



Section A

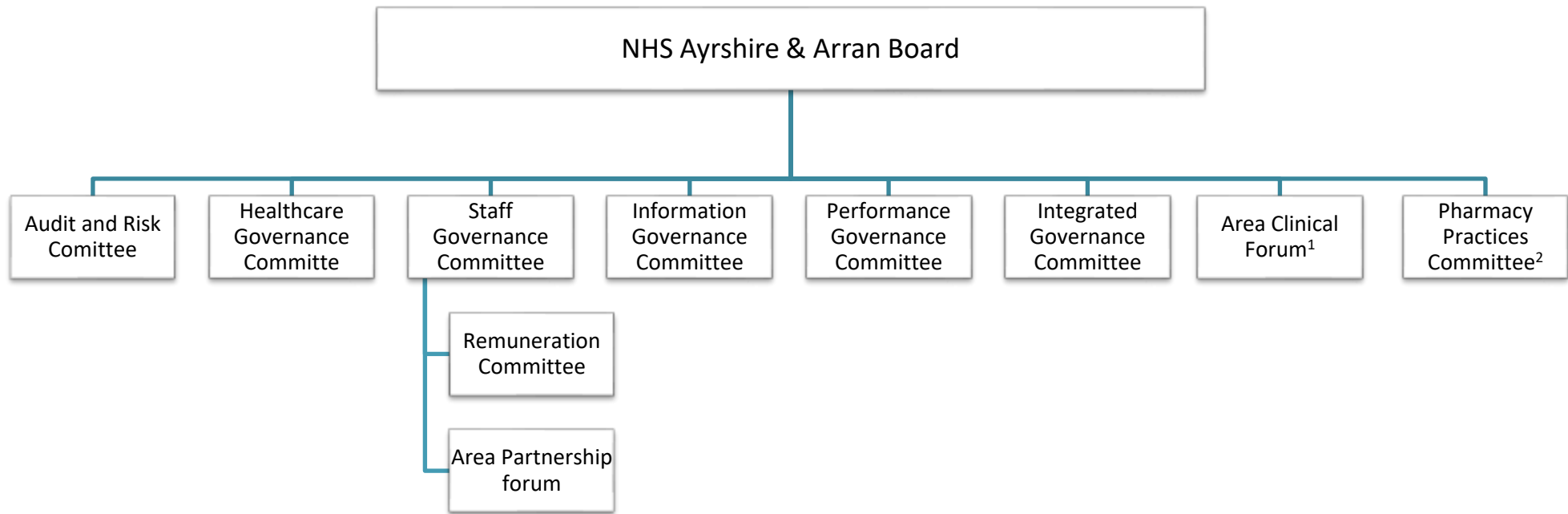
Board Standing Orders How Committee business is organised

This section provides the Board Standing Orders and explains how the business of NHS Ayrshire & Arran Board Committees is organised

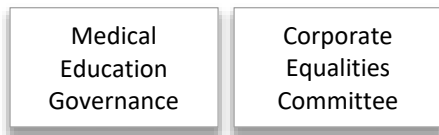
- [Item 1:](#) The Board and its committee structure
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Section A – Item 1 – The Board and its Committees

Item 1: The Board and its Committees



Sub-committees which report to NHS board (NOT standing committees):



¹ Standing committee of the Board, advisory, reports annually to Board.

² Standing committee of the Board - decision making, reports annually to Board

Item 2: NHS Board Standing Orders

DL(2019)24 - NHS Boards Standing Orders was published on 13 December 2019. This directive published a model Standing Order template which has been adopted by NHS Ayrshire & Arran. These Standing Orders were approved by the NHS Board on 07/10/2024.

Standing orders for the proceedings and business of Ayrshire and Arran NHS Board

1. General

- 1.1 These Standing Orders for regulation of the conduct and proceedings of Ayrshire and Arran NHS Board, the common name for NHS Ayrshire & Arran Health Board, [the Board] and its Committees are made under the terms of The Health Boards (Membership and Procedure) (Scotland) Regulations 2001 (2001 No. 302), as amended up to and including The Health Boards (Membership and Procedure) (Scotland) Amendment Regulations 2016 (2016 No. 3).

Healthcare Improvement Scotland and NHS National Services Scotland are constituted under a different legal basis, and are not subject to the above regulations. Consequently those bodies will have different Standing Orders.

The Blueprint for Good Governance in NHS Scotland (issued through [DL\(2019\) 02](#)) has informed these Standing Orders. A Second Edition of The Blueprint was issued through [DL\(2022\) 38](#) in December 2022. The Blueprint describes the functions of the Board as:

- Setting the direction, clarifying priorities and defining expectations.
- Holding the executive to account and seeking assurance that the organisation is being effectively managed.
- Managing risks to the quality, delivery and sustainability of services.
- Engaging with stakeholders.
- Influencing the Board's and the organisation's culture.

