



NOT PROTECTIVELY MARKED

Public Board Meeting		27 January 2021 Item 13
THIS PAPER IS FOR NOTING		
STAFF GOVERNANCE COMMITTEE MINUTES OF 16 SEPTEMBER 2020 AND VERBAL REPORT OF 9 DECEMBER 2020		
Lead Director Author	Madeline Smith, Chair of Staff Governance Committee Lindsey Ralph, Board Secretary	
Action required	The Board is asked to note the minutes and verbal report.	
Key points	<p>In compliance with the Service's Standing Orders, the approved Committee minutes are submitted to the Board for information and consideration of any recommendations that have been made by the Committee.</p> <p>The minutes of the Staff Governance Committee held on 16 September 2020 were approved by the Committee on 9 December 2020. A verbal update of the meeting held on 9 December 2020 will be provided by the Chair of the Committee.</p>	
Timing	Minutes are presented following approval by the Committee. The Board will receive a verbal update of the most recent Committee meeting from the Chair of the Committee.	
Link to Corporate Objectives	This paper relates to our goal of ensuring staff have a voice and people are at the heart of everything we do.	
Contribution to the 2020 vision for Health and Social Care	Everyone Matters is the national strategic workforce contribution to the 2020 vision. All work of the Staff Governance Committee and the Staff Governance Action Plan is aligned to this.	
Benefits to Patients	The Staff Governance Committee has responsibility, on behalf of the Board, to ensure that there is effective monitoring of the machinery for effective staff governance within the Service. Effective staff governance assists in creating a workplace where staff feel valued, and are appropriately located, skilled and developed to deliver safe, effective, patient centred and quality care.	
Equality and Diversity	Workforce equality monitoring information, equality outcomes and associated reports, are monitored through the Staff Governance Committee. Equality impact assessments are carried out for individual workstreams, including policy development and review. Relevant equality impact information is reported to the Staff Governance Committee.	

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MINUTES OF STAFF GOVERNANCE COMMITTEE

10:00 ON WEDNESDAY 16 SEPTEMBER 2020
VIA MICROSOFT TEAMS

Present: Madeline Smith, Non-Executive Director (Chair)
Stuart Currie, Non-Executive Director
John Riggins, Employee Director
Tom Steele, Board Chair, Non-Executive Director
Martin Togneri, Non-Executive Director

In Attendance: John Baker, General Manager, ICT (*Item 8.4 only*)
Paul Bowtle, Head of Leadership and Learning
Lee Davies, Head of Strategy Implementation and Quality Improvement (*Item 7.2 only*)
Frances Dodd, Director of Care Quality and Professional Development
Alison Ferahi, Head of Organisational Development
Steven Gilroy, Staff Side Representative, UNISON (ex officio member)
Pippa Hamilton, PA to Director of HR&OD (Minutes)
Pauline Howie, Chief Executive
Liz Humphreys, Non-Executive Director
Simon Larson, Communications Manager (*Item 11.3 Only*)
Lyndsay Lauder, Director of Workforce
Maria McFeat, Deputy Director of Finance (*from 12:00*)
Toby Mohammed, Head of Education and Professional Development
Sarah Stevenson, Risk Manager
Ann Tobin, HR Manager - Equalities
Kevin Reith, Deputy Director of Workforce
Milne Weir, Regional Director, North
Tony Wigram, Head of Health and Safety

Apologies: Gary Coll, Staff Side Representative, GMB, (ex officio member)
Jamie McNamee, Staff Side Representative, Unite the Union (ex officio member)

ITEM 1 WELCOME AND INTRODUCTIONS

Madeline Smith welcomed everyone to the meeting.

Madeline advised Committee that Kevin Reith would be leaving the Service in December to join NHS Fife and passed on her thanks to Kevin for all of his support to the Staff Governance Committee and assistance in moving things forward in times of real change.

