


Staff Governance Committee

18 June 2020, 13:30 to 14:45
MS Teams


Agenda

1. **Apologies for Absence**
2. **Declaration of Members' Interests**
3. **COVID-19 Briefing Session**
 - 3.1. **Covid-19 Governance Update**

(enclosed)
CP

 Item 03.1 COVID-19 Governance Update.pdf (6 pages)
 - 3.2. **Covid-19 Workforce Update**

(enclosed)
LD

 Item 03.2 COVID-19 Workforce Update.pdf (6 pages)
4. **Any Other Competent Business**
5. **3 July 2020 at 10:00 am, via Teams**

Meeting:	Staff Governance Committee
Meeting date:	18 June 2020
Title:	Item 3.1 Covid-19 Governance Update
Responsible Executive:	Carol Potter, Chief Executive
Report Author:	Gillian MacIntosh, Board Secretary

1 Purpose

This is presented to the Board for:

- Assurance

This report relates to a:

- Government policy/directive
- Legal requirement

This aligns to the following NHSScotland quality ambition(s):

- Safe
- Effective
- Person Centred

2 Report summary

2.1 Situation

This paper provides a summary of the governance arrangements put in place within NHS Fife since mid-March 2020, in consequence of the unprecedented challenges created by the outbreak of the Covid-19 pandemic and the resultant public health emergency. Its purpose is to provide assurance to Committee members that proper operational structures have been implemented and robust governance arrangements continue to operate, to enable effective and continued scrutiny of the Executive during this extraordinary period of demand on the Health Board.

2.2 Background

In recognition of the challenges caused by the rapid mobilisation of services to address Covid-19, approval to revise governance arrangements across NHS Boards was given by the Scottish Government Director of Health Finance, Corporate Governance & Values in a letter to Board Chairs, dated 25 March 2020. Individual NHS Boards were invited to submit their specific proposals for governance during the pandemic period to the Office of the Chief Executive; NHS Fife returned their own submission on 30 March.

At its April 2020 meeting, NHS Fife Board members considered a paper outlining the Board's planned approach to governance whilst NHS Fife continues to deal with the Covid-19 pandemic, based on the principles contained in the submission made to the Scottish Government. The aims were to ensure that NHS Fife:

- could effectively respond to Covid-19, and at the same time appropriately discharge its governance responsibilities;
- maximises the time available for management and operational staff to deal with the significant challenges of addressing Covid-19 demand within clinical services; and
- minimises the need for people to travel to and physically attend meetings, thus mitigating the risk of disregarding government guidance on social distancing and limiting travel outwith one's own home.

Since the outbreak of the pandemic in mid-March, the Board has held (on 8 April and 27 May) two full meetings remotely, utilising both tele- and video-conferencing, with a prioritised agenda in place for each Board meeting. Whilst it has not been possible to meet physically in a public setting due to the ongoing lockdown restrictions and social distancing measures, for the May Board meeting representatives from the local media were invited to listen in via Teams, and this has worked successfully. Board papers continue to be published in advance on the NHS Fife website, as do the Board minutes after each meeting has taken place.

An hour-long meeting of the Chair, Vice-Chair and members of the Executive Team has taken place each week since mid-March, with a full minute circulated to Board members for their information. The Chair and Vice-Chair additionally have regular contact with the Chief Executive and other key members of the Executive Team on priority items as and when required. Regular meetings with local elected representatives (MPs/MSPs) also continue to operate.

Whilst the scheduled dates in May for the Board's committees were stood down, a series of Covid-19 related briefing sessions have been timetabled for each committee in June, prior to the proposed resumption of Board committees in July. Agendas for forthcoming meetings will reflect the priorities of the Board's ongoing response to Covid-19, in addition to the consideration of business otherwise requiring approval, such as agenda items linked to the approval of the annual accounts. The Chair, Vice-Chair and Committee Chairs will liaise with the Executive Team to identify what business must be considered by the Board and its committees and when, if necessary, meetings need to go ahead. It is likely that much routine business will be suspended or deferred, and each Committee's workplan will need to be reviewed to ensure that new items related to Covid-19 are covered appropriately.

