

NHS Lothian

Staff Governance Committee

Minutes of the meeting of the Staff Governance Committee held at 9.30 on Wednesday 1 June 2022 via Microsoft Teams.

Present:

Mr W. McQueen, Non-Executive Board Member (Chair);
Mrs J. Butler, Director of Human Resources and Organisational Development;
Miss T. Gillies, Medical Director
Ms T Miller, Director Employee Relations;
Ms C. Hirst, Non-Executive Board Member
Ms K. Kasper, Non-Executive Board Member;
Ms N. Akta, Non-Executive Board Member
Ms T Miller, Director Employee Relations;
Ms J. Clark, Partnership Representative;

In Attendance:

Mr C. Campbell, Chief Executive
Mr J. Crombie, Deputy Chief Executive
Ms R. Kelly, Deputy Director of Human Resources;
Ms A. Langsley, Associate Director of OD & Learning;
Ms H. Monaghan, Consultant, Laboratory Medicine (Item 5.3);
Ms L. Barclay, Business Manager Human Resources;
Ms A. MacDonald, Specialist Education Lead Workforce Development (Item 2)
Ms I. Penman, Clinical Service Manager, Outpatients;
Ms H. Tait, Clinical Service Manager, Oncology;
Ms K. Imrie, Programme Manager, Ophthalmology;
Ms J. Bladen, Clinical Services Manager, Outpatients;
Ms F. Ireland, Deputy Director, Nursing
Mr N. McAlister, Head of Workforce Planning, Human Resources (Item 11.4)
and Mr G. Ormerod, Committee Administrator (minutes).

Apologies:

Mrs J. Campbell; Ms G. McAuley; Ms H. Fitzgerald

Chair's Welcome and Introductions

Members were reminded that they should declare any financial or non-financial interests they had in the items of business for consideration, identifying the relevant agenda item and the nature of their interest. No interests were declared.

1. Declaration of Conflicts of Interest

- 1.1 Mr McQueen welcomed everyone to the Committee and advised guests were shadowing the Committee today from the Talent Management and Succession Planning Programme.
- 1.2 Mr McQueen highlighted there are no reflections or feedback from the Board on the agenda today, but this will be covered at the end of the meeting.

2. Presentation - Employability and Early Careers

- 2.1 Ms MacDonald provided a brief presentation on the employability and early years careers work that was currently ongoing in NHS Lothian.
- 2.2 It was highlighted that the population from 2018 has seen an increase of 25% for those aged 75 and over but only a 1% increase in those aged 16-24. Unemployment is falling after the pandemic and Scotland currently has 1100 apprenticeships available for young people. There is a continuous need for employees to feel a sense of connectivity with their jobs and for an equal priority and a renewed sense of purpose and value. Ms MacDonald highlighted that 40% of employees are likely to leave their job if some of these qualities are not provided within the working experience.
- 2.3 Ms MacDonald advised that it is critical that we continue to invest in retaining staff while also developing a framework for pillars and embed these into the programme of work to attract, train and nurture employees. A lot of work has been ongoing with wellbeing and preparing for next steps; choices for learning and developing opportunities to give people enhanced meaning and purpose in their role and to improve wellbeing.
- 2.4 The new apprenticeship pathway is one example of this in Pharmacy with Band 2 roles available and linked to other routes that can lead to a Band 4 Pharmacy Technician role. We are supporting Band 4 Technicians and supporting local education for opportunities for staff with skill gaps so they can compete, progress and learn to aid progression across the organisation.
- 2.5 Ms MacDonald confirmed that employability programmes are restarting with a 10 month project with work experience and job training taking place at RIE and RHYCP sites in partnership with NHS Lothian, Edinburgh City Council and the new Virgin Media Hotel. There will be a number of internships available for new graduates and posts available within HR, West Lothian Health and Social Care Partnership (HSCP). There are opportunities with 6 month work experience for 16-24 year olds and positions available in admin, play workers and activity co-ordinators. The Youth Network will also contribute to develop early leadership and support mentoring and leadership.
- 2.6 NHS Lothian will look to develop a work experience model and develop a project group with revised opportunities for placements and workshops. The curriculum will also be included within schools and we are launching a webinar for future nurse-led work with Grampian with teaching resources in collaboration with NHS Lothian and NHS Scotland.
- 2.7 Mr McQueen thanked Ms MacDonald for an excellent presentation and highlighted that it's great to see this work progressing. Mr McQueen asked what do you do to keep close to new employees in the first 6-12 months? Ms MacDonald advised we do this through workforce development and work with mentors and buddies to support people in their roles. Behaviour science tools are being used throughout apprenticeships that can sense check engagement levels before any issues start to occur and this has been successful.
- 2.8 Mr McQueen asked if the 20 care experience positions have been filled or is there more we can do for care youngsters?

