

STAFF GOVERNANCE STANDARD MONITORING FRAMEWORK 2021-2022



Monitoring Strand	Questions	Response
<p>Overarching – Staff Experience and Engagement</p>	<p>The Health and Social Care Staff Experience Report 2021 was published on 7 February 2022.</p> <p>Please confirm your 3 key areas identified in response to your Board Staff Experience Report and progress on actions to address these.</p>	<p>The key areas identified include:</p> <ol style="list-style-type: none"> 1. Ongoing focus and support on staff health and wellbeing with a particular focus on promoting a mentally healthy workforce. A wellbeing strategy and associated KPIs have been approved and a programme of wellbeing initiatives and campaigns has been developed for delivery during 2022/23. In addition, a programme of training and awareness sessions for managers and staff has been introduced to increase awareness in relation to mental health and wellbeing. The programme includes: <ul style="list-style-type: none"> • Mental Health Awareness Sessions for Leaders, Managers and Staff. A total of 6 sessions for managers and 6 sessions for staff are planned for delivery in 2022/23 – with 3 sessions for managers completed to-date. • Peer Support Network. In collaboration with NES and NHS Lanarkshire Staff Care team, a group of staff from across the hospital will be trained as peer supporters.

		<p>The training is based on a psychological first aid model and will equip staff to provide local peer support. For 2022/23, an initial cohort of 12 staff will be identified and trained and the training is scheduled for delivery in December 2022 and February 2023.</p> <ul style="list-style-type: none"> • Mental Health First Aid training for Wellbeing Advisors. This is an accredited course delivered by Scottish Association for Mental Health (SAMH) and training was completed in October 2022 • NEBOSH Wellbeing in the Workplace training. This is an accredited course and is being delivered to increase understanding of factors and initiatives that impact on workplace mental health support. The programme is targeting members of the Board's Healthy Working Lives Group to support them in planning future wellbeing campaigns and initiatives and is scheduled for delivery in November 2022. <p>2. Visibility of senior managers and Board members – Regular leadership work-rounds and visits to wards/ department have recommenced (having been reduced during the Coronavirus pandemic) to increase the visibility of senior leaders across the organisation.</p> <p>3. Leadership and team development. A range of leadership and management development programmes are scheduled for delivery during 2022/23 to support succession planning and ongoing improvements in leadership capacity and capability across the organisation. These will target aspiring, newly appointed and established leaders and managers from a range of disciplines and departments.</p>
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		<p>Two programmes for aspiring and newly appointed leaders have already commenced, and a further cohort is scheduled to commence in February 2023. A development programme for new Charge Nurses commenced in September 2022, and a Senior Charge Development programme is due to commence in November 2022. Interventions to support team development and maintenance for teams impacted by the implementation of the new clinical model will also be provided as required.</p>
<p>Overarching – Culture and Values</p>	<p>Compassionate and inclusive leadership can have significant benefits to the workforce and may also lead to better care and outcomes for patients and service users</p> <p>Please describe one action that your Board is taking to nurture these values of collaboration and compassion through leadership.</p>	<p>Development of compassionate and inclusive leadership, and promotion of a culture of psychological safety in teams, is a core aim of all leadership development programmes being delivered within the organisation. Promotion of the importance and benefits of compassionate leadership is also embedded in the mental health awareness training for managers.</p> <p>Interventions are designed to increase understanding of:</p> <ul style="list-style-type: none"> ▪ the genesis of compassionate leadership and the essential skills and activities needed to demonstrate it ▪ the impact and benefits of adopting a compassionate approach ▪ individual values, personality styles and preferences, and how these impact on behaviours and responses and the people that they lead. ▪ the things that leaders and managers can do to promote compassionate leadership, what gets in the way, and how/where they could develop their skills further