Committee also welcomed back Sarah Stevenson to her first SGC meeting since returning from Maternity Leave.

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Committee were reminded of the virtual meeting etiquette and were asked to ensure that their microphones were placed on mute when they were not speaking and to use the “raise hand” function during the meeting, should they wish to speak.

ITEM 2 DECLARATIONS OF INTEREST

Standing declarations of interest were noted: Martin Togneri, in his capacity as a Board member of NHS24. Madeline Smith, in her capacity as Board member of NHS24.

ITEM 3 MINUTES OF MEETING HELD ON 11 JUNE 2020

The minutes of the meeting held on 11 June 2020 were discussed and it was noted that Paul Bowtle’s attendance was omitted from the minutes. It was agreed that the minute would be amended to include Paul’s attendance.

Committee approved the minute as an accurate record of the meeting subject to the above change being made.

Action:

1. **Secretariat** amend minutes of June Committee to include attendance of Paul Bowtle.

ITEM 4 MATTERS ARISING NOT ON THE AGENDA

None to note.

ITEM 5 SPECIAL TOPIC – ATTENDANCE MANAGEMENT

Kevin Reith provided a comprehensive presentation on attendance management, which summarised:

- Recent absence trends observed over the last period.
- The approach being taken in relation to attendance management
- Root causes of attendance problems

Committee noted that the overall sickness absence rate was 6.1% which was lower than the equivalent period in the previous year. Kevin provided members with absence data in the form of vector charts, and reminded Committee of the variations in data between national statistics and internal information contained within the presented vector of measures.

In relation to the top 5 absence reasons, Kevin described that an increase could be seen in anxiety/stress/depression since May 2020. It was noted that in relation to COVID/Non-COVID absence, absence relating to COVID peaked at a level of 13.2% in week commencing 23rd March 2020, however since then there had been a reducing trend, with the level falling to 1.3% in week commencing 7th September. Kevin advised that the significant drop in COVID related absence from the beginning of August, related to the guidance on shielding being paused, allowing most staff in this category to return to work.

Kevin outlined the Service’s absence position in terms of NHS Scotland and in broader UK context. Committee noted the undernotes statistics:

- NHS Scotland – 4.6% in July 2020, SAS 6.2%
- NHS Scotland – 5.2% in March 2020, SAS 7.6%
- NHS Scotland rolling 12 months – 5.2% (5.4% for previous year), SAS 7.6%
- NHS England Ambulance Service highest sickness 7.3% in April 2020 (6.2% average).

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Kevin advised Committee that work is ongoing through the NHS Ambulance Service Human Resource Directors Group to establish a common people measures dataset to ensure the availability of routinely refreshed benchmarking data.

Committee noted that in relation to the consideration of the Service's approach to attendance management targets were set based on the Pay Deal settlement in 2018, whereby from 2019/20 Boards were asked to achieve a 0.5% annual reduction to achieve a 4% target across the sector. Kevin advised that given the unique nature of the Service an aim of 5% was agreed for the Service. Committee noted that the Service's position in April 2019 was 7.6% absence, which would mean an aim of 6.1-6.3% to achieve the annual reduction target.

Committee were reminded that as a result of COVID and in line with national guidance it was agreed in partnership to pause attendance management activity. Kevin added that with the COVID impact settling down it had been agreed to resume normal management activity in July 2020.

It was noted that as part of the new Once for Scotland Attendance Management Framework, the Workforce Team have developed manager guidance to support the comprehensive framework and have been running workshop sessions, in partnership with staff side colleagues during August and September to brief managers. Kevin added that to date 140 managers have attended the workshops, with the aim for all areas to be covered within the coming weeks.

