



NHS GRAMPIAN
Meeting of the Grampian Area Partnership Forum (GAPF)
Thursday 15 July 2021 - 10am to 12noon
Microsoft Teams

Board Meeting
07.10.21
Open Session
Item 15.08

Present:

Adam Coldwells, Director of Strategy and Deputy Chief Executive (Co-Chair) – Chaired the meeting
Rachael Little, Elected Staff Side Chair/Employee Director (Co-Chair)
Mike Adams, UCATT
Paul Allen, Director of Facilities, Estates & eHealth
Diane Annand, Interim HR Manager Staff Governance
Albert Donald, Non-Executive Director/Whistleblowing Champion
Joyce Duncan, Non-Executive Director, Chair of Staff Governance Committee
Alistair Grant, RCN
Keith Grant, UNISON (deputy for Martin McKay)
Louise Leiper, RCM
Deirdre McIntyre, COP
Cameron Matthew, Divisional General Manager, Acute
Jeanette Netherwood, Corporate Manager, Health & Social Care Moray (deputy for Patricia Morgan) part one only
Tom Power, Director of People & Culture
Kerry Ross, Deputy Business Manager, Mental Health and Learning Disabilities
Alan Sharp, Assistant Director of Finance (deputy for Alan Gray)
Karen Watson, Unite (deputy for Steven Lindsay)
Joan Anderson, Partnership Support Officer - Minutes

In Attendance:

Susan Harrold, Senior Planning Manager – for item 6
Lorraine Hunter, Head of HR Service Centre – for item 7
Sarah Duncan, Board Secretary, Board Secretariat and Legal Team
Elizabeth Gibb, Learning and Development Team (whole meeting)
Cathy Simpson, National Video Conferencing Manager, eHealth (first half of meeting)

	Subject	Action
1	<p>Welcome and Apologies</p> <p>Apologies received from:</p> <p>Caroline Hiscox, Chief Executive (deputy Adam Coldwells), Patricia Morgan, Health and Social Care Moray (deputy Jeanette Netherwood), Susan Carr, Director of Allied Health Professionals & Public Protection, Lynda Lynch, Board Chairperson, Janine Howie, Partnership Manager Business & Strategy, Aberdeenshire Health & Social Care Partnership (and deputies Lynn Boyd and Kathy Davidson) Stuart Humphreys, Director of Marketing and Corporate Communications, June Brown, Interim Executive Director of Nursing, Martin McKay, UNISON (deputy Keith Grant), Alan Gray, Director of Finance (deputy Alan Sharp);</p>	

	<p>Gerry Lawrie, Head of Workforce & Development. Jamie Donaldson, Elected Staff Side Chair of Health & Safety Representatives Group, Steven Lindsay, Unite (deputy either Karen Watson), Dianne Drysdale, Executive Business Manager, Executive Business Unit, Cheryl Rodriguez, Head of Occupational Health and Safety, Ian Cowe, Health and Safety Manager Susan Coull, Head of HR Gavin Payne, General Manager of Facilities and Estates Janet Christie, BAOT Rob Fairfull, GMB Sandy Reid, Lead – People & Organisation, Aberdeen City Health and Social Care Partnership</p>	
2	<p>Minutes for Approval</p> <p>Minute of Meeting held on 20 May 2021 was approved.</p>	
3	<p>Matters Arising</p> <p>a. NHS Grampian Board Report</p> <p>Rachael Little explained the process of the Board Report from GAPF.</p> <p>There was an opportunity to review the content of the Board Report and align it to the agenda and make it representative of topics discussed at the meeting with identifiable actions where appropriate.</p> <p>Suggested format for the report:</p> <p>Context/summary Actions Items of particular interest/of note highlighted Include a copy of the agenda so people could align this with the Board Report</p> <p>It was agreed to think about the proposal and discuss again at the end of the meeting under item 13.</p>	
4	<p>GAPF Learning from Partnership through the Pandemic Event 17 June 2021</p> <p>Rachael Little thanked all who attended the GAPF Event and acknowledged all the hard work put in to the planning for the day.</p> <p>The paper which had been previously circulated highlighted the themes from the feedback received. Rachael Little had also provided a comparison with the themes from the GAPF Big Rocks Event held in May 2018 at Curl Aberdeen.</p>	

