

Integration Joint Board

Date of Meeting: 30 March 2022

Title of Report: Staff Governance Report for Financial Quarter 3 (2021/22)

Presented by: Jane Fowler, Head of Customer Support Services (ABC)

The Integrated Joint Board is asked to:

- Note the content of this quarterly report on the staff governance performance in the HSCP
- Take the opportunity to ask any questions on people issues that may be of interest or concern;
- Endorse the overall direction of travel, including future topics that they would like further information on.

1. EXECUTIVE SUMMARY

1.1 This report on staff governance performance covers financial quarter 3 (October - December 2021) and the activities of the Human Resources and Organisational Development (HROD) teams. In the last quarter, the advent of the Omicron variant has resulted in a pause on learning and development courses in the NHS to accommodate the increased demand on staff. Meanwhile there has been a continued focus on supporting employee health and wellbeing, recruitment processes and managing employee relations cases.

2. INTRODUCTION

2.1 This report focuses on how staff governance supports the HSCP priorities and meets the staff governance standard. Staff Governance is defined as “A system of corporate accountability for the fair and effective management of all staff.” The Standard requires all NHS Boards to demonstrate that 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.

2.2 In the context of health and social care integration, we also consider the following:

- Adopting best practice from both employers
- Development of joint initiatives that support integration
- Compliance with terms and conditions and employing policies

3. PROGRESS AND CHALLENGES

3.1 Culture

3.1.1 Argyll and Bute HSCP Culture Group, jointly chaired by the Chief Officer and the Staffside Lead, continues to meet monthly. The Group is open to any HSCP colleagues, to generate and take forward local actions. In the last quarter, actions taken to improve culture include:

- Staff communication updates continue weekly with information on key issues of interest to staff.
- The Chief Officer issues regular all staff email updates.
- Delivered a programme of 'Connections' colleague engagement events (see below) and offered mindfulness sessions/spaces for listening. These have been well received by colleagues
- Continued to promote the Guardian Service to staff and there are now regular engagement sessions with the HR teams to identify areas for particular attention.
- Began a review of the initial Culture Action plan to identify priorities and update actions
- Agreed and shared 3 key messages via the Staff Communications after each meeting so that staff can see what is being discussed and are encouraged to participate in the group.

3.1.2 Culture Group members are participating in 6 priority workstreams as part of the overall Culture programme with colleagues in north Highland to drive forward culture change across Highland and Argyll and Bute. The priority workstreams have made the following progress:

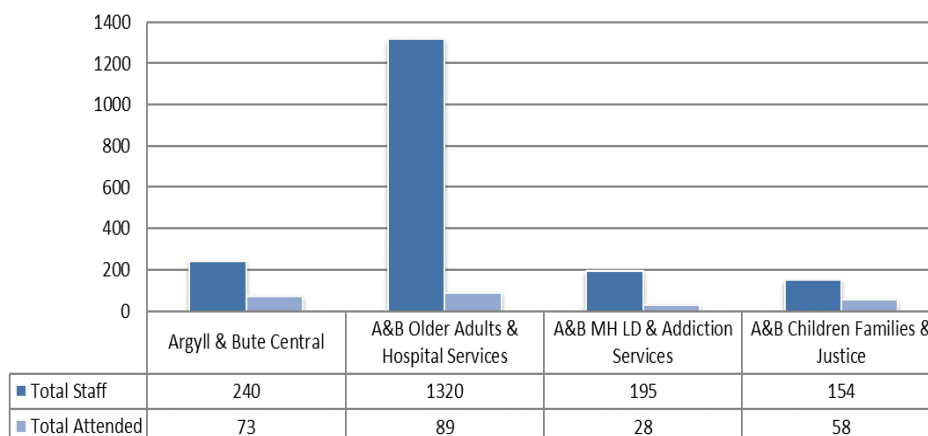
- Values and Behaviours – embedding these by incorporating in a Team Conversations session. This was due to be piloted in Autumn 2021 and due to Omicron some services were paused therefore the pilot will start in March 2022.
- Civility Saves Lives – Part of the Culture package is expected to relate to Civility Saves Lives and facilitated workshops are anticipated as a follow-up to the core workshop where appropriate.

- Leadership and Management Development Programme – the above two priorities link to this; development of skills and tools for all managers in a programme that started in October 2021. The programme was paused due to Omicron and will restart in March 2022.
- People Process Review – providing clarity of roles and responsibilities, improving overall performance and reporting and improving incidence of early resolution
- Root Cause Diagnostic – identifying system failures and their impact, taking forward lessons learned. This work has been completed.
- Culture Metrics and Tools – develop, implement and review a suite of metrics; a culture dashboard is being developed for managers to assess where support is needed. A Listening and Learning staff survey was undertaken in June-July with 41% engagement. Teams received results that will help to inform their action plans. The survey results have been reported separately.
- A Culture Roadmap is expected to raise awareness of initiatives and progress for teams across Highland. Key milestones will feature on the roadmap, and this is expected to be introduced as part of the overall communications campaign.

3.1.3 In November 2021, **Whistleblowing Champion**, Bert Donald, met again with the Culture Group and Joint Partnership Forum to raise awareness of his role and report on his previous visits to Argyll and Bute. IJB members will recall the Whistleblowing and staff governance papers presented by NHS Highland and HR Shared service referencing the partners' activity in response to whistleblowing responsibilities and the assurance provided to the IJB around the Whistleblowing arrangements at a previous meeting.

3.1.4 **Courageous Conversations** sessions continue to be delivered via MS Teams and can be booked by teams as well as individuals, from both Council and NHS. An eLearning version is in development and expected to be available in the next quarter. Completion of learning across HSCP up to Q3 is shown below. The numbers are still relatively low, but we anticipate that participation rates will increase once the e-learning module is available and the impact of Omicron has passed, freeing up employees up to attend training and participate in learning. There are vacancies in the Talent Management Team currently being advertised and once these are filled, there will be more capacity to promote learning.

Leadership and management : courageous conversations



3.1.5 A **Listening and Learning survey** was carried out throughout June and July by Culture Amp to measure our progress on delivering culture change. The SLT met to discuss the results of both this survey and iMatter. SLT agreed priorities for action and these have been incorporated into an action plan that will be monitored for progress by SLT.

3.2 Wellbeing

3.2.1 HSCP Guardian Service

The Guardian Service was extended from 1 January 2021 to cover Argyll and Bute Council employees working for Argyll and Bute Health and Social Care Partnership.

The service is independent and confidential and is for staff to discuss matters relating to patient and service user care and safety, whistleblowing, bullying and harassment, and workplace grievances. The Guardians are external to the HSCP and provide information and emotional support in a strictly confidential, non-judgemental manner. The 'Speak Up' Guardian Service can be accessed 24/7.

Regular management information is provided and reviewed by the A & B Council HROD team. Since April 2021 :

- There have been 45 cases opened by the Guardian Service for Council employees who work within the HSCP.
- 22 of these cases have been closed, 23 remain open.
- There have been 4 news cases in January 2022.

Reviewing the 45 cases, they point to three main themes where matters arise that employees wish to discuss:

- Management Issue (18 cases)
- Behaviour Relationship (12 cases)
- System and Process (10 cases)

What is also worth noting from the management information provided by the Guardian service as to why employees have decided to use the

Guardian service is the percentage of employees who indicated that they had already raised a concern.

In 42% of all cases that have been opened by the Guardian Service for Council HSCP employees, the employee had previously raised a concern that they feel had not been listened to or that nothing had been done.

There is a continuing opportunity therefore for matters when raised to be dealt with promptly when first raised which may hold the best chance for amicable and swift early resolution.

The Guardian service is in year 2 for NHS Highland. Since April 2021 overall there have been 153 contacts with the Guardian service for the whole of NHS Highland
31 of these have been from employees working in Argyll & Bute
For January 2022 there was one new contact for Argyll & Bute
The majority of the 31 cases were management issues followed by bullying and harassment.
88 of the cases have been closed

Similar to Argyll & Bute Council the main reason for employees using the Guardian service is that they have raised a concern but they feel that they have not been listened to / nothing done - 43.14%

71.9% of contacts wanted the discussion kept confidential within Guardian Service remit.

3.2.2 Council Wellbeing Team

The Council implemented a new Supporting Attendance at Work Policy and Procedures with effect from 1st October, which provides a more supportive approach to managing absence and promoting wellbeing.

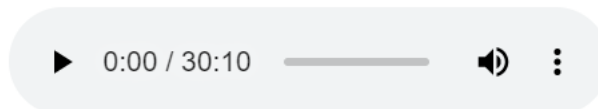
The Wellbeing Team delivered a series of training sessions for managers on the new procedures throughout October and November. In addition they have updated all associated guidance and resources which are available on The Hub and also on the MyCouncilWorks website [Managing leave and sickness – My Council Works](#). Those already being managed through the former Maximising Attendance Procedures, will continue through this process to conclusion.

3.2.3 The Wellbeing Team have also been actively promoting the Employee Assistance Programme, Wellbeing App and structured counselling provision, which has led to a significant increase in uptake over the past year.

Head of Service, Jane Fowler recently spoke with Pippa Milne about the wide range of services available through the EAP and that podcast is available to listen to via 'Pippa's Podcasts' page.

[Pippa's Podcast \(argyll-bute.gov.uk\)](http://argyll-bute.gov.uk)

Balancing everyday life with the requirements of work and home can create pressures for all of us. Today Pippa chats with Jane Fowler, Head of Customer Support Services, about the Council's Employee Assistance Programme which provides support and information, and can assist staff in achieving the work-life balance. More information can also be found on the [MyCouncilWorks staff website](#).



The team also continue to publish a weekly Wellbeing Wednesday feature on a range of Wellbeing topics and signposting to relevant support agencies, as well as development and promotion of a MyWellbeing section on the MyCouncilWorks section of the website, which allows access to various resources by non-networked staff who cannot access the Hub. [My Wellbeing – My Council Works](#)

The Wellbeing Team also provide ongoing support and advice for managers and employees in relation to supporting attendance, in accordance with the old and new procedures; and have arranged a series of webinars on various aspects of wellbeing and attendance management. Feedback from the sessions will be gathered from attendees and included in the next quarterly report.

- 3.2.4** The OD team offered Spaces for Listening sessions to all HSCP staff. This is a structured process which creates a space to share thoughts and feelings and experience an equality of listening. Six people attended each session and these were well received. Following this success, further dates will be offered once services are fully stepped up again after the Omicron surge.
- 3.2.5** A Self Care intervention and a Self Care/Wellbeing module has been designed and developed as part of the NHSH Leadership and Management Development programme. Due to stepping down of services to respond to Omicron, the start date for delivery will be from FQ4.
- 3.2.6** A focus for Quarter 4 is to:
- Continue to promote wellbeing resources
 - Continue to offer a Spaces for Listening approach
 - Offer self-care intervention
 - Consider staff wellbeing alignment with the culture programme and the priorities for 2021/22

3.3 Learning and Development

3.3.1 The approach to performance discussions within A & B Council has recently been revised and the new approach which launched in late January has been well received to date. Responding to feedback from employees and managers changes are underway to the council's approach to performance appraisals.

