

STAFF GOVERNANCE COMMITTEE

Minutes of the Meeting held on Monday 11th September 2023 at 2.00pm in the Board Room, NHS Lanarkshire, Kirklands Hospital, Bothwell and via Teams

PRESENT: Phillip Couser, Non Executive Director, Chair
Robert Foubister, Unison Representative
Colin Lee, Non Executive Director
Sylvia Stewart, Employee Director
Margaret Anne Hunter, Unison Representative
Cathy McGinty, Unison Representative
Nauman Dar, Non Executive Director
Liz Aims, Unite Representative
Bernadette McIntyre, RCN Representative

IN ATTENDANCE: Martin Hill, Board Chair
Kirsty Cole, Head of Organisational Development
Eddie Docherty, Executive Nurse Director
Jacqui Jones, HR Director
Ann Marie Campbell, Head of HR Employee Relations
Mark Kennedy, General Manager, SALUS
Jonathan Pender, Head of Workforce
Marlene Fraser, Head of Medical Staffing
Margot Russell, Director NMAHP Practice Development

APOLOGIES: Andy McCormick, Unite Representative
Ruth Hibbert, Head of HR Policy and Governance
Charlotte Hope, Corporate Risk Manager
Jann Gardner, Chief Executive
Andy McCormick, Unite Representative
Calvin Brown, Director of Communications

1.1 **WELCOME & APOLOGIES**

Phillip welcomed members to the meeting and the apologies were noted.

1.2 **MINUTES OF PREVIOUS MEETING HELD ON 5TH JUNE 2023**

The minutes of the previous meeting held on the 5th June 2023 were approved as an accurate record.

It was highlighted that at the last meeting the North and South Directorate Review had been deferred to this meeting, but they were not available for this meeting.

1.3 **ACTION LOG**

Members discussed up-dates to the Action Log.

Martin Hill, the Board Chair then raised the issue of sickness absence and asked if there was more that could be done as he felt that assurance was needed that we had enough support for staff who were still off sick. Jacqui reassured the Committee that there was a large piece of work being done around sickness absence along with Mark Kennedy from SALUS, Jonathan was also undertaking work with the Trade Unions and looking at data in relation to high sickness absence and the high use of agency workers.

Annamarie Campbell also advised that work had been undertaken along with others from her Team in how we can support staff, and a paper had been produced, but had not yet been finalised. She agreed to bring this back to the next meeting.

2.1 **CORPORATE RISK REGISTER APPENDIX 1 AND 2**

2.2

There were two corporate risks identified which were:

2039 – Staff Fatigue, Resilience, Wellbeing & Safety

2124 – Sustaining a Safe Workforce

It was agreed that further work would be done around this with Jacqui Jones and Paul Cannon and would be brought back to the Committee, and this would also be for information to other Committees.

2.3 **CORPORATE RISK REGISTER – MITIGATING CONTROLS**

It was agreed that the current status of mitigating controls would be reviewed.

2.4 **NEW RISKS IDENTIFIED TO BE INCLUDED IN RISK REGISTER**

There were no new risks identified.

3.1 **PRACTICE DEVELOPMENT FLASH REPORT**

Margot Russell, Director NMAHP, Practice Development provided the Committee with the NMAHP Practice Development Centre Annual Report for 2022/2023. This would also be shared with the Clinical Governance Committee and the Healthcare Quality Assurance and Improvement Committee.

Margot highlighted the key elements from the report. She intimated that over the course of the year there had been a decrease in staff members within the practice education function as the non recurring funding through NHS Education had come to an end. The NMAHP Practice Development Centre is now staffed by 44.37 WTE equating to circa 53 headcounts which is a decrease of 7 from the previous year.

She drew members' attention to the different Teams within the report which included the Tissue Viability Team which comprises 3.8 WTE clinical nurse specialists who support care delivery across acute services, North and South Health and Social Care Partnerships along with Care Homes. This had recently been increased to 4.8 WTE due to the increasing demand in referrals.