<p>Rachael Little asked GAPF members:</p> <ul style="list-style-type: none"> - How GAPF would ensure it continued to be in line with the system and new ways of working identified going forward? - What would GAPF key topics and priorities be and set these as objectives for GAPF going forward? <p>Rachael Little proposed that instead of a separate workshop being scheduled in 2021, an item would be added to the agenda for development session discussions for the next 6 months to give everyone an opportunity for discussion and agreement on actions.</p> <p>Comments from GAPF as follows:</p> <ul style="list-style-type: none"> - Could there be a way this information could be added to the strategic process. Some actions from the GAPF Event were operational and some were longer term and instead of losing these would it be appropriate to feed this in to the system - Good thought to feed in through the system - Whole event showed how successful the event worked mainly due to the planning done. - How do we capitalise on the work now and not lose it in the amount of other priorities. What we can use for the future and acknowledge what didn't work so well for the future. - Take time to map where things like culture, equality, well-being, home working and technology were going on in the organisation and look at the opportunity for effective Partnership working around these forums. - Break out rooms were invaluable for feedback and facilitators were really good. Questions very important on their own and do not want to lose these. Expand these to be more important - Most important issues to be focused on just now - IT support, home working, technology and communication – these would be defined centrally in NHSG and impact on all organisations connected to NHSG. These things should be taken forward first and have more Partnership and collaborative working around these areas. - ICT and digital strategy engagement key with partners. Group set up working with partners and Partnership - Agree a timeline to give better evidence <p>Rachael Little agreed to arrange a wordle to identify the priorities and most commonly mentioned themes from the feedback received</p> <p>Adam Coldwells summarised the discussion as follows:</p> <p>The working group would be asked to do an initial prioritisation of the work GAPF required to do, taking into consideration capacity and do the mapping as suggested and see where GAPF linked in.</p>	<p>RL</p>
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	<p>A plan to be developed describing where we do what, what we are going to do in GAPF in a discursive way and what we are going to do in September/October/November in GAPF meeting. A timeline to go along with the plan to be developed taking account of capacity.</p> <p>Further update at the next meeting.</p>	RL
5	<p>Prioritisation of forthcoming workforce surveys</p> <p>Tom Power had circulated a paper outlining the proposal as follows:</p> <p>“GAPF are asked to endorse the plan to pause the We Care Pulse Survey in Q2 and Q3 of 2021/22 to enable sufficient space for iMatter and the BPA Culture Survey, with resumption of the former in Q4. This is subject to both of these surveys running as anticipated, with the We Care survey able to be reinstated if either or both do not. An update on We Care will be provided by the Programme Lead at the August GAPF meeting.”</p> <p>Tom Power explained the results of the Pulse Survey using presentation slides (attached).</p> <p>Tom asked GAPF to endorse this paper as a way forward in the current situation.</p> <p>GAPF discussed the presentation slides and the proposal :</p> <p>Points made on the information in the presentation slides included:</p> <ul style="list-style-type: none"> • link to other statistics eg sickness absence or people leaving their job • Exit interview asked the relevant information to be able to log and triangulate information across the system to see if there are patterns. This was a work in progress. HR kept information from Exit Interviews centrally and promoted the use of Exit Interviews periodically. • need to make decisions re pandemic and civil contingencies and decision making – is there more that could be done to support people • Good to measure improvements when start to come out of the pandemic • Knowing how many retirees return part time would show they did not want to leave the organisation and were maybe finding it too much to continue full time. • Do any sectors have no retirees returning part time? • GAPF Terms and Conditions Sub-Group discussed whether organisation should have a policy on how to bring people back to work • A Retirement Policy would be part of phase II of Once for Scotland Workforce Policies 	

