

Staff Governance Committee of Healthcare Improvement Scotland

23 October 2024, 10:00am, MS Teams

Present	In Attendance
Duncan Service, Committee Chair, Non-Executive Director	Ann Laing, Head of People & Workplace
Michelle Rogers, Committee Vice- Chair, Non-Executive Director	Belinda Henshaw-Brunton, Staff Governance Associate
Carole Wilkinson, HIS Chair	Eddie Warde, Partnership Representative
Evelyn McPhail, Non-Executive Director	Laura Liddle, Associate Director of Workforce
Judith Kilbee, Non-Executive Director	Lynda Nicholson, Head of Corporate Development
Keith Charters, Non-Executive Director	Mhairi Hastings, Associate Director of Nursing and Midwifery
Nicola Hanssen, Non-Executive Director	Robbie Pearson, Chief Executive
	Safia Qureshi, Director of Evidence & Digital
Committee Support	Sandra Flannigan, Head of Organisational Development & Learning (O,D&L)
Tara Duffy, Committee Secretary (Minutes)	Simon Watson, Medical Director/Director of Safety
	Sybil Canavan, Director of Workforce
	Tony McGowan, Associate Director of Community Engagement
Apologies	
Aimie Littleallan, Partnership Representative	
Lynsey Cleland, Director of Quality Assurance & Regulation	
Angela Moodie, Director of Finance Planning & Governance	
Ann Gow, Chief Executive/Director of Nursing and Systems Improvement	
Clare Morrison, Director of Engagement and Change	
Eddie Warde, Partnership Representative (also in attendance list)	

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.
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 7 August 2024
	The minutes of the meeting held on 01 May 2024 were accepted as an accurate record. The Committee noted that it had been recorded in the May meeting minutes that updates on the risk register would be provided. However, these updates were not included in the risk register provided for this meeting. The Committee was informed that this matter would be addressed during the Risk Management item. Decision: The Committee approved the minutes.
2.2	Review of Action Register for Staff Governance Committee on 7 August 2024
	The Committee reviewed the Action Point Register and noted that all actions were on track or were

	<p>being discussed later in the agenda.</p> <p>Regarding the Chief Pharmacist recruitment, the Committee was informed that an 18 month fixed term role had been advertised but was not pursued. A permanent position will instead be presented to the Vacancy Review Board (Group) to attract a stronger candidate pool.</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. The Committee noted that a Whistleblowing item had been added to the agenda and should be considered for future scheduling of updates to the Committee.</p> <p>Decision: The Committee approved the Business Planning Schedule.</p>
4.	CORPORATE PLANS
4.1	Interim Workforce Plan
	<p>The Director of Workforce provided the Committee with a paper and presentation updating them on the additional details captured in the revised interim workforce plan. The update included references to the organisational commitments recently confirmed to the Executive and Senior Leadership Teams, focusing on performance, partnership working, personal commitment, and personal governance.</p> <p>In response to questions from the Committee, the following information was provided:</p> <ul style="list-style-type: none"> a) Power BI and Power Automate are available to all staff. The first step with this is to upskill staff and foster a culture shift towards a digital first mindset, building confidence in using these tools. A digital learning plan is currently in development with the Organisational Development & Learning (OD&L) team, and the technology should be strategically applied to priority areas to ensure work is done effectively and with purpose. b) Regarding the HIS employee, flexibility across every role in the organisation will be critical, regardless of job roles or labels. Moving forward, we will transition from our current model to a new one that emphasises organisational adaptability and the ability of our staff to meet new circumstances. c) The performance section of the 4 P's is more than individual contributions, encompassing the organisation's commitment to excellence in impact, performance, and delivery. d) To effectively track workforce numbers and changes across directorates, a broader discussion is needed on how this information is presented in meetings moving forward, as well as on the format and style of these presentations. e) The focus on consolidation, embedding, and stability remains central to managing change. Following a significant period of change over recent years, future changes will be targeted within specific directorates and integrated into the "new normal," ensuring they are managed appropriately. f) Efforts will be made to standardise the structure of directorate sections. g) In relation to project work and review, discussions have taken place regarding progress, with a suggestion to implement quarterly reporting. h) Regarding reporting and priorities, there is the element of hard numbers, reflecting changes as they have happened and anticipating what is likely to happen. Directorate priorities can be reported on, potentially noting where things have been stopped or altered as part of the workforce changes to demonstrate progress. Additionally, there is a range of quantitative and qualitative data that can be provided. <p>Decision: The Committee scrutinised the draft Workforce Plan and took moderate assurance from the update provided.</p> <p>Action: Circulate the wording used for the 4 P's</p>
4.2	One Team Update
	The Chief Executive presented the Committee with a One Team update, highlighting the goal for

