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NHSGGC SGC(M)24/04

Minutes: 56-75

NHS GREATER GLASGOW AND CLYDE

**Minutes of a Meeting of the
NHS Greater Glasgow and Clyde
Staff Governance Committee**

**held in JB Russell House Boardroom and via Microsoft Teams, on
Tuesday 19 November 2024 at 9.30am**

PRESENT

K Miles (Co-Chair in the Chair)

A Cameron-Burns (Co-Chair)

M Ashraf

B Auld

Cllr C McDiarmid

Cllr M McGinty

Cllr R Moran

P Ryan

Dr L Thomson KC (Board Chair)

J Grant (Chief Executive)

IN ATTENDANCE

M Allen	Senior Administrator
F Carmichael	Staff Side Lead, Acute Partnership Forum
B Culshaw	Chief Officer, West Dunbartonshire HSCP
Dr S Davidson	Medical Director
K Donald	Corporate Services Manager – Governance
G Gall	Human Resources Manager, West Dunbartonshire HSCP
D Hudson	Staff Experience Advisor
K Heenan	Chief Risk Officer
W Hunter	Deputy Director of Facilities
H Jackson	Head of Health and Care (Staffing) (Scotland) Act Programme
G Johnston	Non-Executive Director, NHS Forth Valley
T Keenan	Assistant Chief Officer, Glasgow City HSCP
M MacDonald	Head of Learning and Education
A MacPherson	Director of Human Resources and Organisational Development
A McCready	Staff Side Lead, Non City HSCP Staff Partnership Forum and East Renfrewshire HSCP Staff Partnership Forum
D McCrone	Staff Side Lead, BAOT
Dr C McKay	Deputy Medical Director
S Munce	Head of Workforce Planning and Resources

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Dr M Pay	Workforce Strategy Manager
SJ Porch	Human Resources Manager – Corporate Services
N Smith	Depute Director of Human Resources
J Somerville	Head of Occupational Health and Safety
L Spence	Head of Staff Experience
Prof A Wallace	Executive Nursing Director
F Warnock	Health and Safety Manager

56.	WELCOME AND APOLOGIES	ACTION BY
	K Miles welcomed all to the meeting, and introduced G Johnston, Non-Executive Director at NHS Forth Valley who is observing the meeting. Apologies were noted for Amanda Walton, Craig Rennie, Dr Una Graham, Elaine Quail and Margaret McCarthy.	
57.	DECLARATIONS OF INTEREST	ACTION BY
	There were no formal declarations of interest intimated.	
58.	MINUTES	ACTION BY
	<p>The Minutes of the Committee meeting held on 13 August 2024 (SGC(M)24/03) were approved as a correct record. The minutes were approved following a motion from P Ryan, which was seconded by A Cameron-Burns.</p> <p><u>APPROVED</u></p>	
59.	MATTERS ARISING	ACTION BY
	<u>Rolling Action List</u>	
	<p>K Miles referred to the Rolling Action List (Paper 24/33) and advised that there were two items, both marked for closure.</p> <p>The Committee noted the updated Rolling Action List and agreed the items proposed for closure.</p> <p><u>APPROVED</u></p>	

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60.	URGENT ITEMS OF BUSINESS There were no urgent items of business. OTHER BUSINESS Dr Thomson raised the closure of the night café at the Queen Elizabeth University Hospital and concerns raised around staff engagement around decisions. A Cameron-Burns highlighted that the decision had been made following partnership discussion at the Estates and Facilities Partnership Forum, Acute Partnership Forum, Joint Operating Committee and full Area Partnership Forum. W Hunter advised that the final decision was made by the Corporate Management Team, which includes the Employee Director, considering the retail recovery position and other available facilities, including kitchens and microwaves. During discussion, it was recognised that whilst the BMA are members of the Acute and Area Partnership Forum meetings, they do not always attend.	
61.	ASSURANCE PRESENTATION <u>Human Resources and Organisational Development Directorate</u> A MacPherson, Director of Human Resources and Organisational Development, supported virtually by SJ Porch, Human Resources Manager, gave a presentation on Staff Governance activity within the Human Resources and Organisational Development Directorate. A MacPherson provided an overview of key workforce metrics, including sickness absence, Statutory and Mandatory training, KSF compliance and iMatter participation, outlining the actions being undertaken within the Directorate to meet the agreed targets. The presentation included evidence of compliance with the five strands of the Staff Governance Standard. A MacPherson highlighted key achievements, including the Staff Bank winning the NHSGGC Better Value Award 2024 for saving the Board £1.5 million and leading, in partnership, the successful	

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implementation of phase one of the Reduced Working Week for over 99% of Agenda for Change staff.

