

MINUTES - Approved

Meeting of the Healthcare Improvement Scotland Staff Governance Committee at 1.00 pm on 9th August 2023. MS Teams

Present

Duncan Service Board Member, Committee Chair

Nicola Hanssen
Judith Kilbee
Keith Charters
Michelle Rogers
Carole Wilkinson
Board Member
Board Member
Board Member
Board Member
HIS Chair

In attendance

Angela Moodie Director of Finance Planning & Governance
Ann Gow Director of Nursing, Midwifery and Allied Health

Professionals (NMAHP)

Ann Laing Head of People & Workplace Belinda Henshaw- Partnership Representative

Brunton

Ben Hall Head of Communications

Chris Sutton Deputising for Director of Improvement

Eddie Warde Partnership Representative Laura Liddle Associate Director of Workforce **Head of Corporate Development** Lynda Nicholson Lynsey Cleland **Director of Quality Assurance** Kenny Crosbie Partnership Representative SIGN Programme Lead Roberta James Director of Evidence Safia Qureshi Head of O,D&L Sandra Flanigan

Simon Watson Medical Director
Sybil Canavan Director of Workforce

Tony McGowan Deputising for Director of Community Engagement

Committee Support

Tara Duffy Administrative Officer (Minutes)

Apologies

Evelyn McPhail Board Member

Robbie Pearson Head of Communications

Clare Morrison Director of Community Engagement

Kenny Crosbie Partnership Representative Ruth Glassborow Director of Improvement

1.	WELCOME AND APOLOGIES FOR ABSENCE	ACTIONS
1.1	Welcome and apologies for absence	
1.1	The Chair welcomed all present to the Committee meeting, particularly to Eddie Warde who was attending his first meeting as a Partnership Representative. Apologies were received as above.	
1.2	Declaration Of Interest	
	No declarations of interest were provided by Committee members.	
2.	MINUTES OF PREVIOUS MEETING/ACTION POINT REGISTER	
2.1	Minute of Staff Governance Committee meeting on	
	The minutes of the Staff Governance Committee meeting held on 03 May 2023 were approved.	
2.2	Review of Action Point Register of Staff Governance Committee on 06 December 2022	
	The Committee reviewed the Action Point Register from the meeting 03 May 2023 and the updates for the remaining actions on the Action Point Register were discussed down the agenda.	
3.	COMMITTEE GOVERNANCE	
3.1	Business Planning Schedule 2023/24	
	There was no further updates or suggested changes to the Business Planning Schedule.	
4.	CORPORATE PLANS	
4.1	Workforce Plan The Director of Workforce shared a short update on workforce planning activity and highlighted the following:	
	 a) The importance of menopausal awareness, which had missed its delivery date. Resources from 'Hen Picked' a menopause awareness organisation were shared as useful. There are capacity issues due to organisational changes and team transitions which have affected the missed deadline which will be addressed. b) There is recognition of progress in the "One Team" workforce design workstream, with opportunities for collaboration and standardisation of roles. c) Terms of Reference for the VRG and the Internal Audit of Recruitment have been completed as part of the action plan which will commence at the start of September d) The current workforce action plan is almost one year old, and there is a need to refresh the existing action plan, considering changes within the organisation. Activity regarding the production of a new action plan could be presented at the November meeting. 	
	The following was highlighted after further discussion:	

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- e) There is recognition of the need to consider labour market supply and the presence of specialist skills within various teams across the organisation. Flexibility in working arrangements has been positively received, with employees responding well to recognising the need for flexibility and participating in work activities as
- f) Regarding the Dying to Work Charter, the organisation has been working on pulling together existing resources and guidance to support managers in having conversations and providing support to employees, particularly in challenging situations like illness. Awareness sessions are considered a valuable step to ensure managers are confident in handling such conversations.
- g) The need to focus on how the Charter can work in different circumstances and the resources available to support individuals in difficult situations was highlighted.
- h) Suggestions were made for incorporating menopause awareness into corporate induction, annual updates for line managers, and a broader context of employee support.

The Committee were assured with the update provided.

