

# NHS Ayrshire & Arran



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|------------------------------|-----------------------------------------------------------|
| <b>Meeting:</b>              | <b>Ayrshire and Arran NHS Board</b>                       |
| <b>Meeting date:</b>         | <b>Monday 28 November 2022</b>                            |
| <b>Title:</b>                | <b>Corporate Governance Learning and Improvement Plan</b> |
| <b>Responsible Director:</b> | <b>Claire Burden, Chief Executive</b>                     |
| <b>Report Author:</b>        | <b>Shona McCulloch, Head of Corporate Governance</b>      |

## 1. Purpose

This is presented to the Committee for:

- Awareness

This paper relates to:

- Government policy/directive

This aligns to the following NHSScotland quality ambition(s) of:

- Safe, Effective and Person Centred.

## 2. Report summary

### 2.1 Situation

This paper is presented to provide assurance to Members on the NHS Ayrshire & Arran Corporate Governance Learning and Improvement Plan for 2022-23.

### 2.2 Background

In February 2019 the Scottish Government circular [DL\(2019\)02](#) published the Blueprint for Good Governance and required all Health Boards to undertake a self-assessment survey against the Blueprint. The output informed a local Corporate Governance Improvement Plan.

The 2018-2019 NHSAA Corporate Governance improvement plan was developed from this local output and included earlier output from a self-evaluation of corporate governance following reports on [Corporate Governance in NHS Highland](#) and on NHS Governance from the [Health and Sport Committee](#). The improvement plan was supported at a Board Workshop on 25 March 2019. In accordance with the DL the Plan was submitted to Cabinet Secretary on 25 April 2019 and an update submitted to Scottish Government on 2 December 2019 following discussions at Integrated Governance Committee on 25 November 2019.

The current 2022-2023 plan has been developed through annual updates and carry forward actions.

Delivery of the NHS Ayrshire & Arran Corporate Governance Improvement plan is monitored and scrutinised by the Integrated Governance Committee. Following a recommendation from our Internal Auditor an update on the plan is provided to the NHS Board for assurance twice a year.

## **2.3 Assessment**

On 7 November 2022 Integrated Governance Committee discussed the Corporate Governance Learning and Improvement Plan and progress against actions. Committee confirmed they were assured by action being taken and progress reported. The Committee supported the completion dates for actions.

Appendix 1 shows the plan for 2022-23 with progress noted.

Integrated Governance Committee will monitor delivery of the plan at each committee meeting.

### **2.3.1 Quality/patient care**

Taking forward actions in the plan will ensure the quality of our governance practice which supports the effective delivery of services across the organisation.

### **2.3.2 Workforce**

There is no impact on workforce from the improvements being progressed. Any required changes to working practice have been discussed with appropriate staff with no adverse impact noted.

### **2.3.3 Financial**

There is no financial impact from the improvements being progressed.

### **2.3.4 Risk assessment/management**

There has been no formal risk assessment. Not delivering on the agreed improvements would present a risk to compliance with the national Blueprint for Good Governance.

### **2.3.5 Equality and diversity, including health inequalities**

An impact assessment is not required to support the discussions on progress. When an assessment is required to deliver areas of the improvement plan this has been completed.

### **2.3.6 Other impacts**

- Best value - The focus on delivering outcomes to continuously improve our corporate governance arrangements and ensure compliance with the Blueprint for Good Governance strengthens the organisations corporate governance arrangements and delivers best value in all areas.
- Compliance with Corporate Objectives - The recommendations will deliver improvements to the organisation's corporate governance arrangements and system of internal control

### **2.3.7 Communication, involvement, engagement and consultation**

Board Members were consulted on the outcomes from the self-evaluation and the improvement action plan which formed the original 2018-2019 plan that was submitted to Scottish Government. Where required engagement takes place with Governance Committee Chairs and Executive Leads to deliver actions.

### **2.3.8 Route to the meeting**

This has been previously considered by the following groups as part of its development. The groups have supported the content and their feedback has informed the development of the content presented in this report.

Integrated Governance committee – 7 November 2022.

### **2.4 Recommendation**

For awareness. Members are asked to receive the update on the 2022/23 Improvement Plan.