Kevin advised that the Attendance Management Framework was extremely comprehensive and all Boards were continuing to adjust to the new provisions. Committee noted that the key aspects of the Framework are:

- Focus of Once for Scotland is Person Centred – balance to be struck with fair and consistent treatment
- Building in lessons learned from COVID period regarding engagement with staff
- Early handling is key – reporting and tracking
- Wellbeing support options fully utilised
- Appropriate escalation where required

Members noted that in terms of an attendance management improvement plan the undernoted areas are being progressed:

- Increased focus at first line management level – Team Leader Protected Time increases
- National Leads Group to focus and consider lessons learned
- System improvements to support monitoring and tracking
 - GRS changes to align to Once for Scotland
 - Workforce Metrics activity liaison with National Boards
 - Case Management functionality

Madeline Smith thanked Kevin for the presentation and noted that she was pleased to note the work in relation to benchmarking data.

Members commented that in relation to winter planning, whether it was thought that given the current COVID situation there would be an increase on the up take of the flu vaccine by staff compared to last year.

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Tony Wigram advised that it is anticipated that there will be increased uptake for the flu vaccine this year and as a result the Service have increased the number of vaccines requested by 30%. Tony added that the Scottish Government target was that 60% of staff are vaccinated.

Liz Humphreys commented that as outlined there are different programmes of work on going in relation to absence management and the expected outcome would be to see a reduction in absence. Liz suggested that it may be useful for Committee to have sight of a high level overview outlining how the programmes of work interrelate.

Lyndsay Lauder added that she was supportive of Liz's suggestion and agreed that she would take forward a discussion with Frances Dodd with a view to presenting a culture change map to Committee outlining each of the programmes and how these interrelate.

Tom Steele asked if the Service was aware of any intelligence from countries such as Australia and New Zealand following their winter period. Pauline Howie advised that Australia and New Zealand had reported much lower cases of flu and a higher uptake of flu vaccinations.

Committee noted the presentation and information provided.

Action:

- 2. Director of Workforce and Director of Care Quality and Professional Development** to discuss and prepare a culture change map to allow for an overview of the interrelation of programmes of work and present to the December Committee.

ITEM 6 STAFF GOVERNANCE ACTION PLAN (SGAP)

Item 6.1 Staff Governance Action Plan 2020/21 - Progress Report

Madeline advised that Committee would note the change in the format for the agenda adding that this had now been framed around the Staff Governance Standards and hoped that this would enable a better flow of items. Madeline advised that she would be grateful for any views from Committee members on the reformatted agenda.

Lyndsay Lauder presented Committee with a refreshed Staff Governance Action Plan. Committee were reminded that the Plan had previously been presented at the June Committee, where members approved the Plan subject to minor amendments and assurance that the National Partnership Forum, Executive Team and Regional Management Teams had been consulted on the Plan.

Lyndsay advised that since the June meeting, work had continued to ensure the format of the Plan allows for clear presentation. It was noted that the plan now contained detailed progress updates. Lyndsay advised that all of the initiatives contained within the Plan are supporting attendance management aims and the health and wellbeing of the workforce.

Lyndsay highlighted the progress outlined within the Plan to Committee and noted that:

- 21 of the total of 24 initiatives are at green status - expected to be delivered within target timescales.
- Two initiatives are at amber status – risk to delivery against original timescales, due to slippage caused by COVID-19
- One initiative, SGAP20-21/19 which relates to OD support arrangements to support progression of the National Boards Delivery Plan, had not commenced pending further direction from National Boards HR Directors Group.

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Madeline noted that the Organisation Development Plan covers 18 months and queried as to whether there may be some high level areas from the OD Plan that need to be in the SGAP to monitor delivery. Lyndsay Lauder advised that she would ensure that a read across of the OD Plan and SGAP was carried out to ensure that the SGAP as the overarching plan, contains all the relevant initiatives.

Liz Humphreys commented that she found the format of the SGAP a helpful way of bringing everything together, adding that it is important to ensure that it is used as a tool. Liz suggested that there the Plan should also include an initiative in relation to Whistleblowing. Lyndsay Lauder suggested that a state of readiness checklist could be included within the Plan in relation to Whistleblowing to capture the work currently underway.

