

MINUTES – Approved

Staff Governance Committee of Healthcare Improvement Scotland at

28 February 2024, 10am, MS Teams

Present	In Attendance
Duncan Service, Committee Chair, Non-	Aimie Little Allan, Partnership Representative
Executive Director	
Michelle Rogers, Committee Vice Chair,	Angela Moodie, Director of Finance, Planning & Governance
Non-Executive Director	
Carole Wilkinson, HIS Chair	Ann Laing, Head of People & Workplace
Evelyn McPhail, Non-Executive Director	Ann Gow, Deputy Chief Executive/Director of Nursing and
	Systems Improvement
Judith Kilbee, Non-Executive Director	Clare Morrison, Director of Community Engagement &
	Redesign
Keith Charters, Non-Executive Director	Laura Liddle, Associate Director of Workforce
Nicola Hanssen, Non-Executive Director	Lindsay Fielding, One Team Strategic Lead
Belinda Henshaw-Brunton, Partnership	Lynda Nicholson, Head of Corporate Development
Representative	
Eddie Warde, Partnership Representative	Lynsey Cleland, Director of Quality Assurance & Regulation
	Paul McCauley, Risk Manager
	Robbie Pearson, Chief Executive
	Roberta James, Deputy for Director of Evidence & Digital
	Sandra Flannigan, Head of Organisational Development &
	Learning
	Simon Watson, Medical Director/Director of Safety
	Sybil Canavan, Director of Workforce
	Apologies
	Ben Hall, Head of Communications
Committee Support	Kenny Crosbie, Partnership Representative
Tara Duffy, Committee Secretary (Minutes)	Safa Qureshi, Head of Evidence & Digital
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1.	OPENING BUSINESS AND COMMITTEE GOVERNANCE
1.1	Welcome and Apologies for Absence
	The Chair welcomed everyone to the meeting and requested each attendee to introduce
	themselves. Apologies were noted as above.
1.2	Declarations of Interest
	There were no declarations of interest.
2.	MINUTES OF PREVIOUS MEETING
2.1	Minutes of Staff Governance Committee held on 1 November 2023
	The minutes of the meeting held on 1 November 2023 were accepted as an accurate record.
	However, the Committee noted the following:
	a) The Pharmacy Revalidation paper is missing, as it did not appear at the last meeting. The
	Committee was informed that this will be brought to the next meeting and added to the
	business planning schedule.
	 b) The Committee requested clarity on the business case for the workforce development
	funding and plans.

	Decision: The Committee approved the minutes.
	Action: Bring back clarity on the business case for the workforce development after clarity
	has been sought from the One Team Programme Board.
2.2	Review of Action Register for Staff Governance Committee on 1 November 2023
	The Committee reviewed the Action Point Register and noted the updates provided.
	Decision: The Committee gained assurance from the progress with action points.
2.3	Reflection of the Development Session for Staff Governance Committee on 23 January 2024
2	This item was covered below. COMMITTEE GOVERNANCE
3. 3.1	
3.1	Annual Report and Terms of ReferenceThe Committee reviewed the draft Annual Report and Terms of Reference and suggested several
	future actions to be added to the list: Oversight and monitoring of the organisation and development plan; Culture; Learning from organisational change.
	Additionally, the Committee made the following suggestions: a) Actions should be listed as bullet points.
	 b) Pharmacy Revalidation to be updated as it didn't come to the Committee in Q3. c) Wording should be stronger around the Committee scrutinising the details of the proposed organisational redesign.
	The Director of Workforce suggested circulating the notes from the January development session to the Committee to assist with reflecting on the Terms of Reference. It was agreed that both will come back to the Committee in May.
	Decision: The Committee noted the update on the Annual Report and Terms of Reference and agreed this should come back to the May Committee. Action: Annual Report to be updated with suggestions; Circulate notes from the development session; add Annual Report and Terms of Reference to May agenda.
3.2	Business Planning Schedule
	The proposed Business Planning Schedule for 2024-25 was shared, and the following points were suggested during the discussion:
	a) Learning and development should be added to the plan.
	b) Pharmacy revalidation to be added to plan and agenda for May meeting.
	Decision: The Committee approved the current Business Planning Schedule. Action: Business Planning Schedule to be updated to incorporate the noted suggestions.
4.	CORPORATE PLANS
4.1	Interim Workforce Plan
	The Director of Workforce provided the Committee with a paper on the interim workforce plan, explaining that the organisation is not yet at the point of knowing the full detail for a complete interim workforce plan. The content of the paper reflects on the agreed points from the SGC development session. The Director of Workforce confirmed that the future version of the workforce plan, viewable in the coming months, will include the implementation of our strategy, the continued impact and delivery of One Team, workforce modelling requirements, workforce development activity, and leadership and organisational capability, culture, employability, and health and wellbeing activity.
	 Other points highlighted include: a) There is work underway to gain clarity from all directorates in terms of immediate workforce needs, particularly regarding fixed-term contracts, and align them with financial planning. b) Further discussions and planning at the directorate level are planned to ensure all necessary details are captured, leading to a more detailed final plan.