2.3 Assessment

The Scottish Government's letter of 25 March recognised that no single approach to governance would suit all Boards during the pandemic period and that individual Boards should agree and put in place a model that suits their own specific requirements. Some national cross-comparison work has since taken place on Boards' arrangements, as initially reported to the Chairs' Corporate Governance Steering Group in late April, and a further, more detailed update is being prepared for wider circulation / consideration. This initial report confirms that, as in NHS Fife, all Boards have put in place arrangements for undertaking meetings remotely, with most now utilising MS Teams for the conduct of meetings. Most Boards initially also stood down all Governance committee meetings, with any urgent committee business being incorporated into the main Board agenda. Those who have continued with Committee meetings have significantly reduced their frequency

(to meet only when absolutely required) and the coverage of their agendas, to focus on essential operational business only.

Guidance issued by Scottish Government after all Boards had submitted their initial returns meant that Boards had to consider holding Remuneration Committee meetings in the light of decisions to be made in relation to the Scottish Government Variation Order of 27 March, 'Overtime for Executive and Senior Manager staff during Coronavirus outbreak'. A meeting of the Remuneration Committee was thus held, via Teams, on 2 June.

As in NHS Fife, many Boards have put in place an organisational Command structure to provide direction, decision-making, escalation and communication functions during the pandemic period. Further details on this structure are included as Appendix A. Initially meeting on a daily basis, including at weekends, Gold Command has now reduced its frequency of meetings according to the reduction in Covid-related activity and reporting from its supporting Silver and Bronze groups. Routine meetings such as the weekly meeting of the Executive Team, and a formal, monthly EDG, have been resumed.

The Staff Governance Committee is invite to note the governance arrangements put in place within NHS Fife during the pandemic period.

2.3.1 Quality/ Patient Care

Delivering robust governance across the organisation is supportive of enhanced patient care and quality standards.

2.3.2 Workforce

N/A

2.3.3 Financial

The Covid-19 impact on costs is unprecedented and represents a major financial challenge for all Health Boards. Continuing with robust scrutiny arrangements is therefore vital.

2.3.4 Risk Assessment/Management

This paper relates to how the whole system of governance operates, and so is relevant to all risks on the corporate risk register. Compliance with Scottish Government guidance and practice in other Boards is an important mitigating factor against risk.

2.3.5 Equality and Diversity, including health inequalities

This paper does not relate to the planning and development of specific health services, nor any decisions that would significantly affect groups of people. Consequently an EQIA is not required.

2.3.6 Other impact

N/A

2.3.7 Communication, involvement, engagement and consultation

The Board has been open in its intended changes to governance arrangements and has communicated these to the auditors (both external and internal) and Scottish Government colleagues.

2.3.8 Route to the Meeting

This paper has been previously considered by the Chief Executive and Director of Finance. They have either supported the content, or their feedback has informed the development of the content presented in this report.

2.4 Recommendation

The paper is provided for:

- **Awareness** – For Members' assurance and information

The Staff Governance Committee is invited to review the arrangements put in place for continued governance during the pandemic period and reflect on their appropriateness.

3 List of appendices

The following appendices are included with this report:

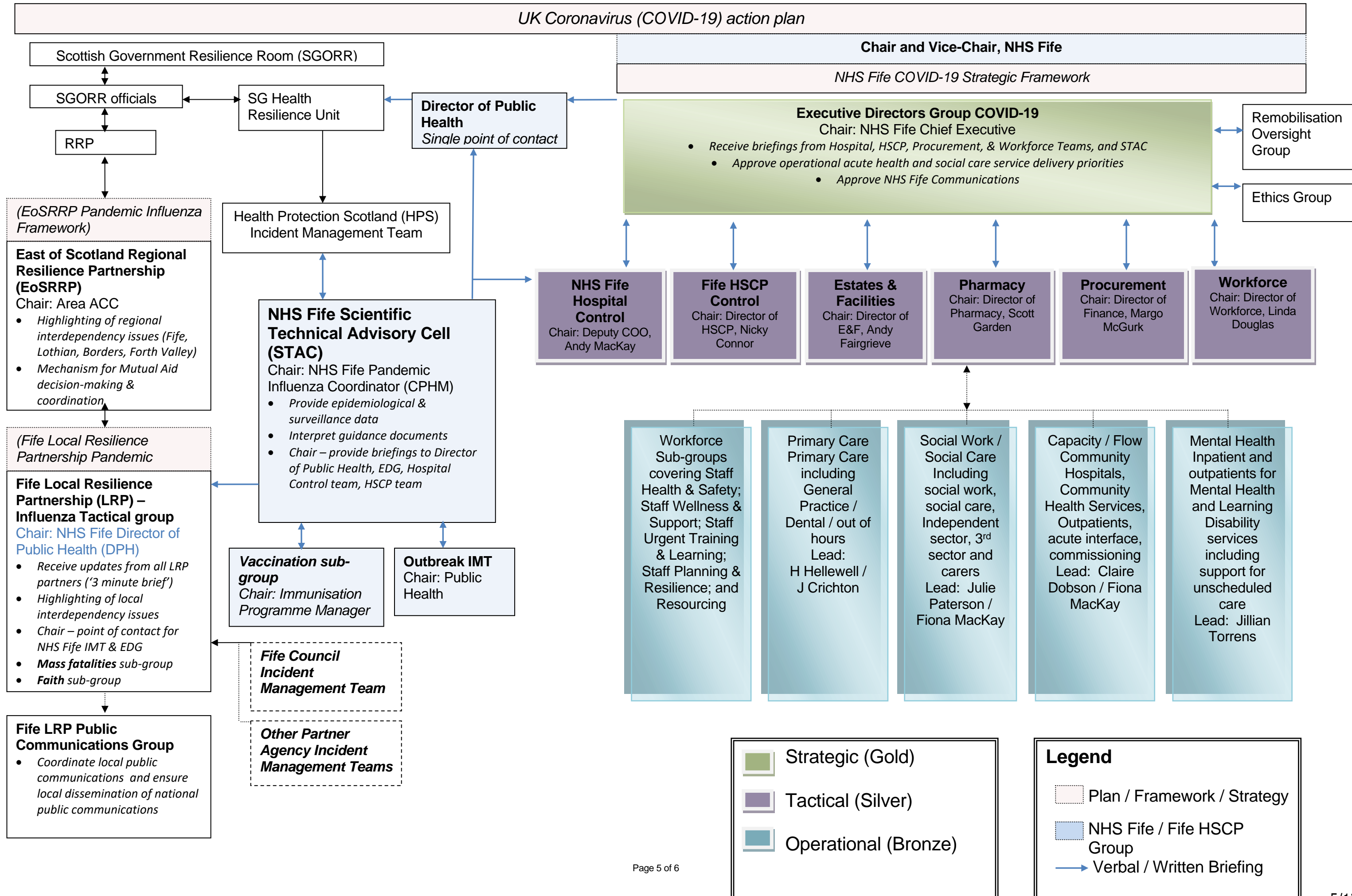
- Appendix A – Covid-19 Pandemic Organisational Structure Chart