Action:

3. **Director of Workforce** to ensure that a read across of the OD Plan and SGAP is carried out to ensure the SGAP as the overarching Plan contains all relevant initiatives.
4. **Director of Workforce** to include a state of readiness checklist within the SGAP in relation to Whistleblowing activity.

Item 6.2 Workforce Vector of Measures

Committee were presented with the most recent Vector of Measures. Kevin Reith advised that the Vectors were last presented to Committee in December 2019 and had not been presented to Committee since then due to COVID-19.

Kevin highlighted the undernoted areas:

- Following a period of reduction in non-COVID sickness absence, levels have begun to rise again, however there was a notable reduction in COVID absence levels.
- Implementation of the new Once for Scotland Attendance Policy had recommenced, which together with employee wellbeing support would aim to sustain lower rates of absence.
- A sustained period of turnover rates reduction has continued.
- Employee relations activity remains stable and continues to be monitored internally with exception reporting to the National Partnership Forum.
- Equality and Diversity recording remains static.
- A revised Appraisal action plan was approved in August with the aim to increase Turas Appraisal completion rates across the Service.
- Learning in Practice completion levels have fallen due to COVID-19 LiP delivery suspension. Options for the utilisation of online delivery was being assessed.
- Team Leader protected management time had been stable since 2018 at around 20%. Development of the Operational Management Model will support progress to the Service's overall 40% aim.
- The 2020 iMatter survey had been postponed due to COVID-19, however an interim September Pulse Survey will be rolled out to provide information on staff engagement levels.

Committee noted that collaborative work is underway with the Service's Management Information Team to develop a Workforce Data Measurement Plan. Kevin added that the aim of this work was refinement of internal reporting arrangements for all people performance data which would be developed in the context of National Boards collaboration.

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Liz Humphreys enquired in relation to the Equality and Diversity chart contained within Page 5 of the presented paper, and asked for clarification on what information this chart is tracking. Kevin advised that the chart represents the capture of employee's protected characteristics. Kevin advised that longer term a self-service function within eESS should improve disclosure rates, however testing of this process was currently paused to allow future development options to be considered. It was noted that in the meantime work is ongoing by Ann Tobin to communicate with staff requesting a refresh of their data.

Madeline Smith noted that Team Leader protected time and LiP seem to be a challenge, and noted that within the paper LiP completion target levels had been noted as a risk. Committee noted concern in relation to LiP completion. Madeline Smith added that there was a need for clear mitigations of this risk to be outlined.

Frances Dodd added that it was unlikely that LiP completion would be achieved this year, however the Education Department were continuing to look at new ways of working to get cohorts together.

Liz Humphreys asked whether the entry on the Risk Register in relation to LiP requires the description to be refreshed in line with the discussion above. It was agreed that Frances Dodd and Toby Mohammed would review the LiP risk with Sarah Stevenson.

Action:

- 5. Director of Care Quality and Professional Development/Head of Education and Professional Development** to review to the LiP risk contained within the Workforce Risk Register with **Risk Manager** to ensure that all mitigations in relation to this risk are clearly defined.

Committee noted the information provided.

Item 6.3 Workforce Risk Register

Madeline advise that following the June Committee a full review of the Workforce Risk Register had been completed to ensure the Register only reflects organisation wide High and Very High Workforce risks. Madeline added that she was pleased to see the amount of work that had taken place to refresh the Register.

Sarah Stevenson advised that following the review of the Risk Register, 3 risk have been reworded and risk level of risk 3737 had increased. Sarah assured Committee that the wording of risk 3737, LiP would be reviewed with Frances Dodd and Toby Mohammed as agreed as part of the discussion above.

Madeline Smith suggested that description of risk 3639 needed to be amended to make it clear which programme of work this risk relates to. Kevin Reith advised that this risk refers to the Workforce Development Programme and was an escalated risk from that programme.