The Care Assurance Team had re-connection with work placements etc. Clinical Skills and Resuscitation Team have had a significant focus on supporting clinical practice, further developing the work in community treatment and assessment centres (CTAC) and developments within the Vaccination programmes.

The Committee then had a discussion which included the need to support people working in clinical practice, the collaboration and work with other Health Boards as well as the National Strategic Group. It was highlighted that it was important to work collaboratively and avoid duplication of work undertaken by Practice Development and the Learning Strategy Group.

The huge amount of work undertaken by the Practice Development Team was acknowledged.

It was agreed that the Sway link would be circulated to members,

The Committee noted the Practice Development Flash Report.

4.1 **WHISTLEBLOWING QUARTERLY REPORT**

Annmarie Campbell drew members' attention to Quarter 1 of the Whistleblowing Report for 2023/2024. She advised that no new cases had been raised during this quarter.

The key points from the Annual Whistleblowing Report for 2022/2023 were highlighted.

Three concerns had been investigated all of which related to independent primary care contractors. None of these were upheld. Lesley advised that the investigation relating to the primary care contractors took longer than expected to come to a conclusion. Four further concerns had been raised, but following discussion it was agreed that these should be dealt with under HR procedures. Communication efforts were ongoing which included the use of staff briefings, leaflets in PSSD, video and presentations and also engagement with the National Speak Up Week Campaign in October 2022. No referrals have been made to the INWO regarding cases already investigated and completed by NHS Lanarkshire.

Annmarie also drew members' attention to the Review of Whistleblowing 2022/2023. She advised that there were some recommendations within the Report, but in the main the report was positive.

The Committee then had a discussion in relation to the Review and the following was noted:

It was important that the lessons learned were addressed.

Lesley advised that a 'Speak Up Week' was being held from the 4th – 10th October.

In relation to a question as to how we compare with other Boards it was advised that this was covered in Part 3 of the report.

A member of the Committee felt that it was a concern that there had been three cases not upheld and Lesley explained the procedure that would have taken place if they had been Lanarkshire cases. She felt that it could also be a concern that there were no cases in Lanarkshire and that the 'Speak Up Week' being held from the 4th – 10th October may encourage people to come forward if they have concerns. Staff can also receive guidance and support from HR or the Employee Director who are available to all staff.

It was agreed that Mary would organise a meeting with Sylvia, Lesley McDonald and the staff side on the Committee to discuss whistleblowing.

Jacqui advised that she was not comfortable being the Executive Lead for Whistleblowing as she felt it was a conflict of interest, and that Eddie Docherty would now become the Executive Lead with support from HR.

Lesley also indicated that she had recently attended two of the Networks within NHS Lanarkshire.

Annmarie informed the Committee of a piece of work that was currently being undertaken along with Jonathan and the Team and the data would be brought to future meetings. A case management system was also being considered.

The Committee noted the Review of Whistleblowing 2022/2023

5.1 **WORKFORCE REPORT**

Jonathan Pender, Head of Workforce highlighted some key areas from the Workforce Report.

Jonathan indicated that there had been a slight increase in the staff in post and that the number of vacancies had increased the reason for this being that there was quite a number of recurring posts. Work was undertaken with finance from a Workforce Reporting perspective e.g. Core Vaccination Service which has now been added into the report and would give a more accurate picture going forward.

In relation to agency shifts Jonathan indicated that the figures from July 2023 show a significant reduction from the last report in April 2023.

Unfortunately, the figures for sickness absence are sitting at 7% and we are the highest territorial Board as we did not get the same level of seasonal reduction. The number one reason is unknown making it difficult to take any action. Jacqui Jones, HR Director pointed out that we need to help Managers along with staff to find out the reason for the sickness absence as it is impossible to help if we do not know the reason. It was important to encourage Managers to have these conversations. Sylvia Stewart, Employee Director also had concerns around sickness absence not being reported correctly in SSTS. It was felt that it was possible that some of the staff are not aware of the Policies that are there to support them i.e. carers leave/parental leave/ etc.

It was pointed out that the vacancy levels were highest with AHPs and then Nursing and Midwifery and that it may be helpful if this was broken down into 'Bands'.