Further information on the role of the Board, Board members, the Chair, Vice-Chair, and the Chief Executive is available on the NHS Scotland Board Development website (<https://learn.nes.nhs.scot/17367/board-development>)

- 1.2 The Scottish Ministers shall appoint the members of the Board. The Scottish Ministers shall also attend to any issues relating to the resignation and removal, suspension and disqualification of members in line with the above regulations. Any member of the Board may on reasonable cause shown be suspended from the Board or disqualified for taking part in any business of the Board in specified circumstances.
- 1.3 Any statutory provision, regulation or direction by Scottish Ministers, shall have precedence if they are in conflict with these Standing Orders.

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- 1.4 Any one or more of these Standing Orders may be varied or revoked at a meeting of the Board by a majority of members present and voting, provided the notice for the meeting at which the proposal is to be considered clearly states the extent of the proposed repeal, addition or amendment. The Board will annually review its Standing Orders.
- 1.5 Any member of the Board may on reasonable cause shown be suspended from the Board or disqualified for taking part in any business of the Board in specified circumstances. The Scottish Ministers may by determination suspend a member from taking part in the business (including meetings) of the Board. Paragraph 5.4 sets out when the person presiding at a Board meeting may suspend a Board member for the remainder of a specific Board meeting. The Standards Commission for Scotland can apply sanctions if a Board member is found to have breached the Board Members' Code of Conduct, and those include suspension and disqualification. The regulations (see paragraph 1.1) also set out grounds for why a person may be disqualified from being a member of the Board.

Board Members – Ethical Conduct

- 1.6 Members have a personal responsibility to comply with the Code of Conduct for Members of the NHS Ayrshire & Arran Board. The Commissioner for Public Standards can investigate complaints about members who are alleged to have breached their Code of Conduct. The Board will have appointed a Standards Officer. This individual is responsible for carrying out the duties of that role, however he or she may delegate the carrying out of associated tasks to other members of staff. The Board's appointed Standards Officer shall ensure that the Board's Register of Interests is maintained. When a member needs to update or amend his or her entry in the Register, he or she must notify the Board's appointed Standards Officer of the need to change the entry within one month after the date the matter required to be registered.
- 1.7 The Board's appointed Standards Officer shall ensure the Register is available for public inspection at the principal offices of the Board at all reasonable times and will be included on the Board's website.
- 1.8 Members must always consider the relevance of any interests they may have to any business presented to the Board or one of its committees. Members must observe paragraphs 5.6 - 5.10 of these Standing Orders, and have regard to Section 5 of the Code of Conduct (Declaration of Interests).
- 1.9 In case of doubt as to whether any interest or matter should be declared, in the interests of transparency, members are advised to make a declaration.
- 1.10 Members shall make a declaration of any gifts or hospitality received in their capacity as a Board member. Such declarations shall be made to the Board's appointed Standards Officer who shall make them available for public inspection at all reasonable times at the principal offices of the Board and on the Board's website. The Register of Interests includes a section on gifts and hospitality. The Register may include the information on any such declarations, or cross-refer to where the information is published.

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1.11 The Board's Head of Corporate Governance shall provide a copy of these Standing Orders to all members of the Board on appointment. A copy shall also be held on the Board's website.

2. Chair

2.1 The Scottish Ministers shall appoint the Chair of the Board.

3. Vice-Chair

3.1 The Chair shall nominate a candidate or candidates for vice-chair to the Cabinet Secretary. The candidate(s) must be a non-executive member of the Board. A member who is an employee of a Board is disqualified from being Vice-Chair. 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.

3.2 The Vice-Chair may at any time resign from that office by giving notice in writing to the Chair. The process to appoint a replacement Vice-Chair is the process described at paragraph 3.1.

3.3 Where the Chair has died, ceased to hold office, or is unable for a sustained period of time to perform his or her duties due to illness, absence from Scotland or for any other reason, then the Board's Head of Corporate Governance should refer this to the Scottish Government. The Cabinet Secretary will confirm which member may assume the role of interim chair in the period until the appointment of a new chair, or the return of the appointed chair. Where the Chair is absent for a short period due to leave (for whatever reason) the Vice-Chair shall assume the role of the Chair in the conduct of the business of the Board. In either of these circumstances references to the Chair shall, so long as there is no Chair able to perform the duties, be taken to include references to either the interim chair or the Vice-Chair. If the Vice-Chair has been appointed as the Interim Chair, then the process described at paragraph 3.1 will apply to replace the Vice-Chair.

