

Unapproved Minutes



Meeting: Staff Governance Committee
Date: 5 September 2024, 2.00pm
Venue: Meeting Room 10 & MS Teams

Members

Brian Moore	Non-Executive Director (Chair)
Lesley McDonald	Non-Executive Director
Colin Lee	Non-Executive Director
Nauman Dar	Non-Executive Director
Sylvia Stewart	Employee Director
Cathy McGinty	Unison Representative
Bernadette McIntyre	RCN Representative

In Attendance

Ann Marie Campbell	Head of Employee Relations
Eddie Docherty	Executive Nurse Director
Calvin Brown	Director of Communications
Paul Cannon	Board Secretary
Jacqui Jones	Deputy Chief Executive & HR Director
Jonathan Pender	Head of Workforce
Charlotte Hope	Corporate Risk Manager
Terri Hunter	Organisational Development Manager
Gordon Gray	Head of Health & Safety
Marlene Fraser	Head of Human Resources
Stephen Pebbles	Deputy Director, Acute Services

Apologies

Morag Holmes	Unite Representative
Robert Foubister	Unison Representative
Jann Gardner	Chief Executive
Ruth Hibbert	Divisional HR Director
Kirsty Cole	Head of Organisational Development
Mark Kennedy	SALUS General Manager
Martin Hill	Non-Executive Director
Liz Airns	GMB Representative
Andy McCormick	Unite Representative

1 Preliminaries

1.1 Welcome and Apologies

Mr Moore welcomed Members and those attending to the meeting, and the apologies were noted.

1.2 Declarations of Interest

There were no declarations of interest.

1.3 Minutes of the previous Meeting(s) held on 3 June 2024 and 11 July 2024

The minutes of the previous meetings held on the 3 June 2024 and 11 July 2024 were approved as an accurate record.

In relation to the minutes of 11 July 2024, it was noted that Mr Moore had written to the Board Chair to express the Committee's concerns over the high levels of sickness absence, and it was further noted that this had been the topic of further scrutiny at the recent Non Executive Directors Briefing session, and discussion at the last Planning, Performance and Resources Committee.

1.4 Matters Arising: Action Log

Members discussed up-dates to the Action Log. In relation to the item on Reasonable Adjustments, it was noted that this discussion was ongoing.

2 Performance Reports

2.1 Acute Services Staff Governance Update

Mr Peebles attended to provide a Powerpoint presentation to the Committee on key Staff Governance metrics as these applied to the Acute Division. Mr Peebles provide a series of slides covering the number of staff within the Division, grade split data, sickness absence charts, vacancies, training compliance rates, iMatter results, TURAS uptake, and challenges facing the Division.

Ms Stewart asked about the Division's success in reducing nurse agency spend, and Mr Peebles highlighted that the cost of using Nurse Agency staff had been reduced by 50%. Mrs Stewart also asked if there had been any impact on vacancy rates, and Mr Peebles offered to share that data separately.

In relation to sickness absence, Mrs McGinty asked if there was absolute clarity of roles between the Line Manager and the Sickness Absence Manager across the Division as a whole, and Mr Peebles reported that in his view this was not the case in every area within the Division and that different services dealt with this issue in different ways, depending on local circumstances.

2.2 Integrated Performance & Quality Report

Members received and noted the latest IPQR (August 2024) and it was agreed that as many of the indicators were covered in other later papers the report would not be scrutinised in detail, and if there were issues still to be discussed these would be raised at the end of the meeting.

It was however suggested, and agreed, that a nomenclature change should be made to retitle the indicator *Off Framework Agency Usage* to reflect the wider issue of *Nurse Agency Usage* instead.

2.3 Occupational Health Annual Report (2023 – 2024)

Members received and discussed the Occupational Health Annual Report (1st April 2023 – 31st March 2024) and Mr Gray took Members through the report in detail.

In relation to Health & Safety, he highlighted RIDDOR activity, Violence & Aggression incidents reported through DATIX, LearnPro Statutory and Mandatory Training Compliance, Control Book Compliance Audits, LearnPro Training, Moving and Handling Practical Training, PaMoVA Practical Training and renewal of all relevant Health & Safety policies. Mr Gray went on to highlight the key areas of focus in 2024/25.