	<p><u>The letter from the Cabinet Secretary for Health and Social Care; and the Cabinet Secretary for Finance and Economy dated 9 September 2021</u> asked Boards to take steps to embed Fair Work First in implementing and applying workplace policies and practice.</p> <p>Please provide an example of a step your Board has taken to progress the Fair Work principles across your Health Board.</p>	<p>The State Hospital agreed and introduced a recruitment strategy in June 2022. This covers all aspects of recruitment development needed including filling workforce gaps through inclusive development. This will create a sustainable pipeline of talented staff and an improved ability to retain people.</p> <ul style="list-style-type: none"> • A newly established Workforce Governance Group will include a recruitment stream which will include: • Use of Annex 21, enabling the use of trainees to develop into roles • Ensure that the recommendations from ‘Fair and Health Work for All’, the Scottish Government’s health and work strategy, are taken in to account • Social inclusion initiatives, such as ‘Best Start, Bright Futures’, part of the Scottish Government’s Tackling Child Poverty Delivery Plan, where apprenticeship opportunities will available for individuals over age 25 across NHS Scotland • Initiatives to enable young people to enter employment are taken into account, including modern apprenticeships and Project Search
<p>Well Informed</p>	<p>We understand from your 2020-2021 Staff Governance Monitoring Return that new communication methods including digital solutions, introduced through the pandemic that have led to positive outcomes may be continued as we move back towards business as usual.</p> <p>Please provide an example of one of these communication methods that has been embedded in your Board.</p>	<p>The State Hospital has now embedded YouTube, Facebook and Twitter as formal channels of communication. All recruitment adverts are now posted on social media which we also use to support local and national events and initiatives. We have continued to grow our ‘subscribers’, ‘followers’ and those we are ‘following’. In 2021/22:</p> <ul style="list-style-type: none"> • YouTube views - 8,044, watch time (hours) – 304.8, subscribers – 66, impressions – 31,625 and click-through rate – 9.5%. • Facebook reach was 20,109. Facebook page visits for the same period was 1,422. Page Likes - 107.

		<p>We did not have a Facebook account in 2020/21. Launch took place in June 2021.</p> <ul style="list-style-type: none"> • Twitter reach from January to April (Quarter 4) of 2021/22 was 41,000 impressions (14,100 in 2020/21) and 365 Likes (104 in 2020/21). <p>2022/23 will see further use of social media, including recruitment and marketing campaigns to attract new staff.</p> <p>We also continue to have Staff Bulletins updating staff on key messages information including updates from the Board Meetings and general overall updates including Whistleblowing, HR issues and Policy updates.</p> <p>A 'Wellbeing Vision' newsletter is produced quarterly in addition to the regular Vision. This started in July 2022.</p> <p>The Wellbeing Team have dedicated ONELAN screens that are utilised to assist in promoting health, safety and wellbeing initiatives and information campaigns. The screens are located in prominent staff areas, including the staff dining room, wellbeing centre and security key room.</p>
<p>Appropriately trained and developed</p>	<p>The Health & Social Care Staff Experience Report 2021 shows that responses to the following questions have declined on average by 2 points from 2019:</p> <ul style="list-style-type: none"> • I have sufficient support to do my job well • I am given the time and resources to support my learning growth <p>These scores suggest a need for future focus on staff development as we move from the short-term immediate crisis which has understandably been the focus over the pandemic whilst recognising continuing staff and system pressures.</p>	<p>1. An annual Corporate & Directorate Training Plan is produced that details workforce learning and development needs, priorities and targets for the coming year. The plan gives cognisance to national and local targets and service priorities, as well as statutory and mandatory training requirements. Individual PDPs are also collated on an annual basis to help inform the content of the plan and to ensure opportunities are available to address individual development needs and CPD. Key learning and development priorities and opportunities for 2022/23 include:</p>