The issue of a high turnover of staff was also discussed and it was suggested that more work could be done around exit interviews. Jacqui also pointed out that special leave/carers leave rather than helping Managers with a level of confidence that Lanarkshire is a caring employer and want to manage giving Managers the confidence to have these conversations. Kirsty Cole, Head of Organisational Development and Jacqui would meet to have a conversation around this. Kirsty advised that a new programme for Managers had been launched and she shared some of the sessions and topics that would be raised. Annmarie also advised that there was a session for Managers with regard to the Once for Scotland Policies. A review was also being undertaken of the Easy Service.

The Committee then discussed training and the Leadership Development Programmes, and that there was a fresh programme which started at Band 3. It was noted that Managers with coaching availability were included within the Programme.

Jacqui suggested that an Action Plan that covers all of the different area interventions that we want in place and then monitor i.e, sickness absence. An Action Plan could then be produced with a number of staff taking this forward.

Jacqui also highlighted the work of Jonathan and his team and the need for some more capacity and the need to put support in place.

The Committee then discussed Operation Flow and it was stated that operation flow staff require to step up to a high level. Low resource was a cause for concern and this could lead to health and wellbeing issues and sickness absence. Eddie Docherty, Executive Nurse Director spoke of the use of a Prag Tool and that they were reviewing the figures, and that there was a huge amount of work ongoing with looking at more of the areas.

The Committee then had a discussion around waiting lists and it was stated that a clinically prioritised approach was always considered across the entire population.

The Chair thanked Jonathan for his report.

5.2 **SALUS ANNUAL REPORT**

Mark Kennedy General Manager, SALUS highlighted the main issues from the SALUS Annual Report.

There were 29 riddors which was an increase of five on the previous year.

In relation to staff incidents there had been an increase of 38% and a decrease of 20% in threatening/intimidating behaviours towards staff.

There had been a huge increase in face to face training, this was because of the compliance training figures

There had been a notifiable patient death and a full review had been undertaken.

Management referrals had increased by 20.6% and this was the highest figure recorded by SALUS and 33% higher than the 2021 data. Potentially due to increased workforce numbers and increasing levels of sickness absence. The presenting conditions within management referrals remain static with 38% of all management referrals relating to mental health issues with a further 21% presenting with musculo-skeletal problems. Work related mental health issues remained unchanged at 18%. Self-referrals had fell considerably with only 167 in year. This may be because of the uptake of the uptake of staff health and wellbeing services. Since COVID self-referrals ad decreased year on year.

Mark intimated that in future the data will be in the format of a dashboard and an automated process for management referrals was being considered for next year along with a review of training capacity and different methodologies of training.

The Committee noted the SALUS Annual Report.

6.1 **COMMITTEE WORKPLAN 2023/2024**

It was agreed that Jacqui Jones and Phillip Couser would meet to discuss the Workplan for 2023/2024.

6.2/ **MINUTES TO NOTE** 6.3

The Committee noted the following minutes:

Area Partnership Forum – 23rd May 2023
Remuneration Committee – 3rd July 2023

6.4 **TERMS OF REFERENCE**

It was stated that the Terms of Reference needed to be targeted.

7.1 **SIGNIFICANT EMPLOYMENT ISSUES**

There was nothing to report under this item.

7.2 **CELEBRATION OF SUCCESS**

There was nothing to report under this item.

7.3 **EMPLOYABILITY REPORT**

This would be brought to the next meeting.

8.1 **ANY OTHER COMPETENT BUSINESS**

Cathy McGinty, staff side representative referred to an SBAR concerning the Occupational Therapy and AHP Review. She explained that the staff were very concerned and were feeling demoralised and anxious with the review, and wanted this brought to the attention of the Committee. She confirmed that she would be meeting with Occupational Therapy leads tomorrow. Eddie Docherty agreed to pick this up and speak to those leading on this Review.

8.2 **DATES OF MEETINGS DURING 2023/24**

18th March 2024 at 2.00pm.

DRAFT