Liz Humphreys noted that there did not appear to be a risk contained within the Register in relation to Demand and Capacity, however a risk in relation to this is highlighted within the Committees papers, noting that there requires to be read across. It was agreed that Sarah Stevenson would look into the demand and capacity risk highlighted by Liz.

Committee thanked Sarah for the review work carried out and noted the assurance taken from the presented paper.

Action:

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6. **Risk Manager** to review Demand and Capacity risk with a view to including this within the Workforce Risk Register should this be required.

Item 6.4 Internal Audit Actions

Committee noted the paper presented. Paul Bowtle advised that an internal audit review was undertaken and published in April 2020 by KMPG in relation to Key Financial Controls – eESS. Committee noted that the review identified three “High” and one “Moderate” graded internal audit actions.

Committee noted the status of each of the internal audit actions which were detailed within the presented paper.

ITEM 7 PROVIDED WITH A CONTINUOUSLY IMPROVING AND SAFE WORKING ENVIRONMENT, PROMOTING THE HEALTH AND WELLBEING OF STAFF, PATIENT AND THE WIDER COMMUNITY

Item 7.1 OD Plan 2020/21

Alison Ferahi presented Committee with the OD Plan for October 2020 – March 2022. Committee noted that as a result of COVID-19 much of the activity within the OD Plan was postponed with resource being redirected to support staff health and wellbeing throughout the pandemic.

Alison asked that Committee endorse the direction of travel of the Plan, and note that further discussion is required by the Executive Team as to how the Plan will be resourced, with a further updated being provided to Committee following that Executive Team discussion.

It was noted that the Plan focuses on three aims, which are seen as being the critical elements to enable the vision of the Plan to be realised:

- Confident, capable managers at all levels who effectively support & develop our people to thrive in a challenging & changing environment and proactively support their health and wellbeing.
- A compassionate culture with a high level of trust, positive working relationships and where everyone is treated with dignity and respect.
- A reputation for being a great place to work with high job satisfaction and staff who feel valued.

Committee noted that it was pleased to see the Plan spanning an 18-month timeframe.

Alison advised that six monthly milestones had been included throughout the Plan to measure progress and track delivery of the proposed actions.

Lyndsay Lauder added that given the uncertainty of COVID-19, she would suggest Committee note a caveat in relation some of the ambitions and aims contained within the Plan. Committee agreed with the caveat suggested by Lyndsay and noted that given the uncertainty of COVID-19 this would continue to be monitored as a risk.

Madeline Smith noted that she welcomed the six-monthly milestones contained within the Plan and suggested that this would also be beneficial within the Staff Governance Action Plan.

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Committee endorsed the Plan and noted its support for the request being made to the Executive Team for resources to deliver the Plan and looked forward to an update on this discussion at the December Committee meeting.

Action:

7. **Director of Workforce** to include six-monthly milestones within the SGAP to measure progress and track delivery of actions.
8. **Head of OD** to provide an update to December Committee on discussion with Executive Team in relation to resources required to deliver the OD Plan.

Item 7.2 Draft Workforce Health and Wellbeing Strategy

Committee were presented with the draft Workforce Health and Wellbeing Strategy which had been developed following UK and International research, supplemented by input and feedback from all staff groups within the Service.

Lee Davies advised that a huge amount of research had been carried out to underpin the development of the Strategy, which had been but influenced by Ambulance Victoria in Australia. Lee added that Ambulance Victoria have the gold standard when it comes to workforce health and wellbeing.

Committee were asked to endorse the direction of travel for the Strategy ahead of further engagement work which would take place throughout October and November, ahead of a final draft Strategy being presented to the December Committee.

Committee noted that the aims of the Strategy were clearly defined, however suggested that the document should include how the aims are going to be achieved and measurement of success outlined.

Members provided their support for the direction of travel and looked forward to more detail on the actions being provided to the December Committee.

