

MINUTES – Approved

Staff Governance Committee of Healthcare Improvement Scotland

07 August 2024, 10:00am, MS Teams

Present	In Attendance
Duncan Service, Committee Chair, Non-Executive Director	Angela Moodie, Director of Finance, Planning & Governance
Michelle Rogers, Committee Vice- Chair, Non-Executive Director	Ann Laing, Head of People & Workplace
Carole Wilkinson, HIS Chair	Ann Gow, Deputy Chief Executive/Director of Nursing and Systems Improvement
Evelyn McPhail, Non-Executive Director	Belinda Henshaw-Brunton, Staff Governance Associate/ Partnership Representative
Judith Kilbee, Non-Executive Director	Ben Hall, Head of Communications
Keith Charters, Non-Executive Director	Caroline Craig, Associate Director of Healthcare Staffing
Nicola Hanssen, Non-Executive Director	Clare Morrison, Director of Community Engagement & Redesign
	Eddie Warde, Partnership Representative
	Kenny Crosbie, Partnership Representative
Committee Support	Laura Liddle, Associate Director of Workforce
Tara Duffy, Committee Secretary (Minutes)	Lindsay Fielding, One Team Strategic Lead
	Lynda Nicholson, Head of Corporate Development
	Paul McCauley, Risk Manager
Apologies	Pauline Symaniak, Governance Manager
Aimie Littleallan, Partnership Representative	Robbie Pearson, Chief Executive
Lynsey Cleland, Director of Quality Assurance & Regulation	Safia Qureshi, Head of Evidence & Digital
	Sandra Flannigan, Head of Organisational Development & Learning (O,D&L)
	Sandra McDougall, Associate Director of Quality Assurance (Deputy)
	Suzanne Dawson, Board Member
	Simon Watson, Medical Director/Director of Safety
	Sybil Canavan, Director of Workforce
	Tony McGowan, Associate Director of Community Engagement

1.	OPENING BUSINESS AND COMMITTEE GOVERNANCE
1.1	Welcome and Apologies for Absence
	The Chair welcomed everyone to the meeting, and the apologies were noted as above. The Chair introduced Suzanne Dawson, the Chair of the Scottish Health Council Committee, and Yvonne Semple, the Chair of the Senior Leadership Group, who joined as observers.
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 28 February 2024
	The minutes of the meeting held on 01 May 2024 were accepted as an accurate record. Decision: The Committee approved the minutes.

2.2	Review of Action Register for Staff Governance Committee on 28 February 2024
	<p>The Committee reviewed the Action Point Register and noted that all actions were on track or were being discussed later in the agenda.</p> <p>The Committee questioned the progress on the M365 licenses and were informed by the Director of Evidence & Digital that the license dependency extends across NHS Scotland, not just HIS. There has been improved management of users across all the Boards, and we are now less concerned about it as a risk.</p> <p>Decision: The Committee gained assurance from the progress with action points.</p>
3.	COMMITTEE GOVERNANCE
3.1	Business Planning Schedule
	<p>The Business Planning Schedule for 2024-25 was shared, and it was noted that Nursing is missing from the Allied Health Professional item under Workforce Metrics. This should be updated to include it.</p> <p>Decision: The Committee approved the Business Planning Schedule. Action: Business Planning Schedule to be updated to incorporate the noted suggestion.</p>
4.	CORPORATE PLANS
4.1	Interim Workforce Plan
	<p>The Director of Workforce provided the Committee with the draft Workforce Plan, along with a presentation. There has recently been an updated and evolving financial picture across the organisation, with additional allocations confirmed at the end of June. As part of the work on the Workforce Plan, One Team Process, and financial picture, we are also aware of directorate and team pressures that are reflected in the paper and the workforce metrics.</p> <p>Key points highlighted from the paper/presentation include:</p> <ol style="list-style-type: none"> a) The main themes in the draft Workforce Plan include activity around health and wellbeing, the importance of equality and diversity (including the work of the equality networks), partnership working, cultural change (including staff experience and engagement), learning and development, and employability. b) The biggest gap within our headcount is in the Nursing and Systems Improvement directorate, including Healthcare Staffing and Portfolio work, making these priority areas that need focus. We are currently undertaking activity around the HIS employee posts. From a budgetary perspective, our affordable headcount is 520 whole time equivalent (WTE), and our staffing is currently below this level. Although there is a lower level of turnover compared to last year, we are still showing a workforce gap in key teams. c) Directorate drivers: Drilling down into the individual directorate returns and using the correct new directorate titles, the drivers for each directorate include: <ul style="list-style-type: none"> o Community Engagement and Transformational Change: Creation of unified directorate structures and support for service change, engagement, and equalities practice. o Finance, Planning, and Governance: Stronger control over delivery and performance reporting, alongside a revised communications strategy. o Quality Assurance and Regulation: Staff delivery, a new programme of inspection, Independent Healthcare, Responding to Concerns, and the Queen Elizabeth review. o Evidence and Digital: Provision of Once for Scotland advice based on the best available evidence. o Medical and Safety: Provision of medical and technical advice in support of the Clinical and Care Governance risks and the safety needs across the wider NHS system. o Nursing and Systems Improvement: Portfolio provision, Healthcare Staffing, Public Protection, and NMHAP provisional governance and support. o People and Workplace: Provision of all HR and organisational development and learning facilities oversight. <p>In terms of reporting on activity going forward and completing the final version of the plan, the</p>