- 2.9 Ms MacDonald confirmed that we are currently out to advertise this programme of work and that this work is embedded in the Corporate Parenting Board. This is a good example of collaborative working with other organisations that we are learning from and who can feed into the model to provide learning and support for young people and wider projects to make this a success.
- 2.10 Ms Penman thanked Ms MacDonald for the great presentation and mentioned that its good to know the organisation offers this support to young children.
- 2.11 Ms Miller also acknowledged the presentation and the need to fill vacancies. Ms MacDonald thanked Ms Miller for her and the unions support with the apprenticeships.

3. Minutes and Action Note of Previous Meeting held on 2nd March 2022

- 3.1 The minutes of the meeting held on 2nd March were approved as an accurate record, with the exception of 43.1 which should read 15th December and not 20th October.

4. Matters Arising

- 4.1 Mr McQueen confirmed he has been involved in “coffee roulette” with scientists from WGH and encouraged other colleagues to take up this offer as he found this a very useful session.

5. Staff Experience

5.1 Advancing Equalities Action Plan - final update on 2021/22 plan and new plan for 2022/23

- 5.1.1 Ms Kelly provided an update on the Advancing Equalities Action for 2021/22 and advised that the Advancing Equalities Action Plan for 2022/23 plan had also been circulated for approval. The 2021/22 Action Plan identifies areas that we have carried forward into 2022/23, but the majority of the actions have been completed.
- 5.1.2 Last year we worked with an external company to assist with the development of the action plan; however this year we felt we had more of an established relationship with the Staff Networks and didn't need external support to assist with the development of the plan. The actions cover all the protected characteristics and have been discussed through the Equality and Diversity HR-OD meetings. The 2022/23 plan will also be brought to the next Committee in July and future meetings, with a RAG status outlining the progress with the implementation of the plan.
- 5.1.3 Ms Kasper advised that from looking back at previous years that a lot of actions have been completed, but looking at red, amber and green, will there be an overall activity report and year on year.
- 5.1.4 Ms Kelly advised that allof the areas we will reported on during the year. A lot of work is ongoing on the promotion of the Staff Networks and trying to increase membership with the work supported through Equality and Diversity HR-OD Group but we do need to build the work into the financial plan for the next year with the potential for the allocation of a budget to support the activity on an ongoing basis.