Action:

9. **Director of Workforce** to ensure that detail of how aims of Strategy will be achieved together with how measurement of success will be outlined is included within the final version of the Strategy.
10. **Director of Workforce** to present final draft Workforce Health and Wellbeing Strategy to December Committee.

Item 7.3 Alternative/Adjusted Duties - Verbal Update

Kevin Reith advised Committee that work was ongoing in relation to the deployment of staff to alternative/adjusted duties for staff on long term sickness absence and how these staff are supported in a return to work when they are unable to carry out their substantive role.

Kevin added that work was ongoing to establish the lessons learned from COVID-19, together with the success of the work carried out a Regional level with an aim to bring this together at a central point to spread these successes throughout the Service.

Committee noted that a detailed update on this work would be provided to the December Committee.

Members noted the update and welcomed a more detailed report being provided to the December Committee.

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Action:

11. Director of Workforce to provide update on Alternative/Adjusted duties work to December Committee.

Item 7.4 Health and Safety Update

Tony Wigram provided Committee with an update paper in relation to Health and Safety. Tony highlighted to members that;

- The fatigue policy was being significantly reviewed by the Health and Safety Team following discussions with the Health and Safety Executive.
- The fatigue management process and action plan was being managed through the Working Practices Steering Group.
- Health and Safety site auditing has recommenced.

Madeline Smith asked that Committee be provided with an update on the fatigue management and action plan.

Committee noted the update.

Action:

12. Head of Health and Safety to provide an update on work in relation to fatigue management and action plan, within the Health and Safety Update presented to the December Committee.

Item 7.5 Lifelines Scotland - Project Initiation Document

Alison Ferahi advised members that Lifelines Scotland was a national tri-service project which aims to support the emotional and psychological wellbeing of staff both past and present, as well as Service volunteers within the Ambulance Service, Fire and Police services in Scotland.

Committee were presented with the Project Initiation Document for Lifelines Scotland.

Committee noted the information contained within the initiation document provided and noted their support for the direction of travel.

Item 7.6 Demand and Capacity Programme Update

Lewis Campbell provided Committee with an update on the Demand and Capacity programme. Members noted following a pause of the programme as a result of COVID-19, the Service now plans to restart the Programme. Lewis advised that the Core Principles for the Programme have now been agreed in partnership.

Committee discussed Core Principle 9, noting from the paper that this would be amended to take account a position raised by staff side colleagues in relation to 02:00 shift finish times. Lewis explained that the Principle will outline that there will be *'No rostered shift should start before 06:00. No new 02:00 finishes will be introduced unless they are already in place. Additional finish times after 00:00 would only be introduced on a voluntary basis'*. Lewis added that staff side had raised the view that 02:00 finish times were unhealthy and that as a result work had been carried out to look into moving these finishes back to midnight, which resulted in no significant difference on performance being seen by this move, and as a result the amendment being subsequently agreed.

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Committee thanked Lewis for the update provided and assurances provided in the additional explanation provided in relation to Core Principle 9.

ITEM 8 APPROPRIATELY TRAINED AND DEVELOPED

Item 8.1 Remuneration Committee Mid-Year Report

Committee were advised that as part of the Service's governance arrangements, a mid-year report from the Remuneration Committee to the Staff Governance Committee was routinely provided annually in September. Due to COVID, Scottish Government's annual performance review process was suspended. As a result, the main Remuneration Committee business meeting held annually in June to review the performance arrangements of the Executive and Senior Management cohort and any other relevant matters was deferred pending revised guidance from Scottish Government on the revised process for 2020/21.

Committee noted that the Service were advised by Scottish Government on 9 September that the revised governance process and pay settlement for ESMs had not yet been announced. It is therefore proposed that an update be provided to the Staff Governance Committee at its December meeting.

Members noted the information and that an update would be provided to the December Committee meeting.

Action:

- 13. Board Secretary/Chair of Remuneration Committee** to provide an update on revised governance process and pay settlement for Executive and Senior Managers to the December Committee.