Report Contact

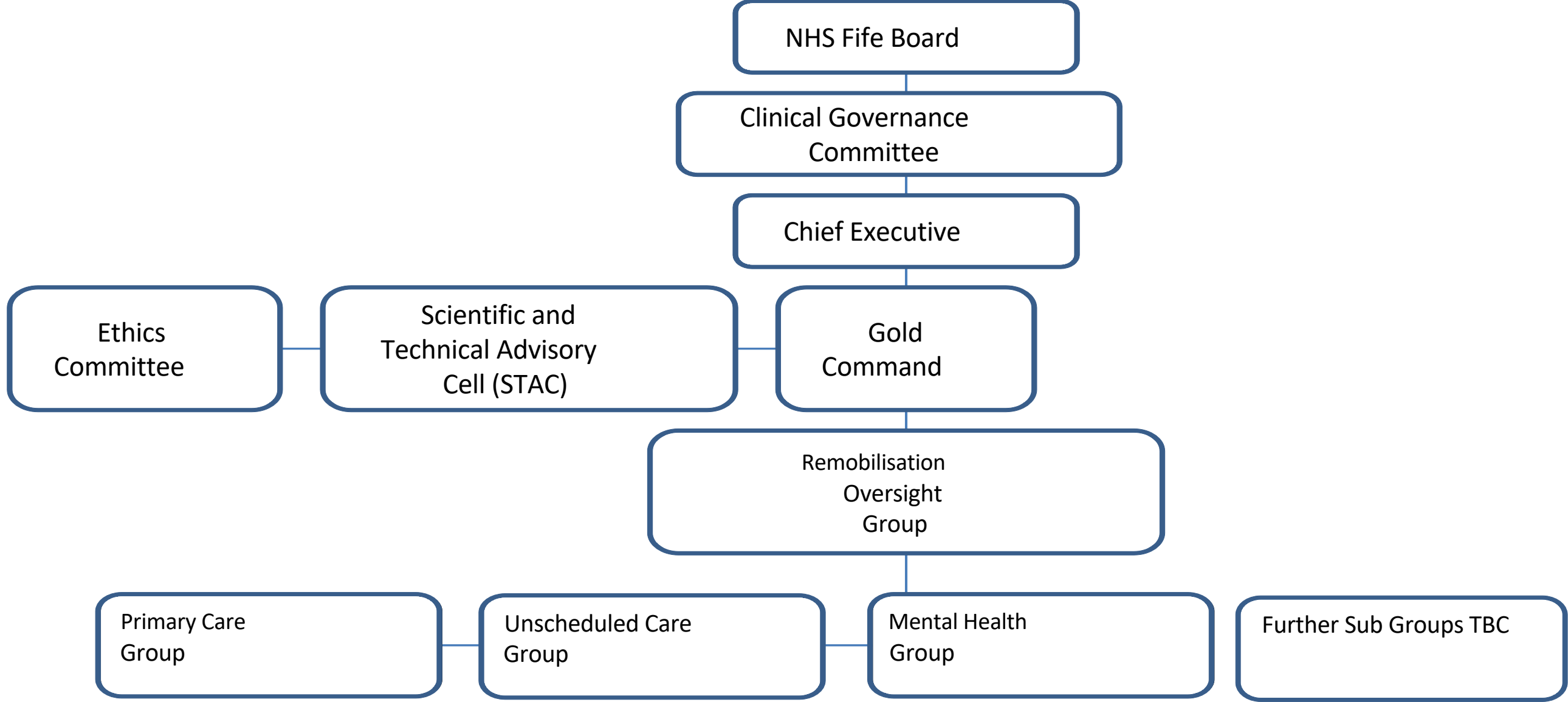
Gillian MacIntosh

Head of Corporate Governance & Board Secretary

gillian.macintosh@nhs.net



Governance Structure of Short Term Remobilisation Oversight Group



* Director of Health and Social Care will take the work of this group through the IJB

Meeting:	Staff Governance Committee Briefing Session
Meeting date:	Thursday 18 June 2020
Title:	Item 3.2 COVID-19 Workforce Update
Responsible Executive:	Linda Douglas, Director of Workforce
Report Author:	Workforce Leadership Team

1. Purpose

This is presented to Staff Governance Committee Members for:

- Awareness and Information

This report relates to a:

- On-going issue

This aligns to the following NHSScotland quality ambition(s):

- Effective, Safe and Person Centred

2. Report Summary

2.1 Situation

The purpose of this report is to provide Staff Governance Committee members with an update on the current position with regards to the Covid-19 Pandemic and to outline the planned arrangements for the remobilisation of NHS Fife's workforce.

2.2 Background

2.2.1 Recruitment and Resourcing and Deployment of Current Workforce, plus Additional Activity to Support the Workforce

To respond to COVID-19, NHS Fife undertook a number of recruitment campaigns at a local and national level aimed at increasing the workforce capacity in response to pressures presented by the COVID-19 pandemic. Over 1,000 people responded to these various campaigns and work has been on-going to accelerate these candidates through the recruitment processes and secure their availability to work. This has involved the need to abbreviate pre-placement checks, to allocation where the need is determined within the Board.

There are four streams of activity in place to supplement the existing workforce, increasing the existing nurse bank capacity, writing to leavers and retirees back to 2018/19, a Family and Friends Campaign and returning and accelerated Registrants, including allocation of Final Year students (medical and non medical).

The Silver Control Teams are responsible for determining their critical functions and for the deployment of existing staff. This includes the identification of substantive clinical employees who could be utilised within alternative areas and the identification of non-clinical staff who are working in non-essential areas who could be deployed into different roles or areas.

Assigning the supplementary workforce is co-ordinated by the Virtual Workforce Deployment Hub chaired by the Workforce Directorate, in conjunction with the Silver Control Teams and with input from professional and service leads, to ensure allocation is prioritised by greatest service need.

The Virtual Workforce Deployment Hub has a varied skill mix including domestics, porters, administrators to registrants. This has and will ensure that NHS Fife can meet service demand currently and in the coming months, as services move into remobilising and recovery and the deployment of existing workforce is impacted upon.