Feedback indicated that in the context of rapidly changing priorities, an annual PRD meeting was not the best way to approach performance and career conversations. Instead a number employees told us that conversations about objectives, behaviours, skills and development form part of an ongoing regular dialogue between employees and their line managers.

Communication has therefore taken place advising employees and managers that with immediate effect therefore you no longer need to hold annual PRD meetings or send records of PRD meetings to HR&OD.

The updated approach is based on measuring and improving outcomes from the conversations managers and employees have about performance, behaviours and career/development aspirations.

Lots of further information and guidance has been made available here:

[Changes to the annual PRD process – My Council Works](#)

Weekly webinars have been made available since launch to answer any questions and provide any additional support and these have been well attended. A webinar is scheduled for the 16th March 2022 and the details are available above on MyCouncilWorks.

The NHS OD team, and Education, Learning and Development team continue to support colleagues on how to access and complete PDPs with training available remotely instead of face-to-face.

Appendix 6 shows the Appraisals Performance Data levels for completed staff appraisals for NHS staff within Argyll and Bute HSCP.

There is still a need to focus on employee development and also to provide support and positive reflection on the achievements of the past year. The Council is currently reviewing the PRD process, based on feedback, in order to improve it; this will be reported in detail in the next report.

3.3.2 Improving compliance with Statutory and Mandatory training is essential to the safety and quality of services that the HSCP delivers. Managers have been asked to ensure that all employees' statutory and mandatory training is up-to-date. Managers can access team reports directly on Turas and the intranet.

Appendix 7a and 7b shows the compliance levels for induction and mandatory training. HROD are discussing with managers how best to support completion and there is an NHSH wide continued focus on improving performance on completion of mandatory training. The new Head of Talent at NHSH will be reviewing reporting of key performance indicators to SLT as soon as the HSCP People Partner is in post at the beginning of April 2022.

- 3.3.3** The Social Work Training Board currently identifies and approves training necessary to meet statutory and service requirements, and monitors progress of SVQ employee candidates in social work and social care services. Representation is from managers across all Social Work professional areas. It meets every two months and the new Chair is the Chief Social Work Officer. There are currently two council employees undertaking a (Grow Your Own) Social Work Degree. Currently we have 14 employees going through SVQ training, and a further 4 are studying for either a Practice Development Award or a PG Certificate in Applied Professional Studies. Within the admin service we have 1 employee undertaking the SVQ3 Business and Administration and 1 undertaking the HNC Administration and IT. We are currently recruiting for an employee to undertake the MHO Award and also the Practice Development Award in Practice Learning
- 3.3.4** The OD team continues to explore ways to improve SVQ accessibility for NESH staff within A&B HSCP and work with the NESH SVQ centre.

The Head of Talent NESH is stabling a Promoting Careers Team within the Talent Management Service and part of their focus will be on Growing Our Own. Further information on progress and plans will be brought to a future IJB meeting.

3.4 Leadership and Management Development

3.4.1 Manager Induction Programme

The Induction programme for managers in the new structure started in February 2021 and runs at monthly intervals throughout the year. Each four-hour session is delivered remotely via MS Teams making the programme more accessible for everyone, particularly managers based on islands. The programme focuses on HSCP manager responsibilities and accountabilities and ensuring that managers are supported.

The themes covered include:

- Values, behaviours, roles and responsibilities; partnership working
- Managing your team
- Spotlight on Services
- Clinical Care and Governance
- Your development – further leadership and management development programmes

- 3.4.2** The total number invited and expected to attend the programme was 29 senior managers.

February -NHS and ABC Finance	20
March - NHS and ABC HROD	21
April - Partnership Working, Facilities Arrangements and IJB and Staff Governance	16
May - Clinical Care and Governance	20
July – Allied Health Practitioners; Communications and Engagement	12
August – Adult Services: Older People, Community	13
September – Children, Families and Justice	Postponed
October - Planning, Contracting & Performance	10
November - Public health	9

December –Self Care – Guardian Service	3
--	---

Figures for FQ3 were significantly lower than previous quarters, due in the main to Omicron response by HSCP.

Feedback from participating managers continues to be very positive and all feedback is used to ensure that the most positive aspects of each session are built into future delivery. As the programme is entering its second year, we will take into account feedback from last year’s programme, including compressing the time for each session and including the opportunity for Team Leaders to participate.

3.4.3 NHS Highland Leadership and Management Development programme and the Council’s Argyll and Bute Manager programme opened to applications from all HSCP managers in September 2021. These programmes will focus on developing people management skills as well as policies and procedures. The NHSH has been developing an online portal that improves the experience for new managers joining NHSH and easy access reference to policies and procedures for existing managers. This portal is also accessible to Argyll and Bute Integrated Managers.

The table below shows participation in Leadership and Management Development Programme by area within the HSCP

	Argyll & Bute Central	A&B Older Adults & Hospital Services	A&B MH LD & Addiction Services	A&B Children Families & Justice
Level 1		1		1
Level 2				1
Level 3	1			
Level 4	5			

3.4.4 Once for Scotland workforce policies courses are being delivered remotely for all managers to ensure up-to-date knowledge of the new NHS Scotland policies. Delivery of sessions was paused during Q3 as a result of the pressures created by the pandemic. Attendance during FQ3:

OFS Attendance Policy	7
OFS Bullying and Harassment	3
OFS Capability Policy	5
OFS Conduct Policy	6
OFS Grievance Policy	5
OFS Investigations Guidance	2

3.5 Resourcing: Recruitment and Redeployment

3.5.1 Attracting and retaining suitable applicants predominantly within nursing and some AHP roles remains challenging across all areas particularly Oban, Lorn and Isles locality and within Mental Health Inpatient Services, however now that we have the new Generic/Cohort mass recruitment we are hoping to see this improve significantly. Feedback has been positive so far for the first cohort and the second cohort closed on Wednesday 27 October. A strategic approach is being taken to this, led by the HR Director of NHSH. The Communications Team continues to

support the recruitment by sharing posts and information relating jobs throughout the UK to relevant groups and contacts on social media. Recruitment colleagues have also been shown the Hootsuite and are able to share posts to the Highland Recruitments social media platforms. Further work is to be done to highlight health posts via www.abplace2b.scot

The HR and OD team have been working with Social Care colleagues to develop proposals for posts which could better support the care recruitment requirements. Job descriptions have been developed and reviewed by the job evaluation team. These proposals will be reviewed at a resources managers meeting on 8th March 2022.

Further details are shown in Appendix 3.

3.6 Workforce Planning

Recognising that all efforts were focused on Winter preparedness and Omicron resilience planning, the Scottish Government extended the deadline for submission of Boards and Health and Social Care Partnerships 3-Year Workforce Plans. The National Workforce Strategy Planning for Scotland's Health and Social Care Workforce was published on 11 March 2022. It states that '*a new framework to shape Scotland's health and social care workforce over the next decade places training, wellbeing, job satisfaction and the principles of Fair Work at its heart.*' The HSCP is required submission of a Strategic Plan by summer 2022 and a draft of this will be brought to the IJB by the Head of People Planning, Analytics and Reward at NHS, who leads on workforce planning for the HSCP.

3.7 My HR – My Council Works

We are continuing to transfer staff information onto [My Council Works](#) which is externally facing and therefore accessible to all staff; not just those who use the internal network. This is not only a useful tool for all council staff, but also very useful for the NHS managers who manage council employees, for ease of accessing Council policies. The majority of policies have now been uploaded and we will ensure future policies are included on this external hub.

4. RELEVANT DATA AND INDICATORS

4.1 Attendance

4.1.1 HSCP NHS absence levels have risen slightly from last quarter, just above the national target of 4%. The percentage absence for NHS employees for Quarter 3 are:

- October: 4.64%
- November: 6.08%
- December: 5.19%

- 4.1.2** The Council data at Appendix 1b, is showing a very slight decrease in absence levels during FQ3. In October 2021 the average for HSCP was 2.53 days lost per FTE per month, whereas in December 2021 it has decreased to an average of 2.63. Work continues by both HR and the Wellbeing Teams to support managers to get employees on long-term absence back to work, and to tackle short-term absence.

Further details are shown in Appendices 1a and 1b. There is an additional rolling graph at Appendix 1c, showing a comparison of Covid-related and non-Covid related absence within Council employees. The number of non-Covid related absence remains higher than that of Covid-related cases in FQ3, which has gradually decreased during the Quarter.

4.1.3 Return to Work Interviews

Return to Work Interviews are an important aspect of looking after our employees. They are recorded and reported for Council staff, with a target rate of 100% completion within 3 days of returning to work. This is a key component of attendance management. The rates for Q3 have shown an overall decrease, from an HSCP average of 73% completion rate in September 2021, which was a significant improvement on previous rates, to an average 48% completion rate at the end of December 2021. This decrease may have been related to increased demands linked to the rise in the Omicron variant. Ensuring that these interviews are being completed after all absences regardless of length should remain a priority. The chart detail is shown in Appendix 2 below.

- 4.1.4** Training for Once for Scotland Attendance Management Policy was stood down during Quarter 3 due to HSCP and parent organisations' Omicron response activity. HR along with Occupational Health advice continue to closely monitor Covid related absences in particular "long Covid" and its prevalence. We can report on this particular issue in a future report once we obtain further information across the HSCP.

4.2 Redeployment

- 4.2.1** All NHS vacancies are considered for both Primary and Secondary redeployment lists as they arise. The HR team continue to work in partnership with the Area Manager and Staffside/TU Rep in securing permanent, temporary and shadowing opportunities. As a result, in Quarter 3, the numbers of staff on the redeployment primary list is on a downward trend.
- 4.2.2** Appendix 4 continues to highlight the numbers of temporary and casual workers that we have in the HSCP. Quarter 3 shows there is a slight upward trend of appointing temporary employees and the use of casual workers.

4.3 Employee Relations (ER)

- 4.3.1** In Q3, within the NHS caseload, there was 1 grievance case closed. No new cases were added to the caseload. Further details are shown in Appendix 5 where it shows a fairly static trend of the number of ongoing ER cases.

- 4.3.2** HSCP Council Disciplinary and Grievance cases are showing an overall downward trend during Q3. Details are shown at Appendix 5b
Further details are shown in Appendix 5.

