CORPORATE GOVERNANCE IN NHS LANARKSHIRE

1. The purpose of this report is to:

- provide an update to the Lanarkshire NHS Board on the mapping of Corporate Governance in NHS Lanarkshire against the NHS Scotland Corporate Governance Blueprint DL (2019) 02;

- provide the Board with the high level outcomes of the self-assessment survey;

- seek comments on the Corporate Governance Improvement Plan which identifies areas for improvement discussed at the Board Development Day on 6th March 2019, pending feedback at the Board meeting on 27 March 2019;

- note that a revised draft will be circulated in early April 2019 for sign off by Board Members;

- seek the Board's endorsement to submit the report and Improvement Plan to Scottish Government by the end of April 2019; and

- agree to receive an update against the Improvement Plan at each NHS Board meeting.

2. Introduction

- Board Members will recall that NHS Lanarkshire piloted the self-assessment survey to influence and inform the roll out of the survey nationally.

- The self-assessment survey was opened for comment during January 2019.

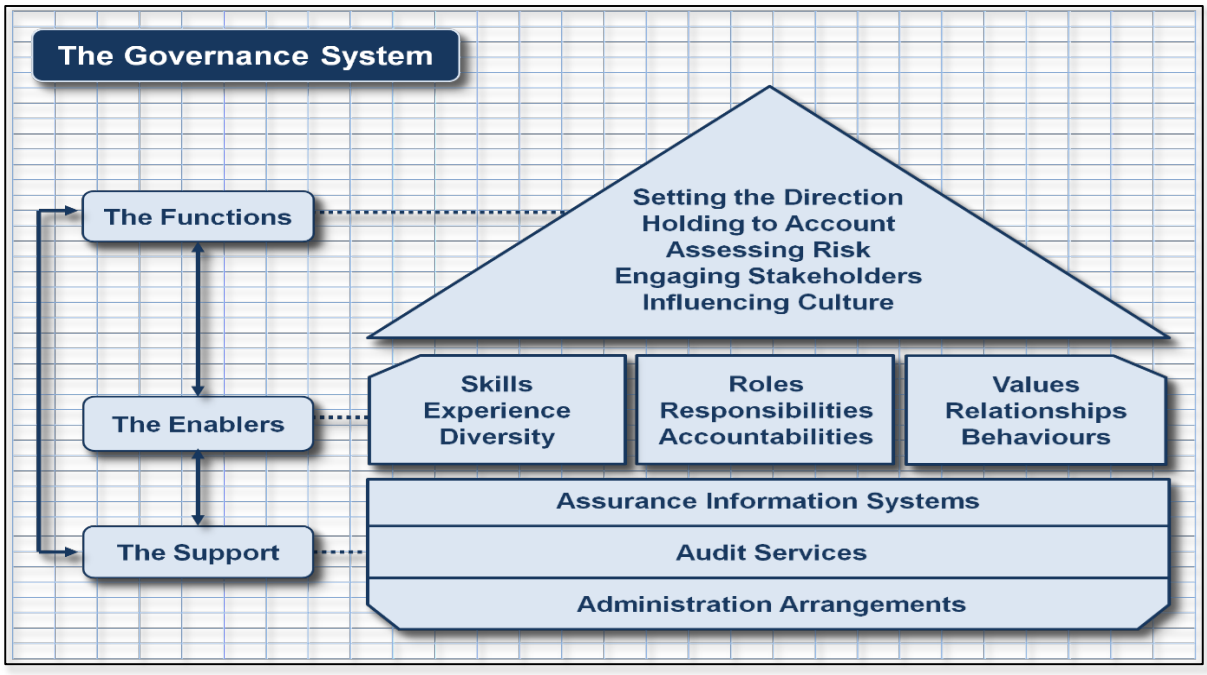
- The self-assessment survey allowed the NHS Board to identify areas of strength, and areas for development and improvement.

- The NHS Board held a Development Day on 6 March 2019 to discuss the results of the survey and to consider whether the Board has the right systems in place to provide assurance.

3. The NHS Scotland Corporate Governance Blueprint

The NHS Scotland Corporate Governance Blueprint defines governance as the system by which organisations are directed and controlled and describes a three-

tiered model that explains the functions of a governance system, the enablers and the support required to effectively deliver those functions.



To oversee the development and introduction of the Blueprint for Good Governance, a Joint Corporate Governance Steering Group has been established to provide leadership, support and guidance necessary to take the initiative forward. The Joint Steering Group is chaired by Christine McLaughlin, Director of Health Finance, Corporate Governance and Value, and John Brown, Chair of NHS Greater Glasgow & Clyde.

Neena Mahal, Chair of NHS Lanarkshire is also a member of the Joint Steering Group and Paul Cannon, Board Secretary, NHS Lanarkshire, will join the Group from April 2019 as Vice Chair of the NHS Scotland Board Secretary Group.

4. Survey Results

- In NHS Lanarkshire the survey was sent to

    - Non Executive Members, including the Chair (7)
    - Stakeholder Members (Chair, Area Clinical Forum and Chair, Area Partnership Forum) (2)
    - Local Authority Appointed Members (2)
    - Executive Members (4)
    - Directors who attend the Board meeting (9)

- In order to ensure that the views of individuals were not identifiable the responses were grouped into Non Executive (11) and Executive (13) cohorts.
- The completion rate was 100%.

- The results are shown at Appendix 1 on five separate slides.

- The results summarised in Appendix 1 were presented at a Development Day held on 6 March 2019. This is part of a programme of bi-annual Development Events (held in March and October of each year) and the March 2019 event followed on from Board effectiveness discussions at the October 2018 Development Day.

