

**STAFF COUNCIL MEETING: Action Plan and Outcomes  
Summary**

**Date:** Thursday 22 September 2016

**Duration:** 10.00 am – 12.00 pm

**Location:** Training 3 & 4, SCHC

<b>Members:</b>	
Amy Poole	Communications & Marketing Officer
Debra Ollerhead	Continence Service (Staff Council Member)
Jo Harvey	Director of Human Resources & Organisational Development <b>(Joint Chair)</b>
Judy Fairbairn	Sexual Health (Staff Council Member)
Leann Davitt	Physiotherapy (Staff Council Member) <b>(Vice Chair)</b>
Norma Hayes	Staff Governor
Paula Simpson	Deputy Director of Nursing (joined meeting at item 5)
Val McGee	Director of Integration and Partnerships
<b>In Attendance:</b>	
Claire Richards	Senior Assistant to Director of Human Resources & Organisational Development ( minutes)
Craig Elkerton	Senior Health Advisor (observing)
Fiona Davies	Speech & Language Therapy (observing)
Ken Walker	Communications & Marketing (observing)
Ian Hogan	Head of IT
Helen Lawler	Physio Rehab at Home
<b>Apologies:</b>	
Dominique Gill	Senior Assistant, Corporate Team(Staff Council Member)
Fiona Fleming	Senior Communications and Marketing Manager
Helen Lundy	ICCT Manager (Staff Council Member)
Karen Howell	Chief Executive
Mel Johnston	Business Manager, Dietetics (Staff Council Member)
Paula Downie	Health Visiting (Staff Council Member)
Stephanie Ball	Community Night Nursing Service ( Staff Council Member)
Alison Jones	Quality & Governance (observing)
Ewen Sim	Medical Director
Angela Price	Health Visiting (Staff Council Member)
Mark Greatrex	Director of Finance and Resources
Phil Clow	Director of Business Development & Strategy
Sandra Christie	Director of Nursing and Performance
Tom Meade	Wirral Heart Support/ Staff Governor ) <b>(Joint Chair)</b>

No	Topic Summary	Outcomes / Actions	Lead (Date)
1.	<p><b>Introductions/Apologies</b> LD welcomed all to the meeting and apologies were noted as listed above and the group introduced themselves.</p>		
2.	<p><b>Minutes of the previous meeting – 21 July 2016</b> The group accepted the minutes as a true and accurate record of the meeting.</p> <p><b>Matters Arising</b> <b>UPDATE 21/07/16:</b> TM confirmed that the ToRs would be shared with the group and an update to be provided at the next meeting <b>UPDATE 22/09:</b> ACTION COMPLETE</p> <p><b>Leadership For All</b> <b>ACTION 21/07:</b> Staff Council to encourage their teams and services to complete their staff appraisals and record progress on the Appraisal spreadsheet. <b>UPDATE 22/09:</b> ACTION COMPLETE</p> <p><b>Staff Council Membership</b> <b>ACTION 21/07:</b> Staff Council Expression of Interest form to be included in Staff Bulletin <b>UPDATE 22/09:</b> ACTION COMPLETE</p> <p><b>Staff Awards</b> <b>ACTION 21/07:</b> Amy Poole to feedback comments to Comms Team for progression <b>UPDATE 22/09:</b> ACTION COMPLETE</p> <p><b>AOB</b> <b>Fender Way Health Centre</b> <b>ACTION 21/07:</b> MG agreed to progress this issue with IP addresses at Fender Way for the Continence Team. <b>UPDATE 22/09:</b> ACTION COMPLETE</p> <p><b>ESR Self Service Roll Out</b> <b>ACTION 21/07:</b> JH to progress issue over incorrect years of service for Sexual Health staff on ESR and raise query around ESR codes <b>UPDATE 22/09:</b> JH confirmed that she would feedback to JF directly but confirmed that all the staff years of service were correct. The information is correct on ESR but a 'glitch' shows the information as incorrect on MSS.</p>		

