



NOT PROTECTIVELY MARKED

Public Board Meeting

29 September 2021

Item 16

THIS PAPER IS FOR NOTING

**STAFF GOVERNANCE COMMITTEE MINUTES OF 14 JUNE 2021 AND
VERBAL REPORT OF 1 SEPTEMBER 2021**

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| 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 14 June 2021 were approved by the Committee on 1 September 2021. A verbal update of the meeting held on 1 September 2021 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 the NHS Staff Governance Standards are implemented in the Service and that an effective structure is in place to support and monitor implementation within the Service, including health, safety & wellbeing, as well as remuneration. 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 MONDAY 14 JUNE 2021
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: Karen Brogan, Associate Director of Strategy, Planning and Programmes (*Item 05*)
Gary Coll, Staff Side Representative, GMB, (ex officio member)
Frances Dodd, Director of Care Quality and Professional Development
Alison Ferahi, Head of Organisational Development and Wellbeing
Graeme Ferguson, Head of Human Resources and Employee Relations
Garry Fraser, Regional Director, West
Sarah Freeman, Head of Infection Prevention and Control (*Item 8.1*)
Pippa Hamilton, PA to Director (Minutes)
Pauline Howie, Chief Executive
Liz Humphreys, Non-Executive Director and Whistleblowing Champion
Lyndsay Lauder, Director of Workforce
Maria McFeat, Deputy Director of Finance
Toby Mohammed, Head of Education and Professional Development
Daren Nelson, OD Lead (*Observing*)
David Robertson, Regional Director, East
Sarah Stevenson, Risk Manager
Matthew Sime, OD Lead (*Observing*)
Milne Weir, Regional Director, North
Tony Wigram, Head of Health and Safety

Apologies: Ann Tobin, HR Manager - Equalities
Steven Gilroy, Staff Side Representative, UNISON (ex officio member)
Paul Bowtle, Head of Workforce Systems and Analytics
Jamie McNamee, Staff Side Representative, Unite the Union (ex officio member)

ITEM 1 WELCOME AND INTRODUCTIONS

Madeline Smith welcomed everyone to the meeting and extended the welcome to Daren Nelson and Matthew Sime, the newly appointed OD Leads for the Service. Committee noted that Daren and Matthew were observing the Committee meeting as part of their induction.

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.

| | | |
|--------------------------------------|--------------|------------------------|
| Doc: 2021-06-14 SGC Approved Minutes | Page 1 of 13 | Author: PA to Director |
| Date: 2021-06-14 | Version 1.00 | Review Date: N/A |

ITEM 2 DECLARATIONS OF INTEREST

Standing declarations of interest were noted:

- Martin Togneri, in his capacity as a Non-Executive Director, NHS24.
- Madeline Smith, in her capacity as Non-Executive Director and Vice Chair, NHS 24 and Non-Executive Director, Digital Health and Care Innovation Centre.
- Stuart Currie in his capacity as Non-Executive Director, The State Hospital.
- Liz Humphreys in her capacity as Non-Executive Director, Public Health Scotland.

ITEM 3 MINUTES OF MEETING HELD ON 18 MARCH 2021

The minutes of the meeting held on 18 March 2021 were reviewed for accuracy. Liz Humphreys advised that within the minute at Page 3 – Workforce Vector of Information, she had asked that annual leave data and tracking information be included within future Committee reporting. Liz highlighted that this action was not contained within the Committee Action Tracker. It was agreed that the minutes and action tracker would be amended to ensure that the action was captured.

Lyndsay Lauder highlighted to Committee that the data set referred to by Liz did not currently form part of the standard data produced and updated Committee that discussions were ongoing with Business Intelligence colleagues in relation to the data set which is presented to the Board and Staff Governance Committee.

Subject to the above amendment being made, members approved the minute as an accurate record of the meeting.

Action:

1. **Secretariat** to amend March minutes and Action Tracker to include the request that annual leave data and tracking information be included within future Workforce Vector of Measure reporting to Committee.

ITEM 4 MATTERS ARISING NOT ON THE AGENDA

None to note.

ITEM 5 SPECIAL TOPIC – DEMAND AND CAPACITY PROGRAMME

Karen Brogan provided Committee with a comprehensive presentation which detailed the background and ongoing work of the Demand and Capacity Programme.

