



**NOT PROTECTIVELY MARKED**

**Public Board Meeting**

**29 July 2020**

**Item 15**

**THIS PAPER IS FOR NOTING**

**STAFF GOVERNANCE COMMITTEE MINUTES OF 16 APRIL 2020 AND  
VERBAL REPORT OF 11 JUNE 2020**

<b>Lead Director Author</b>	Madeline Smith, Chair of Staff Governance Committee Lindsey Ralph, Board Secretary
<b>Action required</b>	The Board is asked to note the minutes and verbal report.
<b>Key points</b>	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.  The minutes of the Staff Governance Committee held on 16 April 2020 were approved by the Committee on 11 June 2020.  A verbal update of the meeting held on 11 June 2020 will be provided by the Chair of the Committee.
<b>Timing</b>	Minutes are presented following approval by the Committee. The Board will receive a verbal update of the most recent Committee meeting.
<b>Link to Corporate Objectives</b>	This paper relates to our goal of ensuring staff have a voice and people are at the heart of everything we do.
<b>Contribution to the 2020 vision for Health and Social Care</b>	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.
<b>Benefits to Patients</b>	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.
<b>Equality and Diversity</b>	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**

**10:30 ON THURSDAY 16 APRIL 2020  
VIA TELECONFERENCE**

**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:** Lewis Campbell, Regional Director – East  
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 (Minutes)  
Pauline Howie, Chief Executive  
Liz Humphreys, Non-Executive Director (Observing)  
Lyndsay Lauder, Director of Workforce  
Maria McFeat, Interim Assistant Director of Finance  
Jamie McNamee, Staff Side Representative, Unite the Union  
(ex officio member)  
Toby Mohammed, Head of Education and Professional Development  
John Perritt, Risk Manager  
Robert Pollock, Staff Side Representative, GMB (ex officio member)  
Kevin Reith, Deputy Director of Workforce  
Milne Weir, Regional Director, North  
Tony Wigram, Head of Health and Safety

**Apologies:** John Burnham, Associate Director of Care Quality and Professional Development  
Gary Coll, Staff Side Representative, GMB, (ex officio member)

### **ITEM 1 WELCOME AND INTRODUCTIONS**

Madeline Smith welcomed everyone to the meeting.

Madeline reminded the Committee that NHS Scotland and the Service are facing unprecedented pressures as they respond to the Covid-19 Pandemic. Board Governance Committees recognise that the Service's front line staff, senior officers and the Executive Team must be allowed to deal with the Covid-19 Pandemic with as little distraction as possible. However, the Board must also be assured that robust governance processes are in place during the national emergency and in this context the April Committee would particularly focus on how the Service continues to meet the Staff Governance Standards in its response to COVID-19.

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All papers prepared for the meeting had been circulated in advance. Committee members had been asked to submit questions in advance and responses will be provided by the Director or appropriate manager directly. In order to enable most of the time to be spent on COVID-19 and the workforce challenges, risks and opportunities presented by the Pandemic Madeline proposed that the majority of papers be noted or approved without significant discussion and asked committee members to focus their additional questions for these papers to areas where they felt they needed further assurance.

## **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, and as a member of the Board of Digital Health Institute.

## **ITEM 3           MINUTES OF MEETING HELD ON 18 SEPTEMBER 2019**

The minutes of the meeting held on 11 December 2019 were approved as an accurate record of the meeting.

## **ITEM 4           ANNUAL REPORTS**

Committee noted the annual reports from the Remuneration Committee and Health Safety and Wellbeing Group together with the Staff Governance Committee Annual Report.

Committee approved the Annual Report as presented and noted that this would now be presented to the Board.

Madeline passed on her thanks to everyone for all the work that had been completed by the Committee over the past year.

## **ITEM 5           SPECIAL TOPIC – COVID-19 - STAFF GOVERNANCE COMMITTEE RESPONSE**

Lyndsay Lauder presented Committee with a paper which outlined the actions being taken to ensure that the NHS Staff Governance Standards are informing the response to the national emergency of COVID-19. Committee noted that the paper provided assurance that the Service is taking the necessary actions to support the workforce.

Lyndsay described the workforce related actions being taken in response to COVID-19 and aligned them to the five Staff Governance Standards.

### **Well Informed**

- Regular, open and up to date communications with our workforce have been essential to provide reassurance and appropriate advice to all staff at a time of high anxiety and stress. The Covid19 situation is complex and fast moving. With new information, advice and guidance being received from a variety of authoritative sources on a frequent basis the service has learned from experience to keep messages clear and uncomplicated and to use multi channels of communication.
- The Workforce Director meets with the Senior HR Team at least three times per week to cascade information from the Executive Team, COVID-19 Strategic Cell and workforce guidance circulated by the Scottish Government. This ensures that

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operational managers have a clear policy framework for decisions relating to staff management and rapid access to HR advice and guidance.