- The October 2018 Development Day covered Board effectiveness, and resulted in a review of Non Executive Members Portfolios, in the light of the appointment of two new Non Executive Members, in September 2018.

- The draft Blueprint was also shared at the October 2018 Development Day and the key features of the Blueprint were highlighted, in advance of the formal issue of the Blueprint, in February 2019.

Mapping against the NHS Scotland Corporate Governance Blueprint

5. Delivering the Functions

Setting the Direction

5.1 Where are we now?

- The Board has an agreed strategic direction "Achieving Excellence" which supports the development of an integrated health and social care system, with a focus on prevention, anticipation and supported self-management.

- This strategy is one part of a trilogy of plans with essential co-dependencies between this and the Joint Strategic Commissioning Plans produced by North and South Lanarkshire Health & Social Care Partnerships.

- This is underpinned by a set of Corporate Objectives, approved by the Board on an annual basis, and subject to a mid-year review, and cascaded throughout the organisation to inform individual and team objectives.

- The Corporate Objectives are aligned with the Annual Operating Plan and the priorities of Scottish Government.

- Through the Board, and its Planning, Performance and Resources Governance Committee (PPRC), the Board ensures that the delivery of Achieving Excellence, Corporate Objectives and the Annual Operating Plan is scrutinised and monitored.

- The revenue budget allocation and approval of capital investments are approved by the Board and monitored regularly through reports to the Board, the PPRC, and in Development Seminars.

- The PPRC provides a forum for Board Members to discuss and influence the strategic direction of the Board at an early stage

- A local review of the scheme of integration is underway, focusing on the North Lanarkshire Health & Social Care Partnership Integration Scheme, but is has been agreed that any lessons that might apply to the South Health & Social Care Partnership Integration Scheme will be take forward as part of that local review. This review is being conducted by the Health Board in partnership with North Lanarkshire Council to consider what improvements can be made, to clarify governance oversight, and support a more coherent planning of services, to increase the pace of integration.

- The Board was the first in Scotland to undertake a full Fairer Scotland Duty assessment in relation to the consultation on the replacement / refurbishment of University Hospital Monklands.

5.2 Areas for Improvement

- Streamline the overall mission, purpose and objectives onto a strategy map, which can be used to cascade strategic priorities throughout the Board and ensure clarity of direction (March 2019)

- Communicate the strategic mission, purpose and objectives both internally to staff across the organisation and externally to the population of Lanarkshire and other stakeholders to ensure a better shared understanding (end June 2019).

- Review the key strategic planning processes of the Board and the Integrated Joint Boards, taking cognisance of the outcome of the local Review underway,

and any emerging National guidance, to ensure a coherent and joined up whole system approach to planning

- Implement the Board's Health Inequalities Action Plan, embed the recommendations of the Director of Public Health Annual Report 2017/18, and take forward best practice in relation to the application of Fairer Scotland Duties

Holding to Account

5.3 Where are we now?

- The Board and Governance Committees receive relevant regular reports on service delivery, areas of risk, finance and workforce

- The Board has agreed to a review, which is underway, of its current performance management system to deliver enhanced assurance and triangulation of information, reflecting a whole system approach to providing a more co-ordinated flow of information to the Board and Governance Committees

- Board Members participate in Patient Safety Leadership Walkrounds and service visits which enable them to speak directly to staff and patients. This also allows them to triangulate information using patient/carer feedback, staff feedback and any complaints with the information they receive in reports

- In addition to Clinical, Staff, Audit, and Remuneration Committees, the Board has also established a Governance Committee to scrutinise and monitor Acute Services performance

- A review of the effectiveness of Governance Committee structures took place in 2017/18, identifying the need for a clearer and dedicated focus on Public Health priorities, and better reporting on the operational delivery of Primary Care and Community Services. This led to the establishment of a new Population Health, Primary Care and Community Services Governance Committee, providing better oversight of delivery of services by both North and South Health and Social Care Partnerships and a focus on delivering improvements in Public Health

- The Board has a designated Non-Executive Member who acts as a Link Non-Executive Champion on the Information Governance Committee (reporting

to the Healthcare Quality Assurance & Improvement Committee) to provide scrutiny and enhanced assurance oversight

- The Board undertakes regular reviews of Board effectiveness and uses the opportunities through Board Development events to identify areas for improvement

- The Board has adopted a "Golden Thread" approach to how Governance Committees report to and feed into discussions at the Board

- External advisors are invited to participate in the Healthcare Quality Assurance & Improvement Committee, and Public Forum representatives are members of the Acute Services Governance Committee, to enable enhanced scrutiny and challenge.

5.4 Areas for Improvement

- Ensure that measures to reflect continuous service improvements are embedded across all aspects of service delivery and explicitly demonstrated within discussions and reporting arrangements.

- Strengthen further the Information Governance reporting arrangements by having Information Governance as a standing item at Healthcare Quality Assurance & Improvement Committee, and extend an invitation for the Information Governance Committee Chair / Non Executive Link Member to attend the Committee meetings, and provide regular updates.

- Improve the performance management system and flow of information/ assurance provided to the Board and Governance Committees and explicitly identify areas of risk and mitigating actions.