Karen highlighted and provided members with details in relation to the undernoted areas:

- Programme background
- Overview of Business Case
- Benefits of Investment
- Risks if investment not received
- Highlights of completed work for 2020/21
- Workplan for 2021/22

Committee noted that :

- The Programme Steering Group continue to meet fortnightly to track progress against plans.
- A dedicated recruitment team had been established to attract and recruit at pace.

| | | |
|--------------------------------------|--------------|------------------------|
| Doc: 2021-06-14 SGC Approved Minutes | Page 2 of 13 | Author: PA to Director |
| Date: 2021-06-14 | Version 1.00 | Review Date: N/A |

- Training and education services were supporting internal teams.
- A Demand and Capacity Programme Board had been set up to provide additional monitoring, governance and assurance.

Karen added that current pressures and changes in the system included:

- An Increase in patients presenting with symptoms that require a more immediate response.
- An Increase in service time associated with
 - Infection control measures
 - Treatment time
 - Hospital turnaround
 - Redesign of services across the wider health and social care system
- Redesign of internal services to ensure patients are signposted to alternative care where appropriate/reduce unnecessary ambulance response and Emergency Department attendance.

Committee discussed the presentation and noted the assurance mechanisms built into the programme

Madeline Smith asked if increased acuity was emerging as a pattern. Karen confirmed that a pattern had been observed and work was ongoing by Jim Ward and the Clinical Team to look into this further.

Tom Steele noted that higher acuity calls are evident from weekly reporting and suggesting that in terms of rest breaks and shift overruns, measurement at a local level may be useful.

Garry Fraser advised that work was underway by the Demand and Capacity Programme Board to look at a plan for measurement and benefits realisation, as well as whether additional resources were having a positive impact on rest break figures and shift overruns.

Pauline Howie advised that Scottish Government colleagues had complimented the work underway by the Demand and Capacity Programme Board to evidence the baseline assumptions and enable monthly reporting and development of key performance matrix following a refresh and update of the modelling and forecasting.

Madeline Smith commented that everyone wants to see improvements in both staff and patient experience, adding that as those measures start to gather evidence and data it would be beneficial to have continual updates provided to Staff Governance Committee on the benefits to patients and staff enabling these to be tracked, suggesting that this could be provided as a vector of measures or a particular report.

Karen Brogan advised that the Programme Board had seen some improvements in response times for ILT patients but currently no improvements had been seen in rest periods, which had been as a result of other pressures within the system. Karen assured Committee that commitment was in place for additional resources to allow for improvements to be seen across the Board.

Lyndsay Lauder advised that she would discuss future reporting of staff and patient experience improvement measurement and how best to report these to Committee with Karen Brogan and Katy Barclay and bring a proposal back to the next Committee meeting in September.

Madeline Smith advised members that this would be the last Staff Governance Committee meeting for Garry Fraser, who will be leaving the Service to join NHS Tayside after 24 years'

| | | |
|--------------------------------------|--------------|------------------------|
| Doc: 2021-06-14 SGC Approved Minutes | Page 3 of 13 | Author: PA to Director |
| Date: 2021-06-14 | Version 1.00 | Review Date: N/A |

service. Madeline thanked Garry for his contribution to the Committee and valued work on the Demand and Capacity Programme and wished him all the best for the future.

Action:

2. **Director of Workforce** to discuss future reporting of staff experience improvement measurement linked to the Demand and Capacity Programme and how best to report these to Committee with **Associate Director of Strategy, Planning and Programmes** and **Head of Performance Reporting** and bring a proposal back to the next Committee meeting in September.

ITEM 6 ANNUAL REPORTS

The Staff Governance Committee Annual Report was presented for review and approval ahead of submission to the Board.

Madeline advised that within Page 3 of the report section f, "*Effective leadership and management*", should be bulleted within this section. It was agreed that this amendment would be made to the Annual Report ahead of submission to the Board.

Subject to the above amendment being made, Committee approved the Annual Report.

Action:

3. **Secretariat** to amend Page 3, section f, to include a bullet point at the start of "*Effective leadership and management*" ahead of the Annual Report being submitted to the Board.

ITEM 7 STAFF GOVERNANCE ACTION PLAN (SGAP)

Item 7.1 Staff Governance Action Plan 2020/21 – Progress Update

Lyndsay Lauder presented the Staff Governance Action Plan which included progress updates.