In relation to Occupational Health activity, Mr Gray highlighted Management Referrals, Health Surveillance, Pre-Placements, Immunisations, Blood Borne Virus Exposure, Physiotherapy and Counselling. Mr Gray went on to highlight the key areas of focus in 2024/25.

Mr Moore commended Mr Gray and his colleagues for providing such a concise and helpful Annual Report covering a very wide range of activities.

In relation to DNA rates in certain services, it was noted that reports are provided to Line Managers, who should support staff who are booked on to courses and events, to ensure that these are viable to run.

3 Human Resources Reports

3.1 Workforce Report

The Workforce Report provided an overview of the NHSL workforce in relation to key performance areas: staff in post, vacancies, supplementary staffing and turnover. The report provided details of current performance, highlighted areas of concern and current actions. Mr Pender took Members through the report in detail.

3.2 NMAHP Practice Development Centre Annual Report 2023-24

Members noted a report from Margo Russell, Director, Practice Development. In view of the fact that Mr Docherty had been unable to join the meeting, it was decided to note the very informative and detailed report and if Members had any comments to make to direct these to Mrs Russell separately.

3.3 iMatter Staff Experience Survey - current results

Members received and discussed a report which set out the current position on Staff Experience. The iMatter Staff Experience Survey 2024 – Current results paper was included as Appendix A to the paper and fully reflected current results.

Members noted that so far two of the three KPI results had been published – response rates and EEI scores.

NHSL KPI 1 Response rate – 58%

NHSL KPI 2 EEI score – 78

NHSL KPI 3 Action plans – final results available 17/9/2024

It was noted that response rates and EEI score remained steady when compared to previous years, and comparable with the national results. 81% of teams in NHSL sit in the Strive & Celebrate level for their Employee Engagement Index with overall Directorate EEIs ranging from 72 to 85.

In 2023, Scottish Government added two additional questions at the end of the survey around Raising Concerns (to help inform around Whistleblowing).

These were again included in the 2024 survey however they do not form part of the main survey and staff are not required to answer the two questions. Results from these 2 questions and are only reported at Directorate / Board level not at team level. The overall Board average scores for the questions are detailed below. A breakdown by Directorate was available on request.

1. I am confident that I can safely raise concerns about issues in my workplace - 81
2. I am confident that my concerns will be followed up and responded to – 75

Members discussed how best to encourage a higher uptake of the survey and it was noted that there had been a very positive discussion at the Area Partnership Forum meeting held earlier that week. Staff Side colleagues indicated that they were very engaged in promoting the survey.

The Staff Governance Committee

1. Noted the content of the report
2. Encouraged Directorates in submission of team stories
3. Supported Senior Leaders to work with their teams to promote the continuous improvement concept, and the value of participating in iMatter

3.4 Corporate Induction

Members received a report from Dr Hunter on Corporate Induction, which was discussed. The paper sought approval to transition NHS Lanarkshire's corporate induction programme from a virtual programme delivered via MS Teams, to an online e-learning module hosted on LearnPro.

The paper highlighted that the current programme format is no longer 'fit for purpose' with an urgent review required to be undertaken to ensure all new staff are provided with a flexible, accessible opportunity to participate in the induction process.

Following discussion, the Committee

1. Approved the move from a virtual Corporate Induction programme to an e-learning module.

3.5 Protected Learning Time

Members received and discussed a proposal from Dr Hunter that sought to increase NHS Lanarkshire's compulsory LearnPro modules from 10 to 12 to fit with the recommended modules, in line with Protected Learning Time (PLT). The paper also recommended a comprehensive review and redesign of existing LearnPro modules on a phased basis.

Dr Hunter reminded Members that in line with the national circular released in March 2024, Protected Learning Time (PLT) for NHS Scotland staff will be introduced imminently. Protected time for staff includes statutory, and mandatory training modules and NHS Scotland Agenda for Change staff were expected to complete all elements of mandatory learning during working time.

It was also noted that in order to streamline learning content with other Boards across NHS Scotland and to avoid confusion, a change of name for categories is required in LearnPro and our reporting dashboard. It is proposed that NHSL adopt 'core mandatory' for modules which are applicable to all staff, and 'core role specific' for job/role specific modules.