A MacPherson advised the Staff Governance Committee that there are some continuous improvement opportunities for the Directorate over the next 18 months. These include the West Glasgow ACH relocation, building on the strong foundation of hybrid working, addressing skills gaps through multi-skilling team to enable cross departmental working and capitalising on recruitment redesign efficiencies.

A MacPherson showcased achievement of Investors in People for NHSGGC in 2024, further to achieving across all five clusters as the Directorate's case study. Human Resources, as part of the Corporate Cluster ensured self-reflection, reintroduced the One HR Team ethos, energised communications across the team and focussed on celebrating success internally.

During discussion, it was recognised that areas of good practice such as hybrid working, are shared as appropriate across the organisation.

In response to a question from R Moran about Estates and Facilitates staff having the same hybrid working opportunities as colleagues in other areas of the Board, A MacPherson advised that for practical reasons, this was often not possible, but other flexible working opportunities were available and used.

During a discussion on reducing sickness absence, it was agreed the Absence Partnership Working Group will explore whether hybrid working could support increased attendance in other areas, for example where an individual might be well enough to work from home, but not travel into work.

The Committee noted the positive roll-out of optional rolling four day working weeks within the Health and Safety team, with positive feedback from staff and increased productivity.

West Dunbartonshire Health and Social Care Partnership

B Culshaw, Chief Officer, supported by G Gall, Human Resources Manager and D McCrone, Staff Side Lead, BAOT, gave a presentation on Staff Governance activity within the HSCP. This

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	<p>provided an overview of key workforce metrics, including sickness absence, Statutory and Mandatory training, KSF compliance and iMatter participation, outlining the actions being undertaken within the Directorate to meet the agreed targets. The presentation included evidence of compliance with the five strands of the Staff Governance Standard.</p> <p>B Culshaw highlighted key achievements, including the embedding of a Succession, Career and Development Planning Framework and all staff having access to communication channels which offer the opportunity to give and receive feedback on organisational issues.</p> <p>B Culshaw advised the Staff Governance Committee that there are some continuous improvement opportunities for the HSCP over the next 18 months. These include further increasing TURAS appraisal compliance, absence management, and consideration of the impact of the planned reduction in Agenda for Change workforce full time working week from 37.5 hours to 36 hours per week.</p> <p>B Culshaw showcased Becoming a Trauma Informed Organisation as the HSCP's case study, highlighting how the supporting Strategy adds focus to Staff Wellbeing, systems and processes, community involvement and leadership.</p> <p>K Miles thanked all involved in the delivery of the assurance presentations, noting that the Committee had been fully assured, including all data in the accompanying report (Paper 24/34).</p> <p><u>ASSURANCE NOTED</u></p>	
<p>62.</p>	<p>SAFETY, HEALTH AND WELLBEING</p> <p>F Warnock provided a Safety, Health and Wellbeing update (Paper 24/35), highlighting the range of Safety, Health and Wellbeing activities being developed and deployed:</p> <p>Ligature Risk Reduction – Further activities have been completed in the Suicide Reduction Strategic Plan, with the total increasing to 27 of 33. One activity has now moved from Planned into 'In Progress'. All activities will be implemented within the agreed timescales.</p>	

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Enforcement Activity (Leverndale) – Following a HSE investigation into the suicide of one of our patients in November 2023, the HSE have confirmed that they are satisfied that the material breaches identified in the Notice of Contravention have been complied with.

Enforcement Activity (Royal Alexandra Hospital) – Following a patient suicide in June 2024, NHSGGC received an Improvement Notice from the HSE. The Head of Health and Safety is now working closely with the Clyde Sector Director and the Senior Management Team to review the action plan and work towards meeting the elements of the schedule of the notice.

