



NHS GRAMPIAN Meeting of the Grampian Area Partnership Forum (GAPF)  
 Thursday 15 June 2023 10am to 12.30pm  
 Microsoft Teams

Approved

Board Meeting  
 Open Session  
 03.08.23  
 Item 13.7

**Present:**

Steven Lindsay, Elected Staff Side Chair/Employee Director (Co-Chair) - Chaired  
 Adam Coldwells, Director of Strategy and Deputy Chief Executive (Co-Chair)  
 Lynn Boyd, Service & Development Manager, Aberdeenshire Health and Social Care Partnership  
 June Brown, Executive Nurse Director  
 Janet Christie, BAOT (left 11am)  
 Joyce Duncan, Non-Executive Director, Chair of Staff Governance Committee  
 Dianne Drysdale, Smarter Working Programme Manager  
 Alison Evison, Board Chairperson  
 Alistair Grant, RCN  
 Keith Grant, UNISON (deputy for Martin McKay)  
 Stuart Humphreys, Director of Marketing and Corporate Communications  
 Sarah Irvine, Senior Finance Manager  
 Rachael Melvin, Deputy Service Manager (deputy for Adeyinka Adewumi)  
 Gavin Payne, General Manager of Facilities and Estates  
 Tom Power, Director of People & Culture  
 Sandy Reid, Lead - People & Organisation, Aberdeen City Health and Social Care Partnership  
 Michael Ritchie, Unite (attended from 10am to 10.30, then Karen Watson deputised)  
 Philip Shipman, Acting Head of People and Change  
 Audrey Steele-Chalmers, AHP Professional Lead - Moray (deputy for Susan Carr and Lynn Morrison)  
 Karen Watson, Unite (deputy for Michael Ritchie)  
 Joan Anderson, Partnership Support Officer

**In Attendance:**

Susan Simpson, Health and Safety Specialist Manual Handling – for item 5a  
 Geraldine Fraser, Integrated Families Executive Portfolio Lead – for item 6a  
 Emma Hepburn, We Care - Programme Lead – for item 6a

	<b>Subject</b>	<b>Action</b>
1	<p><b>Welcome and Apologies</b></p> <p>Everyone was welcomed to the meeting and apologies were received from the following:</p> <p>Paul Allen, Director of Infrastructure &amp; Sustainability            Adeyinka Adewumi, Deputy Business Manager, RCH (deputy Rachael Melvin)            Diane Annand, Staff Governance Manager            Susan Carr, Director of Allied Health Professionals &amp; Public Protection (and deputy Lynn Morrison – deputy Audrey Steele-Chalmers)            Jamie Donaldson, Elected Staff Side Chair of Health &amp; Safety Representatives Group</p>	

	<p>Caroline Hiscox, Chief Executive  Gemma Hood, SOR  Gerry Lawrie, Head of Workforce &amp; Development  Martin McKay, UNISON (deputy Keith Grant)  Deirdre McIntyre, RCOP  Cameron Matthew, Divisional General Manager, Acute  Kathleen Tan, CSP</p> <p>Steven Lindsay explained that the change of GAPF quorum was agreed virtually by at least 6 Staff Side and 6 Managers following last meeting. Therefore, the new quorum was 4 Staff Side and 4 managers.</p>	
2	<p><b>Minutes for Approval</b></p> <p>Minute of the Previous Meeting held on 18 May 2023 was approved.</p>	
3	<p><b>Matters Arising</b></p> <p>a. Industrial Action Short Life Working Group (SLWG)</p> <p>Philip Shipman explained that junior doctors had rejected the pay offer from the Scottish Government. British Medical Association (BMA) had informed NHS Boards of the intention to take 72 hours strike action. This still had to be formally notified. The SLWG had met twice a week and were setting up cells as follows:</p> <ul style="list-style-type: none"> <li>• Trade Union Negotiating Cell - to liaise with striking and non-striking unions to hear all concerns and have open channels of communication with BMA</li> <li>• Colleague Welfare Cell – to look after staff welfare</li> <li>• Comms Cell – communications to public and patient and staff. Communications had already been circulated in the Daily Brief</li> <li>• Placement Board Liaison Cell – NHS Grampian employed junior doctors across Scotland. This group to cover junior doctors in other boards taking strike action</li> <li>• Clinical Services Planning Group – chaired by Associate Medical Director to look at clinical services and how to mitigate for the number of junior doctors on strike.</li> </ul> <p>NHS Grampian employs 700 junior doctors, although not all junior doctors we employ are located in Grampian. Similarly, some junior doctors based in Grampian are employed by other Health Boards.</p> <p>During lawful strike action employees within the same bargaining unit don't need to be a member of a trade union to take strike action.</p> <p>Communication to be circulated asking junior doctors if they planned to be in the work place during the notified days of strike action.</p>	