5. WORK PLANNED FOR THE NEXT 3 MONTHS

5.1 Update on work for FQ3 and plan priorities for FQ4:

AB HSCP Culture Group – refresh Culture Plan	FQ4
Continue delivery of Courageous Conversations, management development; improvement to people processes	Restart after standing down in FQ3
Report on the iMatter survey so managers can produce action plans with their teams	Completed
Continue to support Staff Health and Wellbeing activities to align with Council and tackle HSCP sickness absence	Wellbeing Group established; work ongoing
Continue to support aspects of the Culture programme and workstreams	Restart after standing down in FQ3
Seek to understand the outputs from the Listening and Learning survey and what is needed as a result; create action plans incorporating results from this survey and iMatter	FQ4
Progress to 100% of all vacancies on JobTrain – plan roll out with service managers – roll-out delayed due to staff changes/availability and considerable resourcing workload	Ongoing
Progress workforce planning; eESS training required for HROD and all managers (NHS to deliver)	Restart after standing down in FQ3
Deliver Once for Scotland to all managers and then staff – delivered remotely via MS Teams	Restart after standing down in FQ3

6. CONTRIBUTION TO STRATEGIC PRIORITIES

- 6.1** This report has outlined how the staff governance work contributes to strategic priorities.

7. GOVERNANCE IMPLICATIONS

7.1 Financial Impact

A reduction in sickness absence will reduce costs.

7.2 Staff Governance

This staff governance report provides an overview of work that contributes to this theme.

7.3 Clinical Governance

None.

8. EQUALITY & DIVERSITY IMPLICATIONS

Equality and Diversity implications are considered within the NHS People and Change and Council HROD teams as appropriate when policies and strategies are developed.

9. RISK ASSESSMENT

Risks are considered medium. Individual HROD risks identified on the Risk Register. Risk assessments have been completed in relation to remobilisation.

10. PUBLIC & USER INVOLVEMENT & ENGAGEMENT

The Everyone Matters pulse survey was reported in this quarter.

11. CONCLUSIONS

It is recommended that the Integration Joint Board:

- Note this quarterly Staff Governance update;
- Take the opportunity to ask any questions on people issues that may be of interest or concern;
- Endorse the overall direction of travel, including future topics that they would like further information on.

12. DIRECTIONS

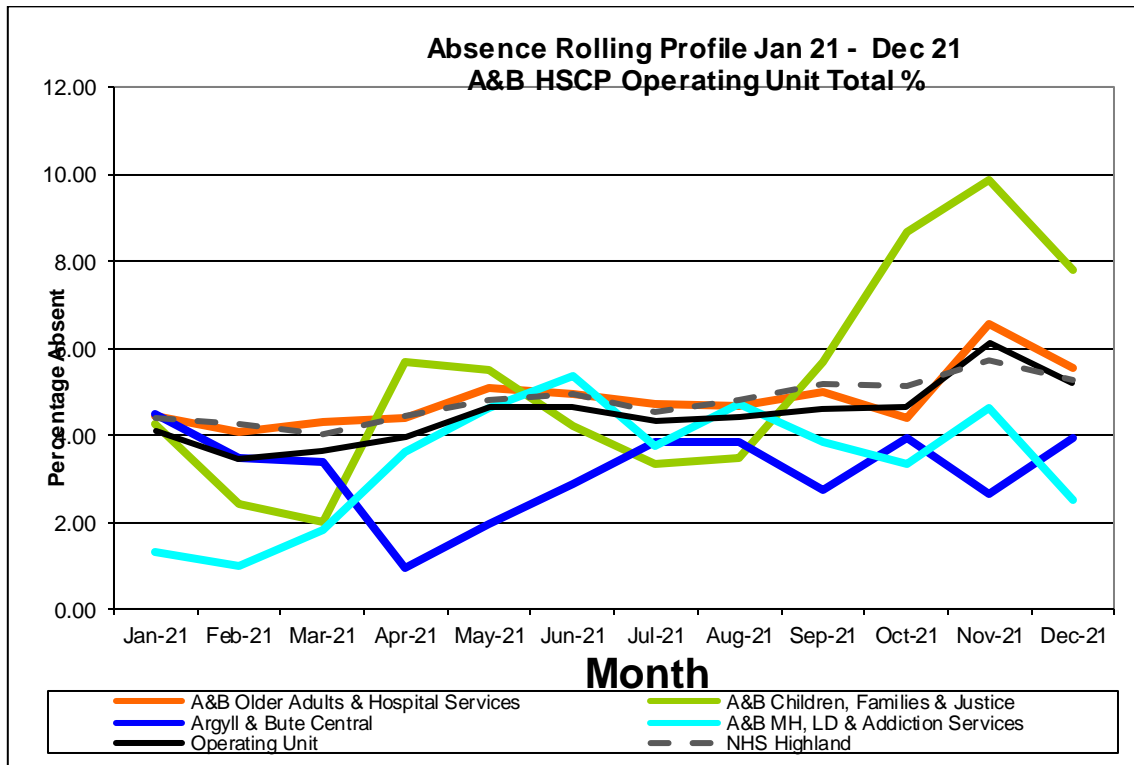
Directions required to Council, NHS Board or both.	Directions to:	tick
	No Directions required	✓
	Argyll & Bute Council	
	NHS Highland Health Board	
	Argyll & Bute Council and NHS Highland Health Board	

REPORT AUTHOR AND CONTACT

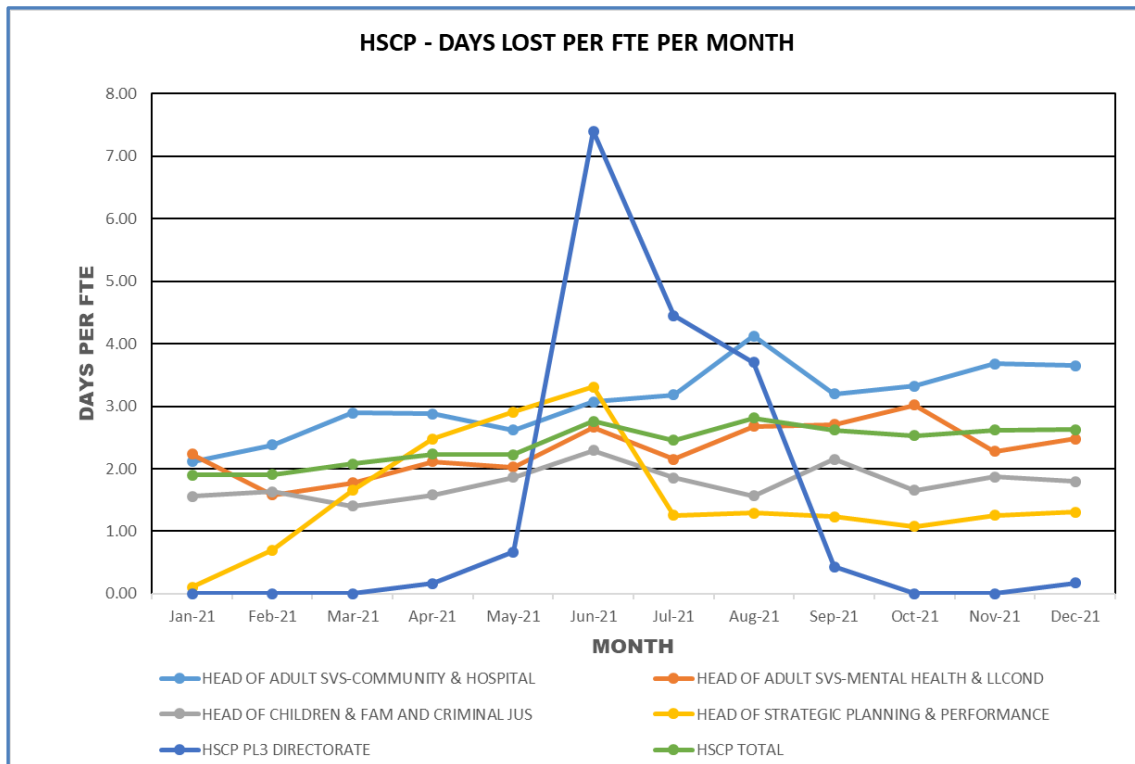
Charlie Gibson, HR Lead, NHS Highland charlie.gibson@nhs.scot
Jo McDill, HR&OD Officer, Argyll and Bute Council hr-hscp@argyll-bute.gov.uk
Dorothy Ralston, HR&OD Officer, Argyll and Bute Council hr-hscp@argyll-bute.gov.uk

