NHS Board Meeting 29 May 2019

Lanarkshire NHS Board Kirklands Fallside Road Bothwell G71 8BB



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# SUBJECT: CORPORATE GOVERNANCE BLUEPRINT & IMPROVEMENT PLAN

# 1. PURPOSE

This	s paper is coming to the B	loard for noting.		
	For approval	For endorsement	To note	
2.	ROUTE TO THE	BOARD		
The	paper has been:			
	Prepared	Reviewed		

by the Board Secretary.

#### 3. SUMMARY OF KEY ISSUES

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.

In January 2019 the Board / CMT members who attend the Board meetings were invited to complete a self-assessment questionnaire, the result of which were discussed at the Board Development Session on 6 March 2019, and this resulted in the drafting of an Improvement Plan.

The draft Improvement Plan was shared with the Board at the March 2019 meeting, and comments were invited. A revised draft was circulated to Board Members for electronic sign off before being submitted to the Cabinet Secretary on 30 April 2019.

The Improvement Plan is attached for information, and will be updated by way of a progress report at each Board meeting.

#### 4. STRATEGIC CONTEXT

This paper links to the following:

Corporate objectives	AOP	Government policy	$\boxtimes$
Government directive	Statutory requirement	AHF/local policy	
Urgent operational issue	Other		

### 5. CONTRIBUTION TO QUALITY

This paper aligns to the following elements of safety and quality improvement:

# Three Quality Ambitions:

Safe Effective Person Centred
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# Six Quality Outcomes:

Everyone has the best start in life and is able to live longer healthier lives; (Effective)	
People are able to live well at home or in the community; (Person Centred)	
Everyone has a positive experience of healthcare; (Person Centred)	
Staff feel supported and engaged; (Effective)	
Healthcare is safe for every person, every time; (Safe)	
Best use is made of available resources. (Effective)	

#### 6. MEASURES FOR IMPROVEMENT

These have been set out in the Improvement Plan.

#### 7. FINANCIAL IMPLICATIONS

There may be a requirement to fund some training, but wherever possible this will be managed from within existing budgets.

# 8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS

The significant risk is reputational if the Board does not meet the goals set out in the Improvement Plan.

#### 9. FIT WITH BEST VALUE CRITERIA

This paper aligns to the following best value criteria:

Vision and leadership		Effective partnerships	Governance and	
			accountability	
Use of resources	$\boxtimes$	Performance	Equality	
		management		
Sustainability	$\boxtimes$			
Management				

# 10. EQUALITY AND DIVERSITY IMPACT ASSESSMENT

N/A

#### 11. CONSULTATION AND ENGAGEMENT

The Report and Improvement Plan were subject to consultation with Board members and members of the Corporate Management Team.

# 12. ACTIONS FOR THE BOARD

The Board is asked to:

Approve	Endorse	Identify further actions				
Note	Accept the risk identified	Ask	for	a	further	
		repor	t			

# 13. FURTHER INFORMATION

For further information about any aspect of this paper, please contact:

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24 May 2019