	<p>Command and Control Civil Contingency was to be set up with Gold, Silver and Bronze controls.</p> <p>A decision to be made on whether to activate the Policy for Management of the Workforce during and after Major Incidents including Pandemic. The decision to be made by the Chief Executives Team (CET) when or if the policy would be enacted. Adam Coldwells agreed to discuss with Tom Power to ensure that the CET had all the information they required to make an informed decision.</p> <p>Philip Shipman explained that the dispute was between the BMA and the Scottish Government and not with NHS Grampian as the employer. NHS Grampian would work with trade union and professional organisations to manage the disruption but recognised there had to be disruption otherwise there would be no point in taking strike action.</p> <p>A report would go to Staff Governance Committee as there was a need to ensure governance around the process.</p> <p>Steven Lindsay highlighted the communication in the Daily Brief on 13 June 2023 regarding no annual leave to be approved during the week that the 72-hour strike action was planned.</p> <p>People had heard that staff were being asked to cancel annual leave for the week of strike action and this had not been the intention of the communication.</p> <p>GAPF discussed the requirement not to approve leave and agreed this was only for annual leave and not other types of leave. It was also for new requests for annual leave and not those already approved. The request applied to all staff, not just clinical staff. The wording of the communication would be refined and re-sent as a standalone global and it would also be cascaded via portfolios.</p> <p>Facilities and Estates had been involved in discussions as it was recognised how important those staff were in supporting the organisation.</p> <p>GAPF agreed that if an extra-ordinary meeting was required this could be arranged.</p> <p>b. GAPF Development Event 21 September 2023</p> <p>Steven Lindsay reported that the full day GAPF Event planned for 21 September would be held in person at Curl Aberdeen. The day's themes would include fatigue, violence and aggression and the impact on staff wellbeing, civility saves lives. Save the date invite had been circulated. Everyone was encouraged to bring someone along who was not usually involved in Partnership.</p>	<p><b>AC</b></p> <p><b>SL/PS</b></p>
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	<p>c. GAPF Terms of Reference/Facilities Arrangements for Trade Unions and Professional Organisations Policy Amendments</p> <p>Steven Lindsay explained that the changes were approved by a quorum of GAPF managers and staff side. The GAPF Policies Sub-Group had approved the amended policy for final sign off by GAPF.</p> <p>Keith Grant outlined the changes on behalf of the Sub-Group changes circulated</p> <p>Front page version 6 changed to 7</p> <p>Page 2 updated with the changes as follows:</p> <p>Appendix 1 – removed UCATT from the list</p> <p>Appendix 2 – 2.15 quorum changed from six to four - this is both management and Staff Side quorum</p> <p>GAPF approved the updated policy.</p>	<p>JA</p>
<p>4</p>	<p><b>Well Informed</b></p> <p>a. Staff Governance Committee (SGC) Report</p> <p>Joyce Duncan presented the report from the Staff Governance Committee. It covered the work of the group for the last year and planned to report bi-monthly thereafter.</p> <p>The SGC and GAPF did not report to each other but it was good to have open sharing of information.</p> <p>GAPF welcomed the report as good governance. Keith Grant noted that a lot of staff and managers were still not aware of the Staff Governance Standard.</p> <p>b. Finance Update</p> <p>“Sarah Irvine updated on the financial situation as follows:</p> <ul style="list-style-type: none"> <li>• Entering final stages of audit of 2022-23 accounts with all financial targets met for 2022-23. The accounts are due to be taken to the NHS Grampian board at the start of July for approval.</li> <li>• NHS Grampian had submitted the Financial Plan for 2023-24 to NHS Grampian Board. The plan predicted a £60m deficit for 2023-24 and will be resubmitted to Scottish Government at the end of June to clarify some assumptions.</li> <li>• 3% savings target is required and this will be taken forward by the Sustainability and Value Group.</li> </ul>	

- In the process of finalising our May financial position with indicative figures showing an overspend a little above our financial plan. The main drivers of the deficit are high levels of Nurse staffing in April & May together with limited progress on achieving savings.
- Supplementary staffing costs remain at high levels – with increases seen on agency nursing from the levels seen in 22/23 and banding payments for non-compliant junior medical rotas remaining high.
- High inflation is continuing to impact in areas such as drugs, medical supplies and catering provisions.
- NHS Grampian is not alone – with all territorial boards were facing similar financial pressures for the 2023/24 year.”