	 The following information was provided after questions from the Committee: c) Consultation with the Partnership Forum and other groups is necessary to shape the content of the Workforce Plan within our scheduling framework. Additionally, the One Team Workforce Group, supported by staff representatives, plays a vital role. We will engage with directorates, as done previously by creating specific questions to ensure details are integrated into the plan. d) Fixed-term contracts have posed challenges. While some staff have been offered permanent positions, there's also a group whose contracts end in March. We've engaged in conversations with both sets of staff, aiming to retain them. Once the redeployment process is finished with permanent staff, vacancies will be offered to those remaining in the workforce. Transparency is crucial in decision-making about staff placements to provide certainty for employees about their future roles. Efforts are underway to address vacancies and redeployment opportunities, with upcoming meetings planned for this. e) Regarding returning money to the Scottish Government, we agreed to a sum that we thought was manageable, and with this tough situation, there isn't much scope for creating business cases for additional funds. f) The Committee expressed concern about returning funds given the situation within the NHS and the role of HIS within this, underscoring the importance of prioritising patient safety. g) The £2 million return of funds have come from vacancies, including project delays due to funding uncertainties, and challenges in recruiting staff. There is careful categorisation of the underspend. It is non-recurring and taken from allocation funding rather than baseline funding, which provides some protection for future years. Underspends can't be rolled over, and if a clear plan can't be provided before the end of the Binancial year, then it is our duty to return the funds. The integrated plans will be going to the Binancial
	Decision: The Committee scrutinised the report and were assured by the update provided on
	the Workforce Plan.
4.2	Executive Director and Corporate Objectives
	The Director of Workforce provided the Committee with a paper providing insights into the reshaping of objective setting for the Executive Director cohort and the proposed corporate objectives for the organisation. There's a focus on national leadership, strategy delivery, being an exemplar employer, financial targets, and efficiency improvements, alongside effective governance. The exemplar employer objective includes metrics such as iMatter, PDWR completion and sickness absence levels. There is also focus on practical application of the 'One Team' approach at both directorate and organisational levels, fostering a positive culture, maximising hybrid working benefits, and ensuring staff confidence in raising concerns. There have been discussions regarding proposals from the Equality, Inclusion, and Human Rights Working Group, with further offline deliberations among Partnership Forum colleagues.
	The following suggestions and comments from the Committee were noted:
	 a) Working collaboratively and flexibly should be added to the first objective, and the use of the words within HIS/colleagues removed. b) The wording of the second objective makes the objective sound personal and not corporate. c) The inclusion of responsibility around supporting the mental health of others. d) The third objective could be hard to measure and could miss a number of areas that might present barriers to people engaging around mental health and substance use.
	The Head of Organisational Development and Learning informed the Committee that the Personal Development and Wellbeing Review process occurs annually between April 1st and the end of May, allowing individuals to discuss their progress and set objectives for the coming year with their line managers. The corporate objectives serve as a guide for these discussions, focusing on actions and priorities at organisational level, such as wellbeing and collaboration, which are deemed important for the organisation's success.