Appendix 1a – HSCP Absence rates – NHS employees

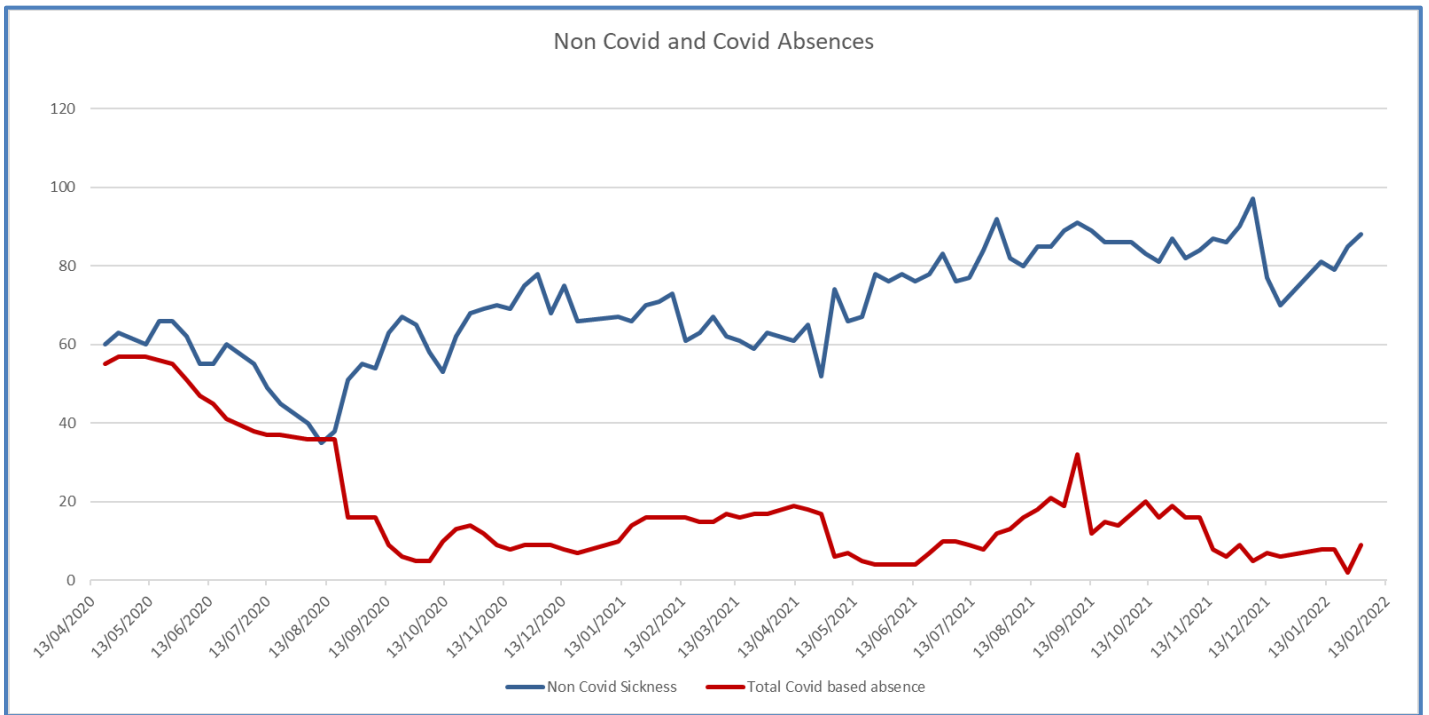
NHS



Appendix 1b – HSCP Absence rates Council Employees

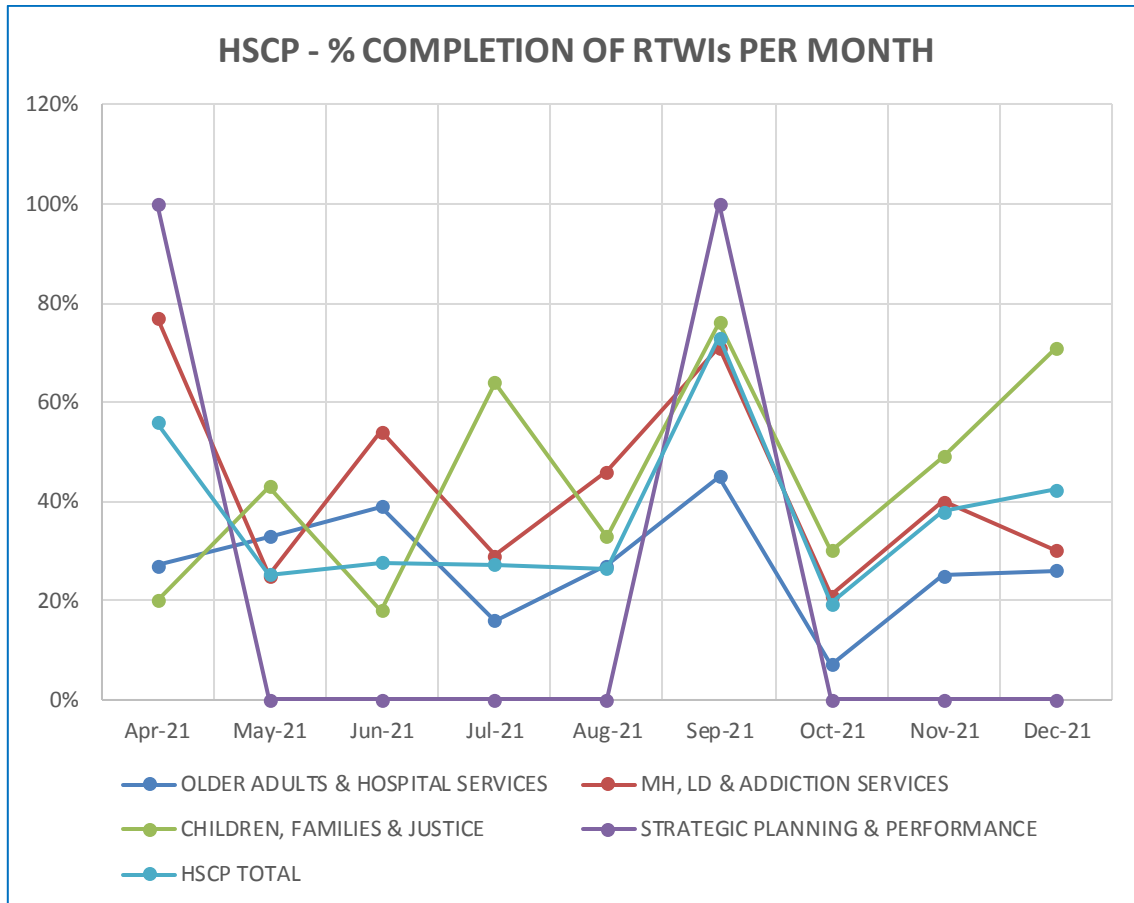


Appendix 1c – HSCP Council Employees – Non Covid vs Covid Absences



Appendix 2 – Return to Work Interview Data (Council Staff) FQ3

The graph below shows the completion rates for Return to Work Interviews (RTWI) across the partnership for Council staff. The target is 100% completion within 3 days of the employee returning to work. The graph depicts the trends in completion rates since April 2021. Whilst there have been a few dips in the % completion rates, it is positive to see an overall improvement in these completion rates towards the end of FQ 3. The Wellbeing Advisors continue to advise and guide managers on the long term absence cases.

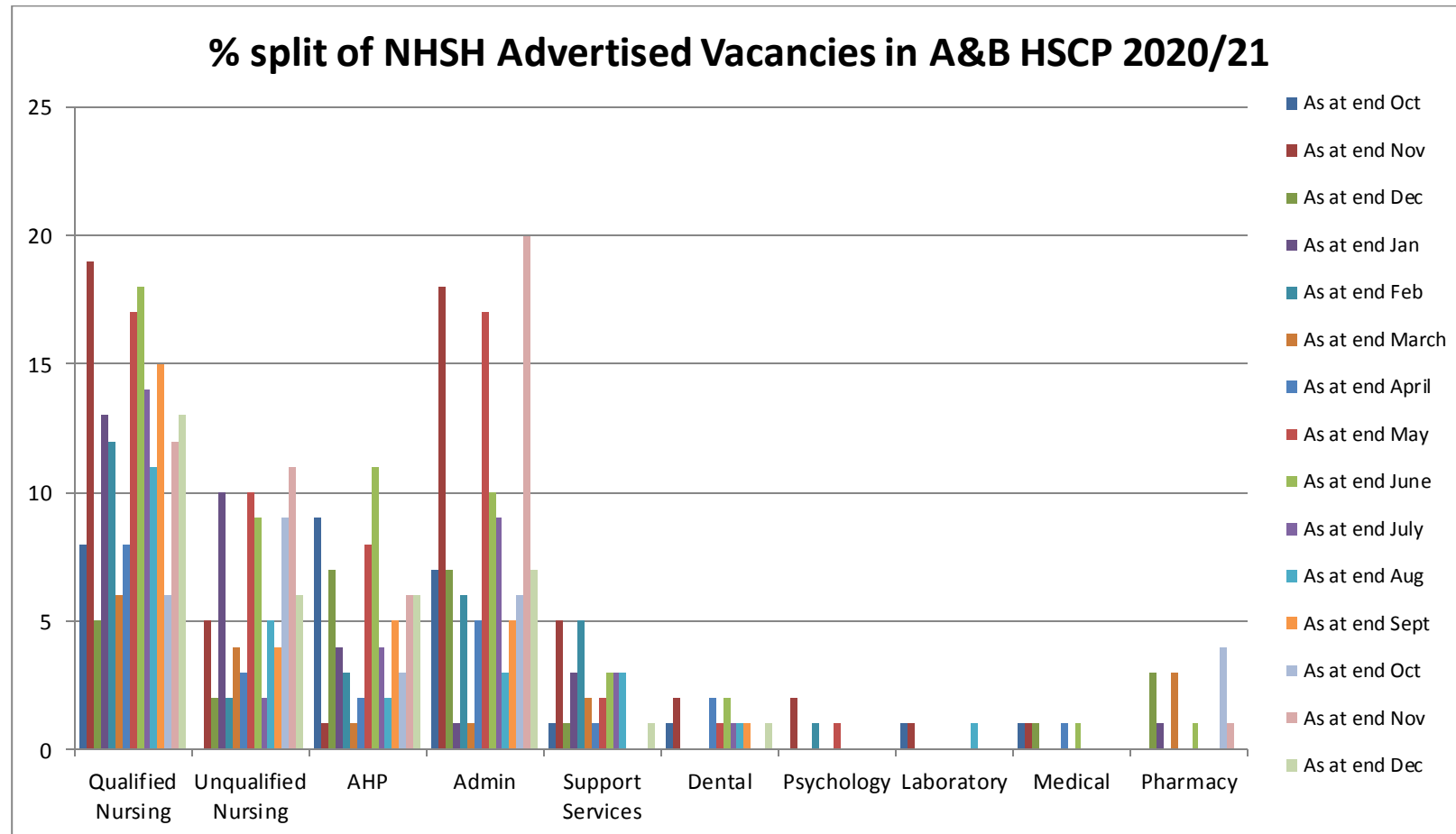


Appendix 3 – Recruitment and Redeployment Activity (Q3)