- 5.1.5 Mrs Butler advised however that we have not turned down any requests for funding so far and the CMT have recently committed to protective time for staff to attend Staff Network meetings.
- 5.1.6 The Committee noted the final report on the 2021/22 Action Plan and approved the 2022/23 Advancing Equalities Action Plan.
- 5.2 Whistleblowing Report
- 5.2.1 Ms Kelly provided an update on whistleblowing. The report shows the cases raised within the last 3 months, with 1 stage 1 concern and 2 stage 2 concerns having been raised since the last meeting with the details contained within the appendix to the report. The Non Executive Whistleblowing Champion has been made aware of all these cases and regular update meetings are held with her to discuss the progress with the active cases.
- 5.2.2 It was noted that we have almost fully implemented the new Standards across all areas of the organisation and within the HSCP's they are aware of the process and know how to raise concerns, with two out of the four having guidance in place and two working to finalise guidance.
- 5.2.3 Ms Kelly advised feedback has been received in Q4 from GP practices and other Primary Care Contractors and will be contained in the Annual Report; "Lunch and learn" sessions have continued, with a number of colleagues joining the most recent session, with another expected to take place in October. We are also going to be running some sessions looking at the process of investigating and training for those involved in whistleblowing and other investigations. Over the next 12 months we plan to send out regular updates through the team brief and continue with updating staff on the whistleblowing standards.
- 5.2.4 The first draft of the annual report for whistleblowing is included in the paper and this is expected to go to the June Board meeting.
- 5.2.5 Ms Kasper thanked Ms Kelly for the update and advised to not underestimate the work that has gone into implementing the new standards and highlighted that we are in a good position now across the organisation. Ms Kelly advised we have flowcharts in place for most areas and we need to continue with training and raising awareness on a regular basis.
- 5.2.6 Ms Hirst highlighted the usefulness of the report and progress that has been made but welcomed additional information on primary care contractors based on the low return rate and a focus on learning and changes to services would be useful to highlight, along with making stronger links to equalities and who is raising concerns.
- 5.2.7 Mr McQueen confirmed a very helpful update, and the Committee agreed to take moderate assurance of the cases that have come through this Committee and asked for this to continue. It was noted that the Annual Whistleblowing Report was approved to go to the next Board meeting.

5.3 Speak Up Report

- 5.3.1 Ms Monaghan attended today's Committee and provided an update for the Speak-Up Report and confirmed that numbers for the speak-up initiative continue to rise but these are similar to previous concerns raised under the whistleblowing standards, with key themes highlighted within the report.
- 5.3.2 It was reported that often individuals raise concerns under 'business as usual' and these are not considered under the standards. Ms Monaghan advised that quite often line managers have worked on concerns fed back and subsequently the responses are dropped when the investigators find out that the work relating to the concern is underway or has started.
- 5.3.3 Given the number of concerns have continued to increase we are looking to recruit to a third Speak Up Ambassador post.
- 5.3.4 It was noted that the National speak-up network and two development days with peer networks have had good board representation. Ms Monaghan advised the service is very busy with around 200 contacts.
- 5.3.5 Mr McQueen thanked Ms Monaghan for the updates under 3.4 and 3.5 and asked if there is anything we can do to improve communication?
- 5.3.6 Ms Monaghan advised there was already an element in place but feedback and follow-up is important along with the confidence of the conversations. Mrs Butler advised that communication is difficult for the whole organisation but we can raise awareness with new managers that come into these roles and feedback and good conversations lead to staff experience and joy in work.
- 5.3.7 Ms Hirst commented on the positive work and themes that are coming out and highlighted that work and concerns have been discussed at Staff Governance and through Healthcare Governance. Ms Hirst asked if this work should have more prominence at the Board and a triangular piece of work that could be presented to the public at board meetings? Mr McQueen acknowledged this and advised that an overview be provided for feedback from these meetings and to bring this work together.
- 5.3.8 Ms Kasper thanked Ms Monaghan for her work with the speak-up campaign and advised that she meets with whistleblowers and mentioned that everyone comments on how amazing the speak-up service is.
- 5.3.9 Mr Campbell advised we are a massive organisation and we have to work through a lot of governance but there is a chance to feedback messages to the board. Mr Campbell advised that it is every manager's duty to make themselves available so staff can be heard and there will always be room for improvement, but there needs to be a balance.
- 5.3.10 Mr McQueen suggested having a further discussion on presenting an organization picture at the board. **BM/ JB/RK & HM**
- 5.3.11 The Committee accepted the challenges, barriers and observations noted within the recommendations in the report.

6. Assurance and Scrutiny

6.1 Corporate Risk Register

6.1.1 3455 –Management of Violence and Aggression

Ms Ireland provided an update on work to address internal audit recommendations that had previously went to the Staff Governance Committee. The work plan would address broader progress of work rather than just the recommendations from the internal audit and would advise the Committee that we are seeking limited assurance as this work is expected to take a few years to complete the actions.

