CORPORATE GOVERNANCE BLUEPRINT – NHS LANARKSHIRE IMPROVEMENT PLAN

UPDATE INCLUDING CROSS REFERENCES TO STURROCK ACTION PLAN (JUNE 2021)

DUE TO COVID-19 A NUMBER OF ACTIONS WERE PAUSED AND ARE SET OUT IN THIS SECTION

THESE WERE REVIEWED BY THE BOARD CHAIR AND BOARD SECRETARY IN DECEMBER 2021

Reference	Action	Lead	Date	Progress / Update	Sturrock C/R (S)
15.	Continue to promote and develop the role and prominence of the Advisory Structure through greater engagement with the Area Clinical Forum (ACF) and the Area Partnership Forum (ACF) to maximise their contribution to the work of the Board	Board Secretary / Chair(s) of the ACF & APF	May 2019/ March 2020	Visits were arranged to all Advisory Committee meetings by the ACF Chair and articles promoting the ACF included in the Pulse. The next phase will is the development of an Area Clinical Forum section on the Board's web site and will be used as a template for Advisory Committees, Governance Committees, and, if suitable, the Area Partnership Forum. The revised timescale, given the priority that had to be afforded to the development of the Monklands web site, is now March 2020. **Template agreed in May 2020 for the Forum - being populated with information and will be rolled out as template for all Advisory Committees following short period of internal feedback.** **June 2021 - agreed to retain and promote in 2021** Paused	S

16.	Refresh NHS Lanarkshire values in consultation with staff and stakeholders to align them with NHS Scotland values	Director of Human Resources	January 2020	CMT accepted a recommendation to pause local development and refinement of NHS Lanarkshire values work, in light of the national work on health and social care values **June 2021 - approach Scottish Government to determine timelines and make decision on pausing further or adopting local values.** PAUSED	S
20.	Seek to exploit further opportunities to promote staff recognition	Board Chair / Director of Human Resources	January 2020	Long Service Awards to be an annual event – date to be agreed. **June 2021 - Options for doing so in late 2021 being explored, paper to CMT in July 2021.** PAUSED	S
21.	Undertake a Board development session on Equality and Diversity duties and responsibilities as a Board	Board Chair / Board Secretary	May 2020	Being discussed with the Head of Equality & Diversity – provisionally planned for early 2020 **CMT session held in June 2021 / Board Development session planned for Autumn 2021 was postponed added to Board Workplan for 2022.** PAUSED	S
32.	Consider the development of an Assurance Framework	Director of Finance / Board Secretary	April 2020	Discussion being taken forward with Internal Audit and Risk colleagues and the original target date of September 2019 extended to reflect the complexity of the task. A workshop involving all Internal Audit Consortium Board was held on 25 October 2019. Looking to develop pilot for year-end assurance framework for 2019/20. **Work also being taken forward as part of the National work of the Corporate Governance Steering Group.**	

				June 2021 - this work was taken forward through the Internal Audit Consortium and not concluded. This is on the workplan for the National Corporate Governance Steering Group for 2022. PAUSED	
33.	Seek to increase the availability of benchmarking data by promoting the use of Discovery as a means to improve operational effectiveness	Director of Planning, Property & Performance	August 2020	**June 2021 - paused due to COVID – now planned for September 2021 to link with the Active Governance action plan / need to benchmark reports** PAUSED	
37.	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	Sept 2019	**June 2021 - paused due to COVID – now planned for September 2021 to link with the Active Governance action plan** PAUSED	

The Active Governance actions are being take forward when Officers are able to prioritise these. These have been paused.

ACTIVE GOVERNANCE (AG) DEVELOPMENT FEBRUARY 2021 SESSION - ACTIONS			
	ACTION	**RESPONSE**	**LEAD/TIMELINE**
1	Review and refine data and information flows for assurance considered by the Board and the way in which data is presented at both the Board and Governance Committees and be clear about the differences between assurance and reassurance.	An initial meeting took place in February to identify the KPIs regularly reported to the NHS Board. These reports are prepared in a variety of formats (narrative, RAG rated and run charts), and work will now commence to quantify the work involved in converting existing RAG rated reports to Statistical Process Control (SPC) reports (control charts are a tool of SPC). Training to ensure an understanding of assurance & re-assurance data purposes will be incorporated into action 9.	**C Lauder** Key members of staff have been redeployed to support the delivery of the vaccination programme and other projects to address the challenges of the global pandemic. As there is no timeline for these staff to return to normal duties, a definitive date cannot be provided for completion of this work. It is also dependent on the Board coming out of an emergency footing and being able to re-establish the normal functioning of Governance Committees. **Timeline - Autumn 2021**
2	Understand and clarify the different levels of data requirements by the Board, Governance Committees and Operating Divisions – the difference between operational management information and data for governance so that the data provides assurance, anticipates issues and is able to tell the Board what it needs to focus on	The review of the performance management processes agreed in May 2019 will underpin the approach we will adopt and be reflective of the Active Governance training session from 3rd February 2021. This will deliver on the assurance and re-assurance requirements and specify the appropriate use of validated and unvalidated information.	**C Lauder** Key members of staff have been redeployed to support the delivery of the vaccination programme and other projects to address the challenges of the global pandemic. As there is no timeline for these staff to return to normal duties, a definitive date cannot be provided for completion of this work. It is also dependent on the Board coming out of an emergency footing and being able to re-establish