4. Calling and Notice of Board Meetings

4.1 The Chair may call a meeting of the Board at any time and shall call a meeting when required to do so by the Board. The Board shall meet at least seven times in the year and will annually approve a forward schedule of meeting dates.

4.2 The Chair will determine the final agenda for all Board meetings. The agenda may include an item for any other business, however this can only be for business which the Board is being informed of for awareness, rather than being asked to make a decision. No business shall be transacted at any meeting of the Board other than that specified in the notice of the meeting except on grounds of urgency.

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- 4.3 Any member may propose an item of business to be included in the agenda of a future Board meeting by submitting a request to the Chair. If the Chair elects to agree to the request, then the Chair may decide whether the item is to be considered at the Board meeting which immediately follows the receipt of the request, or a future Board meeting. The Chair will inform the member which meeting the item will be discussed. If any member has a specific legal duty or responsibility to discharge which requires that member to present a report to the Board, then that report will be included in the agenda.
- 4.4 In the event that the Chair decides not to include the item of business on the agenda of a Board meeting, then the Chair will inform the member in writing as to the reasons why.
- 4.5 A Board meeting may be called if one third of the whole number of members signs a requisition for that purpose. The requisition must specify the business proposed to be transacted. The Chair is required to call a meeting within 7 days of receiving the requisition. If the Chair does not do so, or simply refuses to call a meeting, those members who presented the requisition may call a meeting by signing an instruction to approve the notice calling the meeting provided that no business shall be transacted at the meeting other than that specified in the requisition.
- 4.6 Before each meeting of the Board, a notice of the meeting (in the form of an agenda), specifying the time, place and business proposed to be transacted at it and approved by the Chair, or by a member authorised by the Chair to approve on that person's behalf, shall be circulated to every member so as to be available to them at least three clear days before the meeting. The notice shall be distributed along with any papers for the meeting that are available at that point.
- 4.7 With regard to calculating clear days for the purpose of notice under 4.6 and 4.9, the period of notice excludes the day the notice is sent out and the day of the meeting itself. Additionally only working days (Monday to Friday) are to be used when calculating clear days; weekend days and public holidays should be excluded.

Example: If a Board is meeting on a Wednesday, the notice and papers for the meeting should be distributed to members no later than the preceding Thursday. The three clear days would be Friday, Monday and Tuesday. If the Monday was a public holiday, then the notice and papers should be distributed no later than the preceding Wednesday.

- 4.8 Lack of service of the notice on any member shall not affect the validity of a meeting.
- 4.9 Board meetings shall be held in public. A public notice of the time and place of the meeting shall be provided at least three clear days before the meeting is held. The notice and the meeting papers shall also be placed on the Board's website. The meeting papers will include the minutes of committee meetings which the relevant committee has approved. The exception is that the meeting papers will not include the minutes of the Remuneration Committee. The Board may determine its own approach for committees to inform it of business which has been discussed in committee meetings for which the final minutes are not yet available. For items of

business which the Board will consider in private session (see paragraph 5.22), only the Board members will normally receive the meeting papers for those items, unless the person presiding agrees that others may receive them.

5. Conduct of Meetings

Authority of the Person Presiding at a Board Meeting

- 5.1 The Chair shall preside at every meeting of the Board. The Vice-Chair shall preside if the Chair is absent. If both the Chair and Vice Chair are absent, the members present at the meeting shall choose a Board member who is not an employee of a Board to preside.
- 5.2 The duty of the person presiding at a meeting of the Board or one of its committees is to ensure that the Standing Orders or the committee's terms of reference are observed, to preserve order, to ensure fairness between members, and to determine all questions of order and competence. The ruling of the person presiding shall be final and shall not be open to question or discussion.
- 5.3 The person presiding may direct that the meeting can be conducted in any way that allows members to participate, regardless of where they are physically located, e.g. video-conferencing, teleconferencing. For the avoidance of doubt, those members using such facilities will be regarded as present at the meeting.
- 5.4 In the event that any member who disregards the authority of the person presiding, obstructs the meeting, or conducts himself/herself inappropriately the person presiding may suspend the member for the remainder of the meeting. If a person so suspended refuses to leave when required by the person presiding to do so, the person presiding will adjourn the meeting in line with paragraph 5.12. For paragraphs 5.5 to 5.20, reference to 'Chair' means the person who is presiding the meeting, as determined by paragraph 5.1.