6.1.2 It was noted that there are 2 mitigating actions, the programme of reviews and the purple packs, and the delivery date for the purple packs is 31st August but subject to adequate resources. Ms Ireland confirmed we did get some funding but not enough for a full review of the purple packs. These packs have been added to an electronic system and these can be monitored and flag any concerns.

6.1.3 It was reported that the team is also concluding a review of reliance lone worker alarm devices and the new contract. There is non-reoccurring resources in place and a paper due to go to the CMT meeting. Details on who administers and ownership of areas are still to be agreed.

6.1.4 Mr McQueen thanked Ms Ireland for the comprehensive update and advised it seemed sensible to pause the roll out of the devices until support was right. Ms Ireland confirmed that recruitment has gone back out to recruit but the money is non-reoccurring and these are succession planning posts and hope to recruit to these permanent as there are some retirements planned.

6.1.5 Ms Hirst highlighted the last few years doesn't reflect on the importance of increase in V&A towards staff and advised of concern that these posts are non-recurring V&A is a high priority and highlighted that we may need to look at resources and funding available.

6.1.6 Mr McQueen advised that part of the governance structure for audit and risk and F&R alongside our enthusiasm for the business case and programme this work to other Committees.

6.1.7 Mr Campbell agreed and confirmed that we need to look at the business case but there is limited funding and a number of risks that we need to balance out, but highlighted that other Committee should be aware and to support the business case as best as we can to get the risk priorities right.

6.1.8 The Committee noted the recommendations and noted that the risk remains high.

6.2.1 3828 – Nurse Workforce – Safe Staffing Levels

Ms Ireland confirmed the risk is very high and that this had been fluctuating over a number of months. Due to bringing in new recruits from the graduate nursing programme, we are likely to see a reduction in the risk.

6.2.2 The establishment gap is currently 6.67% against the 5% target and this is noticeably higher in other areas. New graduates will come in towards the end of June/July from Edinburgh, Queen Margaret University and from Napier in September.

- 6.2.3 Trainee mental health nurses will be recruited at B2 level and will complete 2 modules with the Open University and support apprenticeships. We are also looking to roll this out to Napier for nurse training.
- 6.2.4 Ms Ireland highlighted that around 73 staff retired in March and this was a significant number compared to previous years when this is usually around 20 staff. A lot is happening but moderate assurance remains.
- 6.2.5 Ms Kasper thanked Ms Ireland for a very comprehensive paper. Ms Kasper asked if we have the tools in the organisation to manage demand for nursing levels and how do we know these tools are consistently applied to meet demand for nursing levels.
- 6.2.6 Ms Ireland advised the underlined establishment gap is what we run the posts against. We are looking at nursing ward staff, which is made up of substantive and bank staff. The eRostering system and safe care looks at patients across the sites to balance staffing. Work is also taking place with a national system for mental health and adult services as we move away from SCAMPS in paediatrics.
- 6.2.7 The committee agreed to accept the paper and to support the associated risk mitigation plan. To note the risks remain very high and to support a moderate level of assurance concerning the risk mitigation plan.
- 6.3.1 5020 – Water Safety
Miss Gillies confirmed the water safety risk came onto the register due to a change in premises and access to premises during and after the pandemic and increased into legionella as a statutory obligation. Miss Gillies advised the documentation around water safety was not as clear for monitoring and underlined water safety plans.
- 6.3.2 It was noted that local health and safety teams have taken a stronger interest in this area over the last 2 years and there has been input from estates and facilities. Miss Gillies also noted that local Health and Safety chairs have noted an improvement in the quality of information they are receiving.
- 6.3.3 Miss Gillies confirmed we are having legionella culture from the water and its not cases of legionella, but progress is being made on the water plans. The level of risk is unchanged but we anticipate at the next review this will come down as the mitigation plans and becoming clearer.
- 6.4.1 3328 – Traffic Management
Mr Crombie confirmed there were no changes to the report discussed at the meeting on 2nd March, with grading assurance and control remaining the same.
- 6.4.2 Mr Crombie highlighted an incident that took place at WGH where a member of staff was hit on a zebra crossing by a car driven by another member of staff. The employee returned to work after 4 days and the member of staff who was driving the car is being investigated by Police Scotland.