	<p>One Team to become business as usual and the need to decide on next steps for 2025/26. The update also highlighted the role of technology in modernising the organisation, as well as the medical model and work of national strategic clinical leads.</p> <p>In response to questions from the Committee, the following information was clarified:</p> <ul style="list-style-type: none"> a) We need to consider whether we are increasingly mobilising the organisation in new, more natural ways. If so, the enablers must adapt, and the One Team initiative has been a key enabler in this respect. It would be valuable to revisit what this shift means for One Team as we move into the next stage and plan for the future. b) It's crucial that the HIS employee role is not seen as a separate initiative. When parts of the organisation face challenge, the flexibility of the HIS employee should be viewed as a valuable resource that adds to the organisation's solutions. c) Line manager sessions for those receiving HIS employees were highly effective, with managers finding them useful and clarifying the role. d) In terms of the One Team redesign, we are engaged in a process of continuous improvement and have gained significant insights from organisational changes. Looking ahead, we'll need to redesign and remodel for the future, with the HIS employee playing a role in this. A more in depth discussion about what redesign means in the long term will be necessary. <p>Decision: The Committee accepted moderate assurance from the update provided. Action: Bring something back on what this means for One Team in the next stage and the future.</p>
4.3	<p>Project Work in HIS</p>
	<p>The Head of Organisational Development provided the Committee with a paper updating the Committee on work that was started a few months ago to try capture the experiences of existing project related staff.</p> <p>The Committee noted this is excellent work and commended the plan to roll it out to other staff groups. They highlighted the importance of recognising that "moving around is not everyone's preferred working style," especially in terms of the HIS employees.</p> <p>The Committee suggested exploring a staff agility passport as a potentially useful tool for the next steps, but also advised caution, as the ethos of working with HIS should prioritise flexibility.</p> <p>Decision: The Committee accepted a moderate level of assurance on the update.</p>
4.4	<p>National Boards Collaboration</p>
	<p>The Chief Executive informed the Committee that there hasn't been a meeting with the Collaborative for some time, though the National Boards' Chief Executives meet fortnightly. The Business Minister has requested information from all public bodies on corporate function overheads, and we should remain vigilant in case there is a revamping of the shared services model. There is a need to consider the infrastructure required in Scotland to ensure resilience. The Chief Executive will keep the Committee updated with any new information on this work.</p> <p>Decision: The Committee noted the update provided.</p>
4.5	<p>Update on Equality Outcomes</p>
	<p>The Committee was presented with a paper updating them on the development of a new set of equality outcomes for 2025 to 2029, which included specific details on anti-racism efforts.</p> <p>In response to questions from the Committee, the following points were clarified:</p> <ul style="list-style-type: none"> a) The Equality Outcomes draft presented is the complete set and applies to the entire organisation. Outcome 3 is particularly relevant to the Quality and Performance Committee, which will be given visibility on these outcomes. b) When setting Equality Outcomes, the intention is not to create additional workstreams, but rather to identify how we can target specific inequalities within our existing work. This