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	<p><b>Gym Facilities</b>  <b>ACTION 21/07:</b> JH to provide an update on options to support the health and wellbeing strategy at the next meeting.  <b>UPDATE 22/09:</b> JH confirmed that this was on the agenda for today's meeting.</p>		
3.	<p><b>Staff Council Membership</b>  LD confirmed that the group had been agreed in the pre-meeting that any new members can join Staff Council without an election process. DO suggested confirming this in an email to all Staff Council members to agree. JH noted that the Terms of Reference for Staff Council would need to be updated to reflect this change and added that the Staff Governors may need to step back from Staff Council as the Governor role expands. JH noted the need for representation from Community Nursing as this was our biggest group of staff and suggested putting out a communication to Community Nursing to promote Staff Council.</p> <p>LD and JH agreed to update the Terms of Reference and also relook at the Terms of Office for Staff Council members. LD suggested keeping the Term of Office in the ToRs as this would be helpful to ensure that staff commit to attend. JH suggested a general expectation of 3 years Term of Office and LD and JH suggested putting out a quarterly reminder to staff to come along to attend Staff Council.</p> <p>JH agreed to revise the ToRs and bring them to the next meeting for agreement.</p>	<p><b>JH to revise ToRs and share at the next meeting</b></p> <p><b>Communication to go to C'ty Nursing to encourage attendance.</b></p> <p><b>Quarterly communication to go out to staff to promote Staff Council /and encourage new members</b></p>	<p><b>JH (24/11/16)</b></p> <p><b>JH (ASAP)</b></p> <p><b>Comm's (ongoing)</b></p>
4.	<p><b>Leadership Walkrounds</b>  JH confirmed that a schedule of Leadership and Patient Walkrounds would be finalised shortly. Our Executive Directors and Non-Executive Directors were undertaking the walkrounds at present but our Governors would also be involved in these going forward. JH added that the Staff and Patient questions were being revised for the walkrounds.</p> <p>JF noted that Sexual Health had recently had 2 leadership visits which were very different: one was undertaken by a Non-Executive (NED) who ensured that he spoke to each member of staff individually and took time to speak to everyone. The other visit was held as a group session. JF suggested changing the titles of the visits to reflect the purpose of each visit so this is clearer to staff? JF noted that the timing of the visits/walkround was good as the service was being retendered and staff appreciated this. DO noted that SC had visited the Continence Team which had been appreciated by the team.</p>		

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5.	<p><b>Clinical Forum</b></p> <p>LD queried if the Clinical Forum meetings were still taking place? JH noted that she had checked with SC who had confirmed that the Clinical Forum meeting had been amended in light of the Divisional Structure review and Clinical Reference Groups were going to be established. LD noted that it would be useful to know the structure of the groups and what was discussed at the meetings.</p> <p>PS joined the meeting and updated the position further in relation to Clinical Reference Groups for each professional group (nursing, therapies and medical/dental). She noted the need for an overarching forum and agreed to share the Terms of Reference for discussion and feedback at the next Staff Council meeting.</p> <p>CE noted that in East Cheshire there was access to Clinical skills training through Public Health and there are 2 nurses on secondment to do the training. PS agreed to progress this outside of the meeting and agreed to arrange a ½ hr meeting with Debbi Howard, PS and CE.</p>	<p><b>PS to share TORs for Clinical Forum for next meeting</b></p> <p><b>PS to meet with CE and DH around Clinical Skills training</b></p>	<p><b>PS (insert next meeting date)</b></p> <p><b>PS (ASAP)</b></p>
6.	<p><b>Staff Zone – Forms</b></p> <p>LD raised a query on behalf of TM regarding the accessibility of forms on Staff Zone around annual leave and sickness. JH reported that the forms for both sit within policies on Staff Zone. APo added that there are a variety of forms some in different formats, some as standalone documents and some are part of a policy. JH suggested that a quick link to the most popular or frequently used form could be helpful or a top 5 button to access the forms. APo agreed to look at the comms workload and agreed to confirm timescales at the next meeting.</p>	<p><b>APo to review most popular forms to make these more accessible on Staff Zone.</b></p>	<p><b>Apo (ASAP)</b></p>
7.	<p><b>FabChangeDay</b></p> <p>FD explained that 19<sup>th</sup> October would be FabChangeDay when people within the NHS make small changes that can have a big impact. FD tabled further info and CR agreed to share with the group electronically after the meeting.</p> <p>FD explained that there were pledges on the FabChangeDay website or app or staff could come up with their own. FD added that Speech and Language had started the Randomised Coffee Trials which gave staff the chance to meet up with other staff to exchange ideas, build relationships and understand services. JH explained that the Randomised Coffee Trials were going to be proposed at ELT but noted that SC was supportive of the idea.</p>	<p><b>CR to share the FabChangeDay info with the group via email</b></p>	<p><b>FD/ CR (asap)</b></p>
8.	<p><b>* Organisational Update</b></p> <ul style="list-style-type: none"> <li><b>Balanced Scorecard (Month 4) –</b></li> </ul>		