4.2 **One Team Update**

The Director of NMAHP provided the Committee with an update on the One Team programme. The following points were highlighted:

- a) The purpose of One Team is to enhance the organisation's flexibility and agility, aligning with the overall strategy. The goal is to consolidate skills across the organisation for more efficient collaboration. Recent changes, such as integrating skills and professions, aim to support teams and improvement initiatives. However, these changes require ongoing staff support and organisational development efforts, including training for managers and professionals. There's was also emphasis on formal organisational change and culture development.
- b) Resource allocation has been prioritised to ensure successful implementation of these changes. Around £510,000 has been invested for this purpose, including building dedicated teams for organisational development, culture, HR, and programme management support. Detailed updates on various workstreams are provided, including the redesign process and the transition to new working environments.

In response to questions from the Committee, the following additional information was provided:

c) It is important to enable and support staff to adapt to the new environment. This includes fostering confidence, embracing change, and creating a learning culture. The goal is to empower individuals to experiment, make mistakes, and learn from them. Team coaching and associate director positions are being utilised to enhance the process.

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- d) There is a focus needed on line management, recognising the need for clear support and guidance. Investment in this area will help promote effective change management and innovation. Culture has been identified as a crucial factor, and efforts are underway to shape a positive culture that aligns with the organisation's goals. Collaborative work and engagement from various departments are driving the development of a tangible and inclusive culture.
- e) Practical steps, such as providing tools for line managers and revisiting culture through benchmarks and past initiatives like culture stories are being taken. While the culture transformation process is still unfolding, there are dedicated efforts to ensure that employees feel skilled, competent, and capable in the evolving environment.
- f) There is a need to accommodate different learning styles within the organisation, with a focus on providing various learning opportunities. Recent changes may have caused some gains to be lost, and we should be investing in staff support, training, and creating a positive work environment. Line management is important as a key enabler for effective change management and development. There is a need to address concerns on losing subject matter expertise due to changes in roles and responsibilities.

The Committee appreciated the ongoing discussions and the update provided.

4.3 Organisational Change Update

The Director of Workforce provided the Committee with a presentation on the current Organisational Change activity that is taking place across the organisation. The following points were highlighted:

- a) Consultation papers have been shared, and a 12-week consultation period has concluded, with separate consultations responses.
- b) A Governance Chairs meeting has taken place to consider feedback, management responses, and implications of the proposed changes. The meeting aimed to ensure alignment with the organisation's strategy.
- c) Various responses had been received from staff members, collective team responses and trade union groups.
- d) The provided papers included a rationale for final conclusions, potential changes to structural information, and feedback on job structures and roles.
- e) An independent review of the management and consultation process had been conducted, ensuring a comprehensive representation of received information.
- f) Communication of management responses to staff had commenced in both directorates, using individual communications and huddle processes.
- g) Outstanding matters include the completion of the Agenda for

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In response to questions and further discussion, the following additional information was provided:

h) The Governance Committee chairs were focused on ensuring that changes aligned with the strategy and facilitated strategy delivery. There was a shared interest in progressing forward and establishing stability amidst uncertainty, especially concerning Community Engagement, acknowledging the difficulty of change. The Committee chairs expressed satisfaction with the process and aimed for implementation. The need for a comprehensive organisational development strategy and development plans for staff and managers was recognised.

The Committee were assured with the update and progress on organisational change and recognised the impact of this on staff and on programme delivery.

4.4 eRostering

The Director of Workforce provided the committee with an update and paper on eRostering Implementation and the following was noted:

- a) The focus during this phase is on introducing the products to key stakeholders. A project manager named Thomas Denholm has joined to support the programme and has been instrumental in coordinating the scheduling and inviting appropriate individuals for the workshops and activities.
- b) An important product being used is the 'Loop' app, which allows individual staff to access information on their phones. Workshops on various aspects like communication and engagement and stakeholder analysis. The team is actively involved in the planning process to ensure awareness and successful implementation.
- c) Resourcing from One Team has been secured to support this in the wider redesign efforts. The impact of the workshops and activities on a day-to-day basis was acknowledged, and efforts are being made to get teams accustomed to the new system.
- d) A programme board has been established, which will monitor all progress and report to the operational risk will register. The operational risk associated with the implementation is being carefully managed and monitored.