Quorum

- 5.5 The Board will be deemed to meet only when there are present, and entitled to vote, a quorum of at least one third of the whole number of members, including at least two members who are not employees of a Board. The quorum for committees will be set out in their terms of reference, however it can never be less than two Board members.
- 5.6 In determining whether or not a quorum is present the Chair must consider the effect of any declared interests.
- 5.7 If a member, or an associate of the member, has any pecuniary or other interest, direct or indirect, in any contract, proposed contract or other matter under consideration by the Board or a committee, the member should declare that interest at the start of the meeting. This applies whether or not that interest is already recorded in the Board Members' Register of Interests. Following such a declaration, the member shall be excluded from the Board or committee meeting

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when the item is under consideration, and should not be counted as participating in that meeting for quorum or voting purposes.

- 5.8 Paragraph 5.7 will not apply where a member's, or an associate of theirs', interest in any company, body or person is so remote or insignificant that it cannot reasonably be regarded as likely to affect any influence in the consideration or discussion of any question with respect to that contract or matter. In March 2015, the Standards Commission granted a dispensation to NHS Board members who are also voting members of integration joint boards. The effect is that those members do not need to declare as an interest that they are a member of an integration joint board when taking part in discussions of general health & social care issues. However members still have to declare other interests as required by Section 5 of the Board Members' Code of Conduct.
- 5.9 If a question arises at a Board meeting as to the right of a member to participate in the meeting (or part of the meeting) for voting or quorum purposes, the question may, before the conclusion of the meeting be referred to the Chair. The Chair's ruling in relation to any member other than the Chair is to be final and conclusive. If a question arises with regard to the participation of the Chair in the meeting (or part of the meeting) for voting or quorum purposes, the question is to be decided by the members at that meeting. For this latter purpose, the Chair is not to be counted for quorum or voting purposes.
- 5.10 Paragraphs 5.6-5.9 shall equally apply to members of any Board committees, whether or not they are also members of the Board, e.g. stakeholder representatives.
- 5.11 When a quorum is not present, the only actions that can be taken are to either adjourn to another time or abandon the meeting altogether and call another one. The quorum should be monitored throughout the conduct of the meeting in the event that a member leaves during a meeting, with no intention of returning. The Chair may set a time limit to permit the quorum to be achieved before electing to adjourn, abandon or bring a meeting that has started to a close.

Adjournment

- 5.12 If it is necessary or expedient to do so for any reason (including disorderly conduct or other misbehaviour at a meeting), a meeting may be adjourned to another day, time and place. A meeting of the Board, or of a committee of the Board, may be adjourned by the Chair until such day, time and place as the Chair may specify.

Business of the Meeting

The Agenda

- 5.13 If a member wishes to add an item of business which is not in the notice of the meeting, he or she must make a request to the Chair ideally in advance of the day of the meeting and certainly before the start of the meeting. The Chair will determine whether the matter is urgent and accordingly whether it may be discussed at the meeting.

5.14 The Chair may change the running order of items for discussion on the agenda at the meeting. Please also refer to paragraph 4.2.

Decision-Making

- 5.15 The Chair may invite the lead for any item to introduce the item before inviting contributions from members. Members should indicate to the Chair if they wish to contribute, and the Chair will invite all who do so to contribute in turn. Members are expected to question and challenge proposals constructively and carefully to reach and articulate a considered view on the suitability of proposals.
- 5.16 The Chair will consider the discussion, and whether or not a consensus has been reached. Where the Chair concludes that consensus has been reached, then the Chair will normally end the discussion of an item by inviting agreement to the outcomes from the discussion and the resulting decisions of the Board.
- 5.17 As part of the process of stating the resulting decisions of the Board, the Chair may propose an adaptation of what may have been recommended to the Board in the accompanying report, to reflect the outcome of the discussion.
- 5.18 The Board may reach consensus on an item of business without taking a formal vote, and this will be normally what happens where consensus has been reached.
- 5.19 Where the Chair concludes that there is not a consensus on the Board's position on the item and/ or what it wishes to do, then the Chair will put the decision to a vote. If at least two Board members ask for a decision to be put to a vote, then the Chair will do so. Before putting any decision to vote, the Chair will summarise the outcome of the discussion and the proposal(s) for the members to vote on.
- 5.20 Where a vote is taken, the decision shall be determined by a majority of votes of the members present and voting on the question. In the case of an equality of votes, the Chair shall have a second or casting vote. The Chair may determine the method for taking the vote, which may be by a show of hands, or by ballot, or any other method the Chair determines.
- 5.21 While the meeting is in public the Board may not exclude members of the public and the press (for the purpose of reporting the proceedings) from attending the meeting.

Board Meeting in Private Session

- 5.22 The Board may agree to meet in private in order to consider certain items of business. The Board may decide to meet in private on the following grounds:
- The Board is still in the process of developing proposals or its position on certain matters, and needs time for private deliberation.
 - The business relates to the commercial interests of any person and confidentiality is required, e.g. when there is an ongoing tendering process or contract negotiation.