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	<ul style="list-style-type: none"> <li>• JH updated that our financial position remained strong and the trust was ahead of its financial plan at the end of August with an overall surplus of £236k.</li> <li>• <b>CIP</b> – The trust has a £670k gap at present and there are fewer ideas being submitted to help fill the gap. JH encouraged the group and their colleagues to submit any new CIP ideas through the Ideas and Innovations page on Staff Zone or contact the PMO team.</li> <li>• <b>KPIs</b> – VM reported that our KPI position was good and thanked staff for their hard work to keep KPIs green rated. There are some red KPIs in 0-19 Service and conversations are ongoing to see if some KPIs need to be renegotiated.</li> <li>• <b>Sickness Absence</b> – JH reported that the sickness absence rate was a real cause for concern as the rate in July had increased to 5.9% from 5.6% in June which is above our target of 4%. The sickness absence rate had decreased to 4.9% in August but it was important that this was maintained beyond the holiday period. This would be picked up later in the agenda in more detail.</li> </ul> <p><b>Update on Bids, Tenders and Organisational Change</b></p> <p><b>Bids &amp; Tenders:</b> VM updated on the current bids and tenders:</p> <ul style="list-style-type: none"> <li>• <b>Sexual Health Wirral</b> - the trust is working in partnership with the Royal Liverpool hospital as a subcontractor to provide consultant leadership for the service. JF added that the bid details would be due in the 1<sup>st</sup> week of October. All the workstreams were in place and David Hammond has been co-ordinating engagement</li> <li>• <b>Integration of Health and Social Care</b> - Department of Adult Social Services staff would transfer into the Trust in April 2017 and KPMG have provided due diligence report. A business case would be submitted to Board in September which has been written in partnership with Wirral Council. Five staff engagement events had been held to keep both Council and WCT staff updated.</li> <li>• <b>Dental Call Handling - Lancashire</b> - the Trust had decided not to pursue this contract as the IT system required would be costly.</li> <li>• <b>East Cheshire Looked After Children Team</b> - PS updated that this service would transfer across to WCT</li> <li>• <b>ADHC</b> - The ADHC would close on 30<sup>th</sup> September and the trust was working to support the 3 affected GPs. An acknowledgement would be added to the Staff Bulletin.</li> <li>• <b>Pathway Redesign around Respiratory and Diabetes</b> - the business case was being presented to Healthy Wirral Board today</li> <li>• <b>Clinical Admin Support Review</b> – JH confirmed that the ToRs had been shared and work was ongoing. Focus groups had taken place and staff had engaged and feedback via a survey. The next stage would be to look at the core elements of each role followed by a proposal then consultation with staff.</li> </ul>		