HSE Training Compliance – The Chief Executive led a renewed focus at the Corporate Management Team meeting in August 2024 with target dates set for Sharps, Falls and Moving and Handling. There is currently varied compliance, with ways to increase compliance discussed at each respective performance review meeting and actions recorded in activity plans.

Overdue Health and Safety Datix Incidents – this continues to be an area of focus for improvement and relevant owners have been asked for this to be addressed as a matter of urgency.

Safety Culture Framework – A review of the Health and Safety Policy continues and is being reviewed with the Health and Safety Representatives. It is expected to be considered by the Corporate Management Team in March 2025.

During discussion, the following was agreed or noted:

- That the HSE are content with the action taken to address the Notice of Contravention at Leverndale and Improvement notice at the Royal Alexandra Hospital, but that the investigations remain open and there remains the possibility of Fatal Accident Inquiries. An update will be provided with reference to any cases proceeding to Inquiries and the governance and assurance path clarified.
- Any learning arising from incidents at Leverndale and the Royal Alexandra Hospital is shared, as appropriate.

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	<ul style="list-style-type: none"> • That lower compliance in sharps, moving and handling and falls training can play a part in increased Datix incidents, but that accidents could still occur with 100% compliance. <p>K Miles thanked F Warnock for the update, noting the Committee had been fully assured.</p> <p><u>ASSURANCE NOTED</u></p>	
<p>63.</p>	<p>NHSSCOTLAND STAFF GOVERNANCE STANDARD 2023-2024: ASSURANCE OF COMPLIANCE</p> <p>A MacPherson presented a paper (24/36), setting out the proposed response by NHSGGC for the annual Staff Governance report. The report highlighted that the Scottish Workforce & Staff Governance (SWAG) Committee, as guardians of the Staff Governance Standard, have requested that this year, rather than a full annual monitoring return, that Boards provide assurance that they are committed to upholding the Staff Governance Standard to support their workforces and effective partnership working. SWAG also requested Board data on bullying and harassment, whistleblowing and retire and returns.</p> <p>Members of the Staff Governance Committee considered and approved the draft response, which will be submitted by 6 December 2024.</p> <p><u>APPROVED</u></p>	
<p>64.</p>	<p>WORKFORCE STRATEGY 2021-25 PROGRESS & WIDENING ACCESS TO EMPLOYMENT UPDATE</p> <p>Dr Pay discussed the Workforce Strategy 2021-25 (Paper 24/37), advising the Committee that the Strategy is in its concluding phase (April 2024 - March 2025), with the corresponding Phase Four Action Plan approved by the Corporate Management Team in June 2024.</p> <p>Dr Pay advised that the Phase Four Action Plan contains 32 actions, which will further develop 18 strategic activities. Seven of the actions in Phase Four have particular priority due to their links with outstanding commitments within the Workforce Strategy 2021-2025, or legislative requirements.</p>	

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Dr Pay confirmed that there are no actions identified as not being achievable and that work is underway on development of the Workforce Strategy 2025-30. The Committee supported an updated due date for action 22 (implementing principles of protected learning time) to reflect timescales for supporting national work to be complete.

The Committee noted that the NHSGGC Workforce Plan 2022-25 is due to come to an end in March 2025, with a requirement for a new plan to be developed for 2025 to 2028. Formal engagement and commissioning, in partnership, of the 2025-28 plan commenced in May 2024, informed by Scottish Government guidance published in August 2024.

The Committee noted that the NHSGGC Workforce Plan 2025-28 will then be taken through the appropriate governance channels, including Area Partnership Forum, Corporate Management Team and Staff Governance Committee, commencing in January 2025 before being submitted to the Scottish Government by 31 May 2025 and finally published on the NHSGGC website on 1 October 2025.

Widening Access to Employment Update

M MacDonald provided an update on Widening Access to Employment, highlighting the following:

Apprenticeships:

- Apprenticeship programmes continue to be embedded at service level in local teams, with 42 Modern Apprentices graduating in September 2024.
- The Apprentice Ambassador was introduced this year to recognise our colleagues who promote and champion apprentice activity using opportunities internal and external to NHSGGC.
- The planning for apprentice delivery continues to align closely to workforce planning forecasts for demand and demographics.

