

NHS 24

**Approved Minutes of the Meeting of the
NHS 24 Staff Governance Committee
held on Thursday 1 August 2024
2024 at 10:00 am
Via Teams**

PRESENT

Dr Martin Cheyne
Mr Alan Webb (Chair)
Ms Carol Gillie
Ms Liz Mallinson
Mr Kenny Woods
Mr John Gebbie
Mr Jim Miller
Mr Andrew Moore
Dr Jacqui Hepburn
Ms Steph Phillips

APOLOGIES

Ms Joanne Edwards
Mr Martin Macgregor

IN ATTENDANCE

Ms Lisa Morton
Ms Chantal Robinson (Minutes)

01. WELCOME, APOLOGIES AND INTRODUCTIONS

The Chair welcomed members present to the 1 August 2024 meeting of the Staff Governance Committee. Noting apologies from Mrs Edwards and Mr Macgregor.

NOTED

02. DECLARATIONS OF INTEREST

The Chair invited members to declare any interests in any of the items being discussed. There were no declarations made.

NOTED

03. MINUTES OF PREVIOUS MEETING OF 9 MAY 2024

The Staff Governance Committee considered the minute of the previous meeting held on Thursday 9 May 2024 [Paper No. Item 1.3]. The Committee were content to approve this as a complete and accurate record.

APPROVED

04. MATTERS ARISING

The Staff Governance Committee considered the paper 'Rolling Actions Log' [Paper No. 1.4] and were content to accept the recommendation that 5 actions were closed. Accordingly, actions 382, 384, 385, 386 and 387 were approved for closure.

There were no other matters arising raised.

NOTED

05. BUSINESS ITEMS

05.1 ATTRITION DEEP DIVE

The Committee considered the paper 'Attrition Deep Dive' [paper no 5.1.1] presented by Ms O'Brien, Talent Acquisition Manager and Ms O'Neill, Workforce Information and Development Manager. The Committee noted progress made so far in relation to reducing attrition and noted the progress which had taken place in relation to the Attrition Improvement Plan. The Workplan would continue to be progressed by an internal, cross-directorate working group and a quarterly update would be provided to the Staff Governance Committee through the workforce quarterly report. Areas of interest highlighted included:

- Attrition continued on a downward trend which in turn meant NHS 24's vacancy factor had decreased.
- Attrition had been embedded within the Cultural Dashboards and the Culture and Wellbeing Action Plans.
- Internal promotions increased.
- Check in responses remained high at a score of 8/10. Scores on Glassdoor had increased to 3.2/5.
- The stability index for Call Handlers had increased meaning more staff were now staying beyond 12 months than previously reported. There had been little movement regarding Clinical Supervisors.
- Top reason for leaving NHS 24 continued to be New Employment elsewhere within NHS Scotland.

The Chair thanked Ms O'Brien and Ms O'Neil for the comprehensive and informative update.

NOTED

05.1.2 HEALTH & SAFETY QUARTERLY REPORT

The Committee considered the paper 'Health & Safety Quarterly Report' [Paper No. 5.1.2] presented by Ms O'Brien, Talent Acquisition Manager noting the H&S Committee last met on 8 July 2024 and the paper provided a brief overview of all key areas. Ms. O'Brien highlighted the H&S Committee action plan advising the following had been completed:

- Local issues identified relate to estates and had been escalated to individual landlords as appropriate.
- Established a short life working group to discuss managing stress.
- Fire Risk Assessments are up to date.
- Reviewed the job description for the SST Manager (H&S Lead) which had been agreed and is now awaiting evaluation.

The Committee Chair thanked Ms O'Brien for the update.

05.1.3 WORKFORCE QUARTERLY REPORT

The Committee considered the paper 'Workforce Quarterly Report' [Paper no 5.1.3] presented by Ms O'Neill, Workforce Information and Development Manager.

Ms O'Neill highlighted the following:

- The KPIs for each of the key strategic workforce objectives demonstrate the successes of the various workforce initiatives developed and embedded.
- Rolling Turnover continues to decline and is now 18.99%. The target by September 2024 was 20% so we have made excellent progress.
- Call handler target continues to be met with the focus now shifting to increase Clinical Supervisor headcount rapidly.
- There is a Clinical Supervisor Recruitment Action Plan progressing with Service Delivery which covers attraction, shortlisting, interviewing, and onboarding.
- Completion rates for H&S e-learning for Q1 were 94.9%.
- 69% through year one of the data and digital transformation plan for workforce with twelve tasks completed and 14 in progress.
- Essential Learning: Overall completion levels of 90% have been met and are at 90.5% exceeding target. This is the first time NHS 24 have met this target and represents a significant milestone.
- Leadership Development Programme: Our Leadership courses for middle and senior leaders 'Leading with Courage' and 'Leading for Impact' respectively have commenced. 7% of middle leaders and 23% of senior leaders have completed their course. Both programmes will continue until Dec 25. Level 1 Evaluation shows 99% of participants state that their programme meets or exceeds their expectations.
- Practice Education: 80.30% of those who commenced the Core Training Programme have fully completed it.
- Appraisal: New appraisal year commenced on 1st April with a requirement at end year discussion to set objectives and PDP for year ahead. 3.5% of the organisation have completed all three of these elements this quarter with target being 5%.
- Culture and Wellbeing: Directorate level Culture and Wellbeing Action Plans commenced on 1st April and progress for Q1 being collated. Progress will be reported through Staff Experience Steering Group when available.