The central coordination of this supplementary workforce ensures that demands for staffing are given full consideration, ensuring a whole system response to the challenges faced by increased patient activity and COVID-19 related absence levels, taking account of modelling of required staffing levels.

As new requirements emerge the Virtual Workforce Deployment Hub's role has evolved into identifying areas of the existing workforce that may be mobilised to assist the service demand at any one time. NHS Fife as a pilot Board for "Test and Protect" (formerly Test, Trace, Isolate and Support Programme), we have been utilising the services of the Virtual Workforce Deployment Hub, to deploy some of our existing workforce, for example, those who are shielding and/or self isolating to roles in this new work stream.

In addition to the recruitment and resourcing activities, we identified early the need to support our staff and their wellbeing. Focussing initially on the range of established services and resources, we ensured what was available was communicated and promoted.

2.2.2 Workforce Development - Induction Arrangements

The provision for Induction has moved to a 'Fast-track' virtual programme, this is delivered on-line to ensure new starts can effectively get started in their role. The training materials, which include video's and e-Learning modules, are on LearnPro (the online learning content system). To date over 300 staff have travelled the 'Fast-track' Induction route (this includes substantive and bank staff).

2.2.3 Communications and Guidance

Important COVID-19-related information is available on a dedicated COVID-19 section on the intranet and is communicated to Staff. Originally via the Coronavirus Update for Staff message from the Chief Executive, and now via StaffLink the staff communications application. The Coronavirus Update for staff was published daily on the intranet from the

beginning of the pandemic and sent to all staff via email with a request for managers to share the information with staff who do not have regular access to emails. The message has recently been revised to weekly. There are Clinical, Workforce, Operational, Staff Health and Wellbeing, Media Updates and national guidance sections included. The new StaffLink app has been introduced bringing the latest news, information and guidance from across NHS Fife, it is available on work laptops or desktops and can be downloaded to employees personal devices.

NHS Fife regularly updates and issues Manager and Staff Guidance to set out what is expected of NHS Fife Staff and Managers in terms of Scottish Government directive, HR policies, local arrangements and the deployment of staff. These documents are designed to inform our workforce and work alongside our local resilience arrangements.

2.3 Assessment

2.3.1 Quality / Patient Care

Central co-ordination of the deployment of the supplementary workforce and existing workforce will ensure demands from services are considered from a system-wide perspective and based on clinical need, current / predicted absence levels and workforce modelling.

2.3.2 Recruitment and Deployment

In response to the COVID-19 pandemic, recruitment activity has concentrated on posts critical to the COVID-19 response. The demand from services for workforce, whether to meet extra demand or the inevitable absences due to staff absence (illness, self-isolating, shielding) have been met in the main through the Virtual Workforce Deployment Hub, utilising additional supplementary workforce gained via the NES hosted Portal for returning registrants, the local Friends and Family Campaign, Returning Leavers and Nurse Bank.

In addition, there has been the early appointment of 212 Student Nurses to 6 month fixed term posts within NHS Fife and it is anticipated that these employees will progress to substantive nursing posts as vacancies arise and on a managed basis.

Public Health have been working closely with the Virtual Workforce Deployment Hub to resource the new "Test and Protect" (formerly Test-Trace-Isolate-Support) Programme, where the workforce needs cannot be met from the existing Public Health team. The Virtual Workforce Deployment Hub initially identified and deployed shielded employees to undertake the contact tracing roles, similar to the approach of other Boards. A more targeted deployment exercise continues as the Test and Protect team scales up.

2.3.3 Staff Absence

The staff absence position has been steadily improving following the initial increase prompted by isolation requirements in early March 2020. The figures are below:

	Week 7 - 9/03	Week 8 - 16/03	Week 9 - 23/03	Week 10 - 30/03	Week 11 - 06/04	Week 12 - 13/04	Week 13 - 20/04	Week 14 - 27/04	Week 15 - 04/05	Week 16 - 11/05	Week 17 - 18/05	Week 18 - 25/05
COVID19 Positive	0.0%	0.0%	0.1%	0.2%	0.4%	0.8%	0.9%	0.9%	0.5%	0.3%	0.2%	0.1%
COVID19 Self Isolating	0.5%	4.5%	6.8%	4.9%	3.1%	1.9%	1.6%	1.4%	1.0%	0.8%	0.7%	0.5%
COVID19 Underlying Medical Condition	0.0%	0.4%	1.4%	2.1%	2.5%	2.6%	2.6%	2.5%	2.5%	2.5%	2.6%	2.6%
COVID19 Other	0.1%	0.3%	0.5%	0.4%	0.3%	0.3%	0.4%	0.5%	0.4%	0.4%	0.4%	0.4%
Sickness & Other Unscheduled Absence	5.8%	5.7%	5.6%	5.1%	4.6%	5.0%	5.1%	4.6%	4.6%	4.7%	5.2%	5.5%
Total Absences	6.4%	10.8%	14.4%	12.8%	10.9%	10.6%	10.6%	9.8%	9.1%	8.7%	9.0%	9.1%