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	<p>JF queried if the admin support review should be retitled as some roles have an element of admin but are band 5,6 and 7 who are delivering role but not working directly with patients. JH added that the review was about delivering a clinical service to our patients and admin would not sit on its own. PS confirmed that she understood JF's point as there were also some staff who were corporate but noted that we were all in our roles to support clinical delivery support to our patients by supporting our clinical colleagues to do their job to deliver clinical care.</p> <ul style="list-style-type: none"> <li>• <b>Single Point of Access</b> – VM updated that this would be one phone number for Wirral and this service was being expanded and any member of the public or GP service could ring directly and an assessment aspect would be included.</li> </ul>		
9.	<p><b>Staff Flu Campaign</b> PS provided an update on the Staff Flu Campaign and the key points:</p> <ul style="list-style-type: none"> <li>• The campaign refocused on the wellbeing of our population as vaccination of health/social care workers protected and reduced the risk of spreading flu to patients, service users, colleagues and family</li> <li>• The trust were keen to improve on last year's staff flu uptake</li> <li>• Details of the Drop In Flu Clinics timetable had been shared with staff via Staff Bulletin</li> </ul> <p>PS asked the group to take back the key messages and the seven elements of running a successful flu campaign to their teams.</p> <p>PS added that this year there had been the suggestion to provide an incentive system for staff to encourage staff to uptake the flu vaccination. Some ideas suggested were: M&amp;S Gift Vouchers, a free gym membership to a local gym for 3 months alongside the free post note and pen. IH added that IT could offer an Ipad 2 as an incentive. The Ipad was a used one but provides a low cost incentive. The group agreed and suggested 'names in a hat' approach to choosing the winner. PS added that she would progress this idea through Senior Leadership Team for their approval.</p>	<p><b>Staff Council to take back key messages and 7 elements of running a successful flu campaign to their teams</b></p>	<p><b>ALL (asap)</b></p>
10.	<p><b>Sickness Absence &amp; Wellbeing</b> JH highlighted the ongoing concern over the levels of sickness absence during the last year. JH noted that work was continuing to manage sickness absence by using the Managing Attendance policy to help support staff back to the workplace and Service managers have been required to work with the HR team in completing action plans to ensure compliance with the Managing Attendance Policy. An audit had recently been undertaken on sickness absence by MIAA and the trust had received a 'significant assurance' rating.</p> <p>JH asked the group for any feedback on sickness absence within their teams and asked how staff were feeling? A key point noted was that some staff were feeling anxious around the loss of key Band</p>		

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	<p>7 staff within Community Nursing through retirement or who have left the trust and the impact on junior staff at the loss of their experience. PS added that the King's Fund had recently published report highlighting the pressure on District Nursing nationally not just locally and we are working to support the service. JH noted that sickness absence was not just a concern in Community Nursing but across the whole trust.</p> <p>FD highlighted that her team was feeling fragile due to unavoidable illness and FD had been undertaking person centred focus with her team to focus on ways to support the team, understand what a good day looks like for them using positive psychology. NH suggested also thinking about holistic exercise to offer staff such as a choir not just sport related exercise.</p> <p>JH suggested that a Wellbeing Working Group could be set up to provide activities to support staff wellbeing. CE suggested using existing links with organisations such as Merseyside Sports Partnership who work with NHS trusts and can provide Health and Wellbeing Champion Training. JH noted that activities should be available at all our bases and locations not just St Catherine's Health Centre. JH agreed to set up a Wellbeing Working Group to explore these options and to look at what resource and support may be available within the trust. The group would include MSK and Heart Support representation.</p>	<p><b>JH to set up the Wellbeing Working Group</b></p>	<p><b>JH (ASAP)</b></p>
<p><b>11.</b></p>	<p><b>IT Update</b></p> <p>IH attend the meeting to provide an update on IT and the key points were:</p> <ul style="list-style-type: none"> <li>• The IM&amp;T Strategy has now been approved by IM&amp;T Board and 27 workstreams have been identified. 8 projects have been set up to look at SPA, DVT and GP OOHs and also 8 non-clinical projects such as updating Internet Explorer to version 11, rolling out NHS mail and password self-service.</li> <li>• There were 5 active infrastructure projects which includes upgrading the network to help things run quicker and improve connectivity</li> <li>• Healthy Wirral - working to bring everyone onto Single Point of Access</li> <li>• East Cheshire – supporting relocations within East Cheshire</li> <li>• Working to provide faster Broadband in bases on Wirral and all but 7 now have superfast Broadband</li> </ul> <p>IH talked through some data and statistics and the key highlights were:</p> <ul style="list-style-type: none"> <li>• In August 1,699 calls were logged by the IT Helpdesk and 98% of these have been closed</li> <li>• Since March (when the IT service transferred to WCT) the IT Helpdesk have logged 9,976 calls and 96% of these have been closed.</li> <li>• The average wait time for calls into the IT Helpdesk was 2mins 28 seconds, the longest wait 30 mins</li> </ul>	<p><b>IH to share IT statistics with staff via the Staff Bulletin</b></p>	<p><b>IH (asap)</b></p>

