NHS Board 27 March 2024 **NHS** Lanarkshire

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SUBJECT: BLUEPRINT FOR GOOD GOVERNANCE – SELF ASSESSMENT OF SURVEY RESULTS – IMPROVEMENT PLAN

1. PURPOSE

This paper is coming to the NHS Board

For Approval	\square	For Assurance	For Noting [

2. ROUTE TO THE NHS BOARD

This paper has been:

Prepared	Reviewed	Endorsed	
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by the Board Secretary.

3. SUMMARY OF KEY ISSUES

The Blueprint outlines a model for an effective corporate governance system in NHS Scotland to deliver good governance in healthcare. It describes the functions and enablers of good governance and provides definitions of the delivery systems and the evaluation required for continuous improvement. Version 2 of the Blueprint was issued in December 2022.

https://www.gov.scot/publications/blueprint-good-governance-nhs-scotland-second-edition/

The Blueprint sets out the need for Boards to have a consistent and systematic approach to assessing their current governance arrangements and identifying any new and emerging issues or concerns.

A key part of this was a Board self-assessment survey which focuses on how effective Boards are against the Blueprint model in relation to the functions, enablers, delivery approaches and evaluation.

The questionnaire was issued by the Scottish Government Governance and Appointments Team in October 2023 and Boards were invited to identify those who should be included in the survey.

In NHS Lanarkshire this included Board Members (Executive and Non-Executive) and Directors who regularly attend Board meetings. In total 24 questionnaires sent out and all 24 returned.

The results were collated by the Scottish Government Governance and Appointments Team and are attached as Appendix 1. These were shared with all participants in the survey.

In January 2024, a Board Member development session looked at the results and to identify any strengths and weakness, such that an Improvement Plan could be drafted and agreed by the Board. The Improvement Plan is attached as Appendix 2.

The strengths that were identified were those with a combined score of 20 individuals or above, (around 80%), when Very Well and Well were added together.

Strengths

- 2. Setting Direction (2a and 2b)
- 3. Holding To Account (3a 3e)
- 4. Managing Risk (4a & 4b)
- 8 Roles (8a, 8c, 8e)
- 9. Values (9a 9c)
- 12. Appraisals (12b) the highest scoring question

Areas for Improvement

The Improvement Plan sought to focus on those areas where more than 1 response was noted in the weak category (there were no inadequate ratings throughout the survey) and highlighted the areas listed below.

5. Engaging Stakeholders (5a – 5e)

7. Diversity (7a) was the highest weak score with 3 members identifying that we were not reflective of the community we serve

10. Assurance Framework (10f) benchmarking

In terms of initial responses, the Board noted that

5. We are looking to recruit 2 new NXDs and will be seeking to address this through that process. One of the individuals we are seeking to attract should have Communications, Marketing and Stakeholder engagement experience and skills to enhance the Board's Skills Matrix.

We also established a Non-Executive Working Group, led by our Vice Chair, to look at ways of improving how we engage with patients and staff, and a number of suggestions

are being taken forward to improve Non Executive visibility and stakeholder engagement across NHS Lanarkshire.

7. As part of recruiting 2 new NXDs we will also seek to address this issue also.

10. As part of the review of the content of the IPQR being undertaken in early 2024 we are seeking to include as much benchmarking data as we can and encourage contributors to do wherever possible.

The Improvement Plan, once approved by the Board, will be submitted to Scottish Government by 30 March 2024.

4. STRATEGIC CONTEXT

This paper links to the following:

Corporate objectives	ADP	Government policy	\square
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	\square	Person Centred	

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

The Improvement Plan sets out those measures to be taken and these will be monitored in 6 months time.

7. FINANCIAL IMPLICATIONS

Nil

8. RISK ASSESSMENT/MANAGEMENT IMPLICATIONS

If the Board is unable to make these improvements, there would be a reputational risk to the Board in terms of good governance.

9. FIT WITH BEST VALUE CRITERIA

This paper aligns to the following best value criteria:

Vision and leadership	\square	Effective partnerships	Governance and	
			accountability	
Use of resources		Performance	Equality	
		management		
Sustainability				

10. EQUALITY AND DIVERSITY / FAIRER SCOTLAND DUTY IMPACT ASSESSMENT

Has an E&D /FSD Impact Assessment has been completed?

Yes	
No	\boxtimes

11. CONSULTATION AND ENGAGEMENT

Board Members were consulted on the survey results in a development session on 22 January 2024.

12. ACTIONS FOR THE NHS BOARD

The NHS Board are asked to:

Approve	Gain Assurance	Note Note	
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13. FURTHER INFORMATION

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

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Appendix 1Survey ResultsAppendix 2Improvement Plan