

STAFF GOVERNANCE COMMITTEE CONSTITUTION AND TERMS OF REFERENCE

Date of Board Approval: 26 May 2026

1. PURPOSE

- 1.1 The purpose of the Staff Governance Committee is to support the development of a culture within the health system where the delivery of the highest standard possible of staff management is understood to be the responsibility of everyone working within the system, and is built upon partnership and collaboration, and within the direction provided by the Staff Governance Standard.
- 1.2 To assure the Board that the staff governance arrangements in Fife NHS Board are working effectively, including in those services that are delegated to the Integration Joint Board.
- 1.3 To escalate any issues to the NHS Fife Board if serious concerns are identified regarding staff governance issues within services, including those delegated to the Integration Joint Board.
- 1.4 To oversee and evaluate staff governance activities in relation to the delivery of the Board's Population Health & Wellbeing Strategy, including assessing the staff governance and related risk management aspects of transformative change programmes and new and innovative ways of working.

2. COMPOSITION

- 2.1 The membership of the Staff Governance Committee will be:
 - A minimum of four Non-Executive or Stakeholder Board members. (A Stakeholder member is appointed to the Board from Fife Council or the University of St Andrews or by virtue of holding the Chair of the Area Clinical Forum)
 - Employee Director
 - Chief Executive
 - Director of Nursing
 - Staff Side Chairs of the Local Partnership Forums, or their nominated deputy
- 2.2 A Chair and Vice Chair of the Committee will be appointed by the Chair of the Board from the Non-Executive / Stakeholder membership of the Committee. In the event of the Chair of the Committee being unable to attend for all or part of the meeting, the meeting will be chaired by the Vice Chair. The Vice Chair will also support the Chair in the effective running of the Committee, including attending agenda setting meetings and approving draft minutes if so required.
- 2.3 Each member shall give notification if they are unable to attend a meeting. For Non-Executive members, they shall notify the Committee Chair, who may ask other Non-Executive members to act as members of the Committee to achieve a quorum. For Staff Side Chairs of the Local Partnership Forums, they will notify

the Lead Officer, confirming their nominated deputy. This will be reported to the Committee Chair. This information will be drawn to the attention of the Board in the meeting minute.

- 2.4 Officers of the Board will be expected to attend meetings of the Committee when issues within their responsibility are being considered by the Committee. In addition, the Committee Chair will agree with the Lead Officer to the Committee which other Senior Staff should attend meetings, routinely or otherwise. The following will normally be routinely invited to attend Committee meetings:

- Director of People & Culture
- Director of Acute Services
- Director of Health & Social Care
- Director of Planning & Transformation
- Director of Property & Asset Management
- Medical Director
- Board Secretary
- Heads of Service, People & Culture Directorate

- 2.5 The Director of People & Culture will act as Lead Executive Officer to the Committee.

3. QUORUM

- 3.1 No business shall be transacted at a meeting of the Committee unless:

- at least three members are present, at least two of whom should be Non-Executive or Stakeholder members of the Board.
- at least one of the Staff Side Chairs of the Local Partnership Forums, or their nominated deputy is present.

4. MEETINGS

- 4.1 The Staff Governance Committee shall meet as necessary to fulfil its purpose but not less than six times a year.
- 4.2 The agenda and supporting papers will be sent out at least five working days before the meeting.

5. REMIT

- 5.1 The remit of the Staff Governance Committee is to:

- Consider NHS Fife's performance in relation to its achievements of effective Staff Governance and achievement of the Staff Governance Standard, including scrutiny of systems and processes for structures and delivery to support compliance;