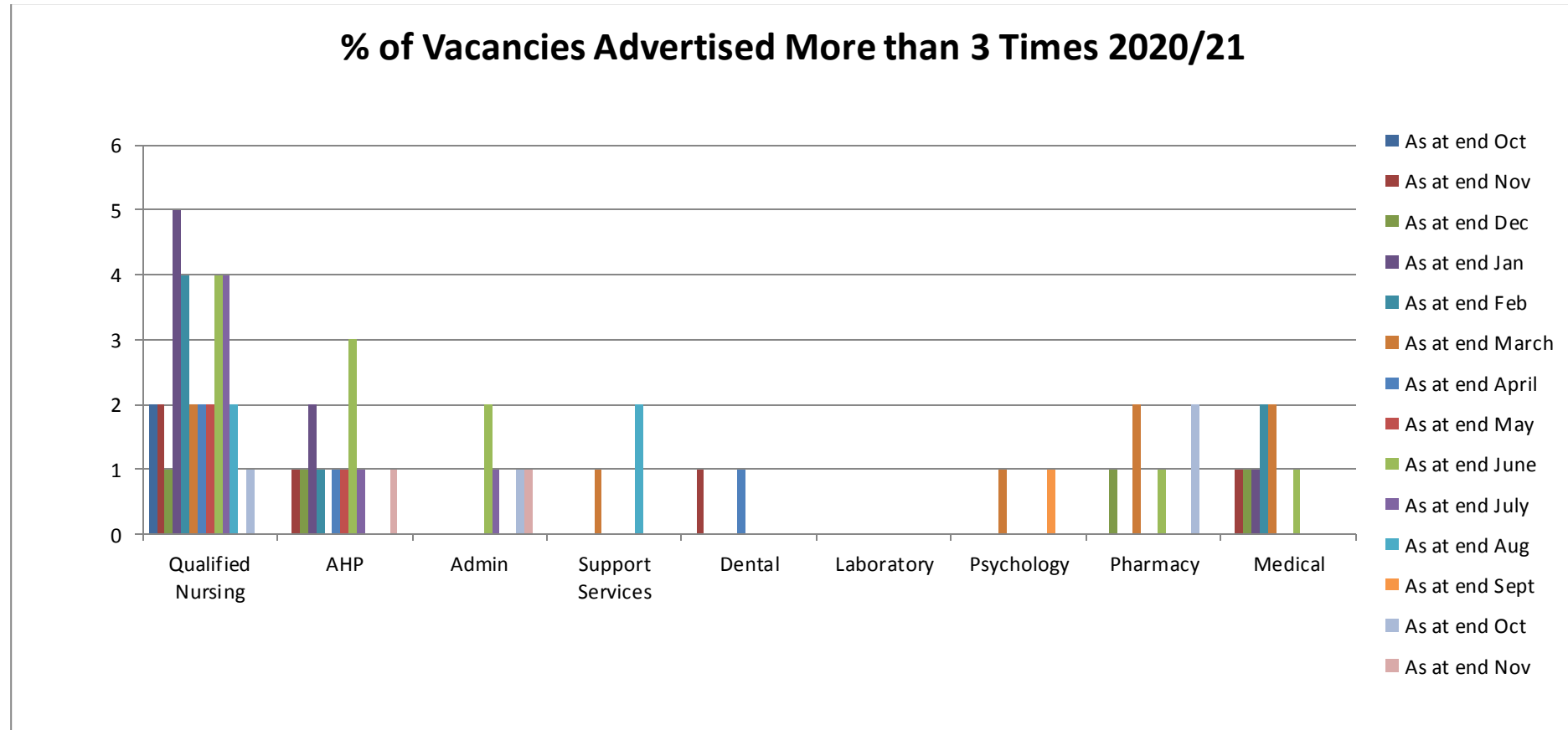
3a NHS Vacancies

	October		November		December	
	New	Re-Ad	New	Re-Ad	New	Re-Ad
Adult Services EAST	18	0	22	9	15	15
Adult Services WEST	43	15	26	18	24	17
Children & Families	3	1	2	5	4	7
Corporate Services	1	0	0	1	2	0
Totals	65	16	50	33	45	39
	81		83		84	

Appendix 3b NHS Advertised Vacancies



Appendix 3c NHS Re-advertised Vacancies

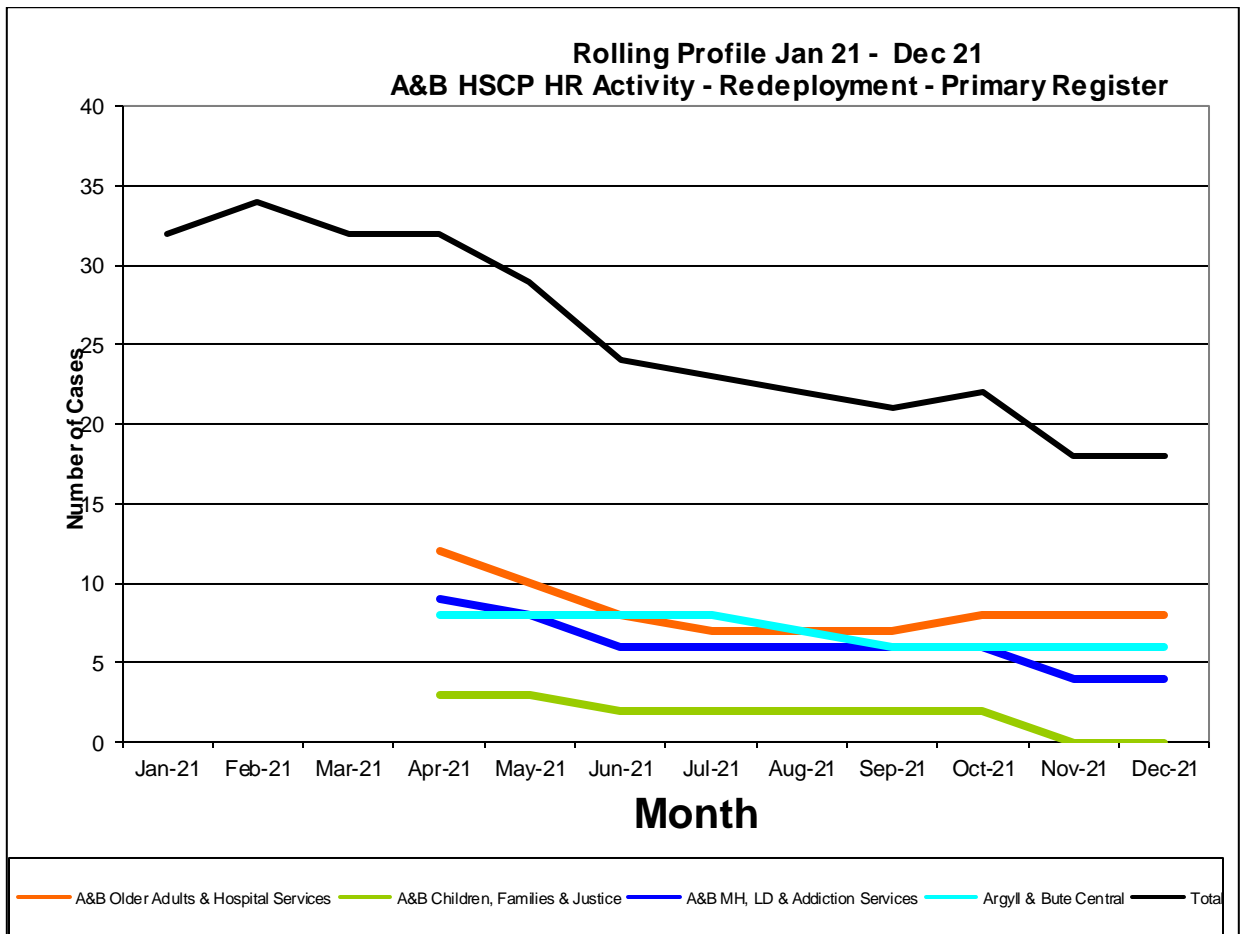


Appendix 3d Council Social Work/Care vacancies

The breakdown of Council vacancies (detailed by Internal/Ring-fenced and External job adverts) for Q3 is detailed in the table below. The Council's Communications Team continues to promote vacancies on social media, as well as the main external adverts via the My Job Scotland website. Overall, there continues to be a high number of posts filled on a temporary or fixed term basis. This can be for budget related or project management reasons.

	Oct 21		Nov 21		Dec 21	
	Internal/RF	External	Internal/RF	External	Internal/RF	External
Older Adults & Hospital Services	2	17	9	14	1	27
MH, LD & Addiction Services	1	4	2	2	1	1
Children, Families and Justice		2	4	4	5	2
Strategy P&P					1	
(HSCP PL3 DIRECTORATE)				1		
	3	23	15	21	8	30
Totals	26 (Temp 13) (Perm 13)		36 (Temp 13) (Perm 23)		38 (Temp 9) (Perm 29)	

Appendix 4: NHS Redeployment



Appendix 4: Permanent, Fixed Term and Casual Contracts (Q3)

4a NHS and Council Social Work/Care Temporary (including Secondments) /Fixed Term Contracts

Employees on T/FT contracts	Oct 21	Nov 21	Dec 21
Older Adults & Hospital Services (ABC)	33	35	34
Older Adults & Hospital Services (NHS)	2	2	3
MH, LD & Addiction Services (ABC)	11	11	12
MH, LD & Addiction Services (NHS)	2	2	2
Children, Families and Justice (ABC)	17	17	19
Children, Families and Justice (NHS)	13	13	13
Strategic Planning and Performance (ABC)	2	1	-
Corporate Services (NHS)	4	4	4
(HSCP PL3 DIRECTORATE ABC)	3	3	3
OVERALL TOTAL	87	88	90

4b Council Social Work/Care Casual Workers

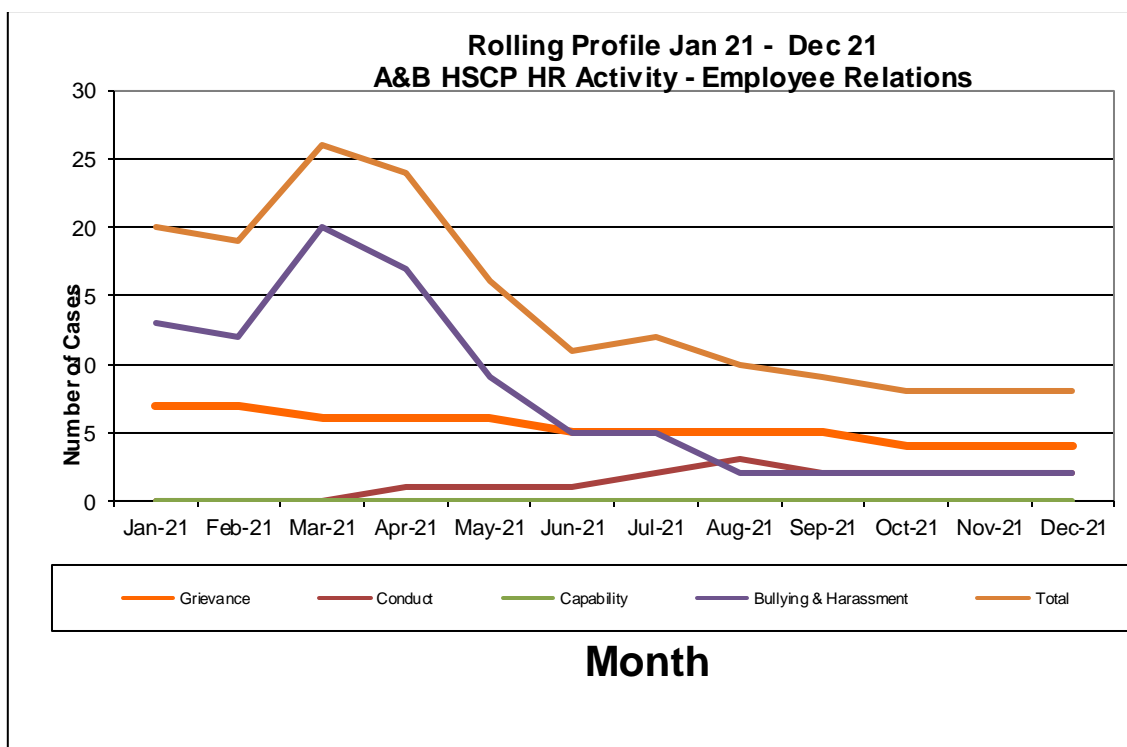
Total Number of Casual Workers (some also on Perm/Temp contracts)	Oct 21	Nov 21	Dec 21
Older Adults & Hospital Services	542	559	551
MH, LD & Addiction Services	143	151	147
Children, Families and Justice	193	194	196
OVERALL TOTAL	878	904	894