ACTIONS:

The Committee asked that as the 2024/25 appraisal compliance was now being measured on all 3 components; end of year discussion, setting objectives and completing a PDP that the Committee would like to see a breakdown of the individual component compliance in the Q2 Workforce Performance Report. **KO**

NOTED

05.2 CULTURE PROGRAMME UPDATE

The Committee considered the presentation 'Culture Programme Update' [Paper No. 5.2] presented by Ms Macaulay, Culture Change Manager. The Committee noted the extensive commitment made to ensure the programme had been rolled out successfully.

The main areas of focus were:

- Embedding Values.
- Leadership and Management.
- Diversity and Inclusion.

- Attraction and Resourcing.
- Staff Engagement.
- Health and Wellbeing.

To ensure the ongoing improvement in NHS 24's culture is owned and driven at all levels across the organisation, each directorate developed a Culture and Wellbeing Action Plan.

The actions allow for staff contribution and feedback, taking a "top down-bottom up."

approach to cultural improvement. To ensure strategic oversight and accountability of this work, quarterly reporting on progress is directed through the Staff Experience Steering Group.

NOTED

05.3.1 REDUCED WORKING WEEK

The Committee considered the paper 'Reduced Working Week' [paper no 5.3.1] presented by Ms Gordon, Head of People Services. Ms Gordon advised a short life working group (SLWG) had been established (a sub-group of the Area Partnership Forum) during March 2024 to take forward implementation plans for the Board. The SLWG comprised of key Directorates and included Trade Union and Professional Body colleagues, this had been a true example of effective Partnership working to implement crucial changes with short timescales. Communication to staff had also been agreed in Partnership at every stage and had been regular and reactive to any changes.

Mr Woods advised Trade Union and Professional Body colleagues had been extremely supportive of the efforts in relation to RWW and agreed this had been a strong example of Partnership Working.

NOTED

05.3.2 PEOPLE SERVICES OVERVIEW

The Committee considered the paper 'People Services Overview' [Paper No. 5.3.2] presented by Ms Gordon, Head of People Services.

Committee members noted the amount of progress achieved by the team during the previous 12 months which had focused on:

- Attendance Management.
- Employee Relations, Case Management and Mediation.
- Line Manager Training.
- Partnership Working.
- People First Implementation.
- Once for Scotland Policy Implementation and Representation.
- New Discretionary Points Process.
- Reduced Working Week.

The Committee noted the development of an action plan for 24/25 which included:

- Implementation of a centralised Case Management system that will feed into the culture dashboard and ensure managers are informed creating accountability.
- Invest in Chatbot technology to respond to enquiries.
- Establish a suite of Case Management KPI's.
- Roll out the next tranche of Once for Scotland Policy in Partnership.
- Support the Digital and Service Transformation Programmes.
- Leverage digital technology to create profiles to allow improved decision making and support organisational performance.

The Committee Members noted the activity planned which aligned to the strategic objectives and would continue to support the move to a strategic delivery model of HR and supporting an inclusive culture.

NOTED

05.4 SHIFT REVIEW EVALUATION

The Committee considered the paper 'Post Implementation Shift Review Benefits and Realisation' paper [Paper No. 5.4], presented by Mr Miller, Chief Executive on behalf of Ms Edwards, Director of Service Delivery. The paper highlighted the Shift Review programme had been embedded into 'Business as Usual' therefore option scenarios agreed at the outset for Call Handlers, Team Managers and Senior Charge Nurses from the business case had now been implemented. The Service Delivery Senior Management Team would manage ongoing monitoring of the operational benefits, with updates from the shift review evaluation team reporting to Service Delivery SMT.

ACTION

The Committee requested the paper to be revised to include further information in relation to financial costings and BAU status. Updated paper to be brought back to November Committee. **JE**

NOTED

05.5 STAFF EXPERIENCE FRAMEWORK

The Committee considered the paper 'Staff Experience Feedback' [Paper No. 5.5] presented by Ms Morton. The paper provided the activity within the Staff Experience Framework designed to support overall improvements in staff experience the key highlights being:

- Launch of the new *Meet Our Directors* MS Teams series.
- iMatter campaign.
- Patient Safety Leadership Session (PSLS).
- Digital Transformation Programme.
- Staff Experience Groups.
- Replacement of the Workforce Management Tool (WFM).