The Director of Workforce assured the Committee that updates will continue to be provided as the implementation progresses. After further discussion the following information was noted:

- e) An extension to the timeline for the implementation has been considered before, but the team is confident in their detailed project plan and timeline.
- f) There is engagement from various stakeholders, including the national team and RLDatix, who run the system. There are

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- practical challenges and a need to ensure that the national team doesn't step away from the project prematurely.
- g) The system is designed for real-time staffing, particularly in a 24-hour care environment. There are benefits of the system, such as skill planning and improved reporting, though some challenges and adjustments are expected due to its unique nature.
- h) It is important to maintain proper governance despite the changes. The Committee recognised the impact on governance and expressed a need for understanding how the system aligns with business as usual.

The Committee were content with the information provided and there was recognition of the need for ongoing updates and discussions on the progress of the implementation.

4.5 National Boards Collaboration Update

The Chair provided the Committee with a verbal update on the National Boards Collaboration and highlighted the following:

- a) There is a new chair and leadership changes.
- b) The focus is on delivering collaboration and good work, with uncertainty around if this is the best way to do it and the group's future.
- c) There's a need to address national accommodation especially outside health boards.
- d) There are challenges in collaboration among all the independent health organisations.
- e) There's a meeting planned for next week with hopes for more progress.

The Committee noted the update.

4.6 Health & Safety and Health & Wellbeing Update

Members received this report updating them on the latest Health and Safety and also Health and Wellbeing activity within the organisation. A number of points were highlighted by the Director of Workforce:

- a) There are planned Health & Safety inspections and noise checks at Delta House and The Gyle. These activities will be reported to the next Health and Safety Committee meeting at the end of the month.
- b) Portable Appliance Testing (PAT) of equipment at Delta House is complete with no issues.
- c) Procurement exercise for PAT testing equipment for staff, including home settings, has been successful.
- d) Display Screen Equipment (DSE) activity is ongoing, with reminders to ensure processes are up to date.
- e) A water risk assessment has been completed for Delta House, with ongoing work in response. Focus on plumbing-related activity in relation to toilets at Delta House.

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- f) There are activities related to Health and Wellbeing being promoted, including meditation sessions, step count challenges.
- g) Recognition of National Carers Week with activities like the 'Caring Cuppa' and increased acknowledgment of staff as carers. Work is being done to enhance positive award status and establish caring employer status.
- h) Continuation of the Menopause Cafe and promotion of the National Wellbeing Hub.
- i) Spectrum Life programme and its benefits for staff and family members.
- j) There is ongoing financial wellbeing support and PDWR (Personal Development and Wellbeing Review) processes.
- k) There are upcoming mental health workplace training for managers and efforts to gather participant information.

The Committee noted the update.

4.7 HIS Modern Slavery

The Director of Community Engagement provided the Committee with a report on HIS Modern Slavery and the following was highlighted by their deputy:

- a) It is important to have a clear statement regarding modern slavery in the organisation.
- b) We are collaborating with various parts of the organisation, including specialist staff and quality diversity and public protection teams.
- c) The statement aligns with relevant legislation and guides policies, procedures, planning, procurement, and commissioning.
- d) Training is being offered to support staff in identifying and addressing potential cases of modern slavery or human trafficking.
- e) The organisation aims for widespread awareness and coverage of the statement.

In response to questions from the Committee, the following additional information was provided:

- f) Where we have touch points with a wider topic is where we might spot potential issues related to modern slavery.
- g) There are efforts to reach out to self-help groups and difficult-toreach communities.
- h) Staff should know the policies and procedures for escalating concerns
- i) We are looking at development of a recruitment policy and collaboration with other teams and aligning relevant policies to ensure staff can identify issues.
- j) Staff have been well-versed in public protection policies and there is a responsibility of staff to report anything that doesn't seem right.

k) There is a growing importance on this area, especially during

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economic pressures.

 There is intention to publish information on the website for day-today activities.

The Committee were assured and content with progress on the HIS Modern Slavery Statement.