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	IH noted that the IT Helpdesk statistics would be shared with all staff via the Staff Bulletin		
12.	<p><b>* Update on Leadership For All/Appraisal</b>            JH provided an update on Leadership for All and Appraisals and the key points were:</p> <ul style="list-style-type: none"> <li>• 98% of eligible staff had now had undertaken their appraisal</li> <li>• Service level talent reviews would be brought together to map out talent across the trust.</li> <li>• On Thursday 10 November the trust would be holding our second annual Leadership for All event, Steve Lander, International rugby referee and coaching member of the 2003 Rugby World Cup winning England squad, would be our guest speaker and details will be published in the Staff Bulletin.</li> </ul>		
13.	<p><b>Staff Awards 2017</b>            JH updated that the For You Thank You Staff Awards 2017 would officially launch on Friday 23<sup>rd</sup> September and noted that the awards are a fantastic opportunity to reflect on the last year and celebrate what you, your team and your colleagues have achieved. The categories had been revised this year and the nomination process had also been revised to make them easier to complete.</p> <p>The closing date for nominations would be Monday 12 December. A final date for Staff Awards Event has not yet been set but will be in February or March 2017.</p>		
14.	<p><b>Key Messages</b>            The group agreed that the key messages from the meeting were:</p> <ul style="list-style-type: none"> <li>• FabChangeDay</li> <li>• Clinical Reference Group</li> <li>• Staff Flu Campaign</li> <li>• IT Update</li> <li>• Health &amp; Wellbeing</li> <li>• Staff Awards 2017</li> </ul>		
15.	<p><b>Future Agenda Items</b>            Please send any future agenda items to either TM, LD, JH or CR.</p>	<p><b>Future agenda items to be sent to TM, LD, JH or CR</b></p>	<p><b>Staff Council members (17/11/16)</b></p>
16.	<p><b>Any Other Business</b>  <b>Communication Around Hub Structure</b>            DO reported that she had been undertaking work with the Community Nursing teams and the team were having an issue in identifying the new hub structure and asked if this structure could be shared</p>	<p><b>PS and DO to draft an</b></p>	<p><b>PS/ DO</b></p>

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	<p>with staff. PS noted that this information would benefit other services too and DO and PS agreed to draft an email listing this information and to add this information to Staff Zone.</p> <p><b>Recruitment of SLT Staff</b> FD noted that she had a potential staff member who wanted join the Speech &amp; Language team but the recruitment process for the vacancy had taken so long that the potential staff member had taken up a post elsewhere. JH said it would be helpful to see where the delays are in the recruitment process and asked FD if she could provide her with the details. JH updated that work was ongoing locally called Streamlining which was looking at streamlining the recruitment of staff would transfer in from NHS Trusts by looking at processes such as DBS checks etc.</p> <p>PS noted that we need to approach and target graduates around March each year especially for posts in Therapy Services so that we do not wait until they have graduated and miss the opportunity to recruit them. FD queried if potential staff could work under supervision on a temporary contract with the Trust until they graduate? PS agreed to liaise with Martin Godfrey to explore this option in more detail.</p> <p><b>Christmas Arrangements</b> JF queried if there would be any Christmas decorations/activities planned this year and could the trust support National Christmas Jumper Day on Friday 16<sup>th</sup> December? JH confirmed that there will be Christmas Lights and Trees at SCHC and a school choir would be invited to sing at SCHC. JH asked the group to send any further ideas to her and ask your teams for their ideas too.</p> <p>DG suggested running Operation Christmas Child - Shoe Box appeal or donating food to the Wirral Food Bank.</p>	<p><b>email to staff regarding the new Hub structure</b></p> <p><b>FD to provide details of delays in SALT recruitment</b></p> <p><b>PS to liaise with Martin Godfrey to explore option to provide temporary contracts to undergraduates</b></p> <p><b>Staff to forward any further ideas for Christmas to JH</b></p>	<p><b>(asap)</b></p> <p><b>FD (asap)</b></p> <p><b>PS (24/11/16)</b></p> <p><b>ALL (asap)</b></p>
17.	<p><b>Date and Time of Next Meeting</b> <b>Thursday 24 November from 10.00 am -12.00 pm in Training Rooms 3 &amp; 4, SCHC</b> <b>Pre-meeting for Staff Council members from 9.30am</b></p>		