	<p>requires a HIS focused approach.</p> <ul style="list-style-type: none"> c) Disability and menopause are addressed together for practical purposes. Severe symptoms of menopause can be considered a disability and should be treated as such. A reasonable adjustments passport and guidance for staff have been established, and discussions have taken place on how to support staff experiencing medical symptoms. d) The outcomes can address both internal and external factors, depending on our approach to tackling inequalities. In setting these equality outcomes, the aim is to align closely with the organisation's broader objectives. e) The full Equality Mainstreaming Report will be presented at the next Staff Governance Committee meeting in February, with opportunities for reflection based on comments and feedback. <p>The Committee suggested that this could be brought to a Governance Committee Chairs meeting for further discussion.</p> <p>Decision: The Committee decided to accept moderate assurance on the progress of the outcomes to date.</p>
4.6	Whistleblowing Activity Update
	<p>The Director of Workforce presented an update on whistleblowing activity, informing the Committee that Independent National Whistleblowing Officer (INWO)'s had been requesting regular updates from the organisation beyond the annual report. Since there were no formal cases to report, a meeting was held to discuss meaningful reporting from HIS's perspective.</p> <p>The Director of Workforce highlighted the following points:</p> <ul style="list-style-type: none"> a) The INWO's office is interested in receiving ongoing updates from HIS in addition to the full annual report. b) Of the 10 Key Performance Indicators (KPIs), two key areas for potential reporting are: 1) changes or improvements to services and procedures resulting from whistleblowing concerns, and 2) a statement on staff perceptions, awareness, and training related to whistleblowing. c) Suggested content to confidently report on in terms of engaging with staff includes activities like the HIS Campus, health and wellbeing activity, the emerging pulse survey, listening sessions, cultural and exemplar employer activity, the annual "Speak Up" week, and organisational commitments. <p>The following suggestions were provided from the Committee:</p> <ul style="list-style-type: none"> d) Including data on grievances and capability issues could provide a more comprehensive picture. e) Including data collected from secondees to offer a fuller perspective and reassure the INWO. <p>The Director of Workforce informed the Committee that further detailed conversations will take place, after which a formal response will be sent to the INWO's office.</p> <p>Decision: The Committee noted the update provided.</p>
5.	WORKFORCE METRICS
5.1	Workforce Report
	<p>The Committee were provided with a paper detailing the Workforce Report which includes information on the workforce metrics until the end of September.</p> <p>The following additional information was shared in response to questions from the Committee:</p> <ul style="list-style-type: none"> a) New start figures will be included in the October report. b) Regarding the employee relations activity on page 86, the paragraph is missing a sentence confirming that long term absences are being closely monitored and that more work is needed to address short term absences.

	<p>c) For the Partnership Forum metric, audit work has been discussed as part of the partnership working measurement, which could potentially provide useful feedback for KPIs. This will be revisited with the Partnership Forum.</p> <p>d) The redeployment register numbers tend to fluctuate. Staff members listed on the register are performing work for the organisation based on operational needs.</p> <p>e) Information will be reviewed to ensure it is presented in a useful, contextual way without compromising confidentiality. In 2022-23, 56% of sickness absences were due to long term conditions, increasing to 68% in 2023-24. Given this trend, a deeper analysis of sickness absence is needed, including a comparison with other boards. Additionally, there may be further support we can provide around significant life events and milestones for staff within our flexible working arrangements.</p> <p>f) The Community Engagement directorate has completed an in depth analysis of sickness absence, which will be shared with the People and Workplace directorate for further learning.</p> <p>g) A policy framework exists to support employees with additional leave or assistance for specific events. As a disability confident employer, with another assessment due in the coming months, we are committed to offering individuals the opportunity to discuss or arrange reduced working hours where needed.</p> <p>Decision: The Committee noted the update and accepted moderate assurance. Actions: Bring an update on the Partnership Forum KPI to the February meeting; Include comparative data on the redeployment register in future reports; Conduct further analysis on sickness absence, with findings to be presented at the February meeting.</p>
5.2	Medical Revalidation
	<p>The Medical Director/Director of Safety presented a report to the Committee on Medical Revalidation, emphasising that while appraisals are key to quality assurance and clinical governance for medical practitioners, they are only part of the broader scope of effective supervision and governance for doctors at HIS. He noted that additional information on these broader aspects could be provided to the Committee if helpful.</p> <p>The Medical Director also confirmed his own successful annual appraisals since joining HIS, with a recommendation for revalidation this year, and has shared these outcomes with the Chief Executive.</p> <p>The Committee noted that the paper did not include an assessment of clinical and care governance and recommended its inclusion in next year’s report.</p> <p>In response to a question on the new medical workforce model, the Committee was informed that doctors receive revalidation through their own health boards, so this should have minimal impact on HIS workload. This information will be included in future reports. The Medical Director suggested that this paper might be combined with the Medical Workforce Model report, which could be presented to both this Committee and the Quality and Performance Committee. Further discussions on this proposal will take place.</p> <p>Decision: The Committee accepted significant assurance that HIS fulfilled the revalidation requirements of the General Medical Council (GMC) during the 2022-23 revalidation period.</p>
6.	VALUES, BEHAVIOURS, ENGAGEMENT & COMMUNICATION
6.1	Culture/Exemplar Employer
	<p>The Head of Organisational Development & Learning presented a paper to the Committee to raise awareness about cultural change within HIS.</p> <p>The following key points were raised by the Committee:</p> <p>a) It is crucial for the Staff Governance Committee to establish clear outcomes regarding the appendix and the associated actions.</p>

