

West Dunbartonshire

Community Health & Care Partnership



Joint Staff Forum 22 April 2013 at 11am Room 2 - Council Offices, Garshake Road DRAFT MINUTE

Present:	Jackie Irvine, Head of Children's Services, CHCP Nazerin Wardrop, Joint Staff Forum Kenny McColgan, Unison Ross McCulloch, RCN NHS (Co-Chair) Keith Redpath, Director, CHCP (Co-Chair) Brian Johnstone, GMB John Russell, Head of Mental Health, CHCP Soumen Sengupta, Head of Strategy, CHCP Serena Barnatt, Head of HR, CHCP Gillian Gall, HR Adviser, CHCP
	Linda McAlister, HR Business Partner, CHCP

		Action
1	Apologies Apologies were noted from Chris McNeill, Tom Morrison, Peter O'Neill and Charlie MacDonald.	
2	Minutes:	
	JSF Minute	
	Older People's Change Fund – additional paper issued. Care case management paper is still outstanding. Health and Safety nominations – Serena Barnatt asked for a trade union representative from the Council. Workplan Mental Health Development Plan – a set of minutes was included with the papers FM Time – this will be covered outwith this meeting. Item 9. Linda has fed back the information to HR colleagues but has had no response re paperwork delays. Minute agreed, APF Agenda	
	Noted	
	Noted	
	Employee Liaison Group	
	Noted	
3	Matters Arising:	
	i. Children & Families/School Nursing	
	A further meeting has been held relating to health visitors in West Dunbartonshire. There is a perceived lack of skill mix and a number of areas have been identified where workforce can be improved. Despite these challenges, there is very good performance.	

	ii. Older Peoples Change Fund Update	
	The Minute and additional paper were noted.	
	iii. Care/Case Management update	
	Embedding	
	iv. Community Care Redesign	
	Noted	
	v. Integrated Day Hospital & Day Care for older adults mental health	
	Fully implemented and can be removed from standing items for the agenda. The number of memory clinics and support at home has increased.	
	vi. DN Out of Hours Boundary Realignment	
	There is a SLA with Highland which is currently subject to review.	
	vii. DN Review update	
	The Minute was noted and it was agreed to ask that future Minutes include more detail.	
	viii. Health and Safety Forum	
	Serena has all nominations with the exception of Council TU and once this is available, she will arrange a meeting. There will be four meetings each year. Nazerin Wardrop volunteered agreed to be nominated.	
	ix. Rehab Teams job description process	
	Gillian requested a health nomination and she will e-mail Ross with details.	
4	Standing Items:	
	i. Committee Update Committee papers are being pulled together for pre agenda on 24 April. Reports include a number of care inspectorate reports, Strategic Plan, Children's Plan, Change Fund, Clinical Services Review and the various standard Minutes. Proposed cycle for Committee are 21 August, 20 November 19 February and 21 May. Agreed to work on a schedule for meetings of this group three weeks in advance of Committee.	LF
	ii. PAG The group met last week. Nazerin thanked the PAG for the warm welcome they extended to her at last week's meeting.	
	iii. Sickness absence update Gillian highlighted some points from the report. Short term absence has increased and long term has decreased. There is a seasonal component to	