Assessing Risk

5.5 Where are we now?

- A short life working group, chaired by a Non - Executive Board Member reviewed and refreshed the Board's risk management and assurance processes in 2017, resulting in a revised and robust risk management system to provide assurance to the Board

- Corporate Risk Registers and risk appetite and tolerance levels are considered at every Board meeting, supporting a good understanding of risk by all Board Members

- All Corporate risks are assigned to a Governance Committee for scrutiny and the monitoring of mitigating actions

- There is a specific focus on Very High risks through reporting arrangements to the Planning, Performance and Resources Governance Committee and the Board

- At the Board's request, a review was undertaken of shared risks e.g. between Health & Social Care Partnerships and Acute Services to clearly identify a single risk owner for each risk

- In recognising the increasing risk profile around contingency planning and resilience, the Board provided significant funding to establish a dedicated team to put new arrangements in place to drive improvements in resilience oversight, provide capacity and capability to support services and enhance scrutiny

5.6 Areas for Improvement

- Improve the Board's identification and understanding of future corporate, clinical, legislative, financial and reputational risks as early as possible by devoting dedicated time to risk horizon scanning as part of its programme of regular development sessions

- Develop the Risk Register further to ensure that the clearly defined set of mitigating measures against each risk also have a focus on improvement actions to reduce the risk, minimise impact and wherever possible, ultimately eliminate the risk

Engaging Stakeholders

5.7 Where are we now?

- The Planning, Performance and Resources Governance Committee were provided with a review of the structure and nature of Stakeholder Groups, in April 2018, to provide assurance that stakeholder engagement was as comprehensive as possible

- The Review identified the remits of the Public Reference Forums, South and North Lanarkshire Public Forums, and a range of groups with diverse representation

- The Board held a Stakeholder Event in February 2019 which was co-created and delivered in partnership with Patient and Carer representatives from across NHS Lanarkshire, with very positive feedback

- There is a review underway of the Board's Communications and Engagement Strategy

- The Board is an active participant in the Community Planning Partnership arrangements in North and South Lanarkshire which provides a key platform to address health inequalities

- The Board entered into a strategic partnership with Glasgow Caledonian University, gaining formal University status in 2017, and has continued to build on the agreement with a number of joint appointments, and research and teaching collaboration.

- Discussions are ongoing with the University of the West of Scotland and Strathclyde University to identify opportunities to enhance joint working arrangements.

- The Board holds regular meetings with MSP's/MPs, and formal all party briefing meetings are held a minimum of twice per year by the Chair & Chief Executive to update them on current strategic issues

- The Chair, Chief Executive and other Board Members also engage with clinical staff groups such as the Achieving Excellence Forum, and Medical Staff Associations and the Board has had an in-depth discussion on the role of the Area Clinical Forum and how it could maximise its contribution

- The Board Chair has initiated a programme of rotating attendance at all Board Governance Committees, attendance at the Area Clinical Forum and its Professional Advisory Committees.

5.8 Areas for Improvement

- Develop and approve a proactive communication and engagement strategy to ensure priorities are clear, well communicated and understood by all stakeholders.

- As part of the development of an Engagement Strategy

    - provide guidance on Stakeholder Mapping to identify and target specific groups and bespoke approaches.
    - prioritise engagement with young people / users of future health services.
    - embed principles that staff must be considered both as consultees and as advocates for change.

- Enhance public confidence in the organisation as a public body by considering the establishment of "Public Ambassadors".

- Consider ways of influencing the development of Scottish Government policies through existing or new forums

- Promote the use of the Corporate Calendar to include all stakeholder events to support Board members to maximise attendance at engagement opportunities with stakeholder groups and special interest groups

- Continue to promote and develop the role and prominence of the Advisory Structure (through greater engagement with the Area Clinical Forum and the Area Partnership Forum in 2019/20).

- Develop mechanisms for measuring the effectiveness of stakeholder engagement

Influencing Culture

5.9 Where are we now?

- The Board has a well-developed programme of visibility and engagement with staff through Patient Safety Leadership Walkrounds, Service Visits, Back To The Floor monthly visits, and presentations at Board /Committees.

- Board Members also attend a variety of planned events such as Patient Safety Week, various staff learning events e.g. EQUIP Graduation and Quality Improvement activities

- The Board is sighted on and committed to the roll out of Psychological Safety at Work initiatives and the importance of staff engagement with iMatter and TURAS.

- The Board is fully committed to encouraging all staff to engage in further personal and career development opportunities such as Project Lift and the Leading for Excellence Programme, where Board Members have shared their Leadership Experiences

- To support the Board's ambition to be an "Employer of Choice" the Board is committed to Project Search, which provides a training programme for young people with Learning Disabilities. The Board is also encouraging the next generation of recruits by holding "Next Gen" Promoting Health Career Choice events

- The Board supports and encourages celebrating the achievements of staff through the Annual Staff Awards Ceremony, the Recognition of Long Service, and Promoting Excellence in Medical Education Awards.

- Financial planning is undertaken in a transparent dialogue with key staff side partners and clinical engagement, particularly in reviewing Cash Releasing Savings Schemes by engaging with the Area Clinical Forum and the Area Partnership Forum prior to approval by the Board.

- The Board has a well-established process for dealing with whistleblowing concerns, and has a Non-Executive Board Member appointed as Whistleblowing Champion, who is actively supported by the Director of Human Resources

5.10 Areas for Improvement

- Refresh NHS Lanarkshire values in consultation with staff and stakeholders to align them with NHS Scotland values.

- Improve links with Scottish Government once the Independent National Whistleblowing Champion has been appointed and cascade any new training materials that may be issued.

- Continue to seek opportunities to benchmark our performance in relation to staff engagement and culture with other Boards

- Consider a refresh of the "Meet the Board" sessions to provide a further opportunity for staff to meet the Board Members out-with the Board Headquarters.

- Seek to exploit further opportunities to promote staff recognition.

