

NHS Board
26 May 2021

Lanarkshire NHS Board
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SUBJECT: CODE OF CORPORATE GOVERNANCE (MAY 2021)

1. PURPOSE

This paper is coming to the Board:

For approval	<input checked="" type="checkbox"/>	For endorsement	<input type="checkbox"/>	To note	<input type="checkbox"/>
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This paper highlights two changes that are required in Section A of the Code of Corporate Governance.

2. ROUTE TO THE BOARD

This paper has been:

Prepared	<input checked="" type="checkbox"/>	Reviewed	<input type="checkbox"/>	Endorsed	<input type="checkbox"/>
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by the Board Secretary to take account of developments and changes that require to be reflected in the Code.

3. SUMMARY OF KEY ISSUES

In May of each year the Code of Corporate Governance is reviewed, and this year a desktop review has been undertaken in light of all the Covid pandemic governance changes that have also been introduced. Once full pre covid governance arrangements have been restored a fundamental review of the Code will be undertaken mid-year 2021, which will also incorporate any national developments being taken forward by the National Corporate Governance Steering Group (in revising the Blueprint for Good Governance), and the NHS Lanarkshire review of Governance Committee Terms of Reference, which will be taken forward through the summer of 2021.

The Board reviewed the Standing Financial Instructions and Scheme of Delegation in April 2021.

There are two minor changes to make to the Board Standing Orders.

The first is to reflect current practice in not being able to meet as a Board in one location due to the Covid restrictions.

The second to reflect the process adopted in appointing a Vice Chair for the Board. This process was followed in the recent appointment of Dr Thomson, but the Board Standing Orders need to be updated to reflect this.

Section A - Page 23 - para 3 - Appointment of Vice Chair of Lanarkshire NHS Board

Current text

- 3.1 To enable the business of the Board to be conducted in the absence of the Chair, a Non-Executive Member who is not an NHS employee (for example Employee Director, Chair of Area Clinical Forum) shall be appointed Vice Chair by the Chair.

Proposed amendment

- 3.1 To enable the business of the Board to be conducted in the absence of the Chair, a Non-Executive Member who is not an NHS employee (for example Employee Director, Chair of Area Clinical Forum) shall be appointed Vice Chair. ~~by the Chair.~~

New Additional paragraph below.

The Chair shall invite eligible Non Executives to indicate their interest in fulfilling the role and an informal interview shall be arranged. Following this, the Chair shall nominate a candidate or candidates for Vice-Chair to the Cabinet Secretary. The Cabinet Secretary will in turn determine who to appoint based on evidence of effective performance and evidence that the member has the skills, knowledge and experience needed for the position. Following the decision, the Board shall appoint the member as Vice-Chair. Any person so appointed shall, so long as he or she remains a Member of the Board, continue in office for such a period as the Board may decide.

Section A - Page 28 - para 16 - Admission of Public and Press

Current text

- 16.1 Members of staff, the public and representatives of the press will be admitted to ordinary meetings of the NHS Board, but will not be permitted to take part in discussion.
- 16.2 The Board may exclude staff, the public and press while considering any matter that is confidential.
- 16.3 Members of staff, the public and representatives of the press admitted to the Board meeting shall not be permitted to make use of photographic or recording apparatus of any kind unless agreed by the Board.
- 16.4 Members of staff, the public and press should leave when the Board meeting moves to reserved business.

New additional paragraph

- 16.5 If the Board is unable to meet in person, due to covid or other restrictions, the Board meeting can be conducted virtually, and broadcast live to enable members of the public and press to observe the proceedings.

4. STRATEGIC CONTEXT

This paper links to the following:

Corporate objectives	<input type="checkbox"/>	AOP	<input type="checkbox"/>	Government policy	<input type="checkbox"/>
Government directive	<input type="checkbox"/>	Statutory requirement	<input type="checkbox"/>	AHF/local policy	<input type="checkbox"/>
Urgent operational issue	<input type="checkbox"/>	Other	<input type="checkbox"/>		

The Code of Corporate Governance effectively provides a framework to support all of the above.

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 type="checkbox"/>	Person Centred	<input type="checkbox"/>
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The Code of Corporate Governance provides a framework which defines the business principles of the NHS Board and the Organisation, in support of the delivery of safe, effective, person-centred care and the undernoted Quality Outcomes.

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 type="checkbox"/>
Healthcare is safe for every person, every time; (Safe)	<input type="checkbox"/>
Best use is made of available resources. (Effective)	<input type="checkbox"/>

6. MEASURES FOR IMPROVEMENT

This section is not directly relevant.

7. FINANCIAL IMPLICATIONS

There are no financial implications.

8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS

There are no obvious material risks.

9. FIT WITH BEST VALUE CRITERIA

This paper aligns to the following best value criteria:

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

10. EQUALITY AND DIVERSITY IMPACT ASSESSMENT

An E&D Impact Assessment has not been completed, because the Code of Corporate Governance equally encompasses all aspects of the Board's role in the discharge of its business.

11. CONSULTATION AND ENGAGEMENT

A desktop review was undertaken in light of other changes that will be required when pre Covid governance arrangements are restored in full.

The revised Standing Financial Instructions and Scheme of Delegation were approved by the Audit Committee in April 2021, and the NHS Board in April 2021.

12. ACTIONS FOR THE BOARD

The NHS Board is asked to:

Approve	<input checked="" type="checkbox"/>	Endorse	<input type="checkbox"/>	Identify further actions	<input type="checkbox"/>
Note	<input type="checkbox"/>	Accept the risk identified	<input type="checkbox"/>	Ask for a further report	<input type="checkbox"/>

- (a) approve the changes made to Section A - page 23 - para 3 - Appointment of the Vice Chair to reflect the current arrangements;
- (b) approve the changes made to Section A - page 28 - para 16 - Admission of Public and Press to reflect the current arrangements;
- (c) note that a fundamental review will be undertake in 2021 to incorporate any post Covid changes in restoring full governance arrangements, any national changes to the Blueprint for Good Governance, and the review of Governance Committee Terms of Reference through the summer of 2021; and
- (d) note that the updated Code of Corporate Governance will be uploaded on to the Board's public facing web site after the meeting.

13. FURTHER INFORMATION

For further information about any aspect of this paper, please contact Paul Cannon, Board Secretary. Telephone: 01698 858181 e-mail paul.cannon@lanarkshire.scot.nhs.uk