	<ul style="list-style-type: none"> • Capture staff at all levels regarding working longer or returning after retirement and not just higher level staff to give evidence of equality <p>Tom Power would look into the health and wellbeing, retirement and working longer with Partnership involvement. Policy development and national signalling had been paused due to the pandemic.</p> <p>Points made on the proposal to pause the survey included:</p> <ul style="list-style-type: none"> • supportive of the pause due to the number of times staff were asked to contribute to surveys • “how do we prevent survey fatigue and support staff to contribute and participate in the surveys” • If pause, lose valuable data set that is live, if keep doing quarterly there was a sequence. If gap in the middle would this make it difficult to track changes • Concern was ask to do another survey when being asked to do two big surveys and the risk was not getting a good response to any of them • Don’t need to get a huge response rate to get a feel for the views of the population • If pause, concern that the organisation will be thought to be changing its approach • Could be impact on staff if they felt they were forgotten about. • Survey didn’t take long to complete • Asking questions should be seen in a positive manner and framed – this is what had been done so far and focus particularly on wellbeing as wellbeing and mental wellbeing was raised most at walk rounds • iMatter questions include questions related to wellbeing of staff • Staff Health, Safety & Wellbeing Expert Group raised survey fatigue • show NHS Grampian had listened to staff by putting out small messages of what had been before the survey went out <p>GAPF voted on the proposal and it was agreed not to pause the survey.</p> <p>Tom will take this forward.</p>	
<p>6</p> <p>*</p>	<p>NHSG Plan for the Future (2022-2028)</p> <p>Susan Harrold presented the plan for the future which had been previously circulated (slides attached).</p> <p>Susan give an update on the current position of the strategy engagement, shared reflections and asked for support from the Forum and any ongoing advice.</p> <p>GAPF supported the strategy, offered support and commented as follows:</p>	

	<ul style="list-style-type: none"> • Staff engagement sessions needed to continue • feedback from some groups and individuals who were looking forward to a more positive future • keen that people fill this in and consider on own or with colleagues • Have to continue to engage to get answers. • Staff Side Representatives network of accredited reps asked to be involved (Rachael Little and Susan Harrold would agree a communication out with the meeting) • Invite Susan Harrold or a colleague to the Acute Sector Partnership forum to share the discussion. Managers may take this away to more local groups to discuss. (Susan Harrold and Cameron Matthew to discuss out with the meeting) • Susan Harrold was willing to attend meetings rather than set up new meetings • Adapt paper work to make it easier for engagement. • Invite Susan Harrold or another team member to September's GAPF meeting to reflect on this work and progress • Evaluation Group already set up – note the importance of feedback to ensure that people who were engaging hear what was happening with their feedback 	
7	<p>Agenda for Change (AfC) Band 1 to AfC Band 2</p> <p>Lorraine Hunter attended the meeting to present a paper which had been previously circulated. Lorraine explained the salary arrangements from transferring the remaining staff from band 1 to band 2 and the reasons for this.</p> <p>The GAPF Terms and Conditions Sub-Group had agreed the recommendation in the paper outlined by Lorraine Hunter for approval by GAPF.</p> <p>Mike Adams explained that when this had been raised nationally originally, NHS Grampian had already completed the majority of the work involved. It had been agreed to leave some staff on band 1 as this was better for those individuals. He asked everyone to note all the good work undertaken and the good reasons for decisions being made throughout this process.</p> <p>Discussions would take place with the individual staff who were to move to band 2 to ensure they all understood their new pay band. Once these discussions were complete, the changes would be made.</p> <p>GAPF approved the recommendation.</p>	

8

Recruitment and Retention Premia (RRP) Application

Diane Annand updated the group on progress.

A meeting was held by the RRP Sub-Group of Scottish Terms and Conditions Committee (STAC) which had been attended by Mike Adams and Diane Annand as co-chairs of GAPF Terms and Conditions Sub-Group along with Ashley Catto and Malcolm Ewen as co-authors of the application. Representatives of other North of Scotland Boards with submitted RRP applications were also in attendance.

STAC sought views on the current RRPs and the ability to exit from RRP, returning to standard terms and conditions. Strong consensus from all Boards that there was a reliance on RRP to recruit and retain staff and there would be a negative impact on services if removed. RRP was even more important when used as a leveller to the discrepancy of pay offered by private companies. As seen before the ability to retain staff reduced when no RRP was offered and this would happen again if RRP was not retained. The application from NHS Grampian was for Estates Staff (excluding building staff).

STAC had a concern that currently the majority of RRPs were being paid in male dominated areas. STAC wants to ensure that there is equal access to RRP, that it still meets the needs of NHS Scotland and legal requirements.

The STAC RRP group will give their recommendation on whether the application should be approved or not to the full STAC group. Although no timeline to receive the outcome was given, NHS Grampian had asked for this as soon as possible given the Estates RRP was due to end in September 2021. From the discussion at the meeting it was thought that the application would be approved on this occasion however the challenge would be working to an action plan to cease the RRP if that remained the view of STAC.

Tom Power explained that he had heard a presentation from NHS Assure at the HR Directors meeting about work they are going to do on workforce planning and market testing on different careers and this work overlapped with RRP. Further work had been asked on regional variations when comparing private and public sector pay. Diane Annand noted that apprentices were paid more in NHS than in private companies, due to application of the living wage, however once trained and transferred to band 4 plus RRP the salary was lower than the private sector.

