



SCOTTISH PARTNERSHIP FORUM Monday 2nd October 2017 Conference Rooms C, D & E, St Andrews House, Edinburgh. Minute

Present:

Julie Collins for Claire Ronald – Chartered Society of Physiotherapy

Gavin Fergie - UNITE

Anna Gilbert - Head of Staff Governance, Scottish Government

Alistair Grant – Royal College of Nursing

Pauline Howie - (Chair), Chief Executive, Scottish Ambulance Service

Geoff Huggins - Director for Health and Social Care Integration, Scottish Government

Shirley Johnston - UNITE

Annie Ingram (By Videoconference) - Director of HR, NHS Grampian

Stephen Lea-Ross, Head of Employee Experience, Scottish Government

Derek Lindsay (By Videoconference) - Director of Finance, NHS Ayrshire & Arran

Richard McCallum for Christine McLaughlin - Deputy Director of Finance, Scottish Government

Robin McNaught - Director of Finance, The State Hospitals Board for Scotland

Sean Neill – Deputy Director for Health Workforce, Scottish Government

Norman Provan for Theresa Fyffe, Deputy Director, Royal College of Nursing

Shirley Rogers - Director for Health Workforce and Strategic Change, Scottish Government

Caroline Sharpe (By Videoconference) - Director of HR, NHS Dumfries and Galloway

Malcolm Summers – Head of Workforce Practice, Scottish Government

Jill Vickerman – British Medical Association

In attendance:

Kieren Green, Scottish Government, (Support)

Grant Hughes, Head of Workforce Planning, Scottish Government

Susan B Russell, Staff Governance Associate, Scottish Government (Minute)

Apologies:

Anne Aitken – Head of Strategic Change, Scottish Government

Peter. F Bennie – British Medical Association

Catherine Calderwood – CMO, Scottish Government

Frances Carmichael, UNISON

George Doherty - Director of HR, NHS Tayside

Tony Dowling - GMB Scotland

Theresa Fyffe – Director, Royal College of Nursing

Jason Leitch - Director, Planning and Quality, Scottish Government

Dorothy McErlean - Society of Chiropodists and Podiatrists

Fiona McQueen - Chief Nursing Officer, Scottish Government

Lilian Macer - UNISON





Claire Ronald – Chartered Society of Physiotherapy Mary Ross Davies – Director, Royal College of Midwives Andrew Scott, Director of Population Health Improvement

Agenda Item 1 – Welcome, introductions and apologies

- The Chair welcomed everyone to the meeting.
- Members were informed of the list of apologies (noted above) and that the meeting was quorate.

Agenda Item 2 – Minutes and summary of action points of meeting held on 18 May 2017

• The minute of the meeting held on 9 February was agreed and there were no matters arising.

Agenda Item 3 - Financial Position of NHSScotland

Richard McCallum presented an update of the financial position of NHSScotland to date and during the presentation the following points were made:

- In relation to the finalised 2016/17 position, all Boards received unqualified audit opinions for that financial year. One Board (NHS Tayside) required brokerage to meet financial targets.
- In relation to the 2017/18 position, a detailed review of the first quarter and month 5 has taken place with all territorial and national boards, with the savings required being similar to 2016/17. There is a split between recurring and non-recurring savings and the Scottish Government continues to interact with partners in the Integrated Joint Boards. There is also ongoing work relating to capital investment projects which are underway e.g. NHS Dumfries and Galloway Royal Infirmary.
- The annual state of NHSScotland Assets and Facilities Report for 2016, which was published in July 2017, highlighted that the proportion of buildings which were in good condition was 70%. Satisfaction in hospital environment was reported at 92%. The backlog of maintenance reduced but this continues to be an area of focus.
- The Programme for Government included several commitments relevant to the NHS, such as lifting the 1% pay cap for NHS and other public sector workers and the commitment to Free Personal Care for under 65s. In real terms the Scottish Government resource spending for the Health & Sport Portfolio equates to 42% of the overall budget.