		Training/ re-affirmation of this approach and an understanding of assurance & re-assurance purposes will be incorporated into action 9.	the normal functioning of Governance Committees. **Timeline – September 2021**
3	Reflect on the role of Governance Committees in scrutinising data in more detail and how Committees exercise their delegation role on behalf of the Board and provide assurance to the Board through exception reporting.	This will involve further refinement of the exception reporting mechanism, with Governance Committees (GC) giving consideration as to how this could be adopted within their own remit.	**Governance Committee Chairs** As described above, the timelines for this work to be completed will be dependent on the GCs being "stood-up". **Timeline – September 2021**
4	Clarify what information should be used for triangulation, what is available locally and nationally and feed through any suggestions to national Active Governance (AG) work.	This will be linked to the roll-out nationally of the AG pilot development sessions and the commitment from the AG Team to create a resource library on their website, providing access to examples of data used for triangulation. GCs will also be asked to consider the scope for triangulation using the data sources they routinely consider. This will be linked to action 3.	**National Active Governance Team & Governance Committees** **AG Team** – the timelines will be dependent on the roll-out of the pilot development sessions with other NHS Boards. **Timeline – tbc** **GCs** - timelines for this work to be completed will be dependent on the G.C.s being "stood-up". **Timeline – August 2021**
5	Consider metric linkage – what is the data telling us about wider strategic priorities and outcomes so that the Board is not just considering outputs.	This will be addressed by refining reports to ensure that all charts have appropriate labelling and analysis. For example, reports should indicate if high performance levels are "better" or "worse", as well as provide appropriate analysis illustrating the impact of performance and linkages to wider strategic priorities.	**C Lauder**

		As detailed at action 9, we will establish a SLWG to plan the delivery of the May staff development session and this will form part of these discussions.	**Timeline – April/May 2021**
6	Consider how we can influence a shared understanding of the AG work with SG in relation to performance data required and what Boards should be monitoring.	This was discussed at the NHS Scotland Corporate Governance Steering Group in March 2021 as an action. This is being explored by Scottish Government.	**NHSScotland Corporate Governance Steering Group** **Timeline – completed**
7	Consider how best to present and consider unvalidated versus validated data and establish views of SG on this, as there appears to be an inconsistent approach to what is being presented in the public domain across Boards.	It has been established that a variety of approaches are used across NHS Boards. SG to be contacted to clarify its views on appropriate data use. The performance management review of May 2019 explored this issue and agreed on the appropriate use of specific information sources across the three tiers of performance management reporting. All reports should be clearly labelled to identify data sources and this approach should be re-affirmed through action 9.	**P Cannon** to contact Richard McCallum to clarify the SG position. **Timeline – March 2021** **C Lauder** **Timeline – May 2021**
8	Update NHS Lanarkshire's internal document on the Data & Measurement Framework (& Data Visualisation Guidance).	The Data & Measurement Framework & Data Visualisation Guidance will be reviewed and updated in line with NHS Scotland Guidance. This will ensure those in leadership roles have the knowledge and skills in Quality Improvement to be able to effectively lead continuous quality.	**K Cormack** **Timeline – May 2021** The Data & Measurement Framework & Data Visualisation Guidance has been reviewed and updated.

9	Consider a separate development session for staff who provide data sets for the Board, Governance Committees, and Operating Divisions on the presentation of data and reflect on how this sits with the proposed NHS Lanarkshire's Master Classes on data measurement.	A development session with the AG Team will be held for NHSL staff who produce data for the Board, GCs and Operating Divisions to support a move from RAG reports towards run charts and control charts. A SLWG will be established in March and will meet fortnightly to further discuss the delivery of the May development session. Four data & measurement master classes will take place targeted at staff undertaking improvement projects to ensure best approaches to assessing and illustrating improvement.	**C Lauder** **Timeline – September 2021** **C Lauder** **SLWG met twice in April 2021** **K Cormack** **Timeline – September 2021** **Master classes were held.**