Committee noted that;

- 10 of the 24 initiatives contained within the Plan had been completed
- 8 of the initiatives are at green status and expected to be delivered within target timescales
- 5 initiatives are at amber status highlighting the risk of delivery against the original timescales, due to slippage caused by COVID-19
- One initiative SGAP20-21/19, relating to OD support arrangements to support progression of the National Boards Delivery Plan, had been paused indefinitely and was proposed for closure.

Lyndsay advised that in relation to SGAP20-21/10, Statutory and Mandatory training, a report on compliance was not available for committee as planned.

Frances Dodd advised that the process to move LiP modules online (including statutory and mandatory training) would be complete by the end of June 2021. Frances added that there remained challenges where in person practice elements were required given the social distancing measures. Committee noted that Frances had discussed these challenges with Nurse Director colleagues who advised that other Boards were also challenged by the delivery of statutory and mandatory training in the current environment, and it was agreed that this action within the SGAP should be amber with a further update in September.

| | | |
|--------------------------------------|--------------|------------------------|
| Doc: 2021-06-14 SGC Approved Minutes | Page 4 of 13 | Author: PA to Director |
| Date: 2021-06-14 | Version 1.00 | Review Date: N/A |

Madeline Smith thanked Frances for the update.

Lyndsay Lauder reminded Committee that as a result of the pandemic this year's SGAP had been merged together with last year's Plan and as a result there were a couple of the timescales which required to be reviewed and updated, however asked that Committee note the progress made and actions completed.

Martin Togneri noted that SGAP20-21/19 was proposed for closure within the Plan and asked if the Service would be losing out on any benefits as a result of the collaborative OD support arrangements programme being paused indefinitely.

Alison Ferahi advised that there would be no deterrent to the Service, as the purpose of the programme was to enable OD functions of all national Boards to collaboratively work together, adding that this was already in place through the OD Leads Network together with the national Boards OD functions being a closely linked group.

Frances Dodd suggested that SGAP20-21/24, Whistleblowing, be marked as complete within the Plan, given that ongoing reporting would take place through various Committees. Committee agreed that SGAP20-21/24 would be marked as complete.

Liz Humphreys queried the timings and closure of items contained within the Plan, using the examples of the SGAP20-21/13 & 14 Equalities, adding that these are marked as completed which would therefore suggest that the work of completing the Equality reports no longer required to be done. However, after discussion it was agreed by committee that this specific action had been completed although the responsibility and committee scrutiny would continue. The committee agreed to close those items highlighted.

Madeline Smith advised that the SGAP was a yearly plan, however as noted earlier, this year's plan had been rolled together with last year's plan. Madeline added that Committee scrutinises and gains assurance from the Plan each year, with updates and reports presented as agenda items.

Lyndsay Lauder advised that she appreciated that the running together of two Plans was becoming confusing, specifically in relation to timescales and advised that she would arrange for a 6 monthly Plan for September 2021 to March 2022 to be presented to the September Committee to allow for clearer oversight.

Committee noted the progress made within the Plan and completed items.

Action:

4. **Director of Workforce** to update SGAP to show SGAP20-21/10, Statutory and Mandatory training as an "amber" status.
5. **Director of Workforce** to update SGAP to show SGAP20-21/24, Whistleblowing, as complete.
6. **Director of Workforce** to provide the September Committee with a 6 month SGAP from September 2021 to March 2022 to allow Committee clearer oversight of actions and timescales ahead of the development and approval of the 2022/23 Plan.

| | | |
|--------------------------------------|--------------|------------------------|
| Doc: 2021-06-14 SGC Approved Minutes | Page 5 of 13 | Author: PA to Director |
| Date: 2021-06-14 | Version 1.00 | Review Date: N/A |

Item 7.2 Workforce Vector of Measures

Lyndsay Lauder presented Committee with the workforce information paper and vector of measures.

Committee noted that from national reports published on 1st June 2021 detailed non covid sickness absence level for the Service to year ending March 2021 as 5.5% compared to 8.4% for 2019/20. Lyndsay Lauder advised that a small gradual increase could be seen in April 2021, with non-COVID absence at 7.26%. Committee noted that focus remained on employee wellbeing, implementation of Once for Scotland Policy Framework and review of absence data to support management of individual cases. Lyndsay added that this work was monitored on a monthly basis through the Performance and Planning Steering Group.