7.0 Health and Safety Assurance

- 7.1 Miss Gillies confirmed that Ian Wilson is due to retire next week and thanked him for his contribution to this area. The Health and Safety paper is set out in the usual format and highlights that we remain in the out-of step cycle that was reported at the latest

Health and Safety Committee last week.

- 7.2 It was noted that there was helpful discussion at the Health and Safety Committee around safer clinical sharps and perceived gaps with an HSE improvement notice served to manage the use of safety-engineered and non-safety devices.
- 7.3 Lone working and violence and aggression (V&A) were discussed with local Committees to share learning for smoother implementation and work required on the ground to get these devices working.
- 7.4 Miss Gillies confirmed the Health and Safety service review and feedback has been paused until a new director of Health and Safety is in post. The decision to pause the review was made so any changes to restructure the team could be made once they were in post and to avoid changing the team twice in a couple of months.
- 7.5 Mr McQueen thanked Ian Wilson and wished him well with his retirement.
- 7.6 Mr McQueen mentioned that he had an interest in fire safety and asked if there were any administering challenges in sharing information with fire assessments?
- 7.7 Miss Gillies advised the fire officers within estates would share this information within the sites, but this is not managed by the site directors. Work is underway to complete visibility and continuing to follow this through. Feedback from site level is that they are welcoming the increased input from estates and their input into the health and safety meetings and to triangulate this work.
- 7.8 The Committee acknowledged the updates from the most recent NHSL Health and Safety Committee with overall assurance levels for the three risks for clinical sharps, fire safety management and other risks including Covid 19 and water management.

8.0 Healthcare Science Service - Accredited Registrations

- 8.1 Miss Gillies provided an update against the accredited registrations for Healthcare Science staff and advised that this came up as a result of the paediatric audiology and issued raised around accountability and standard of practice for audiologists, the type of registration and whether there was an opportunity to move to statutory registration and if this would make a difference.
- 8.2 Miss Gillies highlighted Appendix 2 that has been taken from the website that sets out the roles of professional standard authority for statutory registration and the opportunity for voluntary registration with an accredited registration.
- 8.3 The details are set out in the paper for healthcare scientists and what they do, and the Committee needs to be aware when people register whether this is statutory or voluntary registration and is different for certain professional bodies. Fundamentally the quality of care that is provided is down to the organisation ..
- 8.4 Miss Gillies advised the Committee that she didn't think it would be helpful to move to statutory registration based on previous experiences, and that it would also lead to difficulty with recruitment and retention.

8.5 Mr McQueen welcomed and acknowledged the earlier draft he had received, and this report is clearer on the advantages to the professions that are regulated. Mr McQueen highlighted that we should be asking for registration as a level of comfort, but the importance is to understand the accountability to the employer as Lothian.

8.6 Mr McQueen asked if paediatric audiology staff were all registered and asked if this was in response to the review. Miss Gillies advised she would need to check this detail, but she understood that most were registered before.

8.7 Miss Hirst asked if requirements and continued professional development (CPD) should be approached with an internal focus rather than learning externally from best practice.

8.8 Miss Gillies confirmed individuals have PPDs, but training requirements for paediatric audiology will be picked up by National review and input from QMU. Staff registered in England need to go through accredited training and this isn't required in Scotland.

8.9 The committee noted the recommendation and agreed that healthcare scientists will be actively encouraged to register with the appropriate accredited registration body for their profession but that it would not be mandated.

9.0 Staff Governance Committee Annual Report

9.1 Ms Kelly shared the annual report for the Committee which is in the standard template with the main part of the report being the Statement of Assurance considered at each meeting of the Committee. The standard questionnaire had been circulated to all members, but there was a lower than expected response rate.