4.8 Once for Scotland Programme Update

The Workforce Director provided a covering paper and presented the Committee with a presentation for awareness. The following was highlighted:

- a) The soft launch of the revised work-life balance policies has been confirmed. There are a total of 11 policies in the suite, signed off by SWAG at the end of June. The launch is planned for November 1st, and there's an opportunity for partnership engagement between now and then.
- b) The goal is to compare and contrast the new policies with current practices, including joint conduct briefings, and partnership engagement for managers, staff, and trade union reps.
- c) Support is being provided to individuals, with a detailed slide deck developed for this purpose.
- d) There was discussion at the Partnership Forum regarding the implications of the policies on current working activities across the organisation. The flexible patient policy will require the most input and discussion.

After further discussion within the Committee, the following points were highlighted:

- e) There is a call to implement policies without delay, with emphasis on the importance of understanding any implications.
- f) Flexibility in work practices is something that has been agreed upon in partnership discussions.
- g) There is a need to formalise certain practices related to flexible work arrangements.
- h) Concerns were raised about the one-size-fits-all approach of some policies, particularly in the context of Scotland's unique circumstances.
- i) The impact of COVID-19 on policy implementation was mentioned, and there was suggestion to revisit policies that may have been delayed due to the pandemic.
- j) There is a commitment to providing a report on any policy changes and their implications.

The Committee noted the update.

5. RISK MANAGEMENT

5.1 Risk Management/ Risk Register

The Director of Finance, Planning and Governance provided the Committee with a paper detailing risk management and the Risk Register and the Risk Manager highlighted the main points to the Committee:-

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- a) A new strategic risk has been added related to organisational change. The new risk is assessed at level 12, which is within the appetite.
- b) The focus now is to address risks that are currently out of appetite.
- c) With the workforce plan from now until 2025, the risks should be brought within appetite towards the end of this financial year. There is a plan in place to bring the workforce risks within the appetite.
- d) A mature approach to risk tolerance and acceptance is being taken with acknowledgment that some risks may be technically out of appetite but not critically so.
- e) The new risk appetite approach is currently applied to strategic risks and will be extended to operational plan risks once technical issues are resolved.

After further discussion, the following additional information was provided:

- f) The risk associated with the workforce plan should be considered, particularly due to significant changes in the workforce (e.g.75% turnover) and priorities associated with the workforce plan may change during a change process.
- g) There was discussion about the level of risk considering point f) and it was agreed that the Committee would continue to closely monitor this risk in future quarters.
- h) There are concerns about the impact of stress on the workforce due to ongoing changes and mention of lone working as a safety risk for staff.
- i) There was a suggestion to refine and redefine the organisational change risk to better reflect the specific concerns.
- j) There is a need for more clarity in defining risks and aligning them with the organisation's strategic priorities.
- k) There should be consideration of a short-term risk appetite for addressing current challenges.
- I) The discussed risks are regularly reviewed and updated.
- m) Staff involvement and well-thought-out processes in managing organisational change risks is important.
- n) The Committee was asked to think about how comfortable they are in terms of what's been recorded just now, what information is missing that could help with mitigation, and if there is further information they need to receive to get that assurance.
- o) The Committee suggested not worrying too much about the risks being out of appetite but focusing on it and thinking about what things we might look at in the context of mitigation to try to bring it down, but not trying to reduce the appetite too quickly if it's not realistic.
- p) The workforce plan is long-term, so it is likely that the risk will be out of appetite until some of the mitigations are implemented. It is important that we make sure we are doing the things that need to be done to bring it back into tolerance over this period.