Appendix 5 – Employee Relations Cases

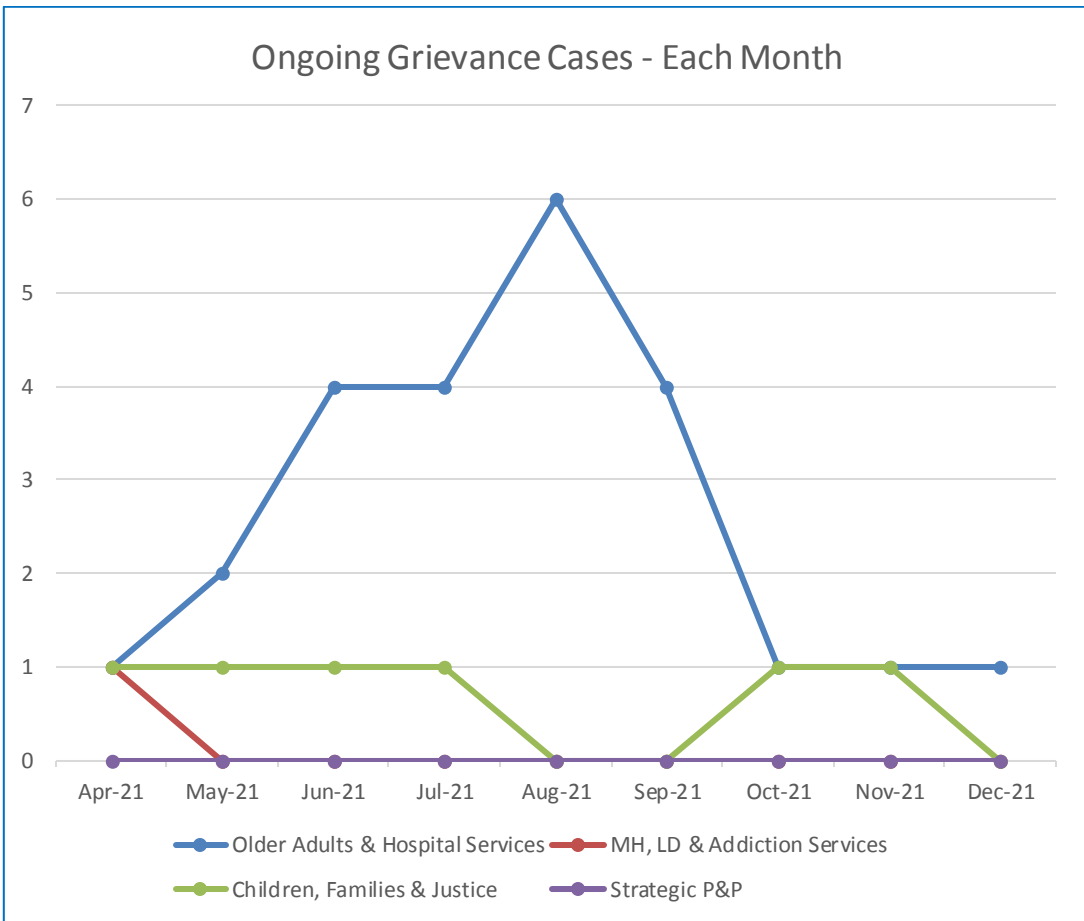
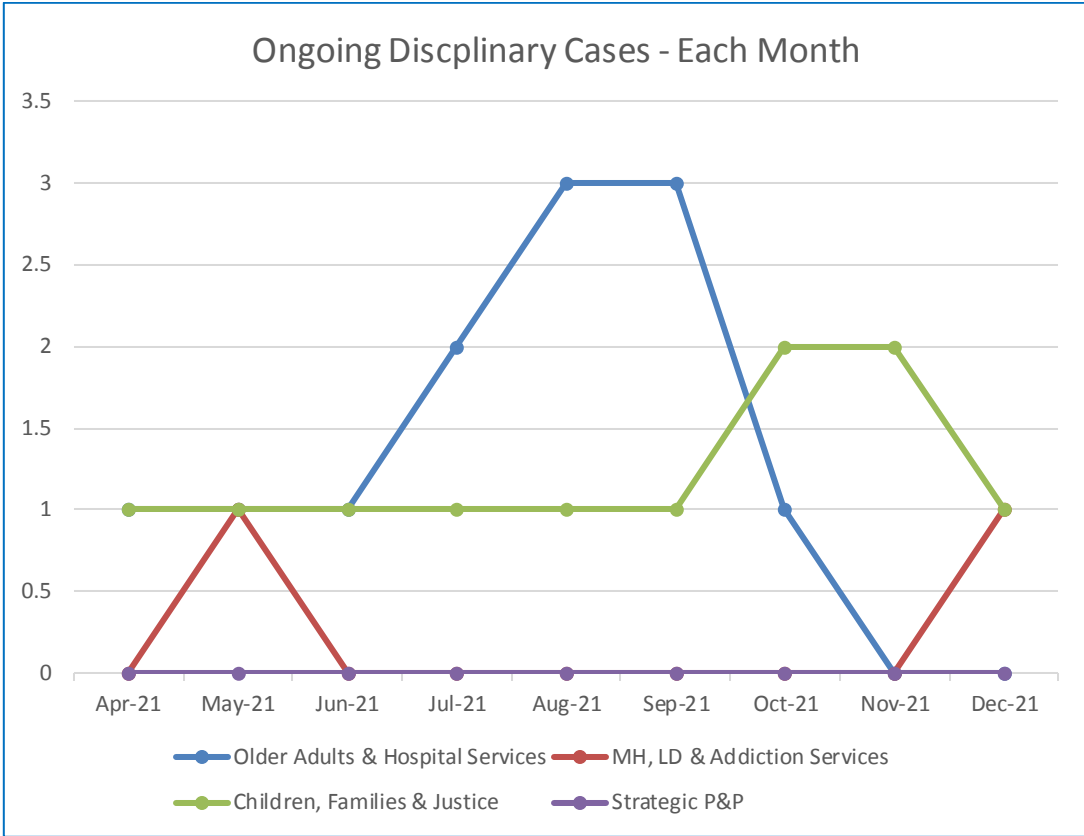
5a NHS ER cases

NHS	Oct 21	Nov 21	Dec 21	Q3 New	Q3 Completed/ Closed
ER ALL					
Grievance	4	4	4	0	1
Conduct	2	2	2	0	0
Capability	0	0	0	0	0
Bullying & Harassment	2	2	2	0	0
Totals	8	8	8	0	1

NHS



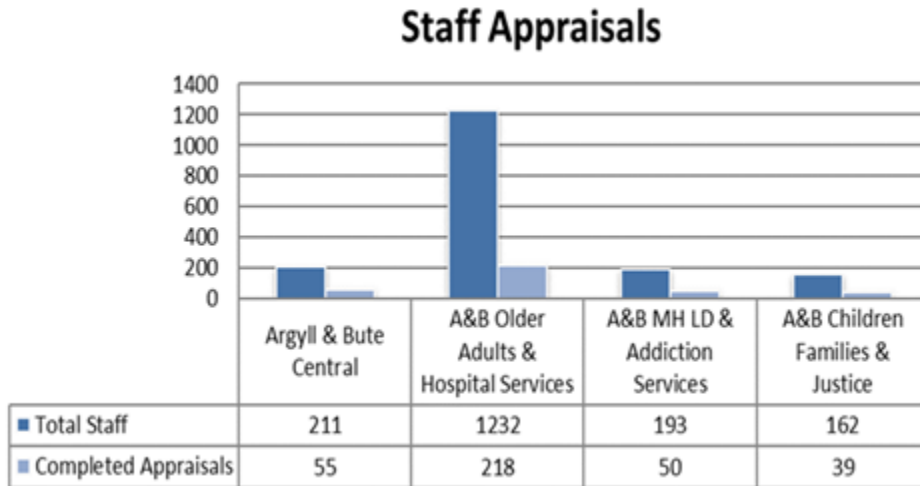
Appendix 5 b - Council Social Work/Care ER cases



Appendix 6 – Argyll & Bute HSCP Staff Appraisal Data

Monthly appraisal performance data for each area can be access via sway presentation ([click here](#)) and monthly reports published on intranet ([click here](#)).

The chart below show the completed appraisal within last 12 months at the end of January 2022.

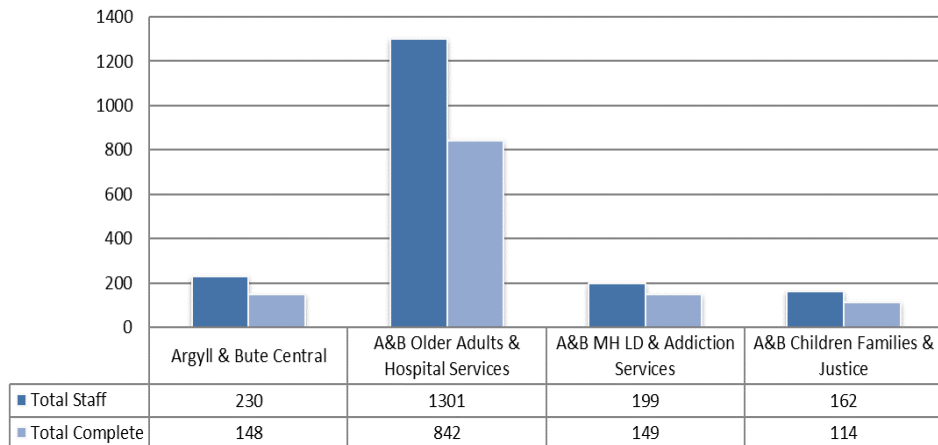


Appendix 7 a – Argyll & Bute HSCP Performance Compliance Data – Ongoing

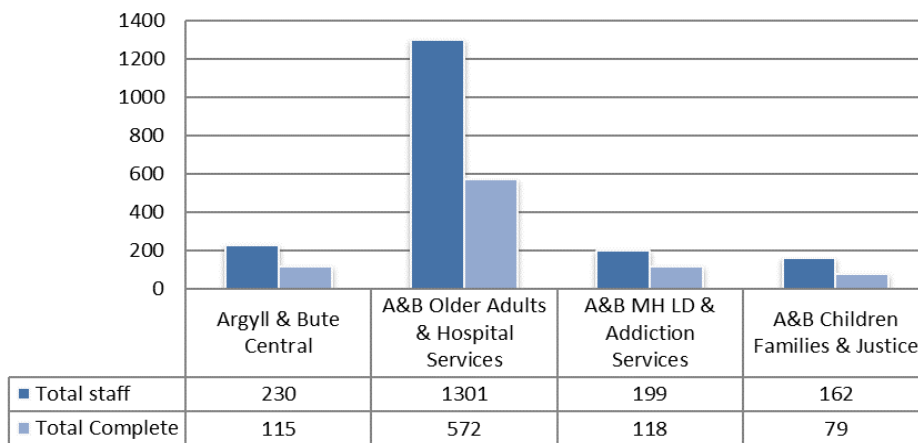
Monthly compliance data for each area can be access via sway presentation ([click here](#)) and monthly reports published on intranet ([click here](#)).