2.3.4 Staff Health & Wellbeing

The Staff Wellbeing Hubs at various locations throughout the Board are being well utilised and appreciated by staff. Virtual yoga and mindfulness classes are available for staff to access online offering an opportunity for staff to pause, rest and feel refreshed. A Psychology Support Pack and Health and Wellbeing Resource for Staff During COVID-19 is available and a Psychology Staff Support Telephone line are available to all staff.

The Occupational Health & Wellbeing Team are providing an essential service in response to the pandemic. This has ranged from supporting the fast track recruitment of the supplementary workforce, supporting risk assessments of staff in the high risk categories, contributing to NHS Fife guidance. More recently efforts have been focussed on providing test results to managers and staff, supporting testing of asymptomatic staff and in relation to the Test and Protect programme.

2.3.5 Workforce Development

In addition to the Fast-track Induction process a range of on-line learning resources have been brought together, tailored to suit non-clinical and clinical roles. These are being reviewed regularly and updated when improved learning resources become available. Whilst at the beginning of the pandemic only the essential elements of induction were being provided, work is underway to re-shape both the induction process and future training delivery to ensure our staff continue to be inducted and trained effectively.

2.3.6 Remuneration and Performance

As a result of the declaration of a Coronavirus Pandemic a number of Remuneration and Performance Activities have been amended or paused. A paper detailing the amendments or paused remuneration or performance activities and the actions taken in response to them was presented to the Remuneration Committee on 2nd June.

2.3.7 Workforce Specific National Guidance

Since 02March 2020 there have been 40 COVID-19 Pandemic specific Variation Orders, Directors Letters or Guidance documents issued to NHS boards via, Scottish Government in collaboration with STAC, SPF and SWAG impacting advice or changes to staff terms and conditions of service. This has been across all aspects of staff governance including, staff safety at work, shielding, extending terms and conditions of service and pausing national working for example iMatter. Each item has been actioned, working closely with local staff side representatives to produce staff and manager guidance and communication briefs to the service.

2.3.8 Staff Governance 2020 – 2021 Workplan

The COVID-19 Pandemic paused some governance activity including the Staff Governance Committee scheduled for May. It is suggested the 2020 – 2021 workplan agreed by the Staff Governance Committee on 6th March be reviewed and resubmitted to the July committee to reflect the changed priorities for the year as a consequence of the Pandemic.

2.3.9 Partnership Working

The Area Partnership Forum and British Medical Association Local Negotiating Committee have resumed on a virtual basis, with meetings taking place in May and June respectively, along with the Local Partnership Forums.

2.3.10 Financial

There will be financial implications generated as a consequence of the COVID-19 pandemic.

2.3.8 Risk Assessment / Management

There is a risk that inadequate staff support provision may impact on staff attendance and on our ability to attract and retain staff in the longer term.

Prioritisation of requests for additional supplementary staffing will be undertaken jointly within Acute and the H&SCP Silver Control Teams, based on clinical need, current / predicted absence levels and workforce modelling, in order to manage and / or minimise risks where possible across the system.

2.3.9 Equality and Diversity, including health inequalities

N/A

2.3.10 Other Impact

N/A

2.3.11 Communication, Involvement, Engagement and Consultation

Staff Support and Wellbeing Group, Employee Director, Workforce Directorate Senior Leadership Team, Workforce Leadership Team and Associate Directors of Nursing.

2.3.12 Route to the Meeting

This paper has been considered by the above groups and the Director of Workforce and the EDG Gold Command Team as part of its development. The groups have either supported the content, or their feedback has informed the development of the content presented in this report.

2.4 Recommendation

Staff Governance Committee members are asked to note the content of this paper.

3. List of Appendices

N/A

Report Contact: Linda Douglas, Director of Workforce
Email: lindadouglas3@nhs.net