THESE ACTIONS HAVE BEEN COMPLETED

1.	Streamline the overall mission, purpose and objectives of the Board onto a strategy map, which can be used to cascade and communicate strategic priorities throughout the organisation, and externally to the population of Lanarkshire, and other stakeholders, to ensure a better shared understanding	Chief Executive / Director of Comms	Septembe r 2019	The NHS Lanarkshire strategy map was approved by the Board at its meeting on 27 March 2019. Further work is taking place to format this for wider distribution to stakeholders. This will be included in the development of the Stakeholder Engagement Plan. Approved by the NHS Board in January 2020 Complete	S
2.	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	Director of Planning, Property & Performance	September 2020	A process is underway to develop the methodology and resources needed to prepare a new 10-year plan for Lanarkshire. A paper will be considered by PP&RC. **Paused due to COVID-19 but will be incorporated into the Covid Recovery Plan** **June 2021 - the refresh of Achieving Excellence, and the development of a new Strategy (Our Health Together) is being taken forward. Paper on the PPRC agenda (June 2021)** Complete	
3.	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	February 2020	Being taken forward through the Population Health, Primary Care & Community Services Governance Committee. The Committee will receive and govern progress reports on each priority. **Paused due to Covid-19 - a Health Inequalities Conference was planned for June 2020** **June 2021 - Health Inequalities Seminar held on 9 June 2021. Being followed up with Community Planning**	

				Partners to co-ordinate Pan Lanarkshire actions to address inequalities. Complete	
4.	Ensure that measures to reflect continuous service improvements are embedded across all aspects of service delivery and explicitly demonstrated within business cases and reporting arrangements	Director of Finance / Director of Planning, Property & Performance	July 2019	This is an ongoing process as business cases are developed. Recent examples are UHH theatre development and UHH surgicube. Complete	
5.	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 / Director of Quality	July 2019	Complete. Complete	
6.	Improve the performance management system and flow of information/ assurance provided to the Board and Governance Committees	Director of Planning, Property & Performance	September 2019	The revised Integrated Corporate Performance system is now in place. Further refinement ongoing. Complete	
7.	Further develop the Board's awareness and use of qualitative information around patient and carer feedback to understand service delivery	Director of NMAHPs	September 2019	Director of Quality and Medical Director have changed the approach to Patient Lived Experience scenarios presented to Board. Link to action 31. Complete	
8.	Improve the Board's identification and understanding of future corporate, clinical, legislative, financial and reputational risks as early as possible by devoting dedicated time	Board Secretary	Nov 2019 & March 2020	Included in the Programme for the Development Day(s) in November 2019 and March 2020 and reviewed at each PPRC meeting. Complete	S

	to risk horizon scanning as part of its programme of regular development sessions				
9.	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	September 2019	A review of the Risk Register has been undertaken and changes made to the format of the Report in line with this requirement. Complete	
10.	Develop and approve a proactive Communications and Engagement Strategy to ensure priorities are clear, well communicated and understood by all stakeholders	Director of Comms	March 2020	Draft Strategy out for comment with key stakeholders (January 2020) and will be submitted to the NHS Board in March 2020. **Approved by the Board in March 2020** Complete	S
11.	As part of the development of a proactive Communications and Engagement Strategy, the Board will consider a further stakeholder mapping exercise to identify good practice in targeting specific groups and bespoke approaches. Other areas for action include: o prioritising engagement with young people / users of future health services. o embedding principles that staff must be considered both as consultees and as advocates for change. o developing mechanisms for measuring the effectiveness of stakeholder engagement	Director of Comms	Paused	This work is being taken forward by the Communications and Engagement Strategy SLWG, which had its first meeting in July 2019. See item 10. **Paused due to COVID-19 but will be incorporated into the COVID-19 Recovery Plan** **June 2021 - A revised Communications & Engagement Strategy will be presented to the Board in July 2021** COMPLETE	S
12.	Enhance public confidence in the organisation as a public body by considering the establishment of "Public Ambassadors"	Board Chair	Nov 2019	Being discussed with Non Executive Directors in January 2020.	S

				Discussed with Non Executive Board Members - agreed that this additional role is not required as it is integral to the role of a Non Executive Board Member Complete	
13.	Consider ways of influencing the development of Scottish Government policies through existing or new forums	Board Chair / Chief Executive	October 2019	Chair & Chief Executive use National Forums to influence the development of Scottish Government policies. Complete	
14.	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	May 2019 / October 2019	The Board and Committee dates for 2020 have been added to the Calendar. The use of the Calendar will be promoted in October 2019 and reminders sent on how to access the calendar before booking future events. Complete	
17.	Improve links with Scottish Government once the Independent National Whistleblowing Champion has been appointed and cascade any new training materials that may be issued	Director of Human Resources	January 2020	Recruitment for Board Whistleblowing Champions will be completed in December 2019. These posts will provide the conduit for improved links with Scottish Government and the Independent National Whistleblowing Officer. **Non Executive Board Member appointed in February 2020, initial training complete.** Complete	S
18.	Continue to seek opportunities to benchmark our performance with other Boards and learn from other organisations in relation to staff engagement, staff governance and implementing a cultural blueprint	Director of Human Resources / Employee Director	January 2020	Work continues to ensure all networking opportunities are maximised to seek benchmarking and good practice information across Boards. In addition, participation in national projects relating to Staff Governance and cultural change is a priority. **Sharing of practice with other NHS Boards has taken place. Employee Director on Ministerial Group.** Complete	S