Director of Workforce suggested that they should continue to provide oversight of the workforce data, update on One Team progress, highlight the directorate priorities that have been identified, and address the impact of any potential changes.

The following information was provided after questions and comments from the Committee :

- d) The Committee questioned the clarity of the overall aim and future direction of the Workforce Plan. While it's clear where the organisation is coming from and the steps to get there, the final target remains unclear. The Director of Workforce acknowledged this challenge, noting the need to balance overarching themes with the support offered across the organisation.
- e) Regarding the workforce affordability, we had only received limited financial information over recent months, hindering the availability of the final hard data before today's discussion.
- f) When considering affordability, it's important to evaluate what the Independent Healthcare programme contributes and how these contributions can be linked to actions benefiting everyone.
- g) Regarding the sickness absence target, there is a sensitivity around distinguishing between targets and benchmarks, with internal discussions focusing on supporting staff to return to work rather than pushing for a target.
- h) The Committee suggested restructuring the workforce document so it's shorter, possibly moving some details to appendices. The focus should be on capturing the current state of staff support, challenges, drivers, and overarching organisational opportunities to report on.
- i) Concerns were raised about the workforce plan being driven by financial considerations, which is not the right approach. There is a need to align the workforce plan with the organisation's strategic priorities, determining what workforce is necessary to achieve these goals.
- j) The workforce plan has effectively captured directorate priorities and drivers, but there is a need to also capture HIS's overarching priorities to better inform resource allocation.
- k) The culture section of the workforce plan should include clear expectations for all staff and managers regarding organisational culture.
- l) There is information available from various Committees that could inform directorate prioritisation. There is a need to make this process ongoing and meaningful, ensuring that activity is reported back to the Committee in relation to the broader workforce plan.
- m) The Director of Evidence and Digital informed the Committee that a key theme in the new developing digital strategy is the digital empowerment of staff. Collaboration is ongoing with the People and Workplace team to create a digital learning pathway based on a new digital framework.

Decision: The Committee scrutinised the draft Workforce Plan and took moderate assurance from the update provided.

Action: The Director of Workforce will have discussions with the Chair, Vice Chair and the Executive Team on the best way to refine the document before the final version goes to the Board.

4.2 Organisational Change Review Update

The Director of Workforce presented the committee with a paper on the Organisational Change Review. The paper included a summary of the work previously highlighted in the Organisational Change Review report and confirms that further progress has been made on the actions detailed in the report.

The new Transformational Oversight Board met in May and reviewed additional proposals for changes to the Community Engagement and Transformational Change directorate. This included confirmation of the directorate's new name and the director's new title. The Board also reinforced the approach to contractual services within the directorate, ensuring its resilience. The Board will meet on an as needed basis, depending on any proposed organisational changes.

A short life working group was established to oversee the implementation of the remaining recommendations from the review. The group reported that all work has been concluded, except for