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- The business necessarily involves reference to personal information, and requires to be discussed in private in order to uphold the Data Protection Principles.
- The Board is otherwise legally obliged to respect the confidentiality of the information being discussed.

5.23 The minutes of the meeting will reflect when the Board has resolved to meet in private.

Minutes

5.24 The names of members present at a meeting of the Board, or of a committee of the Board, shall be recorded in the minute of the meeting. The names of other persons in attendance shall also be recorded.

5.25 The Board's Head of Corporate Governance (or his/her authorised nominee) shall prepare the minutes of meetings of the Board and its committees. The Board or the committee shall review the draft minutes at the following meeting. The person presiding at that meeting shall sign the approved minute.

6 Matters Reserved for the Board

Introduction

6.1 The Scottish Government retains the authority to approve certain items of business. There are other items of the business which can only be approved at an NHS Board meeting, due to either Scottish Government directions or a Board decision in the interests of good governance practice.

6.2 This section summarises the matters reserved to the Board:

- a) Standing Orders
- b) The establishment and terms of reference of all its committees, and appointment of committee members
- c) Organisational Values
- d) The strategies for all the functions that it has planning responsibility for, subject to any provisions for major service change which require Ministerial approval.
- e) The Annual Operational Plan for submission to the Scottish Government for its approval. (Note: The Board should consider the draft for submission in private session. Once the Scottish Government has approved the Annual Operational Plan, the Board should receive it at a public Board meeting.)
- f) Corporate objectives or corporate plans which have been created to implement its agreed strategies.
- g) Risk Management Policy.
- h) Financial plan for the forthcoming year, and the opening revenue and capital budgets.
- i) Standing Financial Instructions and a Scheme of Delegation.

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- j) Annual accounts and report. (Note: this must be considered when the Board meets in private session. In order to respect Parliamentary Privilege, the Board cannot publish the annual accounts or any information drawn from it before the accounts are laid before the Scottish Parliament. Similarly the Board cannot publish the report of the external auditors of their annual accounts in this period.)
- k) Any business case item that is beyond the scope of its delegated financial authority before it is presented to the Scottish Government for approval. The Board shall comply with the [Scottish Capital Investment Manual](#).
- l) The Board shall approve the content, format, and frequency of performance reporting to the Board.
- m) The appointment of the Board's chief internal auditor.
(Note: this applies either when the proposed chief internal auditor will be an employee of the Board, or when the chief internal auditor is engaged through a contract with an external provider. The audit committee should advise the Board on the appointment, and the Board may delegate to the audit committee oversight of the process which leads to a recommendation for appointment.)

6.3 The Board may be required by law or Scottish Government direction to approve certain items of business, e.g. the integration schemes for a local authority area.

6.4 The Board itself may resolve that other items of business be presented to it for approval.

7 Delegation of Authority by the Board

7.1 Except for the Matters Reserved for the Board, the Board may delegate authority to act on its behalf to committees, individual Board members, or other Board employees. In practice this is achieved primarily through the Board's approval of the Standing Financial Instructions and the Scheme of Delegation (click [here](#)).

7.2 The Board may delegate responsibility for certain matters to the Chair for action. In such circumstances, the Chair should inform the Board of any decision or action subsequently taken on these matters.

7.3 The Board and its officers must comply with the [NHS Scotland Property Transactions Handbook](#), and this is cross-referenced in the Scheme of Delegation.

7.4 The Board may, from time to time, request reports on any matter or may decide to reserve any particular decision for itself. The Board may withdraw any previous act of delegation to allow this.

8 Execution of Documents

8.1 Where a document requires to be authenticated under legislation or rule of law relating to the authentication of documents under the Law of Scotland, or where a document is otherwise required to be authenticated on behalf of the Board, it shall be signed by an executive member of the Board or any person duly authorised to sign under the Scheme of Delegation in accordance with the Requirements of

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Writing (Scotland) Act 1995. Before authenticating any document the person authenticating the document shall satisfy themselves that all necessary approvals in terms of the Board's procedures have been satisfied. A document executed by the Board in accordance with this paragraph shall be self-proving for the purposes of the Requirements of Writing (Scotland) Act 1995.

- 8.2 Scottish Ministers shall direct which officers of the Board can sign on their behalf in relation to the acquisition, management and disposal of land.
- 8.3 Any authorisation to sign documents granted to an officer of the Board shall terminate upon that person ceasing (for whatever reason) from being an employee of the Board, without further intimation or action by the Board.