- Partnership working is central to the way we work in the Service and in this context the Director of Workforce and Operational Directors have thrice weekly calls with the National Staff Side Convenors and Employee Director to discuss and consider all workforce issues related to the health, wellbeing and management of the Service workforce. Jamie McNamee noted that partnership working had been working very well throughout the pandemic despite the many challenging issues that had to be addressed. He thanked Lyndsay and the Executive team for their commitment to working in partnership with staff and staff side and expressed a desire to build on this strong position going forward. Stevie Gilroy and Robert Pollock joined with Jamie in this view.

### **Appropriately Trained and Developed**

- The majority of non-clinical training, development and programmes of work have been suspended until further notice in accordance with national advice and guidelines of what is deemed essential and non-essential. This includes the Foundation Leadership programme and all other Leadership programmes, appraisal activity, iMatter and the Once for Scotland Workforce Policy programme.
  - All Paramedic and Ambulance Care Assistant training has been suspended
  - Technician training continues both in an online capacity (using Zoom) and face to face.
  - Infection control and prevention has been reinforced on the Technician programmes in addition to COVID-19 scenarios integrated into the curriculum
  - Face fit testing is occurring at pace across the Service.

Madeline Smith noted the very tight timing around paramedic education over the next three years and asked if there was opportunity to delay the move to the degree programme.

Toby Mohammed advised that the Education and Professional Development Department are still working towards the original time lines, given that the validation meetings have already taken place with the majority of Universities providing the programme.

Frances Dodd confirmed that there are ongoing discussions with the HCPC in relation to an extension for the timelines associated with the transition to the degree programme

Toby also highlighted the work undertaken by the team on induction and other training for returners, 1<sup>st</sup> responders and volunteers who were coming into the service as additional resource to support the workforce in specific areas

Jamie McNamee requested that the committee recognise the hard work and flexibility shown by Dr Toby Mohammed and the Education and Professional Development Department. The team had responded rapidly and effectively in support of front line services during the pandemic and this was fully acknowledged by the SGC.

Robert Pollock supported this view and acknowledged the commitment and professionalism of all Service employees in the responding to COVID-19. The committee endorsed this view.

Martin Togneri asked for clarification on the COVID-19 related absence rate. Lyndsay Lauder advised that currently 6.9% of absence was COVID-19 related and that non COVID related absences were currently 4.8%.

### **Involved in decisions**

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**The section above also supports the third standard and in addition to the thrice weekly conference calls with staff side:**

- There are frequent telephone and email communication in between these times with national and local staff side representatives to allow all parties to remain apprised of developments and take any necessary decisions that may be required.
- Support continues to be provided to local managers to ensure engagement with local staff side representatives and staff is taking place at every opportunity.

**Treated fairly and consistently, with dignity and respect in an environment where diversity is valued**

- HR Teams are working closely with line managers to ensure that policies are being applied consistently and compassionately, as well as providing guidance to those dealing with staff in high risk groups to ensure individual circumstances are considered and appropriate adjustments made.
- Managers and HR are working with staff side in partnership to manage ongoing grievances and disciplinary investigations and ER processes in a proportionate way which reduces the administrative burden for all parties, maximises the front line workforce and manages any associated risks.

**Provided with a continuously improving and safe working environment, promoting the health & wellbeing of staff, patients and the wider community**

- A COVID-19 Health and Wellbeing Working group has been established with representation from staff at all levels. A plan has been developed, approved and implemented which will result in a renewed focus on staff health and wellbeing in the short term with investment in practical resources and advice for staff in the next two months. This work will provide momentum for the development of the long term Health & Wellbeing strategy for the Service which is due by the end of this year.
- The Quality Improvement Team is working to modify existing patient safety improvement approaches and enable staff to quickly, adapt, adopt and test new processes to ensure enhanced ways of working and particularly to encourage effective conversations with peers and managers.

**Personal Protective Equipment (PPE)**

The provision of appropriate Personal Protective Equipment for the Service's front line workforce has been an issue of critical importance and the subject of continuous dialogue recognising the understandable level of anxiety and concern among our staff.

Frances Dodd advised Committee that in relation to Personal Protective Equipment (PPE), a huge amount of work has been carried out in partnership. Twice daily reviews of PPE take place within the COVID-19 Cells at strategic and regional level. At tactical cell level, robust supply and usage tracking has been developed and implemented and is working well. This will facilitate new ways of modelling PPE requirements going forward.

Jamie McNamee thanked Frances and her team for the work which had brought the Service to its current improved PPE position. However, Jamie requested Committee to note his view that the Service was in fact 5 years behind on face fit testing which should have commenced in 2015 and been ongoing thereafter.

Pauline Howie explained that there had been challenges around the requirements, the suitability of the masks and other equipment available, not just for the Service but for the whole of the NHS. Pauline advised that work has been ongoing with Public Health England

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and Health Protection Scotland to update the guidance and provide more clarity in relation to the masks and equipment.

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## Staff Testing

Tony Wigram provided Committee with an update on the Staff testing programme now in place across the Service. Protocols are now in place to ensure that regional cells can rapidly refer asymptomatic staff for testing to the Health Board which provides service to their geographical area. Committee noted that testing is required to happen within 48 hours of symptom onset to be effective and current figures show that 318 staff have been referred for testing, 245 have been tested and 84 have tested positive. Daily updates are prepared on Staff Testing figures and associated COVID-19 related absence.