The Sustainability and Value Plan had a number of themes and each theme had an executive lead. A finance person would also be aligned to each theme. A more detailed report would be shared for the next GAPF meeting.

The group discussed the view of offering more overtime to NHS Grampian employees to reduce the use of agency staff and be of benefit to some staff in the financial crises of being able to work extra in NHS Grampian rather than having to work elsewhere.

Comments on the overtime suggestion as follows:

- Overtime depended on band/grade of staff
- Key was to fill vacancies to don't have to use overtime or agency staff
- Wellbeing of staff
- Trying to recruit a high number of recent graduates
- If the organisation offered real flexibility, then people may choose to work for NHS Grampian rather than an agency
- Overtime not mandatory
- Don't want staff to feel pressured to work overtime and be tired
- Managers need to monitor staff working overtime
- Cannot work in own board as an agency worker
- How to change the short term need for financial gain to seeing the value of a permanent contract? National work ongoing around this

Lorraine Hunter, Head of HR Service Centre, was leading a group looking into the areas which used the most overtime to understand the data better.

c. Staff Breaks, Rest and Recovery Short Life Working Group

Steven Lindsay explained that in November 2022 GAPF approved a joint working group with Area Clinical Forum (ACF). This group had been established with a wide range of participants from clinical

professional groups and members of GAPF along with relevant topic professionals eg We Care and Medical Rota Monitoring Teams.

The group had met 3 times, so far, and was looking at available evidence and research from within and out with NHS Grampian. This included existing questionnaires and survey results eg Culture Matters and We Care pulse surveys which included a question asking staff to indicate if they were taking adequate breaks in the week prior to completing the survey. Over 4 surveys, a small percentage of staff felt they were taking adequate breaks and a small number admitted to taking no breaks. Over 50% felt they were not taking enough breaks during their shifts. This information confirmed what the Group felt was known information.

Steven Lindsay noted that working with ACF members was positive and brought a different perspective to the discussion. The ACF chairperson role was out for election, so a change may be incurred.

Philip Shipman noted that the reasons staff were not taking breaks had not been asked and these may not be straight forward. The group wanted to look at the root causes and solutions.

The group discussed and comments made as follows:

- A need to keep staff informed of what the entitlement to breaks was
- Ensure managers understood the need for breaks and the timings of breaks (eg not near end of shift)
- A lot of people not applying for time off in lieu (TOIL) if missed a break
- Better understanding of TOIL required
- Requirement for enforcement and checks to be done to ensure staff have breaks
- Leadership was required to promote taking breaks
- Health and wellbeing of staff and staff feeling valued if leadership around taking breaks
- Energy levels low after a 12 hour shift without break, fluid, nutrition intake, etc.
- What are the barriers to taking a break? Is this due to the staff rest room being too far from the workplace, or having to come out of personal protective clothing (PPE), etc.
- Feedback received from staff not taking breaks includes “puts more pressure on staff” and “if don’t take a break can finish the amount of work required and maybe finish work on time”
- Staff not taking/getting breaks had been an issue pre-pandemic. Cultural reasons and feel the responses will be more complex than just too busy
- Need to remove the sense of guilt staff have for taking a break

	<p>Philip Shipman explained a plan to ask staff a follow up question on the next We Care Pulse Survey around the reasons why staff are not taking breaks. This would assist with understanding the root causes to allow the group to take forward.</p>	
5	<p><b>Provided with a continuously improving and safe working environment, promoting the health and wellbeing of staff, patients and the wider community</b></p> <p>a. Prevention and Management of Violence and Aggression Policy</p> <p>Susan Simpson presented the policy which had been reviewed in light of requests from the Health and Safety Executive (HSE) and other changes required. These included adding a section on Key Performance Indicators (KPI) and a change of language in the section on security for Dr Gray's as porters were the responders there.</p> <p>Those attending the meeting approved the policy, however, the group was not quorate due to on Staff Side organisation rep who had to leave the meeting early. It was agreed to circulate to GAPF Staff Side Reps for virtual approval. The requirement was for a minimum four Staff Side organisations to approve the policy. Three had approved at the meeting.</p>	JA
6	<p><b>Involved in Decisions</b></p> <p>a. Pregnancy Loss Pledge</p> <p>Geraldine Fraser had shared correspondence from Angela Crawley, MP, asking Boards to sign up to a Pregnancy Loss Pledge.</p> <p>Emma Hepburn had gathered information on the support NHS Grampian already offered employees which was outlined in the paper circulated along with a note of other organisations which had signed up to the pledge.</p> <p>To sign up to the pledge, Boards had to meet a number of criteria. NHS Grampian already offered a number of ways to support staff but not everything in the pledge was covered.</p> <p>Signing up to the pledge would not affect what staff were entitled to under agreed policies and terms and conditions. The purpose was to show that the organisation was mindful about the importance of this to the workforce and about managers showing understanding and having a supportive environment.</p>	