9.2 The main feedback that was received highlighted that there is concern that not all Committee members participate as fully as possible at meetings.

9.3 Ms Kelly confirmed a draft report had already been submitted to the board secretariat for the annual accounts. The Committee approved the Annual Report.

10.0 Staff Governance Monitoring Framework Return

10.1 Ms Kelly confirmed at the August 2021 committee we approved the 2021 monitoring framework for the return to the Scottish Government.

10.2 Ms Kelly confirmed this submission had been submitted to the Scottish Government and a response from them finally received in April which has been shared with the Committee. The arrangements for the Staff Governance Monitoring Framework Return for 2022 has not yet been received.

10.3 Ms Kelly asked the Committee to note the response to the submission for 2020/2021 and the current position with the 2021/22 return.

11.0 Sustainable Workforce

11.1 Workforce Report

11.1.1 Ms Kelly provided an update on the workforce report and advised this shows the latest relevant data. The format of the report has changed and this shows more detail and

workforce statistics. HR enquiries and redeployment information has been removed as these elements are more internal to the HR and OD function and not something that needs to be scrutinised by the Staff Governance Committee.

- 11.1.2 Ms Kelly advised that in future reports we plan to add in KPIs for the regional recruitment service and job evaluation. We will also add in the data for for speak up and whistleblowing; this information comes to this meeting as a separate report but it was agreed this data should also be recorded within the workforce report.
- 11.1.3 ER and bullying and harassment information will also be added to the report in due course. Ms Kelly asked for any feedback on the report to be sent to her or for any additions that could be included for future reports.
- 11.1.4 It was reported that sickness absence is low compared to other health boards but the level of staff retirements has significantly increased due to pension changes and a lot of staff pausing their retirements during the pandemic.
- 11.1.5 Mr McQueen advised that he found the new layout useful, especially the focus on key metrics. Mr McQueen asked if Covid numbers could be removed from the establishment gap as these are conflicting? There are 22% of staff over 55 and advised to look at the age profile by staffing categories due to difficulties in recruitment and expected retirements. The number of completed appraisals at 30% was disappointing.
- 11.1.6 Mrs Butler advised that we are reviewing the age profiling all the time and looking at the risks; this information is shown within the diversity report, but it's not reported at this Committee. Appraisals are a key priority for the CMT in the coming months. The recommendations were accepted by the Committee.

11.2 Equality and Diversity Monitoring Report

- 11.2.1 Ms Kelly shared the Annual Report that will be published after the Staff Governance Committee and will be uploaded onto the internet. The workforce is broken down by key protected characteristics in line with the requirements of the Equality Duty. The information collected has been compared to the 2011 census as we currently don't have the most up-to date information for 2022.
- 11.2.2 There are plans to look at the data within the HR-OD Equality and Diversity group to further analyse the data into what this is telling us and if there is anything else we need to do for the coming year. Ms Kelly advised we are continuing to ask staff to update their own characteristics on eESS and this has been communicated to staff through the team brief with focused work in other key groups expected this year. We are also working with the communications team on a user-friendly way to share this information.
- 11.2.3 Ms Ksaper advised there was a lot of data presented and wondered if something was able to be produced for a year-on year timeline and any outliers for cause for concern?
- 11.2.4 Mrs Butler advised that data would be published and the HR and OD Equality and Diversity Group will go through the data and highlight any areas for action.