Committee thanked Lyndsay and her team for the paper noting that it was helpful to have the COVID-19 workforce response presented in alignment to the five Staff Governance Standards. This has provided assurance to the Committee that the standards continue to inform the management and support of the workforce during the pandemic.

### ITEM 6 STAFF GOVERNANCE ACTION PLAN (SGAP)

#### a) Staff Governance Action Plan 2019/20 – Closing Report

Kevin Reith provided Committee with the final update to the Staff Governance Action Plan for 2019/20, which highlighted key areas of progress and outlined which items would be carried over to 2020/21. Madeline Smith added that in normal circumstances Committee would have also been presented with the draft plan for 2020/21, however due to the revised agenda of the meeting, the 2020/21 Plan would be presented to the June Committee.

Committee were asked to approve the closure of the 2019/20 Action Plan and did so.

### ITEM 7 PLANS AND UPDATES

#### a) Workforce Planning Framework

Lyndsay Lauder updated the committee on the revised timescales for the workforce planning cycle and the workforce projections for 2020/21, which were due to be submitted to the Scottish Government by 30 June 2020. All workforce planning timescales have been suspended by the SG and further guidance will be issued in due course

Madeline thanked Lyndsay for the update to the committee and asked to be kept updated of future advice and developments noting the critical importance of workforce planning going forward.

Committee noted the paper.

#### b) Organisational Development (OD) Plan 2019/20 – Closing Report

Committee noted that members had been given the opportunity to raise any questions on the paper prior to the meeting. It was noted that no comments or questions had been received.

Committee approved the closing report.

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**c) Wellbeing Implementation Plan 2019/2020 – Progress Report**

Committee noted that members had been given the opportunity to raise any questions on the paper prior to the meeting. It was noted that no comments or questions had been received.

Committee approved the closing report.

**d) Staff Experience Update**

Committee noted that members had been given the opportunity to raise any questions on the paper prior to the meeting. It was noted that no comments or questions had been received.

**e) Paramedic Education Update**

Committee noted that members had been given the opportunity to raise any questions on the paper prior to the meeting. It was noted that no comments or questions had been received.

**f) Demand and Capacity Programme**

Lewis Campbell advised Committee that due to COVID-19 the programme is currently delayed and will be restarted as soon as the situation allows.

**ITEM 8 GOVERNANCE**

**a) Workforce Risk Register**

John Perritt presented the current version of the workforce risk register to give Committee members assurance that a robust risk management process is in place for workforce matters. Committee noted that the register presents all workforce related risks contained within the Corporate Risk Register, all High risks contained within the Committees sub groups along with any generic risks identified.

Committee were advised that all new risks contained within the register are highlighted in red for readability.

John added that most of the risks contained within the Register were out with the review window however contact had begun to be made with the risk owners requesting updates.

Jamie McNamee noted the lack of progress with face fit testing in respect of risk no 3581, as discussed previously during the Committee, it was agreed that Tony Wigram would provide Jamie with clarification around the detail of the actions undertaken to mitigate this risk.

Tom Steele expressed disappointment that the Risk Register had not been updated to reflect the current position and requested that this be done for the June Committee.

Pauline Howie agreed that all of the risks required updating and confirmed that risk 3581 in particular will be reviewed.

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**Action:**

1. **Head of Health and Safety** to provide Jamie McNamee with clarification around the detail of the actions contained within risk 3581, Face Fit Testing.
2. **Risk Manager** to ensure all risks within the Workforce Risk Register are updated and reviewed prior to the June Committee.

**b) Policies**

Committee noted and approved the undernoted policies.

**Health and Safety**

- Allergy and Anaphylaxis Policy
- Personal Protective Equipment Policy
- First Aid Arrangements
- Guidance on Inadvertent Exposure to Asbestos

**c) Action Tracker**

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

2019-12-07	Committee/Sub Committee Terms of Reference - Review of wording within Terms of Reference
2019-12-09a(ii)	SGAP Draft Plan 2020/21 - Amendments to Draft Plan
2019-12-10d	Staff Experience Update - Linking Staff Experience Work
2019-12-10(e)	Integrated Support Services Update - HR Connect
2019-12-11c(i)	Vector of Measures - Vacancies Chart

Committee noted that within the action tracker there are currently 9 actions where the target date has been extended to June 2020 meeting given the refined April Committee agenda in light of COVID-19.

**Action:**

3. **Pippa Hamilton** to update the action tracker.

**ANY OTHER BUSINESS**

Tom Steele noted he was extremely pleased that the Committee meeting took place as maintaining the appropriate level of governance was important. Tom passed on his thanks to Madeline Smith, Lyndsay Lauder and everyone involved in the call to enable the meeting to run smoothly.

**Date of next Meeting – 11 June 2020.**

Meeting closed at 12:00.

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