<p>General Discussion on agenda format and reports required</p> <p>Mr Passmore highlighted that the new format for the agenda has been further developed for today’s meeting and the iMatter focus section would be revised further to the discussion under Agenda item 32/19a. Mr Passmore asked the Committee for feedback.</p> <p>For those attending to deliver an agenda item, it was felt that it would be beneficial for the presenters to be given the option to attend an earlier meeting in order to understand what was required of them. If a presentation was to be delivered circulation prior to the meeting was requested to allow preparation of questions and greater engagement. Presenters would be asked to give consideration if elements of their presentation may be better presented in a paper, for example, background information, for the Committee to read prior to the meeting.</p> <p>There was the need for regular updates on key actions, rather than wait the complete year. A short briefing paper was suggested.</p> <p>There was agreement that any topics brought to the Staff Governance Committee by a Sector, should be first be discussed at the Sector Local Partnership Forum and GAPF. The discussion at each level would differ concluding at the Staff Governance Committee to provide assurance. The ability to strengthen the relationship between the Staff Governance Committee and GAPF was welcomed.</p>	
<p>34/19</p>	<p>Staff Governance Committee Board and Performance Governance Reports Content</p> <p>The key messages for the Board Report are:</p> <ul style="list-style-type: none"> • The assurance received from the Appropriately Trained and Developed focus; • Informative presentation on Woodhill House Business Case and Agile Working projects, acknowledging the essential need to involve staff; • Development of how the Committee receive assurance from the Staff Governance monitoring process. Further work will be undertaken on the development of the iMatter focus – Involved in Decisions part of the agenda item, by developing a programme for Sector’s to attend to give examples of how the Staff Governance Standard was functioning in their Sector, using the iMatter focus, to give the Committee assurance. 	
	<p>For Information</p>	

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35/19	a. GAPF Minutes – 25 April and 20 June 2019 – noted. b. BMA Joint Negotiating Committee (JNC) Minutes – 19 April 2019 – noted. c. Staff Experience Steering Group minutes – 17 April 2019 – noted.	
36/19	NHS Grampian Equality and Diversity Workforce Monitoring Report 2018/19 – noted.	
37/19	AOCB None raised.	
38/19	Date of next Meeting Tuesday 26 November 2019, 10am – 1pm in the Conference Room, Summerfield House.	