GAPF gave views on the pledge as follows:

- Pregnancy loss affected a lot of staff and the pledge would support their welfare
- Once for Scotland Workforce Project Group had written to the Scottish Government Health Department around the review of the Supporting Work Life Balance policy
- Would Health and Social Care Partnerships also be asked to sign up to the pledge? Unsure if it would be the individual employers eg NHS Grampian and three local councils
- Good to have the pledge to show empathy, understanding and compassion to staff
- Would support managers to be compassionate and help them know how to acknowledge and deal with sensitive situations as these
- Should the CET consider how they wished the decision to be ratified or progressed

Emma Hepburn and Geraldine Fraser agreed to look further at the gaps which would have to be filled by NHS Grampian before signing up to the pledge. They would request further information from the authors of the pledge where the information required was too vague.

It was agreed that a short life working group would be set up. Geraldine and Emma would arrange this and share the information with Joan Anderson who would circulate for volunteers to GAPF, GAPF Sector Partnership Forums, Health and Safety Committees, GAPF Sub-Groups and Staff Side. Joan Anderson would also request a Partnership Rep to sit on the group.

CET to be involved in endorsement to complete the work required.

b. Public Holiday Proposal

GAPF had requested the GAPF Terms and Conditions Sub-Group to look at the positives and negatives for different options for public holidays across NHS Grampian and a paper had been shared.

The group discussed the paper and made the following comments:

- Different councils had different public holidays
- Within councils, different areas had different public holidays
- Never going to please everyone
- Seen as unfair by some that public holidays were based on the Aberdeen City public holiday dates rather than Aberdeenshire or Moray
- People working in a different council area to that which they lived lead to having public holidays which may be different to that of children in school or other relatives, etc
- One of the barriers to any potential change seemed to be systems feasibility eg SSTS and health roster and a test of change could be needed.

- Is it a priority to spend time on looking into system feasibility at this time when so much else was going on?
- Status quo would give least work but was seen to be biased against Aberdeenshire and Moray staff
- Could a cost to buy out public holidays and have the flexibility be calculated
- People would have to give up enhanced pay for any public holidays which were bought out
- Precedent for public holiday buy out within consultants contracts a number of years before. This could be looked at if consideration was going to be given to buy out of public holidays
- Informal arrangements around multi-professional teams already existed eg to ensure the correct professionals were there when a consultant was working
- Not a good use of time to spend a year working on systems and costs and no agreement reached at the end of it. Other more pressing priorities
- If change some public holidays to annual leave, could have a lot of staff asking for the previous public holiday days off due to schools or clinics being closed
- Unsure if changing would give the fairness being looked for
- Other organisations had moved public holidays to annual leave and staff had not complained
- If public holidays changed to annual leave, normal annual leave arrangements would apply for approving time off
- Offer a couple of options and trial for a year
- Option 1 may be the preferred option to work out a cost benefit analysis (do we need to offer financial or additional leave, technical cost and what is the benefit? Do we see services being offered more consistently and does this reduce the cost of running the services on those Mondays. Does NHS Grampian get a benefit?)
- Could the three councils be asked to align their public holidays to allow NHS Grampian to then match up to one set of dates and allow NHS Grampian staff to continue to receive enhanced payments when working a public holiday
- Wider than just NHS Grampian geographical area. Staff also live outside the three council areas eg Tayside and Highland
- Staff not always happy about having to work a public holiday despite the enhancements received

GAPF agreed to ask the GAPF Terms and Conditions Sub-Group co-chairs Diane Annand and Gemma Hood to undertake a feasibility study including looking at SSTS to see what was possible and bring back to GAPF for 17 August meeting. 21 September planned for the development event so no business meeting and there would be difficulties delaying to October in terms of communicating public holiday dates to staff.

7	<b>Appropriately Trained and Developed</b> – no items	
8	<b>Treated Fairly and Consistently, with Dignity and Respect, in an environment where Diversity is Valued</b> - no items	
9	<b>Any Other Competent Business</b> - none	
10	<b>Communications messages to the Organisation</b>  Steven Lindsay would prepare a report from the meeting for the NHS Grampian Board.	<b>SL</b>
11	<b>Date of next meeting</b>  The next meeting of the group to be held at 10am to 12.30pm on Thursday 20 July 2023 via Microsoft Teams.  Agenda items to be sent to <a href="mailto:gram.partnership@nhs.scot">gram.partnership@nhs.scot</a> by Wednesday 23 June 2023	

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