19.	Consider a refresh of the "Meet the Board" sessions and other opportunities for the Board to engage directly with front line staff.	Director of Human Resources / Employee Director	January 2020	The refresh of "Meet the Board" remains under consideration with the final format likely to be influenced and incorporated in the action plan agreed in response to the Sturrock Report. Agreed that this was a valuable initiative and dates to be scheduled. **June 2021 - in view of social distancing restrictions, virtual walk rounds were trialled in 2020, and were appreciated by staff, these will be rolled out along with out of hours visits by Non Executive Directors, initally to Acute sites, but consideration to be given to community settings as approriate.** Complete	S
22.	Develop Board Members understanding and skills around data presentation and data interpretation through a training session	Board Secretary	August 2020	Session planned as part of the March 2020 Development Day programme. **Active Governance pilot session held in February 2021 - national roll-out being considered by National Corporate Governance Steering Group.** Comlete	
23.	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	October 2019	Shadowing arrangements are in place for any Board Member who wishes to visit another NHS Board Governance Committee, and outputs from the National Board Development Programme will be shared with all Board Members. TURAS Learn has been promoted to Board Members to explore and feedback comments on the newly launched web site. Complete	

24.	Ensure that there is an effective succession plan in place for Board Members	Board Chair	September 2019	The Chair has discussed succession planning with each Non Executive Board Member. Complete	
25.	Reflect on and consider the requirement for specific support for Executive Members of the Board in relation to their role as Board Members	Board Chair	October 2019	All Board members have been encouraged to access TURAS LEARN Complete	
26.	Clarify the role of Board Members as part of the local review of the North Lanarkshire Health & Social Partnership Integration Scheme	Board Chair	October 2019	Accountabilities discussed as part of the review. Complete	
27.	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	Specific discussion have taken place with Non-Executive Directors on Integration and the Performance Framework. Complete	
29.	Undertake and embed a refresh of information flows /a new performance management system to ensure appropriate, timely data is presented in a meaningful way to relevant Board / Governance Committees, providing assurance and taking cognisance of any recommendations from any national work in this area.	Director of Planning, Property & Performance	May 2019	The revised Integrated Corporate Performance system is now in place. Complete	
30.	Improve the flow of information from Committees to the Board, by encouraging exception reporting and escalation of areas of concern/risk	Board Secretary	May 2019	Use of a summary paper to NHS Board meetings by Governance Committees in place. The summary sheet template has been updated to include a section on performance issues. Complete	

31.	Increase the prevalence of qualitative feedback as well as quantitative data in decision making	Director of Communications	December 2019	Care Opinion Summaries are circulated to all Board Members. The Board agenda has standing item on Patient Stories / Lived Experiences. Complete	
Audit Services					
34.	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	July 2019	In place. Complete	
35.	Provide bespoke training for Audit Committee Members	Director of Finance	Sept 2019	Options are being explored to engage with a suitable provider of training, to be held in March 2020, to ensure that the newly appointed Non Executive Board Members can be included in the training. Specific training arranged for the Chair of the Committee in advance of this event was cancelled by CIPFA. The external provider has been identified and a date being secured for this training. **June 2021 - training was delivered in October 2020.** Complete	
36.	Maximise attendance by Board Members at events by promoting the use of the Corporate Calendar	Board Secretary	May 2019 & October 2019	The Board and Committee dates for 2020 have been added to the Calendar. The use of the Calendar will be promoted in October 2019 and reminders sent on how to access the calendar before booking future events. Complete	S

38.	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)	Board Secretary	Dec 2019	June 2021 - the Corporate Governance Steering Group will be commissioning work on templates and this action will be taken forward in light of these being circulated for Boards to adopt. The template for Standing Orders was adopted in May 2020. Complete	
39.	Support all Board Members to fully embrace the use of the electronic Board portal, and move to paperless meetings	Board Secretary	May 2020	The use of Admin Control is expanding and there are now many management / operational groups using the Portal. **The use of MS Teams is being rolled out and being used by Non Executive Board Members.** Complete	