Toby Mohammed highlighted to members that Education and Training data and narrative was included within the report as requested. The data and narrative included information on:

- BSc Paramedic Science Programme
- Ambulance Care Assistant recruitment
- Ambulance Technician recruitment
- Dip HE Paramedic Practice 2019, 2020 & 2021

Members noted the inclusion of the Education and Training data, which allowed for oversight of planned and actual numbers achieved on an ongoing basis.

Madeline Smith noted that chart 15, Team Leader Protected Time continued to remain below the mean of 25.2%, noting that plans for revised trajectories to be identified to deliver the 40% target. Madeline added that she would like an update to be provided with the report to the September Committee detailing the work being undertaken to increase protected time for Team Leaders.

Action:

7. **Head of Workforce Systems and Analytics** to ensure that an update is provided within the Workforce Information – Vector of Measure report to the September Committee which details the work being undertaken to increase Team Leader protected time.

Item 7.3 Workforce Risk Register

Sarah Stevenson presented Committee with the current version of the Workforce Risk Register for approval.

Sarah advised that changes to risks on the register were noted in red for ease of identification. Sarah highlighted to members that Risk ID 5051 was from the Winter 2020-21 Risk Register.

Madeline Smith highlighted that Risk 4906, Workforce training and recruitment targets, referenced that the risk was as an impact of COVID-19, however asked that given this was already a risk for the Service, whether the reference to COVID-19 was required. Sarah advised that she had discussed the wording of this Risk with Lyndsay Lauder, and suggested that it would be beneficial to discuss the wording in more detail offline with both Madeline and Lyndsay.

| | | |
|--------------------------------------|--------------|------------------------|
| Doc: 2021-06-14 SGC Approved Minutes | Page 6 of 13 | Author: PA to Director |
| Date: 2021-06-14 | Version 1.00 | Review Date: N/A |

Action:

- 8. Risk Manager** to discuss the wording of Risk 4906 in more detail offline with **SGC Chair** and **Director of Workforce**.

Item 7.4 Internal Audit Actions

Committee noted the paper presented, which advised that since the March 2021 report there had been no new audit actions which fell within the Staff Governance Committee remit.

ITEM 8 PROVIDED WITH A CONTINUOUSLY IMPROVING AND SAFE WORKING ENVIRONMENT, PROMOTING THE HEALTH AND WELLBEING OF STAFF, PATIENT AND THE WIDER COMMUNITY

Item 8.1 SAS COVID-19 Guidance

Members were advised that from the start of the pandemic the Scottish Ambulance Service (SAS) had followed the “UK COVID-19 Guidance for Ambulance Services”. Sarah Freeman advised that there were now a number of COVID-19 guidance documents from Public Health Scotland (PHS), however, no specific guidance relating to infection prevention and control (IPC) for ambulance services.

It was noted that with the remobilisation of the NHS in Scotland, new addenda were added to the National Infection Prevention and Control Manual (NIPCM), however were not written with a pre-hospital setting focus.

Given the importance of having guidance applicable to the pre-hospital setting and SAS ways of working. Health Protection Scotland (HPS) have agreed that the UK ambulance guidance can be used by SAS provided it is adapted to include links to the Scottish NIPCM and other Scottish guidance. The Committee were advised that this had now completed and provided SAS with COVID-19 guidance that aligns with UK National Ambulance Guidance and also complies with Scottish NIPCM.

Committee noted the paper and Guidance presented.

Item 8.2 OD Plan and Appraisal Activity Progress Update

Alison Ferahi provided Committee with an update on the OD Plan and Appraisal activity progress. Alison advised that Daren Nelson and Matthew Sime, had been appointed as the Service’s OD Leads with a further recruitment campaign underway to recruit to the two outstanding posts.

Alison highlighted that timescales within the OD Plan had required revision, with the proposed new dates within the paper presented to Committee. Alison added that the majority of overall year-end targets remained achievable.

Committee noted that to ensure that the revised timescales stay on track, the initial priorities were:

- Induction of the two new OD Leads and orientation to the Service.
- OD Leads familiarisation with the Foundation Leadership and Management Development Programme.
- Development of leadership mentors (from middle manager and Heads of Service cohorts) to support participants through the Foundation Programme.
- Scheduling of leadership cohorts throughout the next 12-18 months.
- Development and scheduling of additional workshops for the leadership programme.

| | | |
|--------------------------------------|--------------|------------------------|
| Doc: 2021-06-14 SGC Approved Minutes | Page 7 of 13 | Author: PA to Director |
| Date: 2021-06-14 | Version 1.00 | Review Date: N/A |

- Recruitment of a further two OD Leads.