HCSW Academy for unemployed people:

- NHSGGC pre-employment programmes have traditionally been linked to clinical Healthcare Support Worker roles in nursing. Over the last year there have been changes observed in this role such as review of Band 2 and Band 3

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roles and the development of a career and education pathway supporting the professional career choice for the unregistered nursing role. Two programmes have been completed in 2024, with a review of the programme format, complementing the developing pathway and entry routes into the HCSW role.

- Project Search continues to support young people with learning disabilities and autism on an annual basis to access employment and develop their knowledge and skills through the partnership in NHSGGC. A new intake, with 12 participants, commenced in August 2024.

Promotion of careers within NHSGGC:

- In November 2024, NHSGGC will again participate in key STEM events for senior phase pupils, facilitated through our Developing Young Workforce partners in Glasgow and the West of Scotland.
- NHSGGC's Get Ready programmes are aimed at senior phase pupils who have demonstrated a commitment to undertake study for a specific career – nursing, physiotherapy, podiatry and medicine. NHSGGC will continue to develop the range of offerings in the Get Ready format aligned to the aspiration of our Workforce Plan.
- NHSGGC will participate in Scotland's Careers Week run by in November 2024, with scheduled online events developing awareness of NHSGGC careers with partners, young people and our local communities.
- The next focus month of careers promotion for young people will be March 2025, to coincide with Scottish Apprenticeship Week.

Widening Access to Employment Video

M MacDonald introduced a video, which focussed on how, as an Anchor organisation, NHSGGC creates opportunities for people, unlocks potential, fosters innovation and supports patient care.

K Miles thanked Dr Pay and M MacDonald for the update, noting that the Committee had been fully assured.

ASSURANCE NOTED

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65. STAFF HEALTH STRATEGY

J Somerville discussed a report (24/38) providing the Staff Governance Committee with an update on the Board's Staff Health Strategy and supporting Action Plan, noting that the Strategy covers a two-year period to enable alignment with the new updated Workforce Strategy, which is due to be in place from 2025.

J Somerville highlighted that actions within the Strategy focus on recovery and include strengthening support for mental health and wellbeing, promoting NHSGGC as a fair and healthy workplace, mitigating inequalities in health and support for managing attendance.

J Somerville advised that 10 of the 28 actions on the Action Plan have been delivered. A further 14 are on track for delivery within the timescales indicated. The remaining four actions have not been delivered within the original timescales, but work is in progress to ensure full delivery by the end of the Staff Health Strategy 2023-2025 on 31 March 2025.

During discussion, the following was agreed or noted:

- In areas where staff absence is significant, targeted stress and anxiety management training is being delivered and supported by the stress health assessment tool.
- There are plans to increase the number of Confidential Contacts with Whistleblowing and Bullying & Harassment cohorts being trained to support both areas moving forward.

Committee members noted progress towards delivery of the Staff Health Strategy and their support for the ongoing delivery of the remaining outstanding actions.

K Miles thanked J Somerville for the update, noting that the Committee had been fully assured.