Mike Adams had given STAC reassurance that other areas within NHS Grampian who were not male dominated services were also discussing RRP applications. It had been interesting to hear the position of other Board and that there would be catastrophic consequences if withdrawn.

	<p>Mike Adams fed back that Grampian’s application was highlighted as platinum standard. It was shared with all attendees and should be used by other groups were they were considering applications as an indication of the standard required. The work undertaken by Malcom Ewen, Ashley Catto, Diane Annand and their teams was very highly praised.</p> <p>Paul Allen noted that every time the application was resubmitted, discussions took place regarding the pressures on different services and the economic situation in Grampian. He said there was a lot of knowledge within the Estates family, with the wish to retain this as experienced staff were needed to maintain our buildings. He supported the application so skilled staff can be retained, avoiding a deluge of staff leaving the organisation.</p>	
9	<p>Policies Update (SGS1-5):</p> <p>a. Policies Sub-Group Annual Update</p> <p>Diane Annand explained that the throughput of work had been affected by the pandemic and the Sub-group had not met for 5 months of the report period. The process to develop non-clinical policies was highlighted, available at two places on the intranet to assist those developing non-clinical policies.</p> <p>Diane summarised the report, circulated to the group, highlighting the activity in the report period of policies 14 policies approved by GAPF and current active policy review groups.</p> <p>An outline of the Once for Scotland (OfS) Workforce Policies national programme was included in the Report, of which GAPF had received briefings and newsletters previously. Phase I of 6 core policies went live 1 March 2020. Some visits Steven Lindsay and Diane Annand, as co-chairs of the Policies Sub-Group, planned to Sector Partnership Forums had been cancelled as was some of the OfS engagement events due to the Covid-19 pandemic. A further national policy had added from 1 April 2021 with the launch of the National Whistleblowing Standards. OfS Phase II, which had commenced in January 2020 had been paused but now restarted with electronic engagement and the prioritisation of the Homeworking policy. The Report outlined the large scope of Phase II.</p> <p>It was noted that the protocol introduced during the second wave of Covid-19 to allow Silver Command to consider, review and sign off all requests for new interim non clinical policy measures and escalate to Chief Executive Group for information or ratification had not been used. However, two policies had been subject to a similar process as part of the early response to the pandemic.</p> <p>Anyone who wished to be involved in any of the active Policy Review Groups were asked to contact Diane Annand or Joan Anderson to discuss.</p>	

	<p>b. Once for Scotland Workforce Policies: Homeworking Policy</p> <p>Rachael Little reminded everyone of the consultation on the Once for Scotland Home Working Policy. The consultation would close on 26 July 2021. Appreciate everyone contributing to the consultation feedback. The consultation information had been shared widely across the organisation.</p> <p>c. Facilities for Trade Unions and Professional Organisations Policy</p> <p>Sarah Duncan had some proposals to update this policy and it was deferred to the next meeting for discussion.</p>	
10	<p>Operation Snowdrop/Remobilisation/Portfolio Changes</p> <p>Adam Coldwells reported that the activity had been higher than expected and with back ground of community spread of Covid-19 numbers rising leading to staff absences. Some staff absences had been for isolation due to being a contact rather than being a positive case of Covid-19.</p> <p>Due to the higher level of pressure on the system, NHS Grampian had remained at civil contingency response level 2. Infrastructure to support cross system working was in place. The Chief Executives Gold Command Group had been meeting weekly. Silver Command was being led by the person on call and meeting weekly. Bronze Command was meeting on a cross system basis on a daily basis to problem solve operationally.</p> <p>These structures were being reviewed weekly. Gold Command would review the status if the situation with the pandemic changed significantly.</p> <p>Remobilisation – trying to keep going with some of the operational work and services which have been ongoing all throughout the pandemic. Balance of risks of running services being looked at regularly.</p> <p>Alistair Grant reported feedback he had received from members:</p> <ul style="list-style-type: none"> • when would NHS Grampian stop doing things, as pressure increasing in some areas? • NHS Grampian was in remobilisation and change process and increasing pressures for staffing levels. Need to create capacity. • Group of staff being asked if they could “compress their workload”. <p>Alistair noted that staff should be allowed to decompress rather than being asked to compress work and look at what is stopped to support staff. He said that language was very important.</p> <p>Adam Coldwells agreed to discuss this further with Alistair Grant and Tom Power after the meeting.</p>	<p>AG/TP /AC</p>