	Decision: The Committee
	Action: Amend objectives with suggestions made
4.3	One Team Update inc Organisational Change ReviewThe Deputy Chief Executive/Director of Nursing and Systems Improvement provided the Committeewith a paper on One Team including the Organisational Change Review. Highlights of the paperinclude a new medical model, progress in fixed-term contracts, and ongoing organisationaldevelopment planning led by the redesign group. The following was highlighted from theOrganisational Change Review:
	 a) The process was challenging and resulted in delays, impacting staff significantly. The recommendations outlined in the review focus on immediate, short-term, and medium-term actions to address these challenges and ensure a smoother process moving forward. b) Immediate priorities include wrapping up organisational changes quickly, setting up a transformational oversight Board, and tending to resourcing and relationship needs within directorates. Staff will receive the review report, and any agreed-upon solutions will be implemented before moving forward with further changes. c) Short-term actions include formalised mediation, creating educational materials on partnership roles, strengthening policies and guidance, and establishing an overarching Board to support governance of organisational change. d) In the medium-term, the focus shifts to developing resources for organisational change, reinforcing ownership and governance of these changes, and ensuring completion before the next financial year begins. e) The review report's detailed action plan, assigning responsibilities clearly, offers a roadmap for addressing challenges comprehensively. Timely implementation of these recommendations is crucial to mitigate future issues and streamline organisational change processes.
	The Committee acknowledged both the reviews usefulness and the areas where mistakes were made. There is value of learning from this experience, and it is a necessity to address internal challenges to be more effective externally. It was suggested that there is a need for better governance with a more hands-on involvement and a clear focus on driving the change.
	Additionally, the Committee recognised the impact of the iHub's disaggregation within the organisation. While the report mainly addresses official organisational change, it's vital to consider the effects of the iHub's disaggregation. It is important to acknowledge and integrate these impacts into future reflections and organisational processes.
	Regarding a question on the proposed mediation process, particularly it's implementation and stakeholder involvement. There have been reflections on this topic at the Partnership, and this aspect will be further explored with updates provided on the progress in due course.
	Decision: The Committee were assured by the discussion on the One Team and Organisational Change update. Action: Action plan from report to be worked on and circulated to the Committee before the May meeting
4.4	eRostering
	 The Director of Workforce presented a paper with detail on the eRostering implementation in the organisation. The following was highlighted: a) Training sessions were conducted both before Christmas and more recently to familiarise staff with the new digital platform. b) The implementation follows a phased rollout approach, with certain directorates already onboarded and others scheduled for later phases with directorates undergoing significant structural changes in the third phase. c) There have been challenges during implementation, particularly regarding Data Protection Impact Assessments and information governance. Despite challenges, HIS has met the