- Review action taken on recommendations made by the Committee, NHS Boards, or the Scottish Ministers on Staff Governance matters;
- Give assurance to the Board on the operation and effectiveness of Staff Governance systems within NHS Fife, identifying progress, risks, issues and actions being taken, where appropriate;
- Support the operation of the Area Partnership Forum and the Local Partnership Forums in their Staff Governance monitoring role and the appropriate flow of information to facilitate this;
- Maintain oversight of employee relations activity and trends, including grievances and disciplinary processes;
- Seek assurance that appropriate organisational learning is identified and implemented arising from employee relations cases, workforce investigations, staff survey findings, whistleblowing concerns and other workforce intelligence;
- Seek assurance that effective mechanisms are in place for engaging with all members of staff within NHS Fife and capturing staff experience;
- Provide scrutiny and oversight of the Board's equality, diversity and inclusion activities, particularly in relation to staff and staff networks, including receiving assurance reports from the Equality & Human Rights Steering Group;
- Provide scrutiny and assurance on the development and delivery of the Board's People and Workforce Strategy and associated delivery plans, ensuring alignment with the Staff Governance Standard and wider organisational priorities;
- Receive and scrutinise regular reports on workforce and HR performance indicators, including employee relations activity, workforce metrics, staff experience measures and organisational culture indicators, seeking assurance that appropriate improvement actions are in place where performance falls below expected standards;
- Seek assurance that appropriate improvement plans are developed and implemented where weaknesses are identified in workforce management systems, policies or practices;
- Provide oversight of the development, review and implementation of workforce policies, to ensure compliance with national NHSScotland workforce policies, employment legislation and relevant national guidance;
- Maintain oversight of workforce-related risks recorded within the Corporate Risk Register and seek assurance that appropriate mitigating actions are in place to address those risks;

- Seek assurance regarding the organisational culture and working environment within NHS Fife, including matters relating to dignity at work, bullying and harassment, psychological safety and staff experience;
 - Contribute to the development of the Annual Delivery Plan, in particular but not exclusively, around workforce;
 - Exercise oversight of Workforce Planning, including scrutiny of delivery against the Board's Workforce Plan, associated risks, and the impact on workforce sustainability and service delivery;
 - Seek assurance on the effectiveness of arrangements for personal appraisal, professional learning and workforce development;
 - Review regularly the sections of the NHS Fife Integrated Performance & Quality Report relevant to the Committee's responsibilities;
 - Maintain oversight of staff health, safety and wellbeing, including receiving assurance reports from the Health & Safety Sub Committee and monitoring organisational performance in relation to staff attendance, wellbeing and workforce sustainability;
 - Escalate to the Board any significant or systemic workforce governance concerns identified through the Committee's scrutiny where these may impact organisational performance, culture, compliance with the Staff Governance Standard or the Board's statutory duties; and
 - Undertake an annual self-assessment of the Committee's work and effectiveness.
- 5.2 The Committee shall review the arrangements for employees raising concerns, in confidence, in line with the National Whistleblowing Standards. The Committee shall ensure that these arrangements allow proportionate and independent investigation of such matters and appropriate follow-up action. The Committee shall also receive regular reports on Whistleblowing concerns submitted and activities underway to promote a Speak Up culture across the Board.
- 5.3 The Committee is also required to carry out a review of its function and activities and to provide an Annual Report incorporating a Statement of Assurance. The proposed Annual Report will be presented to the first Committee meeting in the new financial year or agreed with the Chairperson of the respective Committee by the end of May each year for presentation to the Audit and Risk Committee in June and the Board thereafter.
- 5.4 The Committee shall draw up and approve, before the start of each financial year, an Annual Workplan for the Committee's planned work during the forthcoming year.

6. AUTHORITY

- 6.1 The Committee is authorised by the Board to investigate any activity within its Terms of Reference, and in so doing, is authorised to seek any information it requires from any employee.
- 6.2 In order to fulfil its remit, the Staff Governance Committee may obtain whatever professional advice it requires and require Directors or other officers of the Board to attend meetings.
- 6.3 Delegated authority is detailed in the Board's Standing Orders, as set out in the Purpose and Remit of the Committee.

7. REPORTING ARRANGEMENTS

- 7.1 The Staff Governance Committee reports directly to Fife NHS Board on its work. Minutes of the Committee are presented to the Board by the Committee Chair or Vice Chair, who also provides an assurance report on the matters considered at the Committee and highlights any particular issues which the Committee wishes to draw to the Board's attention.
- 7.2 Each Committee of the Board will scrutinise the Corporate Risks aligned to that Committee on a bi-monthly basis.