	<p>Adam Coldwells reported that moving people around to create capacity was being discussed at Silver Command. It had been discovered in wave one of the pandemic that when services were stopped on mass some staff didn't have other work to go to. Lessons had been learned from this and services were being considered more closely. For example, if service was stopped or changed, this needed to be done with no loss of capacity? Silver Command were to begin to look at more radical suggestions and trigger points to be prepared in case the pandemic increased.</p> <p>Keith Grant noted that it was important that staff took their annual leave allowance and were not told they could not take it due to service changes. Adam Coldwells asked for any reports of annual leave not being approved to be reported to himself and Tom Power.</p> <p>Tom Power noted the importance of moving together as an organisation and annual leave, etc, was important. Silver Command were looking at staffing across the system. While tracking absences due to pandemic in the Acute Sector, it was noted that these had gone up, but had been reducing recently. There was a need for tactical responses to this.</p> <p>Anyone wishing to pass on information or require information from any of the command controls were asked to contact Adam Coldwells before the next meeting.</p>	
11	<p>Finance Update</p> <p>Alan Sharp attended the meeting to update on the financial situation.</p> <p>The 2020/21 financial position was exceptional due to Scottish Government providing funding for all additional Covid-19 pandemic costs including any unmet savings by Health Boards.</p> <p>2021/22 – there was a lot of pressure on the system due to being within the third wave of the pandemic.</p> <p>Financial results first quarter – returning to position last seen 2019/2020 where finances were tight and NHS Grampian only just met financial targets.</p> <p>NHS Grampian's overspend against the revenue budget was £1m for the month of June which gives a year end overspend of £1.5m at the end of the first quarter to June.</p> <p>Overspend mainly due to spend on medical locums, public holiday pay, higher hospital drug spend, maintenance costs and energy costs (combined heat and power plan was not operational for part of June 2021).</p> <p>Managers had understandably been focussing on Covid pressures and not savings targets in recent weeks.</p>	

	<p>Covid expenditure is £14.2m year to date running at roughly £4-5m a month. £6m of this has been on vaccinations, with significant spend also on Contact Tracing and extra staffing.</p> <p>1000 staff were aligned to Covid work streams at the end of June, including 428 staff aligned to the vaccination programme.</p> <p>There was a need to balance service and financial pressures, and to deliver savings within budgets. Alan Sharp felt there was time to recover the position before end of financial year.</p> <p>Adam Coldwells reported that the next Budget Steering Group would be held in August 2021 and he would ask the group to consider what needed to be done regarding cost savings plans soon rather than leaving until too late.</p>	
12	<p>Any Other Competent Business</p> <p>a. Review of Staff Lockers, Changing Facilities, etc</p> <p>Keith Grant explained that he had been part of a group with Pauline Matthews, Deputy Head of Domestic & Support Services regarding a review of all staff lockers, changing facilities, etc, across all NHS Grampian staff. The group had anecdotal information on the disparity across the organisation with some staff having very good facilities and others having none, with a variety in between. The group wished to have engagement with all staff to gather real information. The group had proposed a questionnaire.</p> <p>Rachael Little offered to support Pauline Matthews and Keith Grant to distribute any developed email communication through the Staff Side communication structures to encourage contributions to the survey. Opportunities to target specific groups may also exist.</p> <p>Paul Allen had concerns about another questionnaire for staff. Alistair Grant stated that he would want to know more about the request.</p> <p>Tom Power stressed the importance of having data to substantiate information. He suggested the group consider what they hoped to get out of the questionnaire and the need to manage expectations of participants.</p> <p>Keith Grant was asked to speak to those who had expressed views.</p> <p>Rachael Little noted that the GAPF Endowment Fund allocation may be a funding option to support this project.</p>	

13	<p>Communications messages to the Organisation</p> <p>Board Report:</p> <p>Rachael Little had discussed the Board Report under item 3a above and made a proposal.</p> <p>Rachael Little asked everyone to send their comments on proposal to rachael.little@nhs.scot and if she did not receive any comments she would trial the proposal and discuss at the August GAPF meeting.</p>	ALL
14	<p>Date of next meeting</p> <p>The next meeting of the group to be held at 10am to 12noon on Thursday 19 August 2021 via Microsoft Teams.</p>	ALL

Joan Anderson - gram.partnership@nhs.scot