



SGC/2017/30

## **Terms of Reference Staff Governance Committee**

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**Review Group:** Staff Governance  
Committee

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**UNCONTROLLED WHEN PRINTED**

**Signed:** George Doherty  
Director of Human Resources

## **STAFF GOVERNANCE COMMITTEE**

### **TERMS OF REFERENCE AND WORKPLAN 2017- 2018**

#### **1. Executive Lead**

The Executive Lead Officer for this Committee is the Director of Human Resources & Organisational Development, NHS Tayside

#### **2. Support Officer**

Items for the agenda should be submitted to the Committee Administration Officer, Mrs Nicki Owen, who can be contacted at Ninewells Hospital, Dundee, DD1 9SY, telephone 01382 740763, extension 40763 or by e-mail [nicola.owen@nhs.net](mailto:nicola.owen@nhs.net)

#### **3. Purpose**

- 3.1 The purpose of the Staff Governance Committee is to provide assurance to the Board that NHS Tayside meets its obligations in relation to staff governance under the National Health Service Reform (Scotland) Act 2004 and the Staff Governance Standard.
- 3.2 In particular, the Committee will seek to ensure that staff governance mechanisms are in place that take responsibility for performance against the Staff Governance Standard and are accountable for progress towards achievement of the Standard.
- 3.3 The Staff Governance Committee will also play a key role in monitoring overall Board performance by ensuring full consideration of the impact of key policy and operational decisions that affect staff, on the Board aims in relation to quality and cost of service delivery.

#### **4. Composition**

- 4.1 The Board shall nominate six Non-Executive Directors of the NHS Board to be members of the Committee including the Chair of the Board and the Employee Director. The Committee will be co-chaired by the Employee Director and a Non-Executive Director appointed by the Board from the membership of the Committee. The Lead Officer, Director of Human Resources and Organisational Development will also be a member of the Committee.
- 4.2 Members of the Area Partnership Forum listed below shall be ex-officio Members of the Committee (without voting rights):
  - Chief Executive
  - Chief Officer (representing Health and Social Care Partnerships)
  - Chief Operating Officer
  - Area Partnership Forum Staff Side Secretaries (2)
  - Co Chairs of other Partnership Forums

The Committee may invite to attend other senior managers and trade union representatives.

#### **5. Meetings**

- 5.1 There should be four meetings per annum with provision for additional meetings as required.

- 5.2 Five Members of the Committee, at least 3 of whom should be Non-Executive Directors must be present in order to form a quorum.
- 5.3 The minutes of the meetings will be submitted to the NHS Board. The Joint Chairs of the Committee will also make a formal report to the Board on a regular basis, at least annually, covering the activities of the Committee and any significant matters of note.

## **6. Remit**

- 6.1 The Committee shall support the creation of a culture within the health system, where the delivery of the highest possible standards of staff management is understood to be the responsibility of everyone working within NHS Tayside and this is built upon partnership and co-operation.
- 6.2 The Committee shall act for the Board in ensuring that structures and processes to ensure staff are:
- Well informed;
  - Appropriately trained and developed;
  - Involved in decisions;
  - Treated fairly and consistently, with dignity and respect, in an environment where diversity is valued; and,
  - Provided with a continuously improving and safe working environment, promoting the health and wellbeing of staff, patients and the wider community.
- 6.3 The Committee shall monitor and evaluate progress through the approval of local human resource strategies and implementation plans.
- 6.4 The Committee shall be authorised by the Board to support any policy amendment, funding or resource submission to achieve the Staff Governance Standard.
- 6.5 The Committee shall oversee the timely submission of all the staff governance data required as part of the Annual Review.

## **7. Joint Working with Other Board Committees**

- 7.1 The Committee shall ensure the implications of workforce performance are fully understood and that all decisions taken relating to staff are subject to appropriate scrutiny in relation to quality and cost of service delivery. In doing so the Committee will share information with, and receive information from, the Board's Finance & Resources Committee and the Clinical Care Governance Committee, and lead officers of these Committees will meet jointly on at least two occasions per year to review performance and agree priorities for future reporting.
- 7.2 The Committee will, through its lead officers, also regularly consider key issues arising through other Committees of the Board to ensure that relevant information is shared to aid understanding of workforce strategic and operational performance matters.

## **8. Risk Reporting**

Quarterly reports from strategic risk owners of the risks aligned to this Committee.

## **9. Best Value**

The Committee is responsible for reviewing those aspects of the Best Value work plan which are delegated to it from Tayside NHS Board. The Committee will put in place arrangements which will provide assurance to the Chief Executive as Accountable

Officer, that NHS Tayside has systems and processes in place to secure the best value for these delegated areas. The assurance to the Chief Executive should be included as an explicit statement in the Committee's Annual Report.

## **10. Authority**

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.