6. Describing the Enablers

Skills, Experience and Diversity

6.1 Where are we now?

- The current NHS Board comprises of 9 Female Board Members and 6 Male Board Members and promotes and recognises diversity of thought and experience, as well as diversity in relation to protected characteristics

- The Chair updates the skills matrix on an annual basis and matches Non - Executive member portfolios according to skills, competencies and the succession planning needs of the Board

- The Chair undertakes an annual appraisal of Non Executive Members

- A process is in place to have new Non-Executives paired with a more experienced Non-Executive Member as a "buddy".

- Development sessions are held on various topics to support in depth understanding, knowledge and learning e.g. sessions on Quality Improvement, Data Measurement, Health Inequalities, Fairer Scotland Duties

- The Board has piloted a different approach to the recruitment of Non Executive Members to promote vacancies and encourage a diverse range of applications

- A recent round of Non Executive Board Member recruitment specifically identified the need to recruit a Non Executive Member with a sufficient level of financial experience, to chair the Audit Committee

- A values based recruitment approach is used within the organisation

- The Remuneration Committee has had a focus on the succession planning of Senior Directors to minimise any risks to the skills base and experience of the Board

- Non -Executive Members have attended Governance Committees in other NHS Boards to enhance their learning and are encouraged to attend national and regional networking opportunities to support their development

6.2 Areas for Improvement

- Undertake a Board development session on Equality and Diversity duties and responsibilities as a Board

- Develop Board Members understanding and skills around data presentation and data interpretation through a training session

- Support Board Members development by taking cognisance of different skills required for different Committee roles through working closely with the national Board Development Programme being developed through the Corporate Governance Steering Group

- Ensure that there is an effective succession plan in place for Non- Executive Members

Roles, Responsibilities and Accountabilities

6.3 Where are we now?

- Board Members are fully aware of the Code of Conduct, including the requirements of the Register of Interests

- Declaration of Interests are invited at every Board meeting

- The Chair holds Non Executive Member only meetings, usually twice a year, to understand any issues/clarify any concerns, and ensure there is a shared understanding of priorities, and governance roles and responsibilities

6.4 Areas for Improvement

- Clarify the role of Board Members as part of the local review of the North Lanarkshire Health & Social Partnership Integration Scheme

- Review the Blueprint in terms of roles and responsibilities and identify any further action required to comply fully with the Blueprint (August 2019)

Values, Relationships and Behaviours

6.5 Where are we now?

- Board Members are clear about their values and what is expected of them individually, and collectively through exhibiting the values of the NHS

- Discussion takes place on Board members' roles and contribution to promoting the values, and leadership behaviours expected in the NHS as part of the appraisal process

6.6 Areas for Improvement

- Maximise opportunities to exemplify Board leadership through values based behaviours with staff and the public, and make Board decision making processes more transparent by

    - encouraging staff to attend Board meetings
    - refreshing the "Meet the Board" sessions
    - Briefing staff on decisions made at the Board meetings

7. Providing the Support

Assurance Information Systems

7.1 Where are we now?

- Performance reports are received at every Board/ PPRC /Governance Committee meeting on service delivery against the Annual Operating Plan.

- Financial Monitoring Reports setting out actual performance against trajectories for revenue, capital expenditure and Cash Releasing Efficiency Savings achieved are presented at each Board and PPRC meeting.

- The delivery of Corporate Objectives are reviewed on a RAG basis bi-annually at the Board meeting.

- Development sessions are arranged regularly for Board Members to foster a greater understanding of the interpretation of data, through the development of a data framework

7.2 Areas for Improvement

- Undertake and embed a refresh of information flow/a new performance management system to ensure appropriate, timely data is presented to relevant Board / Committee to provide assurance.

- Consider any recommendations arising from the national work being taken forward to improve assurance systems, the flow of information and the presentation of data

- Increase the prevalence of qualitative as well as quantitative data in decision making

- Improve the flow of information from Committees to the Board, by encouraging exception reporting and escalation of areas of concern/risk

- Consider the development of an Assurance Framework

- Seek to increase the availability of benchmarking data

Audit Services

7.3 Where are we now?

- The Board Chair and Chief Executive attend the Audit Committee on an ex - officio basis.

- Audit Committee Members contribute to the Board's Internal Audit Plan.

- Audit Committee Members meet in private with both Internal and External Auditors on at least an annual basis.

- Audit reports are directed to the relevant Governance Committee to oversee the implementation of actions and to ensure that there is greater awareness of any issues / concerns.

- All Non-Executive Directors have completed the Audit Scotland Checklist.

- Audit Scotland reports are circulated to all Board Members and discussed as appropriate at the Board / Governance Committees.

7.4 Areas for Improvement

- Strengthen the process for Audit reports to be considered by Governance Committees by ensuring that Non Executive Member Chairs of all Committees also receive notification of Audit findings, in addition to management

- Provide bespoke training for Audit Committee members

Administration Arrangements

7.5 Where are we now?

- Full time, dedicated role of Board Secretary, who has recently completed the Certificate in Corporate Governance (Chartered Institute of Public Finance and Accountancy).

- An annual schedule of all meetings, including IJB commitments by Non-Executive Members, is in place.

- A Corporate Calendar, accessible by all NHS Lanarkshire staff, provides details of regular meetings and scheduled events throughout the year to avoid clashes of commitments.

- Workplans for all Committees and the Board are in place, and these are reviewed at every meeting.

- A comprehensive Code of Corporate Governance is in place, which is refreshed annually.

- The Board has introduced an electronic portal for the distribution of Board and Governance Committee papers.