ASSURANCE NOTED

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66.	<p>HEALTH AND CARE STAFFING SCOTLAND ACT PROGRAMME</p> <p>Prof Wallace introduced H Jackson, who provided members of the Staff Governance Committee with an update on the Health and Care (Staffing) (Scotland) Act (HCSSA) programme (Paper 24/39).</p> <p>H Jackson highlighted the first quarterly assurance report on compliance with the HCSSA, showing a "Reasonable Assurance" level for April–June 2024, with a generally sound system of governance, risk management and controls in place.</p> <p>H Jackson advised that progress made included implementing a Real Time Staffing tool and a Standard Operating Procedure, with further improvements in service planning. Some compliance issues remain, and specific working groups are addressing these to achieve "Substantial Assurance" by April 2025.</p> <p>H Jackson gave a short presentation, which included, programme overview, current status on implementation and action plan, reporting requirements, staff communication and engagement and next steps. During the presentation, Committee members noted that the full annual report required Staff Governance Committee and Board approval in February and April 2025 respectively.</p> <p>During discussion the following was agreed or noted:</p> <ul style="list-style-type: none">• There is a potential challenge in that contractors are not obligated to report on the Act, whereas Health Boards are, creating a need for assurance that contractors are acting appropriately and adhering to the Act's guiding principles. This could potentially lead to future changes in policy or legislation.• That a full Board awareness session on implementation of the Act will be beneficial in advance of considering the full annual report in April 2025.• 500 members of staff had completed the knowledge test on HCSSA, with an average 80% score, providing assurance. It was noted that, following analysis of the incorrect responses, this raised no concerns.	
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	<ul style="list-style-type: none">• A significant amount of partnership working work has been and continues to be invested in delivering the programme, with a huge amount of progress to date. <p>The Committee noted the current assurance level, progress made, and ongoing improvement actions.</p> <p>K Miles thanked H Jackson for the update, noting that the Committee had been fully assured.</p> <p><u>ASSURANCE NOTED</u></p>	
67.	SEXUAL HARASSMENT PROGRAMME UPDATE L Spence provided an update on NHSGGC's Sexual Harassment: Cut It Out programme and our Equally Safe at Work accreditation (Paper 24/40), highlighting the outputs from the Test of Change and an update on progress with the organisation wide roll out. L Spence advised that the full programme was launched across NHSGGC in early October 2024, with key elements including: <ul style="list-style-type: none">• Distribution of posters and leaflets.• Launch of our new sexual harassment online webinar sessions for managers.• Continued promotion of our sexual harassment resources for staff, including a new Sexual Harassment Learn-Pro module.• Across 2024, almost 1200 staff have signed up for our Active Bystander training, delivered by the nationally recognised Active Bystander Training Company. To allow us to scale this up, we have developed and launched a new Speak Up Learn-Pro module.• Dedicated training for our Human Resources Team on dealing with sexual harassment and wider issues of gender inequality.• Recruitment is currently underway for a dedicated officer to deliver training and events to promote both programmes to targeted groups. L Spence highlighted that key milestones for Equally Safe at Work that integrate well with the Cut It Out programme include:	

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	<ul style="list-style-type: none"> • Publishing a statement of support from our Chief Executive; • Conducting a survey of all staff related to gender equality; • Ensuring high levels of engagement from senior leaders; • Conducting focus groups with lower paid women in our workforce; • Conducting a segmented pay gap analysis; • Reviewing a policy or service areas with a gender lens. <p>During discussion the following was agreed or noted:</p> <ul style="list-style-type: none"> • It can be challenging when an individual opts not to come forward, but where there is a repeated pattern of behaviour or witness statements, the organisation can seek to take action. Additionally, changes to whistleblowing legislation will mean that sexual harassment can be raised through this additional route. • Active Bystander training is innovative and award-winning training which gives staff the skills to challenge unacceptable behaviours, including those which may have become normalised over time. • That as an Anchor organisation, NHSGGC has the ability to raise awareness of sexual harassment and the Board's non tolerance of it, through all incoming recruitment routes. • That full cultural change may take time, but the Board are fully supportive and it is important to call out behaviours, demonstrate consequences and what support is available. <p>The Committee noted the progress made with the Cut It Out and Equally Safe at Work programmes.</p> <p>The Committee thanked L Spence and the broader team for making good progress, noting that the Committee had been fully assured.</p> <p><u>ASSURANCE NOTED</u></p>	
<p>68.</p>	<p>BOARD ANTI-RACISM PLAN</p> <p>L Spence presented the proposed Anti-Racism Plan (Paper 24/41), in response to the statement from the Cabinet Secretary setting out the expectation that all Boards will develop these,</p>	