	<p>1. Please describe one action your Board is taking to focus on staff development.</p> <p>2. Please confirm what percentage of staff within the Board has a signed off appraisal discussion on Turas Appraisal as of 31 March 2022.</p>	<ul style="list-style-type: none"> ▪ Leadership and management development - with an emphasis on leadership skills, people management, and supporting and maintaining staff wellbeing. ▪ Risk and resilience - including incident command training, and training to support implementation and use of PMVA Level 3 (PPE). ▪ Digital skills – including training to support the implementation and rollout of RiO, Hospital Electronic Prescribing and Medicines Administration (HEPMA), Tableau Dashboard, and eESS manager and employee self-service. ▪ Practice development - including training on behaviour change literacy and physical health, improving observation practice, autism and intellectual disability, relational approaches and trauma informed care, dementia, and excellence in care. ▪ Realistic medicine and quality improvement. <p>Funding support is provided to facilitate staff attendance at external courses and conferences to support development needs identified in individual PDPs. A bursary scheme is also in operation to enable staff to undertake further and higher education, with 9 staff currently being supported on educational programmes ranging from HNC to masters and clinical doctorate level.</p> <p>2. A total of 76.4% of staff had a signed off appraisal discussion recorded on Turas as of 31 March 2022. Chart 1 below provides details of the percentage of staff with a review completed within the previous 12-month period (reported by month for 2021/22) and highlights that although the % of staff with a signed-off appraisal discussion decreased slightly in Quarter 4 (due primarily to staff absence and associated staffing resource pressures) the average % compliance throughout the year was 84.9%. As of 31 October 2022, the compliance level was 84.6%</p>
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		<p>Chart 1 - PDPR Compliance Levels (Apr 2021 - Mar 2022)</p> <table border="1"> <thead> <tr> <th>Date</th> <th>Percentage Compliance</th> </tr> </thead> <tbody> <tr><td>30 April 2021</td><td>89.3</td></tr> <tr><td>31 May 2021</td><td>91.3</td></tr> <tr><td>30 June 2021</td><td>91.4</td></tr> <tr><td>31 July 2021</td><td>91.2</td></tr> <tr><td>31 August 2021</td><td>90.2</td></tr> <tr><td>30 September 2021</td><td>88.6</td></tr> <tr><td>31 October 2021</td><td>87</td></tr> <tr><td>30 November 2021</td><td>83.2</td></tr> <tr><td>31 December 2021</td><td>81.1</td></tr> <tr><td>31 January 2022</td><td>76.4</td></tr> <tr><td>28 February 2022</td><td>76.8</td></tr> <tr><td>31 March 2022</td><td>76.4</td></tr> </tbody> </table>	Date	Percentage Compliance	30 April 2021	89.3	31 May 2021	91.3	30 June 2021	91.4	31 July 2021	91.2	31 August 2021	90.2	30 September 2021	88.6	31 October 2021	87	30 November 2021	83.2	31 December 2021	81.1	31 January 2022	76.4	28 February 2022	76.8	31 March 2022	76.4
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<p>Involved in decisions</p>	<p>The Scottish Government are committed to working in partnership to enact our Workforce strategy. Partnership structures are integral to understanding the needs within our Health and Social Care system, and how changes are likely to impact on the experiences of Health and Social Care staff.</p> <p>1. Please provide an example of how partnership engagement through your Area Partnership Forum has influenced Policy and Practice in your Health Board over the past year.</p> <p>2. Please describe how your Board ensures that areas of interest at a local level align with the work being taken forward through National Partnership Forums.</p>	<ol style="list-style-type: none"> 1. The Partnership Forum has significantly developed over the past 12 months and works well to align policy into practice. Close working has taken place on developing and agreeing the new Clinical Model and in particular the staffing and organisational change issues. 2. The Employee Director, Chief Executive and Director of Workforce ensure the agenda aligns with the national work and regular updates are given at each meeting along with a summary of new issues. 																										

Treated fairly and consistently, with dignity and respect, in an environment where diversity is valued.

[The NHSScotland Bullying and Harassment Policy](#) provides a supportive environment to employees seeking an early resolution to bullying or harassment concerns and a formal mechanism to address unresolved, significant or persistent bullying or harassment.

1. Please provide the number and of Bullying and Harassment cases raised during the past year at the following stages of the NHSScotland Bullying and Harassment Policy:

- Early resolution
- Formal procedure

2. Please advise how many of the cases raised at early resolution have been resolved at this stage and how many have been progressed to the Formal procedure.

3. Please describe any steps that have been taken locally during the past year, to embed learning from bullying and harassment cases and in particular from cases resolved at early resolution stage.

4. Please advise what steps your Board is taking to specifically record bullying and harassment associated with protected characteristics.

Fostering an inclusive culture and supporting individuals from all backgrounds is key to improving staff experience and delivering the best care for the people of Scotland. We encourage boards to take further steps to support a diverse and inclusive workforce that is adaptive and involved in decisions, where equality and fairness are supported, and staff feel valued and empowered. We understand from the 2020-2021 Staff Governance Monitoring Exercise that work has been underway in Boards to enable staff networks and to improve diversity data recording and monitoring.

Questions 1 and 2.

Bullying and Harassment cases 1 Apr 2021-31 Mar 2022			
Raised at Early resolution	Resolved at Early resolution	Raised at Early resolution and progressed to Formal	Raised at Formal
		1	3

It should be noted that the Board did not record issues raised or resolved at early resolution. However, this has now been rectified since April 2022 and all cases are now recorded.

Question 3

Early resolution cases have started to be recorded. However most recently where learnings have been identified, these are provided to the relevant manager and training or other appropriate support provided. The Plan is to continue to monitor this and move to a “lessons learned” process with Line Managers.