7.6 Areas for Improvement

- Maximise attendance by Board Members at events by promoting the use of the Corporate Calendar.

- Provide training to support staff who act as minute takers/ report writers for Governance Committees to enhance their understanding of the Board's requirements around assurance reporting, rather than reassurance reporting.

- Undertake a review of Board / Governance Committee Report Templates, (taking account of national work being taken forward through the Corporate

Governance Joint Steering Group) and review agenda management processes (timings and details of papers).

- Support all Board Members to fully embrace the use of the electronic Board portal, and move to paperless meetings

8. Conclusion

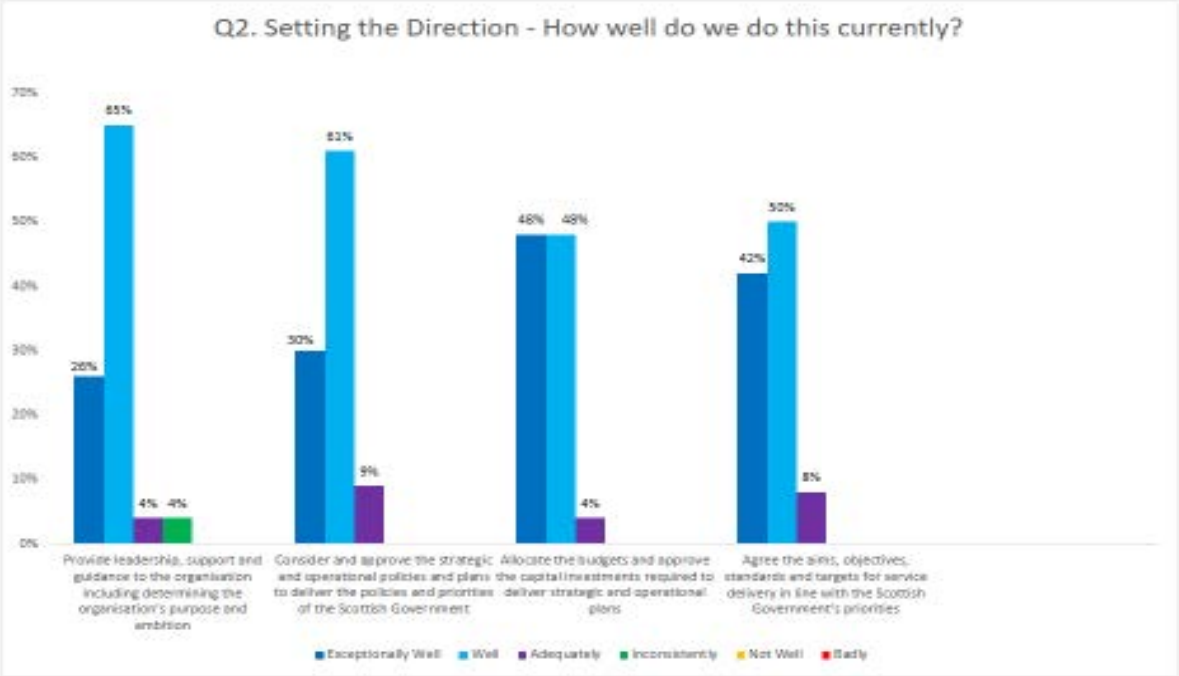
The Board aspires to be an exemplar of Good Governance through

- regularly reviewing the Improvement Plan in 2019/20;
- seeking out best practice including implementing recommendations from the National Corporate Governance Joint Steering Group, and associated workstreams; and
- continuing to review Board effectiveness on an annual basis by undertaking annual self-assessment surveys and wider reflection.

Appendix 1 Survey Results

Appendix 2 Improvement Plan

APPENDIX 1


Q2. Setting the Direction - How well do we do this currently?
70%
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4%
4%
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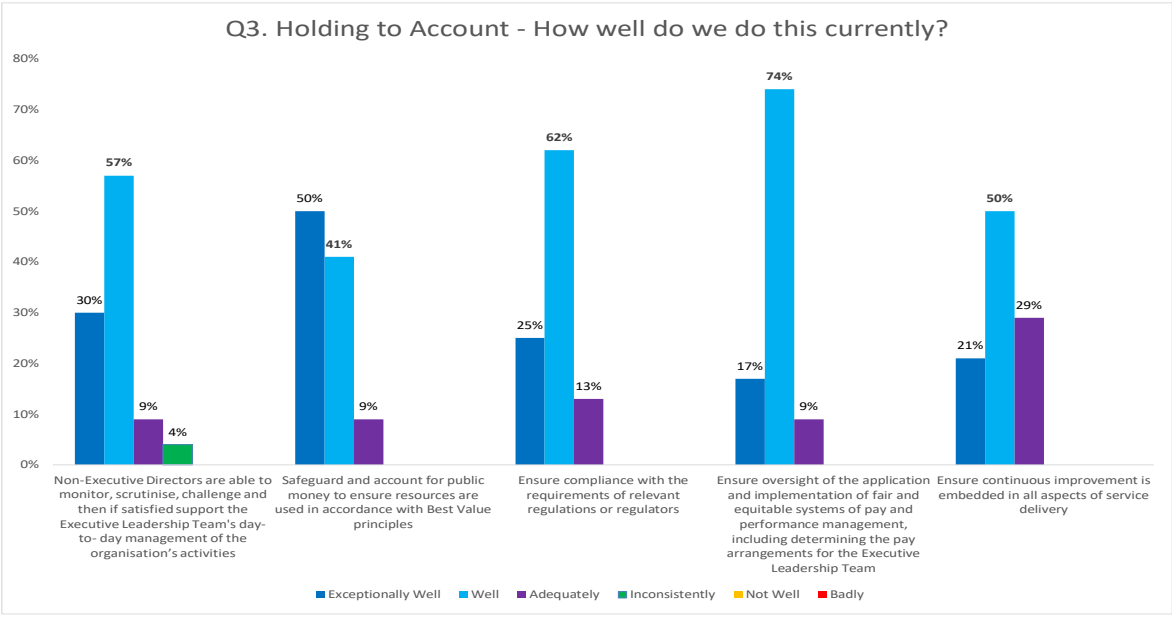
46%
46%
4%
42%
50%
8%
Provide leadership, support and guidance to the organisation including determining the organisation's purpose and ambition
Consider and approve the strategic and operational policies and plans to deliver the policies and priorities of the Scottish Government
Allocate the budgets and approve the capital investments required to deliver strategic and operational plans
Agree the aims, objectives, standards and targets for service delivery in line with the Scottish Government's priorities
Exceptionally Well
Well
Adequately
Inconsistently
Not Well
Badly