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	<p>using Scottish Government guidance as a base. The plan covers both patient facing services and our workforce.</p> <p>LS advised that NHSGGC has a range of anti-racism workstreams in place, developed as part of the Fairer Glasgow, Equality & Diversity Scheme. The workforce elements of this are led and managed in partnership through the Area Partnership Forum and working with the staff led equality forums, through the Workforce Equality Group.</p> <p>LS highlighted that the Scottish Government guidance included a framework, which has been used to align NHSGGC workstreams with the national approach, set out the NHSGGC plan for 2024/25 and identify areas for further development.</p> <p>LS advised that the anti-racism plan is a significant milestone in NHSGGC’s journey to remove discrimination, promote equality of opportunity and foster good relations, noting that it will be considered by the Board, for approval and adoption, on 17 December 2024.</p> <p>The Committee were in particular asked to comment on the vision as we are seeking Board Members’ commitment to the plan.</p> <p>It was noted that as part of the final proposal, a communications plan will be agreed.</p> <p>The Committee noted its support for the plan and were asked to send any comments to L Spence in advance of the final plan going to the Board for approval. K Miles thanked L Spence for presenting it to the Committee.</p> <p><u>ASSURANCE NOTED.</u></p>	
69.	MEDICAL REVALIDATION Dr Davidson introduced Dr McKay, who discussed a report (Paper 24/42), summarising the progress made in relation to appraisal and revalidation objectives for 2024/25. Dr McKay highlighted the following:	

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Objective: The appraisal team will have a focus on ensuring appraisals are completed within their quarterly phase and build on the achievements of reducing deferral rates. **Update:** The revalidation team sent doctors an extra reminder at the start of 2024/25 and continues to send reminders at key points to ensure timely appraisals and submissions. The impact of the additional reminder will be evaluated at year-end.

Objective: Continue to promote and encourage established consultants to undertake appraisal and that this is reflected in agreed job plans. Continue to recruit new appraisers, as appraisers retire and/or demit from the role and explore cross-sector appraisal. **Update:** Secondary Care has 267 appraisers handling appraisals for 2,270 career-grade medical staff, with each appraiser allocated 0.5 SPA time for every 10 appraisals. Clinical Fellows, totalling 356, are appraised by their Educational Supervisors. Current completion rates for 2024/25 appraisals are at 31%, in line with 2019 rates. The revalidation team continues to recruit new appraisers, promote appraisal in job planning, and encourage refresher training.

Objective: Confirm with sector leads that all Clinical Fellows are paired with an appraiser on appointment and have sufficient information, training and support to complete their appraisal within the given timeframe. This will be a joint process from the Appraisal Team and the Director of Medical Education. **Update:** In November 2023, a new system required appointing managers to name a Clinical Fellow's Educational Supervisor on recruitment forms to ensure proper appraisal from the start. However, due to inconsistent completion, the Chiefs of Medicine agreed to make this a mandatory field on the Vacancy Request Form instead. The effectiveness of this change will be evaluated at year-end.

Objective: Continue to promote the electronic system for gathering patient feedback as an alternative to the paper based system to support. **Update:** Promotion of the electronic system for gathering feedback is ongoing but compared to paper based questionnaire uptake remains low. Since 1 April 2024 83% of requests have been for paper based questionnaires compared to 16% for electronic questionnaires over the same period.

It was agreed there may be an opportunity to highlight programmes such as Cut It Out during the annual appraisal and

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	<p>that Dr Davidson will liaise with key stakeholders on how best to take this forward.</p> <p>It was also noted that following an offline discussion between Dr Davidson and P Ryan, that Primary Care data will be included in future reports.</p> <p>The Committee noted that NHSGGC has a robust appraisal and revalidation process and that local guidance is in accordance with that provided nationally. Appraisal and revalidation rates are in-line with other Health Boards in Scotland.</p> <p>K Miles thanked Dr Davidson and Dr McKay for the update.</p> <p><u>ASSURANCE NOTED</u></p>	
70.	<p>STAFF GOVERNANCE PERFORMANCE REPORT</p> <p>S Munce discussed the Staff Governance Performance Management Report (Paper 24/43), providing an update on workforce data and performance as at 30 September 2024. The following positive trends were highlighted:</p> <ul style="list-style-type: none">• Nursing and Midwifery job family establishment position has remained consistent over the last quarter whilst facing the usual winter pressures. There have been 646 adult nurse recruits in the Newly Qualified Practitioners (NQP) 2024 campaign and the current Internationally Educated Nurses recruitment campaign has seen offers of employment made to 101 successful candidates, 58 of which have commenced induction programmes.• Staff turnover has continued to reduce as forecast – the 2023 turnover was 9.7%, while rolling 12 months to 30 June 2024 is 8.4%.• Staff availability has improved over the quarter with sickness absence reducing from 7.5% to 6.9%. Whilst sickness absence remains above both national and local targets, this continues to be an area of focus for local teams, with a range of measures in place supported by Human Resources.• Compliance rates for all Statutory Mandatory training courses have improved. At Board level, eight out of nine courses are now at 90% or above.	