Alison updated Committee on Appraisal activity following the pause of appraisal and PDP work due to the COVID-19 pandemic. Alison advised that to increase appraisal and PDP completion a simplified process was being implemented to emphasise the importance of meaningful conversation rather than lengthy recording on Turas. Members noted that to support this approach it had been agreed that all leaders and line manager will have had their own career conversation/development discussion and associated PDP completion by the end of March 2022. It was noted that the Regional Directors were currently discussing with their operational leaderships teams to establish a realistic aspirational timeline for their workforce to complete their Turas appraisal, with the OD Team supporting in the planning of these discussions and timelines.

Madeline Smith thanked Alison for the update adding that she took assurance that although some OD Plan activity required revised target dates, the majority of activity would remain achievable by year end. Madeline added that she noted positively the work underway in relation to appraisal activity, highlighting that the key area of importance for staff was to ensure that meaningful conversations take place.

Martin Togneri noted that the Scottish Government were not applying targets to Appraisal completion given the pause on this activity, however raised concern at the reluctance from staff to carry out appraisals, noting that Committee had previously been provided with assurance that Turas was a user friendlier system compared to the previous system in place, however there appeared to still be reluctant of recording. Martin added that he agreed that meaningful conversations were important but raised concern at how these conversations would be tracked to ensure that they were taking place.

Lyndsay Lauder provided assurance to Committee that the appraisal and career conversation/development discussions formed an important element of the Foundation Leadership Programme and supporting managers with this work would be a priority for the OD team going forward .

Gary Coll advised that while the built in protected time for Team Leaders was of welcomed however given the unique nature of the Service poses difficulty for staff to participate in these meaningful discussions and suggested that protected time for staff required to be build in to a weekly shift pattern to enable staff to be able to interact with managers and vice versa.

Madeline advised that it would be beneficial for Committee to receive a further update at the September Committee.

Action:

- 9. Head of OD and Wellbeing** to provide a further update to Committee on further agreed timescales, plans and progress in place for Appraisal activity across the Service.

Item 8.3 Workforce Health and Wellbeing Strategy Progress Update

Alison Ferahi provided Committee with a progress update on the Workforce Health and Wellbeing Strategy and highlighted:

- The Service was collaborating with several partners across both Scotland and the UK in order to progress the Strategy whilst influencing the health and wellbeing agenda at a national level.

| | | |
|--------------------------------------|--------------|------------------------|
| Doc: 2021-06-14 SGC Approved Minutes | Page 8 of 13 | Author: PA to Director |
| Date: 2021-06-14 | Version 1.00 | Review Date: N/A |

- The OD Leads would be supporting the leadership and cultural elements of the Strategy with a manager (transferred from the HR Department) in place to work full time on the “Healthy Mind”, “Healthy Body” and “Healthy Lifestyle” work streams.
- Work was ongoing to commission an academic partner to conduct an evaluation of the Workforce Health and Wellbeing Strategy.

Madeline Smith commented that it was positive to see different resources being pulled into the Strategy, adding that she would like the September Committee to be provided with an action plan to underpin the Strategy which outlined timescales, milestones and progress against each area of the Strategy.

Action:

- **10. Head of OD & Wellbeing** to provide September Committee with an action plan to underpin the Workforce Health and Wellbeing Strategy which outlines timescales, milestones and progress against each area of the Strategy.

Item 8.4 Health and Safety Update

Tony Wigram provided the Committee with a Health, Safety and Wellbeing update. Tony highlighted:

- **COVID-19 Vaccination Programme**
It was noted that the Service’s COVID-19 vaccination programme was complete. The most recent Programme Report was appended to the presented paper for Committee’s information.
- **Fatigue Management System and Action Plan**
The Fatigue Framework was being presented to the Working Practices Steering Group with the final draft expected to be presented to the next Policy Review Group.

Liz Humphreys asked for clarification in relation to the RIDDOR reporting contained within the report and asked for an offline discussion with Tony to enable her to gain greater understanding of the information being presented to Committee.

Action:

- **11. Health of Health and Safety** to discuss RIDDOR reporting within Health and Safety Report with **Liz Humphreys** to enable greater understanding to be gained on the information being presented.