	 d) The focus is now on further activities and communication strategies to support staff and managers in adapting to the new system. This includes establishing an operational group for ongoing discussions and ensuring consistency in implementation across teams. e) HIS will continue to receive support from customer support managers, the Arial Datix team, and an internal knowledge hub. This network will address concerns, questions, and any future developments related to the system.
	 The following was provided after questions from the Committee: f) We are aware of concerns, particularly regarding confidence in the system and potential delays. HIS is involved in a national implementation programme and there is a need for a flexible approach due to the unique working environment. Measures are being taken to monitor system uptake and address individual concerns include, tracking activity levels and offering support for difficulties encountered. g) The payroll interface has not yet been implemented. There are ongoing national efforts to establish the interface between eRostering and the payroll system. Accurate payroll recording in both systems is important to progress with this and updates will be shared
	 when available, possibly around September, depending on progress. h) Funds allocated for PGMS are being redirected to project management support within the team, ensuring that we are not paying for a service we are not currently receiving.
	Decision: The Committee were satisfied by the update provided.
4.5	Learning and Development Model
	The Head of Organisational Development and Learning provided the Committee with a verbal update and slide deck on the Learning and Development Model and the Organisational Development Framework, highlighting the following:
	a) The interim model has been shared with the Partnership Forum, Senior Management Group, and the HIS Campus. Feedback indicates support for the direction and the interim model will be implemented as a test of change throughout 2024.
	 b) The model moves away from a legacy approach and adopts a strategic and structured approach that aligns with HIS priorities. c) Key achievements include establishing governance around manager training, rationalising
	 existing learning platforms, and implementing reporting tools to monitor progress with training. d) A year long test of change is planned, with preparatory work leading up to the launch of the
	HIS Campus learning platform on April 22nd. This launch will coincide with a forward plan of opportunities for staff aligned with the interim Learning and Development model. Preparatory activities include promoting the change to staff, building, and testing the HIS Campus virtual space, and collaborating with subject matter experts to develop the programme.
	 e) The interim L&D model showcases the importance of a flexible workforce with transferable skills and aims to provide clear structure for employee development. f) Feedback highlights staff noticing a difference in HIS support for their development,
	 underscoring its prioritisation in the HIS strategy. g) Organisational development priorities focus on impactful changes, aligned with our goal to be an exemplar employer, starting with foundational elements before further enhancements.
	Decision: The Committee noted the update provided. Actions: Share slides presented with the Committee; Bring an update back to the next meeting
4.6	Organisational Development Strategy
_	This item was covered above.
5.	RISK MANAGEMENT
5.1	Risk Management/Risk Register
	The Director of Finance Planning and Governance presented a paper to the Committee on risks. The Risk Manager highlighted how mitigation efforts for workforce risks revolve around the

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	workforce plan, and it will take time to bring these risks to acceptable levels. Furthermore, recent attention has been given to addressing the new risk associated with partnership working following the budget announcement in December.
	The Committee suggested that risk 1323 may contribute to factors beyond financial considerations, such as the organisational changes discussed in the recent paper and it was agreed to update the narrative of this risk.
	Decision: The Committee noted the update provided.
-	Action: Update narrative of risk 1323
6.	WORKFORCE METRICS
6.1	Allied Health Professionals Registered Assurance
	The Deputy Chief Executive/Director of Nursing and Systems Improvement provided the Committee with a paper on the Allied Health Professional (AHP) registration process. There are currently 16 registered AHPs, with two leaving the organisation soon. The former AHP lead, has moved to National Education Scotland (NES), creating a need for a replacement, and a service level agreement has been developed with NES to ensure continued support. HIS are also building active forums for various groups to provide input into the Quality Performance Committee and the Board. Additionally, efforts are being made to support student AHPs, with all current applicants registered and no issues reported. Next steps include developing governance frameworks for nurses, midwives, and AHPs to ensure effective systems are in place.
	 The following information was provided after Questions from the Committee: a) We are in discussions to align governance processes across healthcare professions and are currently exploring ways to formalise this structure to streamline processes and support various functions across the organisation. b) Regarding the consideration of adopting the new Medical Workforce Model for other professional groups, the current focus is on supporting and deploying medics who serve as clinical leads. HIS employs a different employment model for medics compared to nurses and AHPs, who are typically full time staff members involved in various programmes. The aim is to integrate these models and provide a better description of how they operate. c) Some individuals leaving the organisation are transitioning to jobs tagged as healthcare professional roles. These roles may offer a better fit for individuals seeking to work within their healthcare professional domain. HIS are currently revising job descriptions to clarify when registration is required, aiming to create more clarity and potentially retain more staff by offering roles aligned with their professional aspirations.
	Decision: The Committee noted the update provided.
8.	PAPERS FOR NOTING
8.1	Partnership Forum 3 Key Points
	The key points were noted.
9.	CLOSING BUSINESS
9.1	Board Report 3 Key Points
	The Committee agreed the three key points as follows: Interim Workforce Plan, Organisational
	Change Review, Learning and Development Model & Organisational Development Strategy.
9.2	Feedback Session
	The Committee congratulated Belinda Henshaw-Brunton on her new Staff Governance Associate role and requested sight of the One Team Newsletter. Action: Circulate One Team Newsletter
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Approved by: Duncan Service, Committee Chair Date: 1 May 2024

Next meeting:

1 May 2024 10am