The Chair led a discussion which included a recognition from Staff Side partners that there are potential budget pressures relating to pay. Discussions have taken place at National Staff Side and there is an expectation that there will be a fully funded pay increase above 1% and that this will not have a detrimental effect on clinical services. It was acknowledged that the aim of the collective Staff Side was to achieve the best deal possible.

It was also noted by Staff Side that as recognised in the NHSScotland Assets and Facilities Report for 2016, if 70% of buildings were categorised as being in good condition, then by default 30% were not. There was discussion regarding the criteria by which buildings are classified.

Outcome: SPF noted the update and agreed that this work was ongoing and looked forward to receiving further updates at future meetings.

Agenda Item 4 – Brexit – Workforce Issues

Stephen Lea-Ross highlighted the key points of the paper that had been circulated prior to the meeting. The items for discussion were:

- a) How can more comprehensive workforce data be collected in relation to EU/EEA nationals, in order to be able to accurately scope and scale the potential impacts on the service flowing from any future changes to UK migration policy?
- b) What kinds of assistance and support should be provided to EU/EEA members of staff, taking into account that activity might already be underway within individual NHS Boards, and considering also that Boards are likely to be impacted differently?

The Chair led a discussion and the following points were raised:

- This information is not held by professional regulators in the level of detail that may be required and at the moment there is uncertainty on the rules which will be applied.
- Free movement of EU/EEA nationals means that previously we have not had to ask relevant questions on our paper based recruitment systems.
- It is important to ask for the information in a sensitive manner thus minimising the possible upset to staff. Given that some of this is beyond NHSScotland's control it is important to communicate the request for information in a consistent way throughout NHSScotland.
- There was wide support for demonstrable partnership working to look at how the data could be gathered, the reasons for it, and to encourage and promote this as a positive enabling exercise. Staffside and management colleagues gave a commitment to support the narrative of data gathering.





 An EU Data Working Partnership Group has been set up which includes representatives from NHS Employers, Trade Unions/Professional Organisations and SG. They will develop a proposal for Strategic HR Directors to consider and submit to Scottish Partnership Forum for approval.

Outcome: SPF requested further engagement in terms of the ongoing iterative process.

Agenda Item 5 - National Workforce Plan

Grant Hughes highlighted the key points of the paper that had been circulated prior to the meeting.

Grant indicated that there was a need for ongoing engagement which had been previously discussed at SPF Secretariat. The National Workforce Planning Group (NWPG) held its first meeting on 14th September and agreed their Terms of Reference. The NWPG are working towards a plan for 2018. A note of the NWPG meeting will be shared with SPF.

The paper highlighted that progress is being made on Part 2 of the Workforce Plan and is currently being drafted in conjunction with a COSLA/Scottish Government Part 2 Reference Group with wide stakeholder involvement. This group is meeting on 10th October 2017 with a wider stakeholder event taking place on 6th November.

The Chair led a discussion and the following points were raised:

- Recognising that this is a very complex strategy, SPF members welcomed the request for ongoing engagement at all levels of workforce planning i.e. local, regional and national.
- Given the involvement of the BMA in the GP Contract negotiations they would welcome further engagement in Part 3 of the Workforce Plan also recognising the interdependencies with other agencies.
- Overall the engagement with staff-side has been very positive and a request has been made in relation to the issue of regionalisation and the need to link with national structures.

Outcome: SPF noted the update and all members recognised the importance of continuous engagement in the work as it moves forward.





Agenda Item 6 – Regional Health and Social Care Delivery Plans

Shirley Rogers gave a verbal update on the implementation of the Health & Social Care Delivery Plan outlining the intention behind the plan and explaining the delivery plan process. It is recognised that there are likely to be local, regional and national dimensions within the delivery plans, and the priority was to consider the appropriate levels moving foward.

Regional Plans are being submitted which will be discussed with the Programme Board and subsequently sent to the Cabinet Secretary for Health & Sport and the First Minister for sign off which will then require further exploration with periods of wider engagement.

Agenda Item 7 – AOB - There was no other business

The Chair thanked everyone for their attendance, contributions and the discussions that took place.

Date of Next Meeting: 12 February 2018 (14.00 – 16.30) in Conference Room 4ER, St Andrews house, Edinburgh.