9 Committees

- 9.1 Subject to any direction issued by Scottish Ministers, the Board shall appoint such committees (and sub-committees) as it thinks fit. NHS Scotland Board Development website will identify the committees which the Board must establish. (<https://learn.nes.nhs.scot/17367/board-development>)
- 9.2 The Board shall appoint the chairs of all committees. The Board shall approve the terms of reference and membership of the committees. The Board shall review these as and when required, and shall review the terms within 2 years of their approval if there has not been a review.
- 9.3 The Board shall appoint committee members to fill any vacancy in the membership as and when required. If a committee is required by regulation to be constituted with a particular membership, then the regulation must be followed
- 9.4 Provided there is no Scottish Government instruction to the contrary, any non-executive Board member may replace a Committee member who is also a non-executive Board member, if such a replacement is necessary to achieve the quorum of the committee.
- 9.5 The Board's Standing Orders relating to the calling and notice of Board meetings, conduct of meetings, and conduct of Board members shall also be applied to committee meetings where the committee's membership consist of or include all the Board members. Where the committee's members includes some of the Board's members, the committee's meetings shall not be held in public and the associated committee papers shall not be placed on the Board's website, unless the Board specifically elects otherwise. Generally Board members who are not members of a committee may attend a committee meeting and have access to the meeting papers. However if the committee elects to consider certain items as restricted business, then the meeting papers for those items will normally only be provided to members of that committee. The person presiding the committee meeting may agree to share the meeting papers for restricted business papers with others.
- 9.6 The Board shall approve a calendar of meeting dates for its committees. The committee chair may call a meeting any time, and shall call a meeting when requested to do so by the Board.

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- 9.7 The Board may authorise committees to co-opt members for a period up to one year, subject to the approval of both the Board and the Accountable Officer. A committee may decide this is necessary to enhance the knowledge, skills and experience within its membership to address a particular element of the committee's business. A co-opted member is one who is not a member of Ayrshire and Arran NHS Board and is not to be counted when determining the committee's quorum.

Item 3: How committee meetings must be organised

This section provides supporting guidance and must be read in conjunction with each governance committee Terms of Reference and the Board Standing Orders.

1. Board business

1.1 For ordinary meetings of the Board, the business shown on the agenda shall normally proceed in the following order:

- Business determined by the Chair to be a matter of urgency by reason of special circumstances
- Apologies for absence
- Declarations of interest
- Minute of previous meeting
- Matters arising
- Chief Executive and Chairman's Report
- Quality
- Corporate Governance
- Service
- Performance
- Decisions/Approval
- Items for Information/noting
- Any Other Competent Business (items of which due notice has been given).
- Date of Next Meeting

This is subject to review and can be amended by agreement of the Board Chair and Chief Executive.

1.2 Submission of papers

- Board papers shall be submitted by Directors when requested, or when, in the professional opinion of such an individual, a paper is required to enable compliance with any statute, regulation or Ministerial Direction, or other rule of law, or where the demands of the service under their control require.
- Papers to be submitted shall be provided to the Head of Corporate Governance in line with the Board Calendar deadlines. The Board calendar is issued to Directors annually and is available via the Board MS Teams channel.
- The Director of Finance should be consulted on all proposals with significant financial implications. No paper with significant financial implications should be presented at a meeting when this has not been done. Any observations by those Directors on matters within their professional remit shall be incorporated into the paper.
- Only those papers which require a decision to be taken by the Board, or are necessary to enable the Board to discharge its business or exercise its monitoring role, will normally be included on the agenda. It shall be delegated to the Head of Corporate Governance in conjunction with the Board Chair to make

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the final determination on whether or not an item of business should be included on an Agenda.

- All papers will be submitted in writing. Verbal reports will only be accepted in exceptional circumstances and with the prior approval of the Chair of the Board.

2. Membership of standing committees (Governance Committees):

2.1 The Membership and Qorum of each committee is set out in the Terms of Reference.

2.2 In determining the membership of Committees, the Board shall have due regard to its role, remit and accountability requirements. Certain Members may not be appointed to serve on a particular Committee as a consequence of their positions. Specific exclusions are:

Audit and Risk Committee

- the Chair of the Board
- Non-Executives who are also employees of the NHS Board (eg. Chair of Area Clinical Forum or Employee Director)

Remuneration Sub Committee

- any Executive member

2.3 The Board has the power to vary membership of Committees at any time provided:

- In any case this is not contrary to statute, regulation or Direction by Scottish Ministers;
- Each Member of the Board is afforded proper opportunity to serve on Committees

2.4 Casual vacancies occurring in any Committee shall be filled as soon as possible by the NHS Board after the vacancy takes place.

