

**STAFF GOVERNANCE COMMITTEE**

Minutes of the Meeting held on Monday 5<sup>th</sup> September at 2.00pm  
Teams Meeting

- PRESENT:** Lilian Macer, Employee Director (Chair)  
Margaret Anne Hunter, Unison Representative  
Cathy McGinty, Unison Representative  
Andy McCormick, Unite Representative  
Lesley McDonald, Non Executive Director  
Nauman Dar, Non Executive Director  
Neil Findlay, Non Executive Director  
Colin Lee, Non Executive Director
- IN ATTENDANCE:** Marlene Fraser, Head of Human Resources  
Susan Friel, Nurse Director, Acute  
Mark Kennedy, General Manager, SALUS  
Calvin Brown, Director of Communications  
Kirsty Cole, Head of Organisational Development  
Lesley MacKay, Programme Manager, Staff Health & Wellbeing  
Jen Nelson, Workforce Information Manager  
Sharon Rodgers, Organisational Development Manager
- APOLOGIES:** Liz Airns, GMB Representative  
Ann Marie Campbell  
Robert Foubister, Unison Representative  
Heather Knox, Chief Executive  
Ruth Hibbert, Head of HR Policy and Governance  
Kay Sandilands, HR Director  
Jonathan Pender, Head of Workforce

1.1 **WELCOME AND APOLOGIES**

Lilian welcomed everyone to the meeting and noted the apologies.

1.2 **MINUTES OF PREVIOUS MEETING HELD ON 23<sup>RD</sup> MAY 2022**

The minutes of the previous meeting held on 23<sup>rd</sup> May 2022 were approved as an accurate record.

1.3 **ACTION LOG**

Members noted the updates to the Action Log.

## 2.1 **CORPORATE RISK REGISTER**

The Staff Governance Committee had been identified as the relevant Assurance Committee for the following two risks on the Corporate Risk Register: ID 2039 and ID 2124.

The Committee were asked to consider in detail the description of the risk and also the mitigating controls to ensure that these are at an appropriate level, and also how the Committee can support to mitigate further these risks.

A member of the Committee indicated his surprise that the risk level in ID 2039 had reduced and it was felt that the mitigating controls had not yet made an impact. Marlene indicated that there were a number of mitigations in place and these were assessed against the risk and this was the reason why the level had been reduced, but she agreed that it may take time to have an impact. She agreed to do a further assessment and feedback to the Committee.

Lilian asked the Committee to feedback to Paul Cannon or Carol McGhee any comments they had on the Corporate Risk Register.

## 2.2 **DIRECTORATE REVIEW**

### **Hairmyres Hospital**

Susan Friel, Nurse Director, Acute presented to the Committee the performance reviews for University Hospital, Hairmyres and University Hospital, Monklands.

In relation to Hairmyres Hospital she reassured the Committee that there was staff side representation on all of the key groups within the hospital. In terms of sickness absence there had been some real challenges with all three sites showing an increase. This was being monitored through the PRAG Tool which had been developed from Acute and this had been rolled out to all of NHS Lanarkshire, although this was still a work in progress. Meetings between the site and Acute were also taking place on a daily basis.

Susan highlighted the staff currently in post and indicated that attempts were being made to fill all the vacancies through the newly qualified nurse output. She indicated that she would be able to update at the next meeting the outcome from the Nurse recruitment drive. Band 4s have been brought in to supplement the staffing levels on the sites and this has been very successful. These are students about to qualify and they found this a helpful way to be introduced to the ward.

The final slide showed the progress towards specific targets in relation to sickness absence, vacancy rate and Turas/i-Matter which were showing red in all three areas. Action Plans had been put in place.

As Hairmyres Hospital was a PFI site it was stressed that it was important that the voice of the workforce should be heard in the partnership arrangements and the need for the Organisation to engage around the health and safety agenda. Lilian indicated that this issue had been raised at the Area Partnership Forum. It was confirmed that there was a Hospital Hygiene on each of the sites and the Health and Safety meeting.