- 11.2.5 The Committee noted the recommendations and took moderate assurance that systems and processes are in place to ensure that this information about staff is captured.
- 11.3 National Workforce Strategy for Health and Social Care
- 11.3.1 Mrs Butler advised there are a series of papers for the National workforce strategy and co-produced between COSLA and the Scottish Government.
- 11.3.2 The plan was published in March and focused around the 5 pillars of plan, attract, train, employ and nurture that are summarised within Appendix 1. Mrs Butler advised the plans are part of the government commitments and not something the Board is involved in pulling together; we have not received sight of the delivery plan at present.
- 11.3.3 It was noted that with in the document on page 5 that growing the workforce by 1% will need to be reassessed due to recent announcements.
- 11.3.4 It was noted by the Committee that the report is not fit for purpose based on current Scottish intelligence and that there would need to be a return to pre-pandemic levels of workforce in Scotland.
- 11.3.5 The Committee noted the report covers the health and social care sector and noted that although the strategy is national and outlines national actions for health boards, that local authorities and HSCP will lead on operational strategy and outcomes over the 3 year plan.
- 11.4 National Workforce Planning Guidance
- 11.4.1 Mrs Butler advised the workforce guidance has been received and work is already underway to develop the 3 year workforce plan which requires to be submitted to the Scottish Government by the end of the summer for publication in October.
- 11.4.2 It was highlighted that HR Directors have been advised that they wouldn't be able to follow the guidance as this was received later than anticipated but the plan would be aligned to the National LSDF and we will follow the 5-pillars.
- 11.4.3 Mr MacAllister advised this came out much later than expected and there is a lot of service integration and financial planning for the medium to long term for National direction. The guidance asks for detail that we wouldn't naturally include in the 3 year workplan.
- 11.4.4 Mr McQueen advised to produce a work plan based on the financial constraints and underlined advice from the government.
- 11.4.5 The Committee acknowledged the expectation that workforce plans will sit alongside the upcoming medium-term operational planning (MOP) guidance will not be possible as the Scottish Government has subsequently changed planning guidance to focus on the development of a 12-month annual operational plan.

11.5 NHS Lothian 3-Year Workforce Plan

- 11.5.1 The Committee noted that work is ongoing with colleagues and this will be aligned to the LSDF. The plan will have a summary section with an 'ask' from the government to push forward with areas for progression similar to work that has been completed with the physician associates, which has been progressed locally with 50 PAs now in post.
- 11.5.2 The paper will be discussed next week at the CMT meeting and has good involvement with services and professional leads and the plan is expected to come back to the next staff governance meeting as a first draft on 27th July.
- 11.5.3 Mr McQueen asked if the plan had detail and analysis of the workforce position and age profile and a look ahead over the next 5 years?
- 11.5.4 Ms Butler confirmed that Mr McAlister has developed a number of tools to analyse data; this has shown there will not be enough band 5 nurses but workforce plans are changing the shape of the workforce to look for other associated professionals. We are also in a better position with the tools to promote international recruitment against domestic supply routes.
- 11.5.6 Mr McAllister advised we have also picked collaborative action and a social care joint approach for training and developing rather than competing, and to make staff more transferable for career pathways.
- 11.5.7 The Committee accepted the recommendations set out in the 3 year workforce plan.

12. For Information and Noting

12.1 Staff Governance Work Plan 2022-23

- 12.1.1 The Staff Governance Work Plan 2022-23 was noted by the Committee

12.2 Staff Governance Assurance Statement 2022-23

- 12.2.1 The Staff Governance Assurance Statement 2022-23 was noted by the Committee

12.3 Workforce Planning and Development Programme Board Minutes - 25 January 2022

- 12.3.1 The Workforce Planning and Development Programme Board Minutes were noted by the Committee

13. Reflections on the meeting

- 13.1 Mr McQueen thanked Mrs Butler and Ms Kelly and their teams for their updates and the excellent Employability and Early Careers presentation which is vitally important.
- 13.2 Mr McQueen thanked today's guests for attending the Committee and asked for any feedback to be sent directly to him.
- 13.3 Mrs Butler advised the 3 year plan will come back to the Staff Governance Committee in July, before this goes to the Scottish Government but advised the document is available if requested by board members. Ms Hirst advised that non-executive board members have raised workforce for reassurance work that is currently ongoing. Mrs

Butler confirmed she would include this within the June board meeting.

14 Date of Next Meeting

- 14.1 The next meeting of the Staff Governance Committee would take place at 9.30 on Wednesday 27 July 2022