	<p>b) The Committee emphasised the importance of ensuring that other Board members are informed about this ongoing work.</p> <p>c) The paper proposed that an assessment of people practices is conducted, to offer a clearer view of the 'as-is' in HIS, and offer insights towards the articulation and implementation of our ideals / non-negotiables. Influencing consistency of practice is a key element of our One Team ethos, and Exemplar employer ambition. Staff Governance Committee was not fully supportive of external support for this process, citing sufficient skills within HIS to conduct this internally.</p> <p>d) The Committee noted how it aligns with the ongoing discussions around workforce planning and culture. While the cultural touchpoints diagram is helpful, it does not sufficiently highlight the attitudes we expect. We are moving from procedural standardisation toward a more outcomes-oriented, solution-focused approach that emphasises the bigger picture.</p> <p>e) The item should be prioritised earlier in the agenda, as it connects with other topics and will allow for a more focused discussion.</p> <p>f) Regarding the mandatory training for non executive members, it was questioned whether this truly fosters the ability to think laterally, connect the dots, and see the bigger picture.</p> <p>Decision: The Committee noted the development of Action 6 and proposed direction of travel, as outlined in the report.</p>
7.	STAFF GOVERNANCE STANDARDS
7.1	Staff Governance Action Plan
	<p>The Director of Workforce provided a verbal update, informing the Committee that a letter was received from the Scottish Government suspending formal reporting requirements for staff governance standard compliance. However, a follow up letter has been received requesting assurance and compliance information. A pro forma letter will be completed, summarising discussions from this Committee and ER cases, and this will be shared with the Committee.</p> <p>Decision: The Committee noted the update provided.</p>
8.	RISK MANAGEMENT
8.1	Risk Management/ Risk Register
	<p>The Director of Workforce informed the Committee that there were no changes to the Strategic Risk Register, with three risks remaining unchanged. However, some updates were made to the Operational Risk Register, combining several risks into a single directorate wide risk.</p> <p>The Committee suggested the following changes:</p> <ol style="list-style-type: none"> The Workforce risks should reflect today's discussion on staff openness to change and flexibility. Risk 634, addressing both internal and external skills shortages, is not fully captured in the current register. In the controls and mitigations, the reference to performance management is not clearly linked to the workforce plan. <p>Decision: The Committee accepted a limited level of assurance for the overall workforce risk (634) as it is out of appetite, and a moderate level of assurance for the other two risks. Action: Risk register to be updated to include the suggestions noted above.</p>
8.	PAPERS FOR NOTING
8.1	Partnership Forum 3 Key Points
	The key points and minutes were noted from the previous meetings.
9.	CLOSING BUSINESS
9.1	Board Report 3 Key Points
	<p>The Committee agreed on the following three key points:</p> <ol style="list-style-type: none"> Culture/Exemplar Employer, including 4Ps Whistleblowing Activity Update Workforce Report, including sickness absence Project Work in HIS

Approved by: Duncan Service, Committee Chair

Date: 13 March 2025