### **3. List of appendices**

Appendix 1 – Board report on Learning and Improvement Plan 2022 - 2023

## Learning and Improvement Plan 2022-2023

### Board report

| Governance system                                              | Action Ref | Improvement action                                                                                                                        | Action owner                                 | Timeline                        | Commentary                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|----------------------------------------------------------------|------------|-------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------|---------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Actions brought forward from 2018-2019 Improvement plan</b> |            |                                                                                                                                           |                                              |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| <b>The Support – Administration arrangements</b>               | 017        | Progress a Protocol/Policy/ Guideline for protective marking.                                                                             | Head of Corporate Governance                 | In Progress<br>end October 2022 | A final draft Standard on Document Security Marking has been discussed with Information Governance Manager. This will be reviewed and agreed with the Information Governance operational group prior to issue organisation wide.                                                                                                                                                                                                                                                                              |
| <b>Actions brought forward from 2020-2021 Improvement plan</b> |            |                                                                                                                                           |                                              |                                 |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
| <b>Functions - Holding to account</b>                          | 2020-01    | To consider the content of board papers and quality of information and data provided.                                                     | Board Chair and Head of Corporate Governance | Completed                       | Improvement to support Active Governance.<br>The Data Short Life Working Group (SLWG) has recommended a set of data chart principles and proposals to the Board Chair. The Board Chair is progressing a pilot to assess improvement in performance reporting. As this is being progressed as business as usual Committee agreed action complete.                                                                                                                                                              |
| <b>Support – Administration</b>                                | 2020-09    | Internal audit recommendation: Adherence to Controlled document policy – build additional guidance and clarity into policy at next review | Head of Corporate Governance                 | In progress<br>end October 2022 | Continuous development and implementation of the Board's corporate governance system.<br>The Controlled Document policy has been reviewed and re-drafted to deliver a policy which is fit for purpose and provides a clear statement of intent for the organisation. This includes recommendations from the Internal Audit. Engagement is ongoing with a SLWG of key stakeholders to ensure systems, processes and the policy are aligned. The policy will be approved through appropriate governance routes. |

## Appendix 1 – Corporate Governance in NHS Ayrshire & Arran – 2022-2023 plan

| Governance system                                  | Action Ref | Improvement action                                                                                                                                                                   | Action owner                 | Timeline                                  | Commentary                                                                                                                                                                                                                                                                                                                                                         |
|----------------------------------------------------|------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------|-------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Actions brought forward from 2021-2022</b>      |            |                                                                                                                                                                                      |                              |                                           |                                                                                                                                                                                                                                                                                                                                                                    |
| <b>Support - Assurance information systems</b>     | 2021-02    | Internal Audit recommendations: Healthcare Governance Committee – review of assurance arrangements<br><br>Assurance map exercise for HCG and thereafter across governance committees | Head of Corporate Governance | end January 2023                          | Continuous development of the Board's corporate governance system.<br><br>Discussions were held with Internal Audit to seek guidance and clarity on required action. Further information has been received from Internal Audit and is being discussed with the Audit and Risk Committee Chair with an agreed revised date of end January 2023 to close the action. |
| <b>Support – Administration</b>                    | 2021-03    | Sharing of papers and new ways of working with implementation of O365. Developing use of Teams for sharing of papers.                                                                | Head of Corporate Governance | Ongoing based on O365 migration timetable | Continuous development of the board's corporate governance system.<br><br>The use of O365 continues to develop with the use of MSTeams Channels for Board Governance Committees.                                                                                                                                                                                   |
| <b>Standing action items</b>                       |            |                                                                                                                                                                                      |                              |                                           |                                                                                                                                                                                                                                                                                                                                                                    |
| <b>Enablers - Skills, experience and diversity</b> | 2021-01    | Non-Executive induction – continue to develop the national induction template and our local programme                                                                                | Head of Corporate Governance | Standing item<br><br>Ongoing              | Added 2021. Continuous improvement of Non-Exec induction programme.<br><br>The pack continues to develop through engagement with Non-Executive Members who join the Board and to build in appropriate local or national information.                                                                                                                               |
| <b>Functions</b>                                   | 2022-01    | Annual review of Code of Corporate Governance – our governance framework                                                                                                             | Head of Corporate Governance | Standing item –<br><br>Annually May       | Added 2022. Continuous development of the Board's corporate governance system.<br><br>Code of Corporate is reviewed annually or as required in-year to deliver a robust and up to date corporate governance framework for NHS Ayrshire & Arran                                                                                                                     |

11 November 2022 – Report on 2022-23 plan agreed by Integrated Governance Committee.