The Committee also noted further work underway:

- Spotlight Awards.
- Directors Award.
- Staff Experience Leads Workshops.

The Committee thanked Ms Morton for the comprehensive update.

NOTED

05.6 AREA PARTNERSHIP FORUM UPDATE

The Committee considered the paper 'Area Partnership Forum Update' [Paper no 5.6] presented by Mr Woods.

The Committee received an update from Mr Woods, Employee Director, on the work of the Area Partnership Forum, and highlighted several topics discussed at the recent APP meetings.

Area Partnership Forum Self-Assessment

The Committee noted an internal audit of governance had been undertaken during January 2023 and one of the low-rated findings had been:

- Finding 3 – Self-effectiveness reviews are not being conducted annually for all governance committees.

As such, it had been agreed going forward that an annual self-assessment of the Area Partnership Forum would take place. A questionnaire had been issued, and an action plan created based on the results of the questionnaire. It was noted that there had been an increase in the number of responses and improvements and across all areas.

The Committee members noted the proposed Action Plan and associated timescales for completion.

Area Partnership Workplan

The Committee members noted the refreshed APF Workplan to support the development and effectiveness of the Committee.

Mr Webb thanked Mr Woods for the update and invited comments and questions from members.

NOTED

05.7 STAFF GOVERNANCE RISK REGISTER

The Committee considered the paper 'Staff Governance Risk Register' [Paper No. 5.7] presented by Mr Gebbie. The paper provided an overview of all Staff Governance risks which are presented on an annual basis. Mr Gebbie advised there were 14 risks in total, 4 risks had a reduced score and 1 risk had changed Committee reporting.

The Committee noted the updated Risk Register.

NOTED

05.8 HEALTHCARE STAFFING PROGRAMME

The Committee considered the paper 'Healthcare Staffing Programme' [Paper No. 5.8] presented by Mr Moore. The paper provided an update in relation to NHS 24 preparation to meet the legislative requirements of the Health and Care (Staffing) (Scotland) Act 2019.

Mr Moore confirmed NHS 24 had been working over the last 2 years towards full compliance in relation to the Programme, and advised there were a couple of minor improvements, which were in hand, were still to take place. The first Report is due prior to April 2025.

The Committee thanked Mr Moore for providing the required assurance.

NOTED

05.9 CLINICAL WORKFORCE STAFFING LEVELS

The Committee considered the paper 'Clinical Workforce Staffing Levels' [Paper No. 5.9] presented by Mr Moore. Mr Moore advised the Clinical Governance Committee had requested the Internal Audit Report 23/24 be presented to Staff Governance Committee for information.

NOTED

05.10 PRACTICE EDUCATION EVALUATION REPORT

The Committee considered the paper 'Practice Education Evaluation Report' [Paper No. 5.10] presented by Mr Moore. Mr Moore advised evaluations are undertaken following each core induction group session. The results are viewed, and any resulting actions are taken forward by the Practice Education and Development Team. The Clinical Education Governance Group approve amendments and changes to training materials.

The Committee noted the update.

NOTED

05.11 WHISTLEBLOWING STANDARDS UPDATE

The Committee considered the paper 'Whistleblowing Standards Update' [Paper No 5.11] presented by Mr Moore, Director of Nursing & Care. Committee members noted the work which had been in train to ensure ongoing compliance with the requirements of the National Whistleblowing Standards, and also the activity which had taken place during the reporting period.

NOTED

06. FOR NOTING/INFORMATION

06.1 COMMITTEE REVIEW OF SELF EFFECTIVENESS

The Committee considered the paper 'Annual Committee Self Effectiveness Survey Results' [Paper no. 6.1] presented by Dr Hepburn, Deputy Chief Executive and Director of Workforce. Committee members noted most of the questions had received a 'Strongly Agree' response and there were improvements across all areas.

ACTIONS:

An updated Action Plan would be developed and presented to the Committee at the November meeting.
JH

NOTED

06.2 STAFF GOVERNANCE COMMITTEE WORKPLAN 2024-25

The Committee considered the paper 'Staff Governance Committee Workplan 2024-25' [Paper no 6.2] presented by Mr Webb.

The Committee noted the updated Workplan for 2024/25.

APPROVED

06.3 DIRECTORS LETTERS

The Committee considered the paper 'Directors Letters' [Paper no 6.3] presented by Ms. Gordon.

The Committee noted the recent correspondence received from Scottish Government in relation to relevant PCS/DL Circulars.

NOTED

06.4 ANY OTHER BUSINESS

Dr Hepburn informed the Committee Members that notification had been received Scottish Government with Scottish Workforce and Staff Governance Committee (SWAG) approval, to advise a decision had been made to pause the Staff Governance Monitoring exercise for 2023-2024.

There being no further business the meeting closed.

07. DATE OF NEXT SCHEDULED MEETING

10:00am, Monday 4 November 2024

The meeting concluded at 12:35pm.