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

Item 9.1 Equality Fora Update

In Ann Tobin’s absence, Lyndsay Lauder presented a paper which provided an update on Equality Fora within the Service which highlighted:

- There are currently two established staff networks, namely, Proud@SAS and Black, Asian and Minority Ethnic (BAME), which aimed to enable the Service to engage with staff within these groups and create a more cohesive and visible environment for the equality agenda.
- Since the establishment of both groups, membership numbers are increasing with both groups meeting on a quarterly basis.

| | | |
|--------------------------------------|--------------|------------------------|
| Doc: 2021-06-14 SGC Approved Minutes | Page 9 of 13 | Author: PA to Director |
| Date: 2021-06-14 | Version 1.00 | Review Date: N/A |

- Through the Scottish Government a National NHS Ethnic Minority Forum had been established which first met in April to discuss the Terms of Reference and objectives of the Group for 2021/22.
- The Service continues to link with the National Ambulance Diversity Forum and through the support of the Association of Ambulance Chief Executives (AACE) three other networks were now in place, which include two SAS staff members on the membership of these Groups;
 - The National Ambulance BME Forum
 - National Ambulance Disability Network
 - National Ambulance LGBT Network

Committee noted the update provided.

Item 9.2 Culture Change Map

Lyndsay Lauder presented Committee with an update on the development of a Culture Change Map which aimed to present the various elements of culture change and development in a way that highlights links and connections. Committee noted that the Map had been aligned to four values, Quality and Teamwork, Care and Compassion, Openness Honesty and Responsibility and Dignity and Respect and would connect back to the Workforce Health and Wellbeing Strategy to ensure that it was aligned and supported the strategic intentions.

Committee were provided with a refreshed Culture Map diagram which aimed to try and capture some of the workstream interconnections to make the overall picture clearer for the Board, managers and leaders at all levels, and demonstrates to the workforce how the Service translates it's values into action through meaningful programmes of work that they can engage with and understand.

Frances Dodd advised that following the development of the visual culture map it was also proposed that there be development of an interactive element on @SAS which would illustrate and describe how the various programmes and workstreams help to achieve the workforce vision of the Service in a way which clearly makes connections for staff.

Committee discussed the culture map presented and the proposal of the development of the interactive element and noted that there required to be caution that this did not become a stand-alone item and should align and contribute to different areas of current ongoing work.

Committee thanked Lyndsay and Frances for the update and noted that it looked forward to seeing the work progressing.

ITEM 10 INVOLVED IN DECISIONS

Item 10.1 Partnership Update

John Riggins provided Committee with an update on recent partnership activity. It was noted that the National Partnership Forum last met on 27 May 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 04 February and 08 April 2021.

| | | |
|--------------------------------------|---------------|------------------------|
| Doc: 2021-06-14 SGC Approved Minutes | Page 10 of 13 | Author: PA to Director |
| Date: 2021-06-14 | Version 1.00 | Review Date: N/A |

Item 10.2 Staff Experience Update

Lyndsay Lauder presented a paper which updated on staff experience activity within the Service. Committee were reminded that the iMatter questionnaire was paused during 2020 however this would resume during 2021 and the timeline of dates for the 2021 questionnaire were noted:

- Team check 2 to 27 August,
- Questionnaire 30 August to 20 September
- Reports due 4 October
- Action planning 4 October to 27 December

Lyndsay advised that the Scottish Workforce and Staff Governance Committee (SWAG) had confirmed that the 60% questionnaire completion rate threshold would be removed for teams of over 5 members and that the action planning phase would be shortened from 12 weeks to 8 weeks.

It was noted that in addition to electronic questionnaires, the Service had requested that staff be given the option to have access to the questionnaire via SMS on mobile phones which would allow for completion to be more accessible particularly for operational teams.

Gary Coll highlighted that staff experience can't be obtained by a text message asking for opinions and there needed to be meaningful conversation, adding that he was keen to see protected time built in weekly to staff shifts to allow for such discussions to take place.

Tom Steele asked if a "What Matters to You Day" was planned this year for NHS Scotland. Frances Dodd advised that some Boards were taking part in "What Matters to You Day" activity this year, however the Service had taken the decision not to run a campaign for a one day event and feed in this work into the Workforce Health and Wellbeing Strategy to enable feedback to be gathered through ongoing activity rather than a once a year event.

Item 10.3 Learning from Events Group Update

Frances Dodd presented Committee with the approved minutes from the Learning from Events Group meetings held on 25 June 2020, 08 October 2020 and 05 May 2021, which allowed for Committee to have sight of the recent activity undertaken by the Group.