	the type of illnesses in the short term figures. Mental Health and Stress absences have reduced. Linda and Gillian are planning joint awareness sessions in June.	
	WDC percentage was 7.58 which represents a decrease since February and so is moving in the right direction. Minor illness remains the main reason for absence. There is a Corporate Attendance Group and some HR information notes are available to support the attendance management policy. Heads of Service have been tasked with preparing an action plan to continue to support employees.	
	The last audit showed up a number of areas for improvement in management practice and Linda will be carrying out an update audit.	
	There will be continued scrutiny of performance in this area.	
	Grievances and Discipline Actions should be routinely and fully recorded. These are already reported to the Staff Governance Committee and the APF. JCF receives the numbers from the Council above Stage 3.	
	After Brian Johnstone reported hearing that some managers require retraining in issuing disciplinary actions it was confirmed that there are a number of joint training activities currently underway and the new audit should identify any weakness.	
	Agreed to produce a paper for the next meeting to review the last twelve months and to produce quarterly updates.	
	TU agrees that rates are high but the new policies have made a difference and made people more aware.	
	Keith asked for some trend data to be included in the report in the future.	
	iv. Mental Health Services Update	
	The Minute of the Mental Health Services Redesign Engagement Group was noted.	
	Re Item 10, Ross asked if this was an issue and John said he was unaware of any issues. Ross asked what guidance was available to managers. There are 1,500 cases across Glasgow but not aware of any local cases. There has been a systems failure which has affected staff. Ross seeks reassurance that our staff are being treated fairly and equitably and in line with policy.	
5	Healthy Working Lives Staff Survey There was a discussion at the Council around the findings of the survey. Subsequently, an action plan is being prepared. The document was also issued to the employee Liaison Group. This is a live document and further comments are invited from this group.	
	Ross welcomed the report and it was agreed to sign off the report.	
6	CHCP learning from the Mid-Staffordshire NHS Foundation Trust Public Enquiry	
	The issue has been discussed at PAG and SMT and a learning session has been arranged for the extended SMT, this group and consultants employed within the CHCP.	

	Clinical staff have been encouraged to discuss these issues within staff meetings.	
7	Vale Centre for Health and Care Potential move-in date is the beginning of August. On time and on budget. There are some issues around the finishes but these are being resolved.	
	The engagement process that has been in place will continue.	
	There are some TUPE transfer issues relating to staff employed by GP practices which are being addressed.	
	Some additional staff will have to be recruited re the management of the building.	
	There will be a full induction for staff moving into the building.	
8	Highland SLA update Out of hours district nursing. The geographical area which our District Nurses are required to cover would be too large to adequately provide responsive and safe services if it were to include all of West Dunbartonshire and Helensburgh & the Lochside.	
	NHSGGC advised Highland that we would withdraw from SLA giving them one year's notice. However, they intimated that they would be unable to provide an out of hours service immediately. They are now covering up to 10.00pm and will move to an on call service provision. Currently their rota is insufficient to provide a robust system so an extension on the ending of the SLA has been agreed.	
	GEMS are comfortable as long as they get similar inputs. NHS Highland has a different way of delivering services because of its rural communities. It is hoped to be out of the SLA by the end of the summer.	
9	AOCB Keith introduced the paper "Embedding an Integrated Commitment to People and Transformation across West Dunbartonshire Community Health and Care Partnership".	
	The paper describes bringing together HR provision under one person's authority and remit linking back to the Board and the Council, providing a more integrated approach.	
	This was to give the group a headline awareness of the proposal.	
	Ross McCulloch asked for a financial framework and an organisational chart to assist in understanding how one person could take on this remit. He expressed some concerns around two and half posts transferring into a single post. Keith advised that this was not the case and needed to be taken in the round with the other related changes contained within the proposal which would supplement the current resource by a further FTE post.	
	Keith agreed to ensue this was better represented in the ongoing discussions in regard to the proposal.	
	Podiatry Following discussion of the practice of NHS podiatrists delivering treatment in care homes, it was confirmed that treatment is provided based on assessment of need and not on the fact that residents are elderly. Care Home staff are able to do basic nail and foot care. Basic nail and foot care is not particular or special. If care	

home staff are not happy with someone's feet then a referral would be made for an assessment and a care plan would be worked up if required. Nazerin and Chris will arrange a discussion with the care home managers.	
Violence Against Women. Soumen has been doing some work on this service and will bring a paper to the next meeting.	

Date and Time of next meeting:

Monday 29th July, 9.30 am pre meeting, 10.30am JSF

Date and Time of Future Meetings:

Monday 20 July, 9.30 am pre meeting, 10.30am JSF, Meeting Room 2, Garshake Monday 28 October, 9.30 am pre meeting, 10.30am JSF, Meeting Room 2, Garshake Monday 27 January 2014, 9.30 am pre meeting, 10.30am JSF, Meeting Room 2, Garshake Monday 28 April 2014, 9.30 am pre meeting, 10.30am JSF, TBC