2.5 Each Committee will have a minimum number of Non-Executive Members which includes those Non-Executives who are Members due to the office they hold.

| Committee | Non-Execs | Quorum |
|----------------------------------|-----------|--------|
| Audit and Risk Committee | 6 | 3 |
| Healthcare Governance Committee | 6 | 3 |
| Staff Governance Committee | 6 | 3 |
| Information Governance Committee | 5 | 3 |
| Performance Governance Committee | 6 | 3 |
| Integrated Governance Committee | 6 | 3 |

3. Membership of committees due to Office held

3.1 Ayrshire and Arran NHS Board Chair – can opt on all Committees as required with the exception of Audit and Risk Committee

3.2 Employee Director

- Area Partnership Forum
- Staff Governance Committee
- Performance Governance Committee
- Remuneration Sub-committee
- Endowment Sub-committee

3.3 Chair of Area Clinical Forum

- Healthcare Governance Committee
- Staff Governance Committee

4. Functioning of committee

4.1 An Executive Member shall be appointed as an ex-officio member to support the functioning of each Committee.

4.2 An Executive Member or another specified Lead Officer shall be appointed as an ex-officio member to support the functioning of any sub-committees agreed.

4.3 Where the functions of the Board are being carried out by Committees, the membership, including those co-opted members who are not Members of the Board, is deemed to be acting on behalf of the Board.

4.4 During intervals between meetings of Committees or Sub-Committees, the Chair of a Committee shall, in conjunction with the Chief Executive and the Executive Director or Lead Officer have powers to deal with matters of urgency which fall within the Terms of Reference of the Committee and require a decision which would normally be taken by the Committee. All decisions so taken shall be reported to the next full meeting of the relevant Committee or Sub-Committee. It shall be for the Chair of the Committee or Sub-Committee, in consultation with the Chief Executive and Executive Director or Lead Officer concerned, to determine whether a matter is urgent in terms of this Standing Order.

5. Delegation

5.1 Each Committee shall have the delegated authority to determine any matter within its role and function as set out in the Terms of Reference.

5.2 Committees shall conduct their business within their role and function, and in exercising their authority, shall do so in accordance with the following provisions. However in relation to any matter either not specifically referred to in the role and function, or in this Standing Order, it shall be competent for the Committee, whose remit the matter most closely resembles, to consider such a matter and to make appropriate recommendations to the Board.

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- 5.3 Committees must conduct all business in accordance with NHS Ayrshire & Arran policies and the Code of Corporate Governance.
- 5.4 The Board may at any time vary, add to, restrict or recall any reference or delegation to any Committee. Specific direction by the Board to the remit of a Committee shall take precedence over the terms of any provision in the role and function
- 5.5 If a matter is of common or joint interest to a number of Committees, and is a delegated matter, no action shall be taken until all Committees have considered the matter. Where appropriate this would be addressed via the Integrated Governance Committee.
- 5.6 In the event of a disagreement between Committees in respect of any such proposal or recommendation, which falls within the delegated authority of one Committee, the decision of that Committee shall prevail. Where matters cross over various committees the Integrated Governance Committee has a remit to discuss matters and make a final agreement in accordance with its Terms of Reference. If required any matter can be remitted for discussion by the NHS Board in agreement with the Board Chair.

6. Integration Joint Boards

The Integration Joint Boards within North, East and South Ayrshire were established as legal entities with effect from 1 April 2015 and agreed within the Integration Scheme is:

- The NHS Board must nominate four members to Ayrshire IJBs.
- These nominations should be Non executive Directors but there is scope to nominate a maximum of two Executive Directors where this is not possible.
- One of the Non executive members shall serve as the Chair or Vice Chair of the IJB.
- The period of office of voting members will be for a period not exceeding three years.
- A voting member appointed by the NHS Board ceases to be a voting member of the Integration Joint Board if they cease to be a non-executive Director of the NHS Board.
- The Chairperson and Vice Chairperson will be drawn from the NHS Board and the Council voting members of the Integration Joint Board. If a Council member is to serve as Chairperson then the Vice Chairperson will be a member nominated by the NHS Board and vice versa.
- The appointment to Chairperson and Vice Chairperson is time-limited to a period not exceeding three years and carried out on a rotational basis. The term of office of the first Chairperson and Vice Chairperson will be for the period to the local government elections in 2017, thereafter the term of office of the Chairperson and Vice Chairperson will be for a period of two years.