## **Monklands Hospital**

The slides for Monklands Hospital were very similar to Hairmyres Hospital. She indicated to the Committee the groups that had staff side representation. Sickness absence was improving, but was still too high. Monklands had the highest levels of vacancies and they had recruited the majority of the last cohort of international nurses, and that any further recruitment would be targeted to Monklands Hospital.

The progress towards specific targets were still showing as red in all the three areas.

In response to a question around sickness absence Mark explained in detail to the Committee the procedure for staff who were referred to SALUS. Staff who have short term absences would not be referred to Occupational Health. It was confirmed that there was data for all staff across the Board down to ward level and can determine the reason for the absence, although not if it is work related. She agreed to have a discussion with Kay Sandilands and others to ensure that the information for the Governance Committee is appropriate, and if there is further information to help us interrogate the system. A question was also raised in relation to psychological services waiting list.

The Committee then discussed recruitment with the numbers falling. In a few months this may improve as this year had been more successful than previous years. There was a National Group looking at recruitment and also retention.

The Committee then had a detailed discussion about the over reliance on agency staff and Susan confirmed that there would be a trajectory, but this was a significant amount of work and would depend on the Covid and winter pressures ahead when this would be done. Data was awaited for the weekly pay pilot, but the feedback so far was positive. Lilian intimated that the Board had discussed the cost of living crisis and she agreed to bring this to the attention of the Cost of Living Group that had been established, and asked if the information could also be shared with the Staff Governance Committee and the Board.

Susan agreed to e-mail Lesley information around a concern on the i-Matter slide.

Lilian thanked Susan for her presentations.

## **SECTION 3 – WELL INFORMED**

3.1 There was nothing to report under this item.

### **4.1 PDC FLASH REPORT**

Kirsty Cole, Head of Organisational Development shared with the Committee the NMAHP Practice Development Centre Annual Report 2021-22. She shared the areas which included leadership development; tissue viability; education and resuscitation training and an Admin Team to support bookings with partnership organisations. In particular, she drew members' attention to the work on the induction of Band 2 and Band 3s within the report.

Kirsty explained in detail how the needs of staff were identified, in particular OD and the work that was ongoing with the Scottish Union Learning Fund.

The Committee noted the report.

#### 4.2 **LOD UPDATE**

Sharon Rodgers, Organisational Development Manager raised the key points from her report which were:

Corporate Induction – a new programme had been launched earlier in the year with 5 sessions being delivered with 231 participants attending.

Leadership Development - new Leadership Development was launched in June with more dates to follow. An observation was made regarding ethnicity data in leadership. Kirsty advised that a yearly report was produced on training data and there was also a number of staff networks to ask for participants to join and test some of the leadership programmes. She also gave information about what was happening at a national level and the work being undertaken with the Scottish Government.

Learnpro – there was a data cleanse of the Learnpro system being undertaken and the report showed the progress with this.

Career Development Programme was launched on the 17<sup>th</sup> August 2022 and this had been positive and a fuller report would be taken to the HRF with the feedback. Information would also be given around job families and job roles that staff were coming forward from.

Kirsty advised that a yearly report was produced on all the figures in relation to training data, but inbetween there was a number of staff networks and they had been asked for participants to join and test some of the Leadership Programmes. She also explained that work was being taken forward at National level.

### **SECTION 5 – INVOLVED IN DECISIONS**

5.1 There was nothing to report under this item.

#### 6.1 **WHISTLEBLOWING QUARTERLY/ANNUAL REPORT**

Marlene Fraser, Head of HR shared with the Committee the Whistleblowing Annual Report – April 2021 to March 2022 along with the Quarter 1 2022/23 Whistleblowing Performance Report. She highlighted that there had been three cases, with all three cases mainly upheld and detailed Action Plans had been drawn up and monitoring had been put in place. Extensions to timescales were obtained for two of the three cases with two of the three cases dealt with at stage 1 and one was progressed to stage 2. She also intimated that it was worthy of note within the report that there was a lot of communication and awareness raising undertaken.