Madeline Smith thanked Frances for sharing the minutes with Committee. Madeline added that when the Group was initially established its governance route was seen very much as reporting to Clinical Governance Committee, however advised that she would be keen for Staff Governance Committee to also be kept updated on the activity of the Group particularly in relation to staff experience.

Frances advised that if Committee found it beneficial, she would be happy to provide a verbal update on the Group's activity to each Staff Governance Committee. Members agreed that a verbal update at each meeting would be welcomed.

Action:

- 12. Director of Care Quality and Professional Development** to provide a verbal update on the activity of the Learning from Events Group at each Staff Governance Committee meeting.
- 13. Secretariat** to add Learning from Events Group verbal update to the Committee workplan.

| | | |
|--------------------------------------|---------------|------------------------|
| Doc: 2021-06-14 SGC Approved Minutes | Page 11 of 13 | Author: PA to Director |
| Date: 2021-06-14 | Version 1.00 | Review Date: N/A |

ITEM 11 WELL INFORMED

Item 11.1 East Region Recruitment Shared Services Update

Lyndsay Lauder provided the Committee with an update on the progress of the East Region Shared Services Recruitment Programme. It was noted that all recruitment staff from each of the 6 participating Boards transferred over to NHS Lothian on 1st June under TUPE, with a formal organisational change process to now be undertaken with NHS Lothian to embed the new delivery model.

Lyndsay added that a formal Service Level Agreement was currently being considered by each of the Boards to ensure continued delivery of an effective and appropriate regional recruitment service.

Committee noted that during the transition period to the shared service, the on boarding of new staff as part of Demand and Capacity would still be required. It was highlighted that to assist with this, plans were in place to set up an internal team on an 18 month secondment to focus on the recruitment of staff required as part of Demand and Capacity.

ITEM 12 ACTION TRACKER

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

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| 2020/09/10.2 | Learning from Events |
| 2020/12/09.4 | Culture Change Map |
| 2020/12/10.2 | Appraisal Activity - Progress Update |
| 2021/03/6.2 | Workforce Vector of Measures |
| 2021/03/7.2 | Workforce Health and Wellbeing Road Map |
| 2021/03/13 | Staff Governance Committee Workplan 2021/2022 |

ITEM 13 STAFF GOVERNANCE COMMITTEE WORKPLAN 2021/2022

The Committee noted the workplan.

ITEM 14 ANY OTHER BUSINESS

Staff Governance Monitoring Return

Committee noted that the annual Staff Governance Monitoring Return template had been received from the Scottish Government and that work was underway to complete the Return which would go through the relevant governance processes ahead of submission to Scottish Government by the end of September.

Uniforms

Liz Humphreys advised that she had recently seen a social media post from members of staff raising concerns in relation to Service uniforms and asked how these concerns are resolved by the Service. Tony Wigram advised that there was an active Uniform Group which meets regularly to consider issues. John Riggins added that all staff are aware that they should contact their Team Leader or staff side representative if they have any concerns

| | | |
|--------------------------------------|---------------|------------------------|
| Doc: 2021-06-14 SGC Approved Minutes | Page 12 of 13 | Author: PA to Director |
| Date: 2021-06-14 | Version 1.00 | Review Date: N/A |

with areas such as uniforms to allow these to be resolved. Committee noted and were assured by the processes outlined and groups in place to address uniform policy .

Body Cameras

Committee asked if there was any update on the use of body cameras by Ambulance crews. Tony Wigram advised that some English Ambulance Services were currently trialling the use of body cameras, adding that a member of the Health and Safety Team were engaging with those services.

Tony highlighted that the use of body cameras was a workstream in the Health and Safety Group's Action Tracker with a report to be presented to the Health and Safety Group later in the year following engagement with the English Ambulance Services who were utilising the cameras.

Toby Mohammed

Madeline advised the members that this would be Toby's last Committee meeting. Madeline thanked Toby ahead of his impending retirement for his contribution the Staff Governance Committee and the volume of work undertaken through times of extreme challenge and pressure. Members wished Toby well in this retirement.

DATE OF NEXT MEETING
01 September 2021, 10:00

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| Doc: 2021-06-14 SGC Approved Minutes | Page 13 of 13 | Author: PA to Director |
| Date: 2021-06-14 | Version 1.00 | Review Date: N/A |