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q) It was suggested that the risks be reassessed and thoroughly Director FP&G reconsidered, whether they are one singular risk or a combination of multiple risks. r) It is legitimate for this Committee to review the risks as they currently stand and then take it to Audit and Risk explaining the need to do more work on the risks, indicating that further analysis or assessment is necessary. If the updates are not ready in time for the board meeting, then the Committee can inform the board that they are actively working on improving the risk register. s) It is important that risks are considered from the perspective of staff, particularly in the context of organisational change. The Committee should assess whether the mitigation measures and actions in place adequately address the needs of staff and ensure they are well-informed, appropriately trained, and involved in decision-making during times of change. The Committee scrutinised the report and expressed their satisfaction with the suggestions in place. WORKFORCE INFORMATION 6. 6.1 **Workforce Data Update** The Workforce Data Report update to the end of June was presented by the Director of Workforce, and the Committee engaged in a discussion, with the following being noted: a) The process of creating risk assessments, particularly stress risk assessments, related to staff wellbeing was questioned and the Committee were informed they conduct these assessments by exception and the importance of having the right processes and critical mass for addressing staff wellbeing concerns was highlighted. The Committee were informed that this is something that can be picked up more generally. b) There has been engagement with the Employee Assistance Programme, Spectrum, and we have received initial reporting. There have been interactions related to anxiety and relationships, although it's unclear whether these relationships pertain to work or personal life. It is important to open up opportunities for staff to access support. c) Around 7% of the staff population has interacted with the Employee Assistance Program, and while this is considered a good uptake, there is a need to promote it further to increase participation. The Committee noted the update. 6.2 Performance, Development, Wellbeing Review Update The Head of Organisational Development and Learning delivered a presentation on the Performance, Development and Wellbeing Review covering the following points:a) PDWR discussions took place between April 1st and May 31st.

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- b) The OD&L team has been monitoring progress and providing weekly updates to the executive team since mid-July.
- c) Completion rates for each element of the PDWR process were reported as positive and comparable to previous years as of August 7th.
- d) The organisation is undergoing significant changes, which may impact individuals' ability to plan for the year ahead and set objectives. Some people have focused on short-term objectives, considering the mid-year review process.
- e) Important organisational themes include leadership development and strategic management, with allocated resources to support these areas.
- f) The PDWR process will be reviewed between October 1st and November 30th, and mandatory training will conclude by November 30th.
- g) Completion rates will be revaluated at the end of September for the first and second quarters, showing positive progress

The Committee noted the update.

7. VALUES, BEHAVIOURS, ENGAGEMENT & COMMUNICATION

7.1 iMatter

The Head of Organisational Development and Learning shared a presentation with the Committee providing an update on iMatter and the following was highlighted:-

- a) The iMatter process was open for three weeks from May 22nd to June 12th.
- b) A high response rate of 92% was achieved, with 525 people responding out of 571 who received the questionnaire.
- c) The overall employee engagement index score dropped by two points compared to the previous year.
- d) Teams were given eight weeks to meet and agree on action plans based on the iMatter results.
- e) As of the update, 33 out of 62 teams (53%) have completed their action plans and uploaded them into the system. Some teams couldn't meet the submission deadline due to holidays, work commitments, or changing circumstances.
- f) The update shared changes in team sizes and mentioned the organisation's overall score of 7.5 in response to a question about the working experience.
- g) The presentation highlighted areas where scores have increased or remained the same, indicating a supportive working environment.
- h) Areas with a significant drop in scores are identified, and efforts will be made to understand and address the reasons behind these declines.
- New questions related to raising concerns in the workplace were added to the survey, and their results will be addressed in partnership with staff.

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	j) The National Health and Social Care Experience report is expected later in the year.	
	The Committee were assured with the update on the iMatter process.	
8.	STAFF GOVERNANCE STANDARDS	
8.1	Staff Governance Action Plan and Monitoring Report	
	The Committee were provided with a verbal report on the Staff Governance Action Plan from the Associate Director of Workforce which highlighted the following points:	
	 a) Meetings have been held to work on a draft template for the plan, involving representatives from the Partnership Forum and other groups, such as health and safety and equalities colleagues. b) The draft template is being finalised, and there will be another meeting next week to discuss progress. c) The plan is scheduled for sign-off on December 4th, and efforts are being made to ensure it is completed well in advance this year. d) The plan will be presented to the Staff Governance Committee at its next meeting. 	
	The Committee noted the update.	
9.	PAPERS FOR NOTING	
9.1	Partnership Forum Three Key Points	
	The key points were noted.	
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	CLOSING BUSINESS	
10.1	Board Report –3 Key Points	
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Date: 28 11 2023	

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