Q3. Holding to Account - How well do we do this currently?
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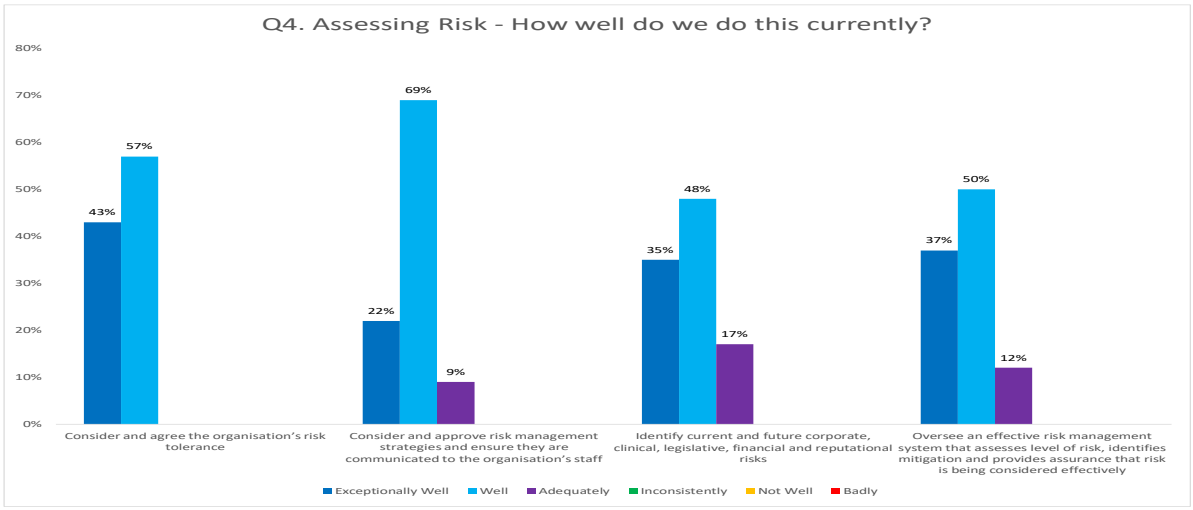
62%
13%
17%
74%
9%
21%
50%
29%
Non-Executive Directors are able to monitor, scrutinise, challenge and then if satisfied support the Executive Leadership Team's day-to- day management of the organisation's activities
Safeguard and account for public money to ensure resources are used in accordance with Best Value principles
Ensure compliance with the requirements of relevant regulations or regulators
Ensure oversight of the application and implementation of fair and equitable systems of pay and performance management, including determining the pay arrangements for the Executive Leadership Team
Ensure continuous improvement is embedded in all aspects of service delivery
Exceptionally Well
Well
Adequately
Inconsistently
Not Well
Badly


Q4. Assessing Risk - How well do we do this currently?
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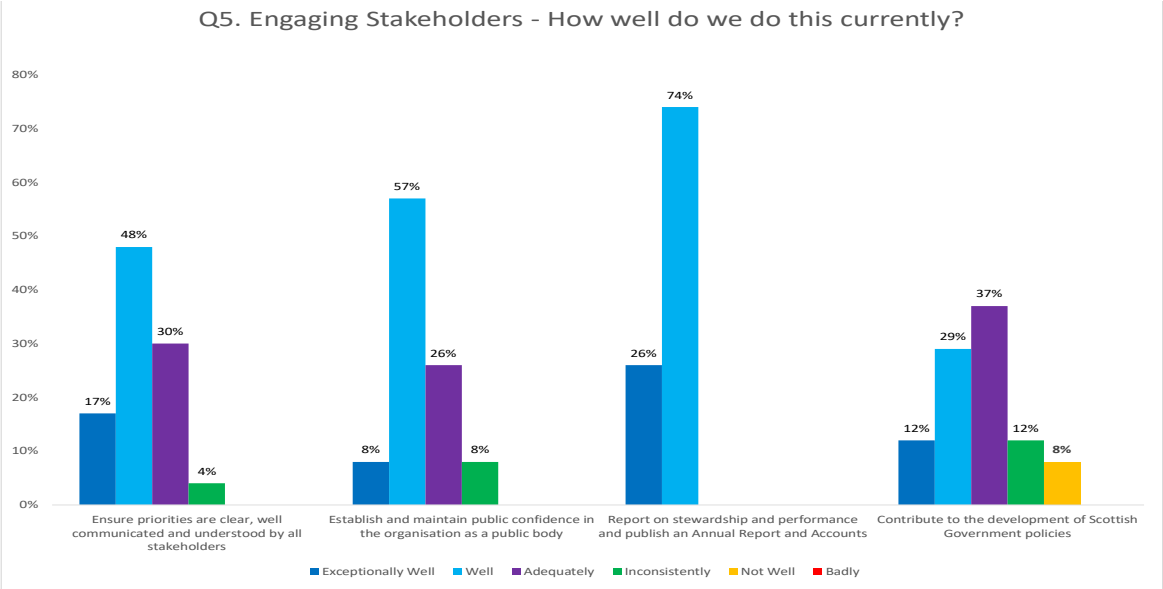
12%
Consider and agree the organisation's risk tolerance
Consider and approve risk management strategies and ensure they are communicated to the organisation's staff
Identify current and future corporate, clinical, legislative, financial and reputational risks
Oversee an effective risk management system that assesses level of risk, identifies mitigation and provides assurance that risk is being considered effectively
Exceptionally Well
Well
Adequately
Inconsistently
Not Well
Badly