A paper was presented to CMT in December 2023 where it was proposed that a review and redesign of existing LearnPro modules took place. Further scoping work had been completed since this paper, and it was now recommended that modules with under 500 completions in a 12-month period were archived; this would apply to 62 modules (which are solely for NHSL staff) of the current 198 modules available. If this proposal was accepted, the L&OD team would contact Subject Matter Experts who own the module to confirm the process, and offer suggestions on alternative routes to training which may be more suitable.

A phased redesign of existing LearnPro modules will commence with core mandatory modules, followed by core role specific modules. Module redesign will focus on ensuring compliance with new accessibility legislation. This re-design work is also an essential part of developing sustainable learning content for any future move to Turas Learn in the future. Compulsory learning modules are recommended to focus on 'core' content and be reduced to a maximum of 15 minutes learning time.

Following discussion, the Committee agreed that:

1. Terminology for e-learning modules and LearnPro system categories be changed from 'compulsory' to 'core mandatory'
2. NHS Lanarkshire adopts 12 core mandatory modules for staff
3. Following discussion and agreement with SME/module owners, adopt a phased approach to reducing the number of LearnPro modules by archiving modules with less than 500 rates of completion
4. Redesign LearnPro modules for future transferability to Turas Learn
5. Reduce module length to a maximum of 15 minutes per module

6. Update the reporting system and learning plan to reflect all changes

4 Governance Reports

4.1 Corporate Risk Register

Members received and noted the updated Corporate Risk Report as it related to risks owned by the Committee at August 2024.

Ms Hope took Members through the report in detail. It was noted that there were currently 18 Corporate Risks included within the Corporate Risk Register, 1 of which was aligned to Staff Governance Committee for assurance purposes.

It was noted that 1 Staff Governance Committee risk has been closed (2124: Sustaining a Safe Workplace) and 1 Staff Governance Committee risk had changed in terms of either Risk Description, Mitigating Controls or Actions (2039: Staff Absence and Wellbeing)

4.2 Health & Safety Governance & Strategic Framework 2024-27

Members received and discussed a Health & Safety Strategic Framework 3 yearly review and revisions to the Framework. Mr Gray took Members through the paper in detail.

He highlighted that the Occupational Health and Safety Governance and Strategic Framework was a requirement of CEL 13 (2011) 'Safe and Well at Work: Occupational Health & Safety Strategic Framework for NHS Scotland'. CEL 13 (2011) required Health Boards to have an Occupational Health and Safety Governance and Strategic Framework in place to outline how NHS Lanarkshire will "approach occupational health and safety to keep staff motivated and healthy, engaged and safe". The framework outlines strategic aims and objectives for delivering occupational health and safety governance arrangements within NHS Lanarkshire.

The cover paper summarised the main areas that had changed within the Occupational Health and Safety Governance and Strategic Framework 2024-27, and Mr Gray stated that he was looking for the Committee to ratify the changes, while noting that the next review would be undertaken in 2027.

Members approved the revised Occupational Health and Safety Governance and Strategic Framework 2024-27.

5 Regular Reports

5.1 Whistleblowing Quarter 1 Update

Members received and noted the quarter 1 update on Whistleblowing activity. Mr Docherty took Members through the paper in detail and Ms McDonald commented on the work undertaken behind the scenes to assist staff who wanted to consider using the Policy.

It was also noted that Speak Up week will be held from 30 September to 4 October, and details of the activities planned were outlined in the update. It was noted that this year's theme is 'Enabling Speaking Up'.

In addition, Members were advised of the national activity planned by the Independent National Whistleblowing Officer (INWO).

5.2 Equality Strategy Action Plan (2024-25)

Members received and noted the updated Equality Strategy Action Plan. Ms Jones indicated that in future iterations this action plan will be included in the Staff Governance Action Plan to ensure that there was consistency of approach and better alignment of activity.

It was also noted that it was expected that there would be an announcement by Scottish Government on ant-racism and the part that the NHS can play in tackling this.

5.3 Staff Governance Workplan 2024-25

Members received the Staff Governance Committee Workplan for 2024-25 which was endorsed. It was noted that this was a dynamic document and it will be updated regularly in between meetings as circumstances dictate.

6 Forward Look

6.1 Any Other Competent Business

No items were raised.

6.2 Risks and Reflections

No issues were raised.

6.3 Date and Time of Next Meeting(s)

5th November 2024

14th January 2025

6th March 2025

8th May 2025

8th July 2025

11th September 2025

6th November 2025

All at 2.00pm.