
ARGYLL AND BUTE COUNCIL

Policy and Resources

Argyll & Bute Health and Social Care Partnership

- 1.2 The progress in delivery of the 100 day plan and the approach being taken that ensures both NHS and council employees benefit from cultural changes.
- 1.3 The establishment of the Argyll & Bute Culture group moving into the longer term phase of activity

**Argyll & Bute Health and Social Care Partnership (HSCP) Culture Survey
Response Update**

2.0 INTRODUCTION

- 2.1 The Chief Officer of the HSCP has taken a whole partnership approach to changes in culture for all health and social care staff whose care practice is integrated and work alongside each other.
- 2.2 NHS Highland and Argyll and Bute HSCP have offered a sincere apology to colleagues who indicated in the Culture Survey that they experienced bullying and harassment.
- 2.3 Communication, delivery, empathy and appropriate action have been identified as key actions in building relationships and trust with an integrated health and social care staff group. Argyll & Bute HSCP are working with its partners, including the joint trades unions, to ensure we are meeting our commitments to staff, building a strong partnership across a wide geographic area and improving culture.
- 2.4 Since the publication of the Sturrock report and the subsequent publication of the Argyll & Bute Culture, the IJB has received response planning and progress reports for the 100 day Plan from NHS Highland and latterly local reports from the Chief Officer. The latest version of the Culture Update is provided in Appendix 2.
- 2.5 The Health and Social Care Partnership benefits from an HR Shared Services approach led by Jane Fowler, Head of Customer Support Services, Improvement and HR. Jane locally manages both NHS and Council HR and OD teams. Working across the partnership HR aims to ensure that staff procedures. This provides a firm basis to support positive behaviours already supported by policies available from each partner and underpinned by legislation.
- 2.6 It is acknowledged that change will take time and the participation of health and social care staff is key to this.

- 2.7 The paper provides an update to members of the Policy and Resources Committee with assurance on culture change activity and monitoring of that activity through the IJB which impacts employees of the council.

3.0 RECOMMENDATIONS

The Policy and Resources Committee is asked to consider:

- 3.1 The work being undertaken by the IJB to address the issues raised in the Culture survey Engagement Exercise
- 3.2 The progress in delivery of the 100 day plan and the approach being taken that ensures both NHS and council employees benefit from cultural changes.
- 3.3 The establishment of the Argyll & Bute Culture group moving into the longer term phase of activity

4.0 DETAIL

- 4.1

Over 30 staff volunteered for the Culture Group, which first met on 1 Sept co-chaired by the Deputy Chief Officer and Staffside Rep. The Culture Group will provide the drive and representation for future culture development.
Developed and rolled out virtual training in Courageous Conversations training sessions - over 200 staff have participated so far.
Initiated and established twice weekly virtual check in sessions with the Chief Officer to provide an opportunity for health and social care staff to ask questions and provide feedback.
Identified staff Wellbeing Champions within health and social care to help communicate key messages about wellbeing and psychological support.
Communicate weekly about Culture and wellbeing
Issue a weekly Communication from the Chief Officer
Established a process for external investigations of any bullying and harassment complaints

5.0 CONCLUSION

- 5.1 This paper outlines the activity undertaken in response to the Argyll & Bute Culture Survey published on 15 May and the subsequent basis for the creation of the Argyll & Bute Culture Group. It notes the 30 staff health and social care who have volunteered to support this and act as ambassadors across the partnership. The Culture Group has good representation from across the disciplines and provides a positive forum for enabling cultural change in integrated teams.
- 5.2 It seeks to provide an update to Council as to the support and engagement of health and social care staff delivering services for the partnership employed by the Local Authority partner.

6.0 IMPLICATIONS

- 6.1 Policy

Implementation of new management structures provides an opportunity to refresh an indication for manager in new posts and implement National NHS Once for Scotland policies supporting operational management.

responsibilities of the managers and on their leadership role on behaviour and culture.