Confidential contacts and networks had also been set up, and detailed Action Plans were established and monitored by the Board.

Marlene then raised an issue with regard to the slow completion of the training modules. A communication had been given to CMT members showing exact numbers in their areas asking them to encourage staff to take up the training. Unfortunately, this was not able to be monitored as there was a systems issue with NES.

There was one concern raised within the Quarter 1 Report and this had been dealt with. The Report would go to the next Board meeting at the end of October.

The importance of awareness raising was stressed and although numbers were low we cannot be complacent. The investigation.

Lesley McDonald, the Whistleblowing Champion highlighted that she would be going to an Ethnic Minority meeting and had also attended a Leadership Walkround and had an invitation to present to the Occupational Therapists. She also asked if the staff side could assist in sharing widely the whistleblowing message.

The Committee noted the Whistleblowing Reports.

## 7.1 **SICKNESS ABSENCE AND OHS REPORT**

Mark Kennedy, General Manager, SALUS drew members' attention to the key points within the Sickness Absence and OHS Report.

The overall absence is above the 22.5% threshold and had increased on the previous quarter. Sickness absence had increased and was above the 4% threshold and had been very a long time. Nursing and Midwifery are consistently the highest by job family at 8.07%. Also within the report there was a breakdown of long and short term sickness absence with the main issue being long term absence. The figures were better in the short term. In relation to the national figures all Board were seeing a steady rise in sickness absence. The figures for Occupational Health were fairly stable with the largest amount last year being 3100 and it looks that this would be similar for this year. Mental Health cases were also slightly down from 38% to 31% of all referrals. 76 staff were in specialist intervention for mental health and the outcomes for this were good.

It was suggested that it would be interesting to see if there was any sickness absence raised in relation to discrimination and the outcome of any complaints in this regard. Mark confirmed that some of this data may be captured but would mainly be captured within the clinical report. He agreed to speak to colleagues to see if this could be added in the future.

The Committee noted this report.

## 7.2 **WORKFORCE METRICS**

Jen Nelson, Workforce Information Manager gave an update on the Workforce Report.

Staff in post has increased over the last two years due to Covid, but there is a slight decline from the previous report with the numbers being 146 WTE although staff in post has remained stable overall.

Vacancies have increased slightly by 0.56% since the previous report and was now 1.07%. This was due to staff in post being lower than the funded establishment. She also indicated that this does not include the Covid Vaccination Service. There is no funding currently in place for that Service and Test and Protect although there is staff in post. This has an overall effect on the vacancy rate. This has led to an over-established position within Administrative Services and a lower vacancy rate across the Board.

Supplementary staff remains stable albeit higher than pre-pandemic levels. A slight increase on previous quarter mainly driven by Nursing and Midwifery, and Support Services.

In relation to agency shifts there had been an increase of 377 shifts filled since the last report. There is ongoing work to try and mitigate this.

Staff turnover had increased by 1.89% since the last report with a peak in March 2022 which was due to a number of temporary Covid contracts ceasing and the Covid turnover has increased as a result of those Covid posts coming in and coming to an end.

A member of the Committee then spoke of the number of shifts that could be offered or could have been filled. Jen outlined the process and that if the bank was unable to fill these shifts they would be escalated to framework agencies. It was important that all shifts were filled so that patient safety or staff safety was not compromised. Shifts that were not filled put more pressure on the workforce. It was felt that this need to be addressed at a national level.

### 7.3 **SALUS ANNUAL REPORT**

Mark Kennedy, General Manager, SALUS highlighted the main issues from the SALUS Occupational Health and Safety Annual Report.

#### **RIDDORS**

The RIDDORS had fallen from 40 to 24 which was a significant reduction.

