

NHS Board
26 May 2021

Lanarkshire NHS
Kirklands
Fallside Road
Bothwell
G71 8BB
Telephone: 01698 855500
www.nhslanarkshire.scot.nhs.uk



SUBJECT: GOVERNANCE COMMITTEE ANNUAL REPORTS 2020/21

1. PURPOSE

This paper is coming to the Board:

For approval	<input type="checkbox"/>	For endorsement	<input checked="" type="checkbox"/>	For consideration	<input type="checkbox"/>
--------------	--------------------------	-----------------	-------------------------------------	-------------------	--------------------------

2. ROUTE TO BOARD

This paper has been:

Prepared	<input checked="" type="checkbox"/>	Reviewed and considered	<input type="checkbox"/>	Endorsed	<input type="checkbox"/>
----------	-------------------------------------	-------------------------	--------------------------	----------	--------------------------

by the Board Secretary. Individual Committee Annual Reports have been considered by the respective Governance Committees / Chairs. As a result of responding to the Covid-19 pandemic some Governance Committees were cancelled in the early part of 2020.

A paper on the revised governance arrangements was agreed by the NHS Board in April 2020 which recommended that the Audit, Staff Governance and Healthcare Quality Assurance & Improvement Committee(s) should continue to meet, as and when required, and to stand down the Acute Governance Committee and the Population Health, Primary Care and Community Services Governance Committee.

It was planned that these would stand back up in September 2020, however this proved not to be possible with the second pandemic wave. The Acute Governance Committee did meet in 2020 and early 2021, but with a very restricted Covid focussed agenda.

These Committees only stood back up formally in May 2021.

Therefore, the difficulty in providing Committee assurance when some were stood down for long periods during the period April 2020 – March 2021 was discussed with the Chief Internal Auditor.

It was agreed that each Committee (where appropriate) would include in their Annual Report a review of their workload to identify whether key issues had been discussed, if not whether these were discussed elsewhere (the Board did provide risk assurance for the Acute Governance Committee and the Population Health, Primary Care and Community Services Governance Committee), or if the issue required to be carried forward into the work plan for 2021/22 when the Committees were able to stand up.

3. SUMMARY OF KEY ISSUES

Attached are Annual Reports from the Board’s Governance Committees, viz:

Committee	Chair	Lead Director
Audit Committee	Brian Moore	Laura Ace
Staff Governance Committee	Lilian Macer	Kay Sandilands
Remuneration Sub-Committee	Neena Mahal	Kay Sandilands
Healthcare Quality Assurance and Improvement Committee	Dr Lesley Thomson	Dr Jane Burns/Eddie Docherty
Acute Governance Committee	Dr Avril Osborne	Heather Knox/Judith Park
Area Clinical Forum	Maureen Lees	Jane Burns
Monklands Replacement Oversight Board	Dr Lesley Thomson	Colin Lauder

These Annual Reports cover: Committee Membership and Attendees; Meetings held during the year; the key issues considered by the Committees; Improvements overseen by the Committees; Matters of concern to the Committees. They also append a separate Board Assurance Framework Workplan Review.

The Planning, Performance & Resources and the Population Health, Primary Care & Community Services Committee(s) did not meet during the period, having been stood down as the pandemic emerged, when the NHS in Scotland was placed on an emergency footing. Instead the Board met on a monthly basis in order to provide assurance for those Committees that had been stood down, and to support the Executive Team in agile decision making.

The Acute Division was formally stood down, but did meet with a covid focused agenda in September 2020, January 2021 and March 2021.

The Committees also, as appropriate, provided assurance statements about the adequacy and effectiveness of Governance arrangements. The Annual Reports confirm that the Committees have reviewed their Workplans in line with their Terms of Reference.

There is a separate review of Terms of Reference underway that was commenced in September 2020 but had to be paused in light of the second wave of covid infections. This review has restarted and will be undertaken through the summer of 2021.

4. STRATEGIC CONTEXT

This paper links to the following:

Corporate Objectives	<input checked="" type="checkbox"/>	AOP	<input type="checkbox"/>	Government Policy	<input type="checkbox"/>
Government Directive	<input type="checkbox"/>	Statutory Requirement	<input checked="" type="checkbox"/>	AHF/Local Policy	<input type="checkbox"/>
Urgent Operational Issue	<input type="checkbox"/>	Other	<input type="checkbox"/>		

5. CONTRIBUTION TO QUALITY

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

Three Quality Ambitions:

Safe	<input type="checkbox"/>	Effective	<input checked="" type="checkbox"/>	Person Centred	<input type="checkbox"/>
------	--------------------------	-----------	-------------------------------------	----------------	--------------------------

Six Quality Outcomes:

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

6. MEASURES FOR IMPROVEMENT

The key improvements overseen by the Board and its Governance Committees are summarised within each report.

7. FINANCIAL IMPLICATIONS

There are no specific financial implications.

8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS

No further risk analysis required.

9. FIT WITH BEST VALUE CRITERIA

This paper aligns to the following best value criteria:

Vision and leadership	<input type="checkbox"/>	Effective partnerships	<input type="checkbox"/>	Governance and accountability	<input checked="" type="checkbox"/>
Use of resources	<input type="checkbox"/>	Performance management	<input type="checkbox"/>	Equality	<input type="checkbox"/>
Sustainability	<input type="checkbox"/>				

10. EQUALITY AND DIVERSITY IMPACT ASSESSMENT

These are Annual Reports on business considered during the year, for which EDIAs would have been considered when the issues were first raised.

11. CONSULTATION AND ENGAGEMENT

Other than the consideration given to the Annual Reports by the respective Committees, consultation and engagement is not relevant to this item.

12. ACTIONS FOR THE BOARD

The Board is asked to:

Approve	<input type="checkbox"/>	Endorse	<input checked="" type="checkbox"/>	Identify further risks	<input type="checkbox"/>
Consider	<input type="checkbox"/>	Accept the risk identified	<input type="checkbox"/>		<input type="checkbox"/>

The NHS Board is asked to:

- a) endorse the Annual Reports, which forms a key part of the evidence in support of the Annual Accounts Governance Statement;
- b) Note that because of the need to stand down a range of Committees during the period of emergency footing, a Board Assurance Framework workplan review was devised following discussion with the Chief Internal Auditor and returns were completed by each Committee; and
- c) note that the Annual Reports will be considered by the Audit Committee on 1 June 2021;

13. FURTHER INFORMATION

For further information about any aspect of this paper, please contact Paul Cannon, Board Secretary, Telephone: 01698 752868 or email at paul.cannon@lanarkshire.scot.nhs.uk