Item 8.2 Workforce Education, Training Plan and Recruitment Update

Committee noted the update paper provided on Workforce Education, Training and Recruitment where information was provided on the undernoted areas;

- Undergraduate Paramedic Education – The New Model
- Diploma in Higher Education Paramedic Practice
- Ambulance Technician Programme
- Ambulance Care Assistants
- Driving Instructor Training and National Principal Assessor
- Emergency Driver Training
- Learning in Practice (LiP)
- Supporting Newly Qualified Graduate Paramedics

Committee noted the update provided.

Item 8.3 Appraisal Activity Update

Paul Bowtle provided an update to Committee with the proposed plan for the resumption of Appraisal activity across the Service. Following the suspension of appraisal activity due to COVID-19, Committee was asked to discuss the action plan which outlined the proposed timeline for appraisal activity across the Service for the remainder of the 2020/21 performance year.

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Committee noted that their understanding of the reasons behind the pause on activity, however were keen to see this reactivated and looked forward to a progress update at the December Committee meeting.

Action:

- 14. Head of Leadership and Learning** to provide December Committee with a progress update on appraisal activity.

Item 8.4 Digital Participant Charter

John Baker advised that within guidance issued by the Scottish Government regarding the digital section of the Annual Operating Plan, it noted that all organisations involved in the delivery of care should sign up to the Digital Participation Charter.

Committee noted that following receipt of this guidance a recommendation for the Service to sign up to the Charter was presented to the Digital and ICT Steering Group, which was subsequently approved. John advised members that to ensure good governance the Digital and ICT Steering Group requested that Staff Governance Committee members are made of aware of the Charter and the decision taken for the Service to sign up to this.

Committee members endorse the Service's sign up to the Charter.

ITEM 9 TREATED FAIRLY AND CONSISTENTLY, WITH DIGNITY AND RESPECT, IN AN ENVIRONMENT WHERE DIVERSITY IS VALUED

Item 9.1 Black, Asian and Minority Ethnic (BAME) & Scottish Ambulance Service/Equality and Diversity Plans

Ann Tobin presented Committee with a paper which provided an update on the work being progressed in relation to Black, Asian and Minority Ethnic staff and communities. Committee noted the paper which outlined the work being undertaken to advance the equality of opportunity across the Service and raise awareness and understanding of BAME staff and communities.

Ann Tobin advised Committee that the actions from this work will flow into the Workforce Equality Monitoring Report and Equality Outcomes.

Committee noted the information provided.

ITEM 10 INVOLVED IN DECISIONS

Item 10.1 Staff Experience Update

Committee noted an update paper on staff experience. The key areas were highlighted within the paper;

- Initial data regarding what wellbeing information and support staff have been accessing during the pandemic.
- Findings highlight that staff tend to go to each other for support or their line manager, but a significant number do not access any support or help at all.
- A national dashboard of wellbeing data is in development, however is at an early stage.
- An Everyone Matters pulse survey will be conducted across Health & Social Care between 01 and 23 September 2020 with reports available in October 2020.

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- The Services actions in relation to staff wellbeing and support have been mapped against an employer's duty of care set out by the Scottish Government in April 2020.

Item 10.2 Learning from Events

Frances Dodd presented Committee with the Terms of Reference for the newly formed Learning from Events Group. Committee noted that the Group was set up to support an organisation culture of growth, development and support for staff and systems to develop care, treatment and experience for patients and staff. Members noted that Learning from Events Group had partnership representation, along with regional, national and frontline clinical representation, which will ensure the support of system wide learning.

Tom Steele commented on the innovative approach of the Group, noting that this was something that should be carried out throughout the whole system. Tom commended the resilience of Service staff, noting that staff make important decisions every day, and there will be inevitably be times when things go wrong, adding that the work of the Learning from Events Group should be seen as a positive to enable issues to be addressed.