Q5. Engaging Stakeholders - How well do we do this currently?
80%
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8%
57%
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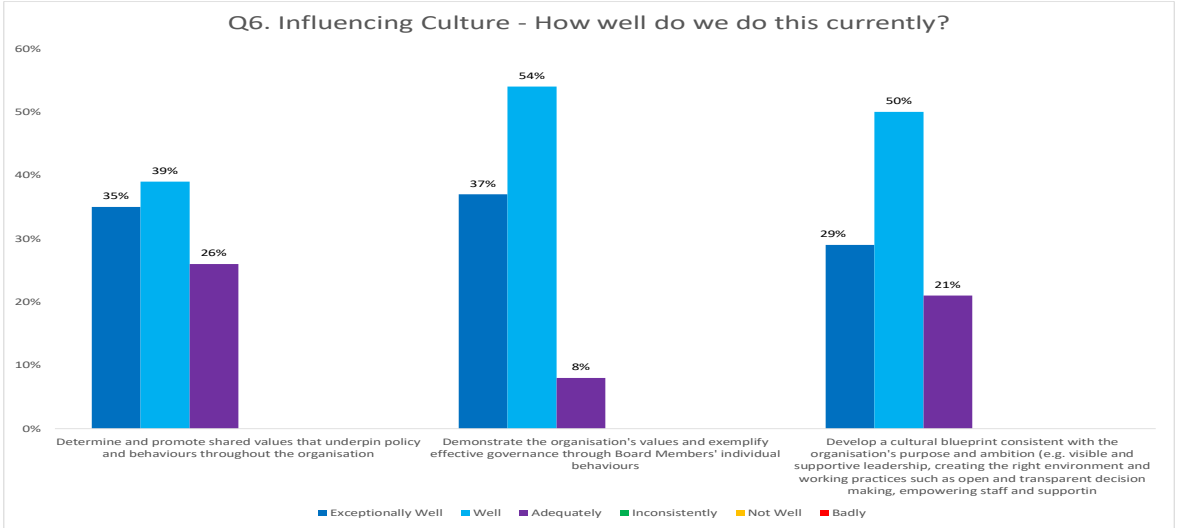
74%
12%
29%
37%
12%
8%
Ensure priorities are clear, well communicated and understood by all stakeholders
Establish and maintain public confidence in the organisation as a public body
Report on stewardship and performance and publish an Annual Report and Accounts
Contribute to the development of Scottish Government policies
Exceptionally Well
Well
Adequately
Inconsistently
Not Well
Badly


Q6. Influencing Culture - How well do we do this currently?
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50%
21%
Determine and promote shared values that underpin policy and behaviours throughout the organisation
Demonstrate the organisation's values and exemplify effective governance through Board Members' individual behaviours
Develop a cultural blueprint consistent with the organisation's purpose and ambition (e.g. visible and supportive leadership, creating the right environment and working practices such as open and transparent decision making, empowering staff and supportin
Exceptionally Well
Well
Adequately
Inconsistently
Not Well
Badly

APPENDIX 2

IMPROVEMENT PLAN

Blueprint Function	Action	Lead	Date
Setting The Direction	Streamline the overall mission, purpose and objectives onto a strategy map, which can be used to cascade strategic priorities throughout the Board and ensure clarity of direction	Chief Executive	27 March 2019
Setting The Direction	Communicate the strategic mission, purpose and objectives both internally to staff across the organisation and externally to the population of Lanarkshire and other stakeholders to ensure a better shared understanding	Director of Communications	30 June 2019
Setting The Direction	Review the key strategic planning processes of the Board and the Integrated Joint Boards, taking cognisance of the outcome of the local Review underway, and any emerging National guidance, to ensure a coherent and joined up whole system approach to planning	Chief Executive	
Holding To Account	Implement the Board's Health Inequalities Action Plan, embed the recommendations of the Director of Public Health Annual Report 2017/18, and take forward best practice in relation to the application of Fairer Scotland Duties	Director of Public Health	
Holding To Account	Ensure that measures to reflect continuous service improvements are embedded across all aspects of service delivery and explicitly demonstrated within discussions and reporting arrangements	Director of Planning, Property & Performance	
Holding To Account	Strengthen further the Information Governance reporting arrangements by having Information Governance as a standing item at Healthcare Quality Assurance & Improvement Committee, and extend an invitation for the Information Governance Committee Chair / Non Executive Link Member to attend the Committee meetings, and provide regular updates	Board Secretary	
Holding To Account	Improve the performance management system and flow of information/ assurance provided to the Board and Governance Committees and explicitly identify areas of risk and mitigating actions	Director of Planning, Property & Performance	
Assessing Risk	Improve the Board's identification and understanding of future corporate, clinical, legislative, financial and reputational risks as early as possible by devoting	Board Secretary	