#### **Staff Incidents**

There had been an 8% increase in violence and aggression incidents. 70% of the total incidents were from the North Partnership mainly around the management of mental health, dementia and care of the elderly patients. A Short Life Working Group was being established to look at this in more detail. 8% of violence and aggression also came from the hospital sites. Data cleansing was also required as multiple incidents may be from the same patients. The Committee welcomed the formation of a SLWG to discuss the different issues that caused violence and aggression.

#### **Training**

The training details for (PaMoVA) and Moving and Handling were highlighted within the report.

## Health & Safety Control Book Audits

The Control Book Audit System was halted at Covid and had now re-commenced with work being undertaken to bring this back up-to-date. Also contained within the report were policy updates.

## Policies and Procedures

Updates for these were given within the report.

## **OCCUPATIONAL HEALTH**

### Management & Self Referrals

A 33% increase in management of referrals was noted which was linked to increasing absence and also the increasing size of the workforce.

Self-referrals were reduced which may be because of the success of the interventions that are now in place within the 'Your Health Matters' website, online counselling and also the staff care service that Paul Graham leads.

KPIs will be a priority as these will require to be reduced.

Mark indicated that Mental Health remained high but work related Mental Health had fallen by 32%, although it was hoped to further reduce this figure.

### Sharps and Splash Exposure

There had been an unexpected increase in sharps needle stick injuries, but on investigation 22 different staff members attended from the vaccination team. Mark had contacted their General Manager with regarding to monitoring and reducing this figure.

### Pre-Placements

This work has doubled and a model was being looked at that maintains fast-tracking.

### EASY and Helpline

Details of this work was contained within the report.

Mark advised if there was any questions or explanations required about the report to e-mail him directly.

The Committee noted this report.

## **7.4**

### **STAFF HEALTH AND WELLBEING STRATEGY**

Lilian introduced Lesley MacKay to the Committee who was the Programme Manager for Staff Health & Wellbeing. She intimated that this was the first version of the Staff Health and Wellbeing Strategy. Comment and feedback was required around the content as this would be the foundation of the Strategy.

There is staff support systems in place at the moment and there was a need to raise awareness of these. There may also be areas which need improved on and gaps identified which will be aligned to the Action Plan when approved. A lot of work still needs to be completed to ensure that we have the right conditions to improve the staff health and wellbeing and Lesley highlighted some of the barriers that need to be addressed.

The Staff Engagement Strategy ‘Your Health Matters – Your Opinion Counts’ had been completed in June and the findings were shared with the Committee and was included within the SBAR. Some of the findings are sitting with the Staff Health and Wellbeing Strategy and these would be aligned to the Strategy.

There will be a Staff Health and Wellbeing Week which will run from 31<sup>st</sup> October to 4<sup>th</sup> November and within this there will be two sessions which will find out about different mechanisms and resources, Lilian and Kay Sandilands, HR Director are leading on this work.

The Committee were asked to provide comments and feedback directly to Lesley on the Draft Strategy by the 16<sup>th</sup> September as it was hoped Lilian and Kay would be able to launch the Strategy on the 1<sup>st</sup> November during the Staff Health and Wellbeing Week. Lesley stressed the importance of input in relation to what was working well and what is not working well and to identify the gaps. She intimated that the activities will be linked to the Action Plan.

The Committee noted the Draft Staff Health and Wellbeing Strategy.

#### 8.1 **COMMITTEE WORKPLAN 2021/2022**

The Committee were on track to deliver the Workplan for 2021/22/

#### 8.2 **MINUTES TO NOTE**

The Committee noted the following minutes –

Area Partnership Forum – 16<sup>th</sup> May 2022  
Human Resources Forum – 20<sup>th</sup> May 2022  
Remuneration Committee – 30<sup>th</sup> June 2022

#### 8.3 **TERMS OF REFERENCE**

The Committee approved the Terms of Reference.