Item 4: Governance Committees role and function

1. Audit and Risk Committee

The Audit and Risk Committee shall have a remit that includes:

- Gaining assurance that all risk and change in risk is being monitored
- Review of Audit Plans for recommendation to the NHS Board for approval
- Monitoring the internal and external audit programme
- Monitoring financial risk management to the Audit and Risk Committee
- Keeping under review and recommending any changes to bank account signatories
- Responsibility for overall audit arrangements
- Overseeing the Board's Internal Control Systems and financial risk
- Keeping under review the role, function and performance of the Board's Internal Audit service
- Keeping under review the Board's External Audit arrangements
- Keeping under review and monitoring the Board's Standing Financial Instructions, Standing Orders and Counter Fraud arrangements.

2. Healthcare Governance Committee

The Healthcare Governance Committee shall have a remit that addresses the wider Quality Strategy including:

- Quality Improvement
- Safety
- Person-centred
- Clinical Effectiveness
- The Board's screening programmes and any health protection matters
- Care home governance
- Health and care in Health and Social Care Partnerships
- To review the strategic risks aligned to the Committee and to provide assurance to the NHS Board in respect of the risks that fall within the Committee specific remit.

3. Staff Governance Committee

The Staff Governance Committee shall have a remit that includes:

- Agreeing, monitoring and reviewing objectives to improve the standards of Staff Governance
- Ensuring appropriate structures and processes are in place in relation to Staff Governance matters to provide assurance to the Board
- Overseeing the development, delivery and monitoring of the Staff Governance elements of the Boards delivery plan
- Exercising delegated authority on behalf of Ayrshire and Arran NHS Board for matters relevant to the Committee's role and remit

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- Ensuring there is adequate communications between the Committee Partnership arrangements and staff to support delivery of the Staff Governance Standards
- To review the strategic risks aligned to the Committee and to provide assurance to the NHS Board in respect of the risks that fall within the Committee specific remit.

4. Information Governance Committee

The Information Governance Committee shall have a remit that includes:

- Caldicott Principles
- Freedom of Information
- NHS Scotland Code of Practice on Confidentiality
- Data Protection
- Information Assurance
- Information Security
- Data Sharing
- To review the strategic risks aligned to the Committee and to provide assurance to the NHS Board in respect of the risks that fall within the Committee specific remit.

5. Performance Governance Committee

The Performance Committee shall have a remit that includes:

- Annual Operational Plan performance targets
- Investment Scrutiny
- Benefits realisation
- Post Project Evaluation
- Finance and Service Performance
- To review the strategic risks aligned to the Committee and to provide assurance to the NHS Board in respect of the risks that fall within the Committee specific remit.

6. Integrated Governance Committee

The Integrated Governance Committee shall have a remit that includes:

- Keeping under review governance issues that have application across Ayrshire and Arran
- Keeping under review the Board's Corporate Governance arrangements
- Discussing specific themes and issues relating to governance and risk that have implications for the Board's Governance Committees.
- Monitoring delivery and seeking assurance of progress for agreed specific programmes of work across health and social care.
- To review the strategic risks aligned to the Committee and to provide assurance to the NHS Board in respect of the risks that fall within the Committee specific remit.

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7. Health and Social Care Partnerships Health and Care Governance Groups

The Health and Care Governance Groups within each of the Health and Social Care Partnerships shall have a remit that will:

- Provide assurance to the IJB on the quality of services delivered by the partnership.
- To support the governance of public protection within the Partnership, including child, adult protection and MAPPA.
- To oversee the processes within the Partnership to ensure that appropriate action is taken in response to adverse events, scrutiny reports/action plans, safety action notices, feedback, complaints and litigation, and that examples of good practice and lessons learned are disseminated within and across the Partnership(s) and beyond as appropriate.
- To monitor the Partnerships Risk Register from a health and care governance perspective and escalate to the IJB any unresolved risks that require executive action or that pose significant threat to patient care, service provision or the reputation of the Partnership.
- To ensure that mechanisms are in place for services to routinely listen, learn and develop from service user experience.
- To ensure that quality and self-evaluation mechanisms are in place to inform a culture of continuous improvement.
- To provide an annual report on Health and Care governance to the IJB and NHS Ayrshire & Arran Healthcare Governance Committee and the Cabinet of the local authority.

The Integrated Health and Care Governance Framework can be found in Section H.

Annex A – Governance Committee Terms of Reference

The Terms of Reference for each Governance Committee of the Board must be read in conjunction with the Board Standing Orders. The Terms of Reference have been approved by the NHS Board and are available on the organisations web page [Meetings and Papers - NHS Ayrshire & Arran \(nhsaaa.net\)](https://nhsaaa.net)

Governance committee of the NHS Ayrshire & Arran Board:

- Audit and Risk Committee ([click here](#))
- Healthcare Governance Committee ([click here](#))
- Information Governance Committee ([click here](#))
- Integrated Governance Committee ([click here](#))
- Performance Governance Committee ([click here](#))
- Staff Governance Committee ([click here](#))