Committee noted its support for the work of the Learning from Events Group and that it would welcome an update report following the next couple of Group meetings.

Action:

- 15. Director of Care Quality and Professional Development** to provide an update on the work of the Learning from Events Group to Committee following a further two meetings of the Group.

ITEM 11 WELL INFORMED

Item 11.1 Integrated Support Services Update

Maria McFeat provided a progress report on the work in relation to integrated support services. It was noted that the South East Payroll Consortium business case had been formally approved by the Service, however implementation of the business case has been paused until January 2021. Maria provided Committee with assurance that work continues with the consortium group to finalise a number of areas of work in preparation for the restart of the business case implementation.

Lyndsay Lauder advised Committee that in relation to the East Region Recruitment Service, the East Region Recruitment Leads Group are on track with the design process, which will inform the high level financial appraisal to conclude the model options appraisal process.

Liz Humphreys commented that it was useful for Committee to see any risks associated with this work as an appendix to the presented paper, however queried whether the risk outlined required to be added to the overarching Workforce Risk Register. Kevin Reith advised that this would be looked at during the risk review previously discussed at Item 6.3 on the agenda.

Action:

- 16. Director of Workforce and Risk Manager** to review risk associated with Integrated Support Services with a view to including this within the Workforce Risk Register should this be required.

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Item 11.2 Partnership Update

John Riggins provided Committee with an update on recent partnership activity. It was noted that the National Partnership Forum last met on 06 August 2020 and the agenda from that meeting was appended to the paper presented for Committee's information. The Committee noted the approved minutes from the meetings held on 06 February and 04 June 2020.

Item 11.3 Communication to Staff Via Cab Devices - Verbal Update

Simon Larson joined the meeting to provide Committee with a progress update on communication with staff via cab based terminals. Committed noted that currently the Communications Team are being selective about how much information is being uploaded to the terminal, to ensure that staff do not feel overwhelmed with information.

Committee noted that information has been requested from the East Region, in relation to any feedback the Team Leaders had received following information being provided to staff on the cab screens.

Committee noted the update and its interest in the feedback from the East Region when this is available.

ITEM 12 ACTION TRACKER

Committee noted the following items as completed, and approved their removal from the SGC action tracker.

2019-12-09a(i)	Turas Appraisal Report
2019-12-10a(ii)	Draft OD Plan
2019-12-10a(ii)	OD Plan Alignment
2019-12-11c(i)	Recruitment Projection
2019-12-11c(ii)	Mental Health Lost Days
2019-12-11s(i)	Alternative/Adjusted Duties
2020-04-08(a)	Workforce Risk Register – Risk 3581 Face Fit Testing
2020-06-08	Workforce Health and Wellbeing Strategy – Draft
2020-06-08	Employer's duty of care mapping work
2020-06-08	Level of staff access to Wellbeing Services
2020-06-09	Action on Paramedic numbers within SGAP
2020-06-09	Paramedic Training numbers
2020-06-09	Refinement of draft SGAP
2020-06-09	Appraisal and Personal Development Plan update
2020-06-10	Update on comms to staff via cab based devices
2020-06-11(a)	Workforce Risk Register Review

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Date: 2020-09-16	Version 1.0	Review Date: N/A

Action:

17. Pippa Hamilton to update the action tracker.

ITEM 13 FOR INFORMATION - COMMITTEE WORKPLAN

Committee noted the Committee Workplan which was included within the papers for information.

ITEM 14 ANY OTHER BUSINESS

None to note.

Item 14.1 Staff Governance Committee Meeting Dates 2021

Committee noted the undernoted Staff Governance Committee dates for 2021.

It was further noted that the calendar of dates for all Committee meeting for 2021 would be presented to the Board in November for approval.

- **18th March 2021**
- **14th June 2021**
- **1st September 2021**
- **13th December 2021**

Date of next Meeting – 09 December 2020.