## **11. Reporting Arrangements**

- 11.1 The Staff Governance Committee reports to Tayside NHS Board.
- 11.2 Following a meeting of the Staff Governance Committee, the minutes of that meeting should be presented at the next Tayside NHS Board meeting.
- 11.3 The Staff Governance Committee should annually and within three months of the start of the financial year provide a work plan detailing the work to be taken forward by the Staff Governance Committee.
- 11.4 The Staff Governance Committee will produce an Annual Report for presentation to the Audit Committee. The Annual Report will describe the outcomes from the Committee during the year and provide an assurance to the Audit Committee that the Committee has met its remit during the year. The Annual Report must be approved by the Staff Governance Committee before it is presented to the Audit Committee..
- 11.5 The Staff Governance Committee will receive for approval the Annual Report of the Remuneration Committee, which reports through the Staff Governance Committee to the Board, while remaining a substantive standing Committee of the Board itself.
- 11.6 The Committee shall oversee the effectiveness of the Area Partnership Forum, and through the Area Partnership Forum, the performance of Local Partnership Fora, in managing change and promoting a positive culture of staff engagement through the submission of regular reports.

## **12. Reporting Schedule**

**See Appendix 1**

**STAFF GOVERNANCE COMMITTEE**

# Best Value Workplan 2017/18

This workplan outlines the major items the Staff Governance Committee has to consider as part of its schedule of work and the corresponding Best Value Characteristics under the headings of regular reports, annual reports, corporate risk reporting, minutes for information and policies

## STAFF GOVERNANCE COMMITTEE WORKPLAN 2017/18

	Responsible Officer	Best Value Characteristics	22 June 2017	September 2017	December 2017	February 2018
<b>Regular reports submitted to the Committee</b>						
Involved in Decisions which Affect Them	Judith Golden/ Alan Small	Performance Management	X	X		
Appropriately Trained	Pat Millar	Performance Management				X
Safe and Improved Working Environment	Lorna Wiggan	Performance Management			X	
Well Informed	Margaret Dunning/ Jane Duncan	Performance Management			X	
Treated Fairly and Consistently	Christopher Smiyth	Performance Management Cross Cutting Theme -Equality	X			
2020 Workforce Vision	George Doherty	Performance Management			X	
<b>Monitoring Reports</b>						
Workforce Information (including Medical Staffing)	Jennifer Mudie		Annual Report/Q4	Q1	Q2	Q3
Promoting Attendance at Work	Christopher Smith/Ian McEachan		Annual Report/Q4	Q1	Q2	Q3
Recruitment Activity	Jennifer Mudie/ Val Beattie		Annual Report/Q4	Q1	Q2	Q3
Staff Governance Monitoring Report (formerly SAAT)	Daniel Courtney		X		X	

## STAFF GOVERNANCE COMMITTEE WORKPLAN 2017/18

NHS Tayside Health Working Lives, Health, Safety and Well being	Pat Davidson				X	
iMATTER Update	Lucy Archer			X	X	X
Employability Services	Alison Smith					X
Valuing People – Valuing Personal Development Plans (PDPs)	Jenni Jones/Pat Millar		X		X	
Whistle blowing	Alison Rogers			X	X	

Annual Reports						
Annual Reports that are reported to the Committee						
Staff Governance Annual Report	George Doherty		X			X
Staff Governance Terms of Reference	George Doherty		X	X	X	X
Healthcare Academy	Alison Smith	Cross Cutting Theme - Sustainability		X		
Remuneration Committee Annual Report	George Doherty		X			
Partnership Annual Report	George Doherty/ Judith Golden		X			
Equality & Diversity Workplan	C Smith	Cross Cutting Theme - Equality	X		X	
Workforce Plan	Jennifer Mudie		X		X	
Consultant Appraisals Annual Report	Andrew Russell	Use of Resources			X	

## STAFF GOVERNANCE COMMITTEE WORKPLAN 2017/18

GP Appraisal Annual Report	Andrew Russell	Use of Resources			X	
Health & Safety Annual Report	Lorna Wiggan/ Ken Armstrong			X		

<b>Corporate Risk reporting – risks aligned to the Committee</b>	<b>Annual Mid Year Assurance Report</b>					
Medical Workforce	Andrew Russell		X	X	X	X
Workforce Efficiencies	Jennifer Mudie		X	X	X	X
Nursing Workforce	Eileen McKenna		X	X	X	X

<b>Minutes for information</b>	Minute to be presented as soon as practicable					
Area Partnership Forum Minutes	Susan Graham		X	X	X	X
Joint Negotiating Committee Minutes	Lorraine Smith		X	X	X	X
Workforce & Governance Forum Minutes	Susan Graham		X	X	X	X

<b>Policies to be endorsed by the Board as and when required</b>						