	<p>one outstanding action: the review of the organisational change policy and broader guidance. This task will now be undertaken by a policy sub group.</p> <p>Decision: The Committee gained moderate assurance from the update provided.</p>
4.3	National Boards Collaboration
	<p>The Chief Executive provided the Committee with a short verbal update on the National Boards Collaborative. The previous work done by the National Boards to explore opportunities for collaboration have stalled, as it has been challenging to reach a common and shared position among the Boards. The Minister for Public Finance has written to all public bodies in Scotland, requesting returns related to spending on corporate services and functions. The HIS return has been submitted to the Scottish Government. There will be increasing pressure from the Scottish Government to ensure that we are maximising our efficiencies as an organisation.</p> <p>Decision: The Committee noted the update provided.</p>
4.4	One Team
	<p>The Chief Executive provided the Committee with a paper with a One Team update, thanking several colleagues for their contributions to the report. The organisation has now moved from the second floor to the ground floor of Gyle Square, providing a new and improved working environment for staff.</p> <p>Regarding the HIS employee, a considerable amount of work has been done to progress from concept to active recruitment, with reviews scheduled next week for Admin Officer and Project Officer roles. As we move forward, it is crucial to anticipate potential cultural issues within the organisation, and work is being done to test various scenarios.</p> <p>The Committee expressed the need to consider different tiers of roles and how staff are supported, emphasising that when setting expectations, they must be realistic and consistent with those of others in the same job role. The Chief Executive agreed, noting the importance of ensuring that in addition to the responsibilities of the HIS employee, all HIS managers understand their role in making this a success and ensuring a consistency. The Director of Workforce added that careful consideration is being given to the onboarding and induction of new employees, and work with managers is already underway. Regarding the proof of concept piece referenced in the paper, the focus will be on reviewing measures of success and maintaining workforce flexibility in the long term. Plans are also in place to expand this approach beyond the current roles.</p> <p>Regarding the Senior Leadership Team, the team has been developed to foster shared accountability for the collective success of our strategy. There was a joint meeting in July with the Executive Team and the Senior Leadership Team, with an ongoing journey clarifying our collective contribution as a larger team and understanding how this works in practice. External support by Elaine Melrose has been provided to support team development, with the second half of this work scheduled for later in the year. The focus includes the role of the manager as a coach, building resilience in managing change and uncertainty, supporting and managing performance, ensuring sustainability, and investing in skill development tools.</p> <p>Decision: The Committee welcomed the update and took moderate assurance from the update.</p>
4.5	Chief Pharmacist Recruitment
	<p>The Medical Director/Director of Safety updated the Committee on the Chief Pharmacist recruitment verbally. Initially, the plan was to make a joint appointment with another Health Board, but this option was terminated due to practical, governance, and financial issues. The current approach is to recruit for a fixed term position that mirrors the previous Chief Pharmacist role. This will allow for a more fundamental review of the pharmacy workforce. A revised job description is going through the agenda for change and a recruitment advert will follow.</p> <p>Decision: The Committee noted the update.</p>

5.	WORKFORCE METRICS
5.1	Workforce Report
	<p>The Director of Workforce presented the Committee with the Workforce Report and highlighted the following points:</p> <ul style="list-style-type: none"> a) The Board discussed sickness absence levels in June, with a slight decrease from 4.6% to 4.5% by the end of the month, compared to 3% at the same time last year. Mental health and psychological reasons were identified as the main causes. b) Efforts are underway to support staff attendance, including training on the attendance management policy, management training, partnership involvement, stress risk assessments, and increased psychological support through National Services Scotland and Spectrum Life. c) The organisation is focusing on activities like meditation and mindfulness, the carers network, and mental health training for managers, including mentally healthy workplace and mental health first aid training. d) There is one active grievance case and two formal absence cases. Several staff members are on long term absence, with ongoing management oversight. e) Six staff members are actively being supported in finding appropriate roles. f) The current Key Performance Indicators include staff turnover, sickness absence, gender pay gap, mandatory training, and partnership working. <p>The following information was provided in response to questions from the Committee:</p> <ul style="list-style-type: none"> a) There is currently no standard feedback process in place to gauge how staff feel about the available opportunities. We need to explore this with the Partnership Forum and individual staff members, and we can expect a range of responses. b) While we do not currently report on the correlation between staff age profiles and absence rates, this is something we could consider. Although we have offered a range of support for specific experiences and conditions, there does not appear to be an immediate correlation. c) The new employee assistance programme has been well accessed with good feedback from staff. <p>Decision: The Committee accepted moderate assurance from the update.</p>
5.2	Performance, Development and Wellbeing Review (PDWR) Reporting
	<p>The Head of Organisational Development and Learning (OD&L) presented a report on the current year's PDWR process, highlighting key activities and outcomes. Discussions occurred between April 1 and May 31, 2024, with the OD&L team following up on necessary actions. The process is important for staff to reflect on achievements, set goals, and identify development areas. So far, 88% of PDWR discussions have been completed and signed off, with 74% of objectives and 76% of personal development plans for 2024-25 signed off. The mid year review is scheduled for October and November. Since 2021, personal development plan outcomes have informed a learning needs analysis across the organisation. The HIS campus progress report also details ongoing and planned infrastructure developments supporting staff opportunities.</p> <p>In the discussion that followed, the following information was provided:</p> <ul style="list-style-type: none"> a) The Committee suggested including a PDWR Key Performance Indicator (KPI) since it is a staff related metric. b) Removing non eligible staff from the results is challenging, but this is something to consider for future improvements. <p>Decision: The Committee was moderately assured by the update, noting that it is occurring during a time of change with uncertainty about its impact on staff. The Committee suggested separating different elements of the report to provide varying levels of assurance.</p> <p>Actions: Discuss the introduction of a PDWR KPI; Explore removing non eligible staff from PDWR results.</p>