#### 8.4 **ANNUAL INTERNAL AUDIT REPORT 2021-2022**

The Annual Internal Audit Report for 2021-2022 was provided for information.



### 9.1 **SIGNIFICANT EMPLOYMENT ISSUES**

There were no issues to report.

### 9.2 **CELEBRATION OF SUCCESS**

Sharon Rodgers, Organisational Development Manager gave a presentation on the changes to the Staff Awards Programme. She shared with the Committee in detail the format of the staff awards previously. In 2020 because of Covid the planned event was re-scheduled and was ran as a virtual awards ceremony. The Pandemic gave the opportunity to review the format and there was a proposal to change the format which was approved in 2021. Sharon then advised the Committee on how the new format would be taken forward.

A question was asked about where this had been agreed and it was indicated that a paper to change the format had been submitted to the CMT and this presentation had been shared with the Human Resources Forum. Work had also been undertaken with the previous Staff Awards Working Group and the Board Chairs, previously Neena Mahal and presently Martin Hill.

A member felt that the previous Awards Programme was a celebration of the work that we do in Lanarkshire and the opportunity to celebrate our workforce in terms of their achievement, but also to invite the staff who had given 40 years' service.

### 9.3 **EMPLOYABILITY REPORT**

Marlene Fraser, Head of HR highlighted the Employability paper on behalf of Lorraine Scott, HR. She stated that a number of the initiatives had to be stood down because of the pandemic, but a significant amount has now been resurrected which included Project Search; Modern Apprenticeships; MA Business Administration; Graduate Apprenticeships; Foundation Apprenticeships and Employability Programmes.

In particular, she drew members' attention to The NHS Demonstrator Project. This project was aimed at long term unemployed over 25 year olds with a specific focus on single parents. Recruitment was taking place for 30 placements for six months' duration with the start date being 18<sup>th</sup> September 2022. Currently 22 individuals had been recruited.

The next Careers Awareness Fayre is due to take place on the 8<sup>th</sup> September 2022.

Marlene advised that a joint session had been held with North and South Lanarkshire Council colleagues to look at ways how NHSL and the Council could work together with an Action Plan to capture these points. An infrastructure was also requested to be put in place through the different opportunities and programmes that are running in North and South Lanarkshire Councils. This will hopefully help bolster the infrastructure within recruitment. Funding had also been requested for our own job coaches.

The Committee discussed the small numbers of apprentices in comparison with the Council and it was felt that there was a huge opportunity to train and keep young people.

It was drawn to the attention of the Committee that there was no mention of support services within the report where there are high levels of potential for apprenticeships and staff development. It was also enquired whether there were structures in place to allow for this. Marlene indicated that there was work ongoing in this area and she agreed to report back to the Committee.

Lilian stressed that the Organisation needs to invest in this programme of work with a level of investment to make sure that our current workforce get the support they need to develop into career pathways, but also additional support for Modern Apprentices. She advised of the benefits this would be to the Organisation and to the communities that we serve. She also spoke of the Project Search which was a fantastic initiative, but as yet the Corporate Management Team had not taken a project search person to develop these individuals. Other Departments had taken on Modern Apprenticeships, but it was felt that the CMT needed to think about what they are doing to support the employability agenda. She felt that there needed to be more focus and investment, but also more leadership in promoting this agenda by taking young people into their own Directorate to work closely with the CMT.

The huge amount of work undertaken by Lorraine Scott was acknowledged in what is a small Department.

Lilian asked Marlene to feedback to Lorraine and her colleagues today's discussion.

10.1 **ANY NEW RISKS FOR INCLUSION IN THE CORPORATE RISK REGISTER**

There were no risks identified.

10.2 **ANY OTHER COMPETENT BUSINESS**

There was no further business to discuss.

10.3 **DATES OF MEETINGS DURING 2022/23**

28<sup>th</sup> November 2022

6<sup>th</sup> March 2023