Questions 4

Given the small numbers and size of the Board, this has not been done to date. We are looking at a system to be put in place which enables us to record but also protect.

	<p>5. Please provide an example of a positive outcome from a staff equality network in your Board.</p> <p>6. Please provide an example of work being undertaken to improve existing equalities data.</p>	<p>Question 5</p> <p>Due to the size of the Board, these have been difficult to establish. However, we have had some initial discussions with other Health Boards around how we can work together on this and lessons learned – particularly around smaller Boards.</p> <p>Question 6</p> <p>TSH intend to make improved use of the electronic systems available to us over financial year 2022/23, specifically EESS. This will enable staff to have oversight of their data and the ability to provide up to date and accurate data themselves (ie roll out of self service)</p>
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Provided with a continuously improving and safe working environment, promoting the health and wellbeing of staff, patients and the wider community.

Everyone who works in our Health Service must have the confidence to raise any concerns. Boards are expected to investigate concerns fairly and appropriately and ensure that the individual raising the concern does not suffer any repercussions for doing so. The [Whistleblowing Standards](#) require Boards to record all information on whistleblowing concerns (including concerns raised anonymously).

- 1. Please provide the number and of whistleblowing cases raised and resolved during the past year at the following stages of the NHSScotland Whistleblowing Policy. For each reported, please also advise whether the investigations are on-going or concluded and whether feedback was provided to the individual.**
- 2. Please advise how many of these whistleblowing cases included a bullying or harassment element.**
- 3. Please describe the actions that your Board has undertaken to improve awareness of how to raise a concern**
- 4. Please provide an example of an improvement made in response to a concern being raised or through other continuous improvement conversations. Please describe how this was addressed to ensure staff feel encouraged and confident to raise concerns.**

Our National Workforce Strategy, published on 11 March 2022, highlights the key priority of the wellbeing of our health and social care workforce, wherever they work. **In view of information that is anticipated to be included in [Board Workforce Plans](#) we do not require Boards to supply information about absence and wellbeing at this stage.**

Questions 1 and 2.

Whistleblowing cases 1 Apr 2021-31 Mar 2022				
	Number	Ongoing	Concluded	Feedback provided
Raised at Stage 1				
Resolved at Stage 1				
Raised at Stage 1 and progressed to Stage 2				
Raised at Stage 2	3		3	Yes
Resolved at Stage 2				
Cases raised anonymously				
Total cases (at all stages)	3			
Total cases with a bullying or harassment element	2			

Questions 3

Roll out of the Whistleblowing Standard took place when launched and regular communications take place within Staff Governance. All Staff are encouraged to undertake the training for Staff and Managers on raising a Whistleblowing Claim developed by INWO.

	<p>Attainment of Healthy Working Lives has been an aspiration since 2008 (and reinforced as a commitment within CEL 01 2012).</p> <p>We note the achievements and progress in Boards and do not require any further information.</p> <p>The National Workforce Strategy for Health and Social Care in Scotland states our vision for: “A sustainable, skilled workforce with attractive career choices and fair work where all are respected and valued for the work they do.” Key to delivering this vision is ensuring we retain our highly qualified and knowledgeable workforce.</p> <p>5. Please provide an example of specific work that has been undertaken in the Board to understand the issues affecting retention across your workforce and any actions planned or implemented.</p>	<p>TSH participated in the “Speak Up Week” with a daily communication to all staff regarding the Standard. Pens, Post its and notepads were developed with the strapline “Speaking up is in everyone’s interests” and a link to the INWO</p> <p>Question 4</p> <p>As part of the outcome of the most recent concern raised, a number of recommendations were made around how improvements could be made to the Whistleblowing process, understanding of individuals of this and the supports available to them through this. An action plan was created to support this process and is regularly reviewed by Staff Governance.</p> <p>Question 5</p> <p>Improvements have been made to the availability of data on turnover within the Board, ensuring that this information is now visible on a monthly basis. Improvements are also being made (through EESS self-service) to the access staff have to exit questionnaires. In addition to this, a Workforce Steering Group has been established which will have oversight of all aspects of workforce planning including retention and turnover, as well as ensuring that new staff are fully supported. Where issues are identified through exit interview analysis, these are highlighted to the relevant director in order that support can be put in place and any relevant actions to improve services are taken forward.</p>
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