6.	VALUES, BEHAVIOURS, ENGAGEMENT & COMMUNICATION
6.1	iMatter
	<p>The Head of Organisational, Development & Learning presented a paper to the Committee on the iMatter results, outlining plans to take a more elevated approach this year. Key points highlighted include:</p> <ol style="list-style-type: none"> The Board level response rate has decreased to 90%, down from 92% last year, and the employee engagement index has fallen to 75% from 80%. The deadline for action plan completion was August 6th, with a reported 75% completion rate to the Scottish Government. There has been a decline in scores at both Board and Directorate levels, indicating a potential loss of confidence and engagement on an organisational scale. This year's approach aims not only to address the results but also to establish a clearer structure around staff engagement practices and overall staff experience. The report outlines nine actions to tackle the challenges and opportunities from multiple perspectives. Key elements of the plan include: Shifting the partnership role into an oversight role; Enhancing the role of the iMatter steering group and its members; Increasing focus on addressing results at the Directorate level; Expanding the use of pulse surveys within Directorates; Considerations around resourcing. <p>In the discussion that followed, the following information was noted:</p> <ol style="list-style-type: none"> Rather than spending excessive time analysing the data, the focus should be on quickly determining the next steps. Engaging with staff will be crucial in moving forward. The Senior Leadership group expressed interest in being involved, serving as a link between the Executive Team, the Board, and the broader organisation. With decision making being a key theme, how can they assist in clarifying and improving understanding. Concerns were raised about questions being asked without sufficient context, emphasising the need for mutual learning. It was suggested that providing support to staff regarding expectations and the roles within the organisation could be beneficial. The Executive Team are disappointed with the decline in results. Both the Executive Team and the Board need to listen carefully, and it's crucial that this work is owned by them. <p>Decision: The Committee noted the update and accepted moderate assurance.</p>
7.	RISK MANAGEMENT
7.1	Risk Management/ Risk Register
	<p>The Risk Manager presented the Committee with the risk update. Currently, there is one risk in the strategic risk register that is out of appetite: the overall workforce risk. After additional work is completed ahead of the Board meeting in September, a better update will be provided to this Committee at the next meeting.</p> <p>A new risk related to sickness absence levels has been introduced this quarter. Additionally, the strategic risk register has been moved to SharePoint, which is why it appears different. The Risk Manager invited any feedback on the new format.</p> <p>Following discussion from the Committee, additional information was provided as follows:</p> <ol style="list-style-type: none"> The column displaying the actual risk score is missing from the new format. A risk related to organisational culture should be considered. The risk opening date should be included in the updated format. Additional work is planned for the operational plan risk register. Work needs to be done on distinguishing between a risk and an issue, as the risk register is sometimes used as an issue log. There is a desire to start identifying and tracking emerging risks, providing early indications where possible. <p>Decision: The Committee noted the update provided, and accepted a limited level of assurance for the overall workforce risk (634) as it is out of appetite and a moderate level of</p>

	assurance for the other two risks. Action: Risk register to be updated to include the suggestions noted above.
8.	PAPERS FOR NOTING
8.1	Partnership Forum 3 Key Points
	The key points and minutes were noted from the previous meetings.
8.2	Local Negotiating Committee Minutes
	The key points and minutes were noted from the previous meetings.
9.	CLOSING BUSINESS
9.1	Board Report 3 Key Points
	The Committee agreed the three key points as follows: Workforce Plan, iMatter, and Organisational Change.
9.2	Feedback Session
	Attendees remarked that the quality of the discussion was very good, and the executives handled the questions well.

Approved by: Duncan Service
Date: 14/10/2024

Committee Chair

Next meeting: 23/10/2024