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	<ul style="list-style-type: none">• Personal Development Planning and Review completion rate is at 56%. <p>The Committee noted that to date, 70 applications had been received for Band 5 Nurse banding review, following significant communications and engagement.</p> <p>K Miles thanked S Munce for the update, noting that the Committee had been fully assured.</p> <p><u>ASSURANCE NOTED</u></p>	
71.	INTERNAL AUDIT UPDATE A MacPherson discussed a report (Paper 24/44), providing an update on the 2023/24 Audit relating to succession planning, which reported in September 2024 and was discussed at the Board's Audit and Risk Committee on 17 September 2024. A MacPherson highlighted that following a review and update of the Board's Succession Planning process in 2022, the auditors carried out a review between June and August 2024 to check for the effectiveness of the new process. A MacPherson advised that six of the seven recommendations had been implemented, with one delayed until December 2024, this being aligning Senior Organisational Development Advisors to Directorates and HSCPs and meeting with each individual on succession lists. The Committee noted the recommendations identified in the audit and the progress against these. K Miles thanked A MacPherson for the update and the Committee noted the progress made through the Action Plan. <u>ASSURANCE NOTED</u>	
72.	HUMAN RESOURCES RISK REGISTER K Heenan discussed the Human Resources Risk Register (Paper 24/45), highlighting that the risks were reviewed by the Human Resources Senior Management Team in October 2024 and the	

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	<p>Corporate Management Team on 7 September 2024, with the “Managing Staff Absence” risk escalated from the Human Resources and Organisational Development Directorate Risk Register to Corporate Level.</p> <p>K Heenan highlighted that in addition to the monthly review of Corporate Risks, this quarter, four detailed reviews have been completed, with these including a full review of the risk including causes, controls, actions and overall risk scores.</p> <p>Following a discussion, the Committee agreed that the updated risks are clearly described, appropriate and the proposed mitigating actions will address the risks. The Committee was therefore content to approve the updated corporate risks, including the three risks with increased scores.</p> <p>K Miles thanked K Heenan for the update, with the Committee content to approve the amendments to the Risk Register.</p> <p><u>APPROVED</u></p>	
73.	<p>AREA PARTNERSHIP FORUM</p> <p>A Cameron-Burns discussed the Area Partnership Forum update (Paper 24/46), noting that all relevant information is contained within the report and that Partnership process training is being explored to address some issues. The Committee noted the update.</p> <p><u>ASSURANCE NOTED</u></p>	
74.	<p>CLOSING REMARKS AND KEY MESSAGES TO THE BOARD</p> <p>K Miles thanked all presenters, contributors to discussions during the meeting and those involved in preparing papers.</p> <p>K Miles noted that this meeting will be the final Staff Governance Committee meeting to take place with J Grant as Chief Executive. On behalf of the Committee, K Miles extended thanks and her appreciation to J Grant for her contribution to and support of the Committee during her time in post, wishing her well for her upcoming retirement.</p>	

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	Key messages to the Board will be included in the Co-Chairs' report to the 17 December 2024 Board meeting and include the Assurance Presentations, Workforce Strategy Action Plan update, HCSSA update, Safety, Health and Wellbeing update, Staff Health Strategy update, Medical Revalidation update, Audit update on Succession Planning and approval of the Scottish Government assurance response.		
75.	DATE & TIME OF NEXT MEETING The next meeting of the Staff Governance Committee will be held on Tuesday 18 February 2025 at 09.30am.		
	The meeting ended at 1210hrs.		