The charts below show the A&B HSCP compliance percentage at the end of January 2022.

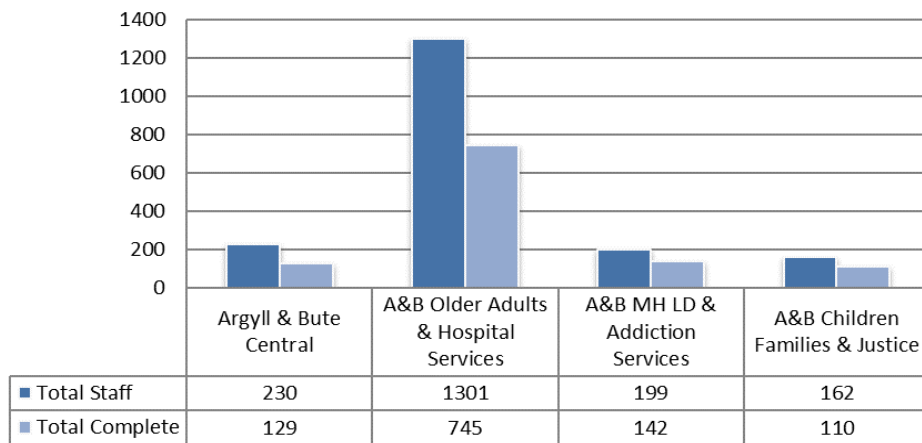
Equality and Diversity



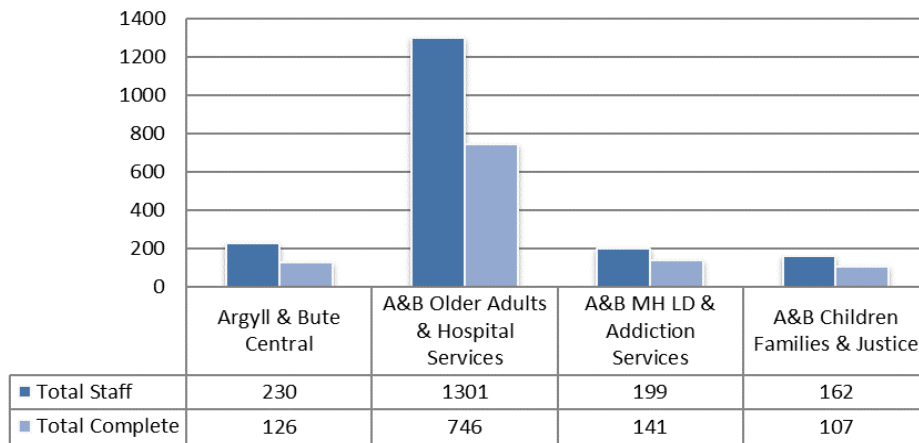
Fire Safety



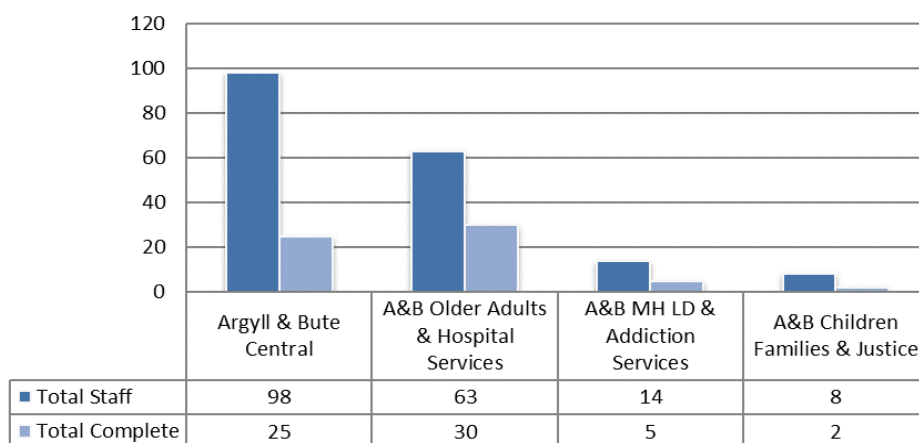
Safe Information Handling - Foundation



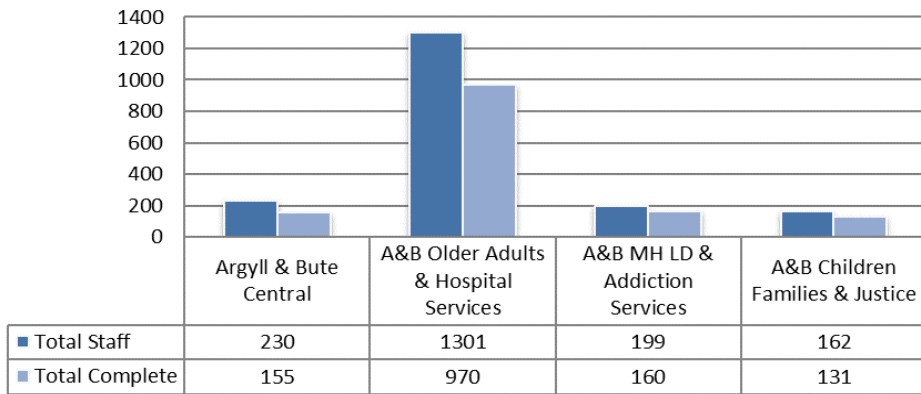
Moving and Handling - Module (A)



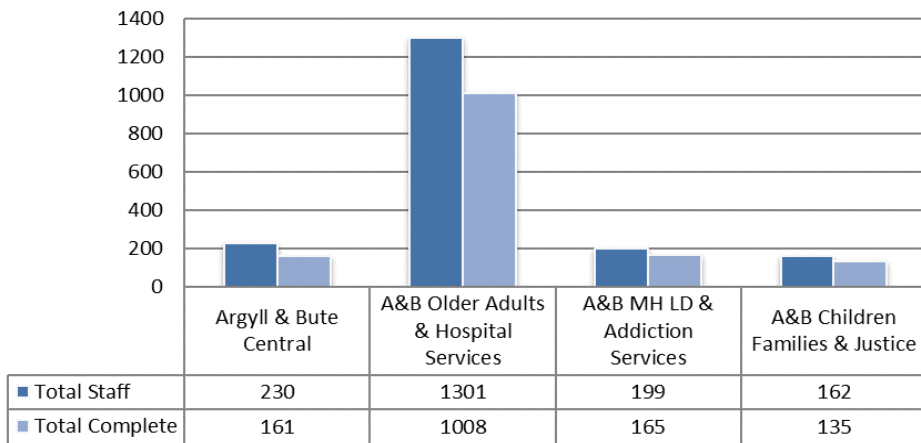
Violence and Aggression (Non-Clinical)



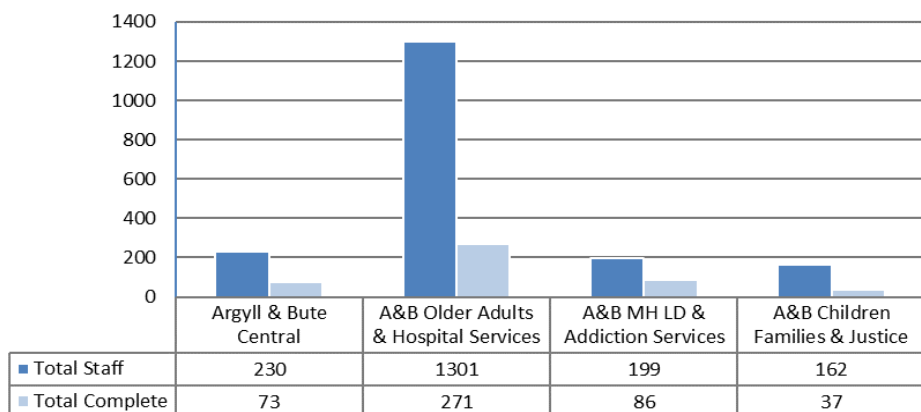
Why Infection Prevention and Control Matters



Hand Hygiene



Public Protection: Everyone's Responsibility

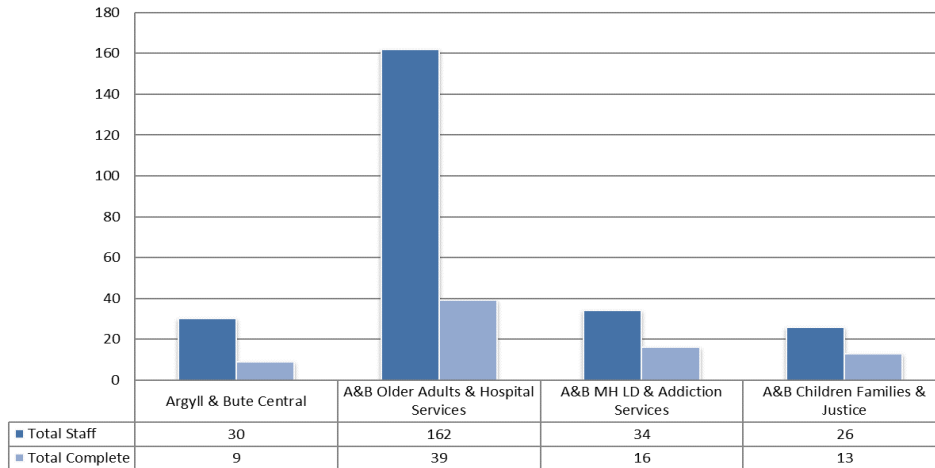


Appendix 7 b – Argyll & Bute HSCP Performance Compliance Data – Induction

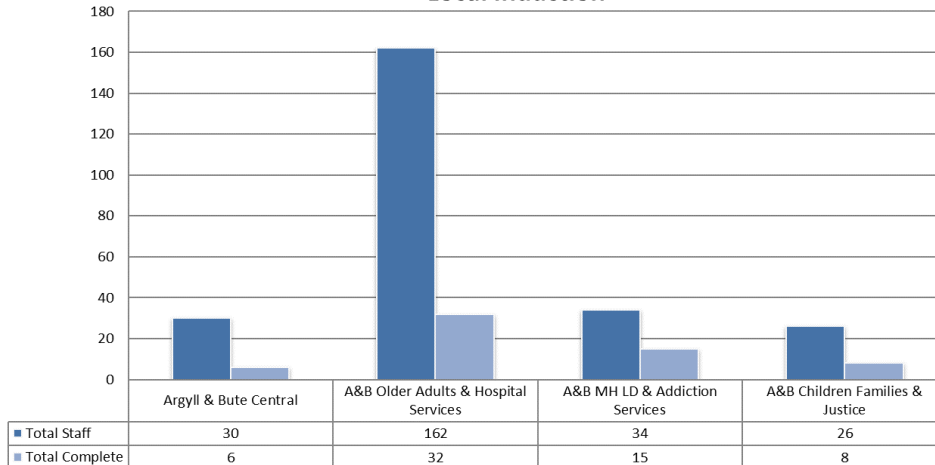
Monthly compliance data for new starts in each area can be access via sway presentation ([click here](#)) and monthly reports published on intranet ([click here](#)).