6.5 Fairer Scotland Duty:

Appendix 1 Reporting timeline and links to reports

Publication of the Sturrock Report 9 May 2019

<https://www.gov.scot/publications/report-cultural-issues-related-allegations-bullying-harassment-nhs-highland/>

29 May 2019 presented at IJB: Report to Cabinet Secretary for Health and Sport into Cultural Issues related to allegations of Bullying and Harassment in NHS Highland ± John Sturrock QC

<https://www.nhshighland.scot.nhs.uk/Meetings/ArgyllBute/IJB%20briefing/IJB%20Papers%202019/A%20and%20B%20IJB%20May%202019%20reports%20v3.pdf>

7 August 2019

<https://www.nhshighland.scot.nhs.uk/Meetings/ArgyllBute/IJB%20briefing/IJB%20Meeting%207-8-19.pdf>

25 September 2019 Culture Fit for purpose action plan update

<https://www.nhshighland.scot.nhs.uk/Meetings/ArgyllBute/Documents/IJB%20-%20Agenda%20items%204%20->

To facilitate wider colleague involvement, a new programme structure has been proposed. The format and attendance of the Culture Oversight Group (formerly Culture Programme Board) has also been proposed for revision as part of this, to encourage outcome-focused discussion and progress management.

2.3 Assessment

The issues and recommendations are structured under 4 key themes:

1. Culture Programme structure and priorities
2. Progress update
3. Ongoing Concerns
4. Partnership Working review

1. Culture Programme Structure and priorities

A revised programme structure has been proposed in order to facilitate wider colleague engagement and greater rigour in planning and resource allocation. There are concerns from some Culture Board members that implementing a programme management approach increases the complexity of delivery as will require involvement from a greater number of colleagues. However, the NHS Highland Board and Staff Governance Committee support the proposed changes.

The purpose of the structure is indeed to increase participation, as culture change will require widespread involvement across the organisation. The intention is also to improve focus and prioritise action, but it is possible that the terminology used to date has confused people.

To address the feedback, a collaborative prioritisation exercise with members of the current Culture Board and the newly formed Argyll and Bute Culture Group is underway. This will co-produce a set of Culture priorities which is expected to be 4-6 key activities from the existing suite of proposed work. Plans and resources will then be structured around these activities, and language will be tested for resonance with members. The next meeting of the Culture Group on the 14th September will review the outcomes from this prioritisation exercise.

2. Progress update

Progress continues to be made in a number of key areas:

Recruitment Review: the External Culture Advisor has completed a review of current recruitment practices and processes, following engagement with recruitment teams, managers and candidates and a review of policies and systems. The report has made a set of draft recommendations to improve manager and candidate experience, which will be shared with a group of staffside, manager and HR colleagues for further discussion and prioritisation. The final recommendations will

Over 300 colleagues have been trained in Courageous Conversations in Argyll & Bute in the first 100 days of the plan and the feedback has been really positive and the skills are being put into practice.

3. Ongoing Concerns

In order to better understand staffside concerns with regards to some cases of ongoing bullying and poor behaviour across NHS Highland, the Director and Deputy Director of HR met with all of the key unions on a 1:1 basis on Thursday 20th August. There was also a dedicated meeting of the Partnership Forum on Friday 21st August where understanding the concerns in these respects was the main agenda item. The NHS Highland Executive Directors Group also met on Thursday 27th August to review concerns and understand the situation and what action the organisation could take to address this.

The key issues raised involved situations where managers are not consistently addressing colleague concerns about behaviours and how they are feeling, when raised at an early stage. It is felt that the lack of effective action can be due to managers not seeing it as their role or not seeing it as important, or in some cases not having the skills to do so effectively.

This means that issues that could be quickly resolved escalate into complex cases and relationship breakdowns. There were also ongoing

facilitate maximum Staff-side input, input from all Staff-side members will be invited in advance of the workshop.

The outcomes of the second workshop will be:

An agreed set of partnership priorities with resources required to deliver

Clarity on the roles of Staff-side, HR and Managers

Recommendations on changes to current governance arrangements and ways of working

Recommendations on changes to Staffside resource allocation

2.3.1 Quality/ Patient Care

Successful delivery of the Culture Programme is critical to effective patient care.

2.3.2 Workforce

The Culture Programme will ensure colleagues are engaged, motivated, clear on their roles and priorities and working to our values.

2.3.3 Financial

Additional funding has been secured to deliver our Culture Programme. Improving our culture will realise reductions in sickness absence and staff turnover, and reduce time and effort spent on disciplinary and grievance processes.

2.3.4 Risk Assessment/Management

No additional risks have been identified.

2.3.5 Equality and Diversity, including health inequalities

Fairness, along with dignity and respect are core principles of our Culture Programme where our values will be embedded in all we do as an organisation.

2.3.6 Other impacts

None

2.3.7 Communication, involvement, engagement and consultation

To deliver the revised programme structure and governance arrangements, greater colleague involvement and engagement is planned. A suite of

communication approaches will be required to foster this involvement and a plan is under development.

2.3.8