	dedicated time to risk horizon scanning as part of its programme of regular development sessions		
Assessing Risk	Develop the Risk Register further to ensure that the clearly defined set of mitigating measures against each risk also have a focus on improvement actions to reduce the risk, minimise impact and wherever possible, ultimately eliminate the risk	Board Secretary	
Engaging Stakeholders	Develop and approve a proactive communication and engagement strategy to ensure priorities are clear, well communicated and understood by all stakeholders	Director of Communications	
Engaging Stakeholders	As part of the development of an Engagement Strategy o provide guidance on Stakeholder Mapping to identify and target specific groups and bespoke approaches. o prioritise engagement with young people / users of future health services. o embed principles that staff must be considered both as consultees and as advocates for change	Director of Communications	
Engaging Stakeholders	Enhance public confidence in the organisation as a public body by considering the establishment of "Public Ambassadors"	Chair	
Engaging Stakeholders	Consider ways of influencing the development of Scottish Government policies through existing or new forums	tba	
Engaging Stakeholders	Promote the use of the Corporate Calendar to include all stakeholder events to support Board members to maximise attendance at engagement opportunities with stakeholder groups and special interest groups	Board Secretary	
Engaging Stakeholders	Continue to promote and develop the role and prominence of the Advisory Structure (through greater engagement with the Area Clinical Forum and the Area Partnership Forum in 2019/20)	Board Secretary	
Engaging Stakeholders	Develop mechanisms for measuring the effectiveness of stakeholder engagement	Director of Communications	
Influencing Culture	Refresh NHS Lanarkshire values in consultation with staff and stakeholders to align them with NHS Scotland values	Director of Human Resources	
Influencing Culture	Improve links with Scottish Government once the Independent National Whistleblowing Champion has	Director of Human Resources	

	been appointed and cascade any new training materials that may be issued		
Influencing Culture	Continue to seek opportunities to benchmark our performance in relation to staff engagement and culture with other Boards	Director of Human Resources	
Influencing Culture	Consider a refresh of the "Meet the Board" sessions to provide a further opportunity for staff to meet the Board Members out-with the Board Headquarters	Board Secretary	
Influencing Culture	Seek to exploit further opportunities to promote staff recognition	Board Chair	
Skills, Experience & Diversity	Undertake a Board development session on Equality and Diversity duties and responsibilities as a Board	Board Chair / Board Secretary	
Skills, Experience & Diversity	Develop Board Members understanding and skills around data presentation and data interpretation through a training session	Board Secretary	
Skills, Experience & Diversity	Support Board Members development by taking cognisance of different skills required for different Committee roles through working closely with the national Board Development Programme being developed through the Corporate Governance Steering Group	Board Chair	
Skills, Experience & Diversity	Ensure that there is an effective succession plan in place for Non- Executive Members	Board Chair	
Roles, Responsibilities and accountability	Clarify the role of Board Members as part of the local review of the North Lanarkshire Health & Social Partnership Integration Scheme	Chair	
Roles, Responsibilities and accountability	Review the Blueprint in terms of roles and responsibilities and identify any further action required to comply fully with the Blueprint	Board Secretary	August 2019
Values Relationships & Behaviours	Maximise opportunities to exemplify Board leadership through values based behaviours with staff and the public, and make Board decision making processes more transparent by • encouraging staff to attend Board meetings • refreshing the "Meet the Board" sessions		

	• Briefing staff on decisions made at the Board meetings	Board Secretary / Director of Communications	
Assurance Information Systems	Undertake and embed a refresh of information flow/a new performance management system to ensure appropriate, timely data is presented to relevant Board / Committee to provide assurance	Director of Planning, Property & Performance	
Assurance Information Systems	Consider any recommendations arising from the national work being taken forward to improve assurance systems, the flow of information and the presentation of data	Director of Planning, Property & Performance	
Assurance Information Systems	Increase the prevalence of qualitative as well as quantitative data in decision making	Director of Planning, Property & Performance	
Assurance Information Systems	Improve the flow of information from Committees to the Board, by encouraging exception reporting and escalation of areas of concern/risk	Board Secretary	
Assurance Information Systems	Consider the development of an Assurance Framework	Director of Finance / Board Secretary	
Assurance Information Systems	Seek to increase the availability of benchmarking data	Director of Planning, Property & Performance	
Audit Services	Strengthen the process for Audit reports to be considered by Governance Committees by ensuring that Non Executive Member Chairs of all Committees also receive notification of Audit findings, in addition to management	Director of Finance	
Audit Services	Provide bespoke training for Audit Committee members	Director of Finance	
Administration Arrangements	Maximise attendance by Board Members at events by promoting the use of the Corporate Calendar	Board Secretary	**Ongoing**
Administration Arrangements	Provide training to support staff who act as minute takers/ report writers for Governance Committees to enhance their understanding of the Board's requirements around assurance reporting, rather than reassurance reporting	Board Secretary	**September 2019**
Administration Arrangements	Undertake a review of Board / Governance Committee Report Templates, (taking account of national work being taken forward through the Corporate Governance Joint	Board Secretary	**Autumn 2019**

	Steering Group) and review agenda management processes (timings and details of papers)		
Administration Arrangements	Support all Board Members to fully embrace the use of the electronic Board portal, and move to paperless meetings	Board Secretary	**Review position in September 2019**