The charts below display compliance with core mandatory elearning requirements at the end of January 2022.

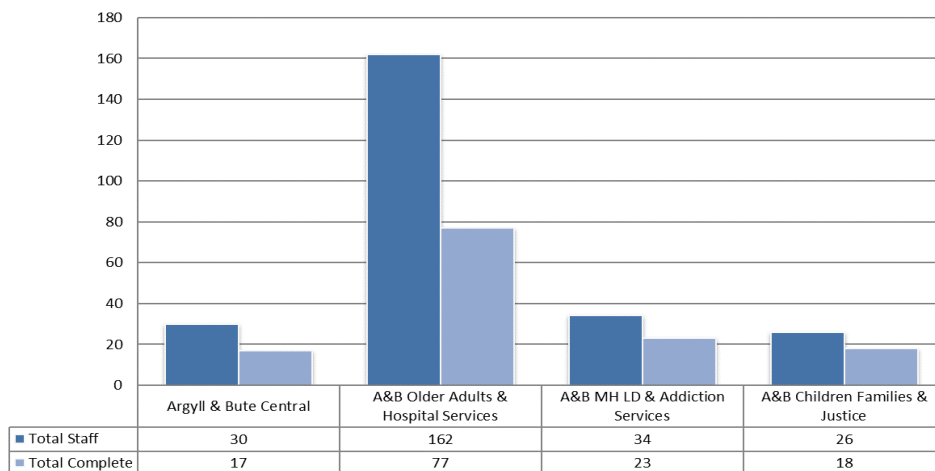
Corporate Induction



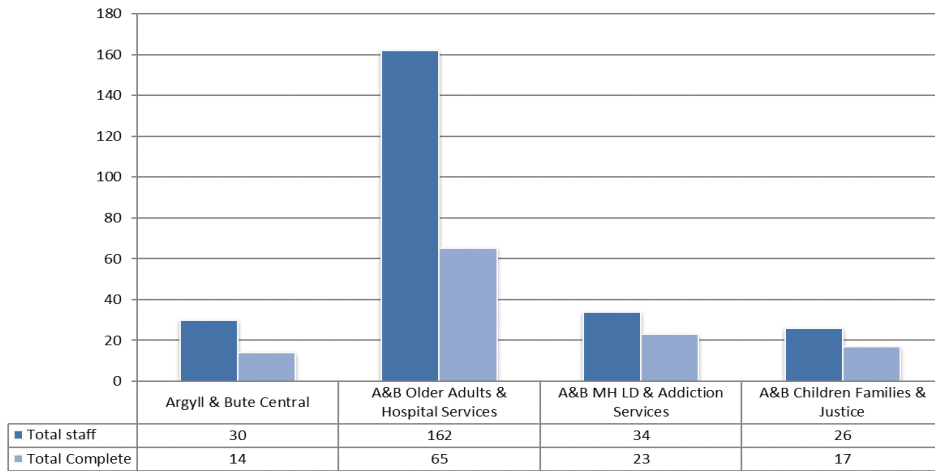
Local Induction



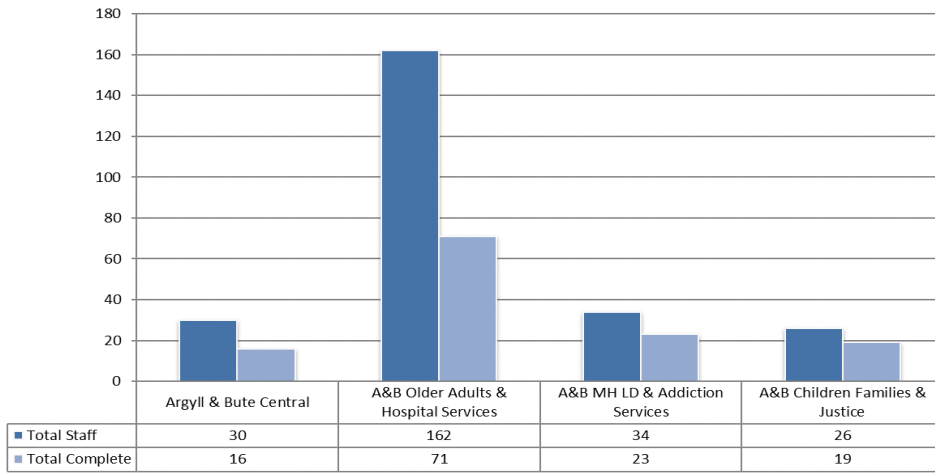
Equality and Human Rights



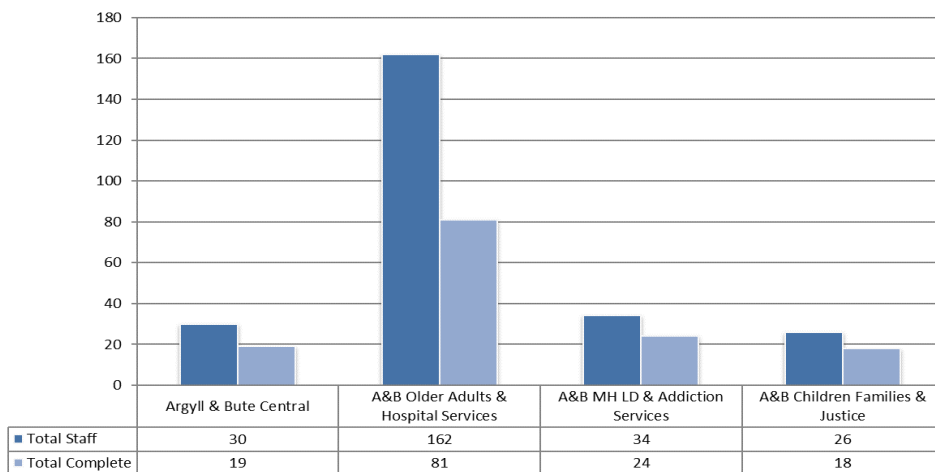
Fire Safety



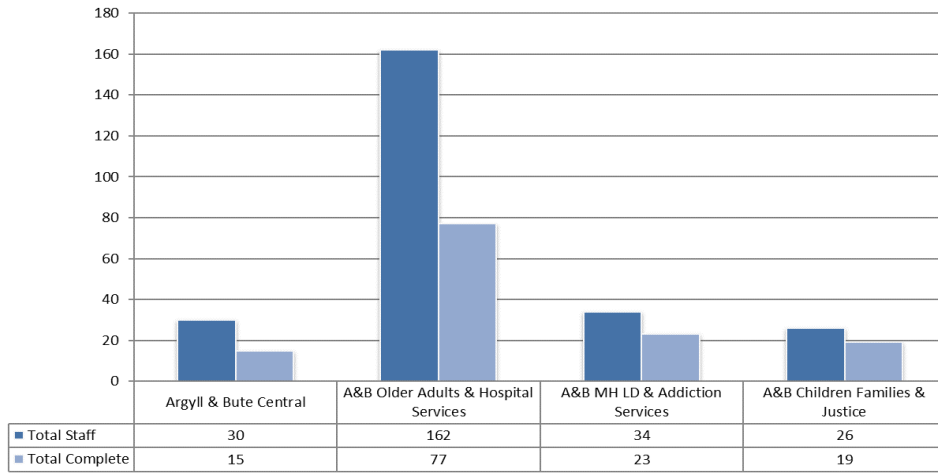
Safe Information Handling (Foundation)



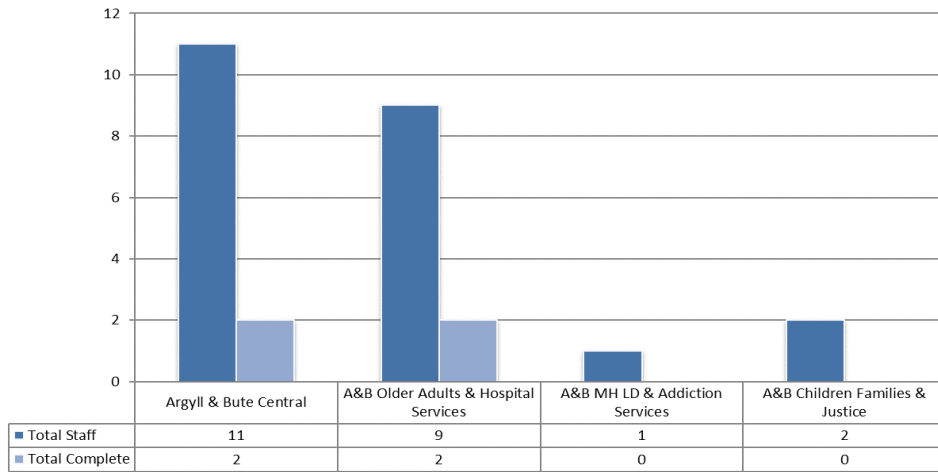
Hand Hygiene



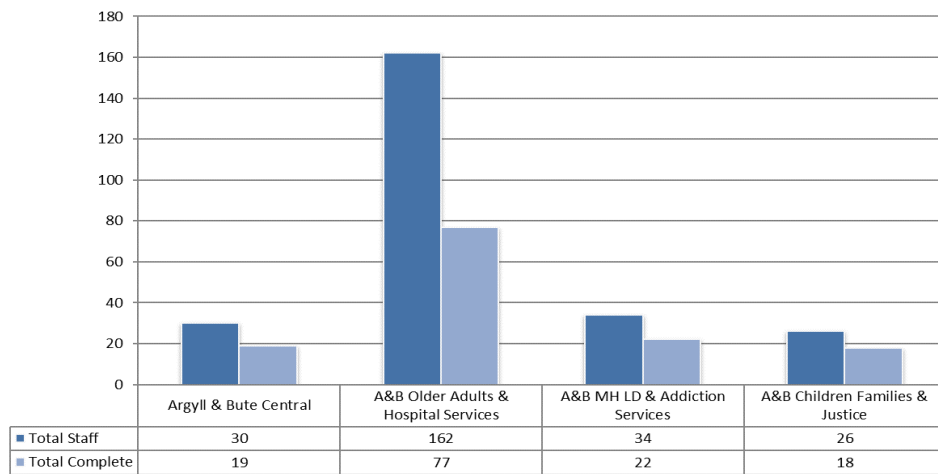
Moving & Handling (Module A)



Violence & Aggression (Theory) - Administrative Services



Why Infection Control Matters



Public Protection: Everyone's responsibility

