

NHS Highland



Meeting: Highland Health and Social Care Committee
Meeting date: 2nd March 2022
Title: Committee Self-Assessment Review
Responsible Executive/Non-Executive: Louise Bussell/Ann Clark
Report Author: Ann Clark Chair

1 Purpose

This is presented to the Committee for:

- Assurance
- **Decision**

This report relates to a:

- Government policy/directive
- Legal requirement

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

- Safe
- Effective

This report relates to the following Corporate Objective(s)

Clinical and Care Excellence <ul style="list-style-type: none"> • Improving health • Keeping you safe • Innovating our care 	Partners in Care <ul style="list-style-type: none"> • Working in partnership • Listening and responding • Communicating well 	
A Great Place to Work <ul style="list-style-type: none"> • Growing talent • Leading by example • Being inclusive • Learning from experience • Improving wellbeing 	Safe and Sustainable <ul style="list-style-type: none"> • Protecting our environment • In control • Well run 	X X
Other (please explain below)		

2 Report summary

2.1 Situation

NHS Boards across the UK operate in an increasingly demanding environment. Good governance is essential in providing high quality, safe, sustainable health and social care services. Governance issues are increasing in the public sector, as is the public interest in governance problems being experienced by public bodies. Regular assessment of the effectiveness of governance arrangements within NHS Boards is a fundamental building block for improvement.

NHS Highland introduced a self-assessment of the effectiveness of the governance committees and the Board in 2021. Improvement actions relating to Highland Health and Social Care Committee were agreed at a meeting in September 2021. Due to the current 'governance light' mode the Board has agreed to undertake a simple review of current action plans rather than rerun a full self-assessment exercise for 22/23. This report advises on progress against the Action Plan at Appendix 1 as agreed in September 2021 and seeks agreement to the updated Plan, attached as appendix 2, for 22/23.

2.2 Background

NHS Boards are expected to work towards the Blueprint for Good Governance and to regularly assess the effectiveness of their governance arrangements. A self-assessment of effectiveness of governance committees in 2021 highlighted a number of common themes, some of which were also raised in an Internal Audit report on the Board Assurance Framework. These themes included the need for greater clarity on the assurance role of Committees and a greater focus in committee reports on links to Board objectives and risks.

All Board Committees developed their own action plan to support improvements on the basis of their individual self-assessment. Board wide actions are also being implemented to address common themes, including improvements to Board and Committee report formats.

2.3 Assessment

The self-assessment carried out in June 2021 included a survey of all Committee members, presentation and discussion of results at a Development Session followed by approval of the Action Plan at Committee in September. Strengths and Weaknesses were summarised as follows:

STRENGTHS	WEAKNESSES
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<ul style="list-style-type: none"> • Enthusiastic membership willing to add value • Oversight and scrutiny • Diversity of membership • Professional and focused Chair • Communication to discuss topics 	<ul style="list-style-type: none"> • Lack of clarity of role – scrutiny of what/whom • Time – meetings rushed • Diversity of membership – different knowledge levels • Some stakeholder roles vacant for long time • Too many topics in the timeframe • Scrutiny around reports and their content
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Three priorities for improvement actions were proposed:

- Developing the understanding/knowledge of Committee members
- Committee Reports – purpose/evidence base/assurance levels
- Timing/Agendas

A number of Board wide and Committee specific actions were included in an Action Plan. Operational pressures arising from the Third Wave of the pandemic has necessarily limited implementation of the Plan. Nonetheless some progress has been made and this is summarised within Appendix 1, highlighted in red.

As agreed by the Board in January 2022, Ann Clark and Louise Bussell have undertaken a review of the 2021 self-assessment exercise, in consultation with the Vice Chair and SLT. No new issues were identified and a revised Action Plan is proposed at Appendix 2 with proposed new actions highlighted in red.

2.4 Proposed level of Assurance

This report proposes the following level of assurance:

Substantial	<input type="checkbox"/>	Moderate	<input checked="" type="checkbox"/>
Limited	<input type="checkbox"/>	None	<input type="checkbox"/>

3 Assessment

3.3.1 Quality/ Patient Care

The Health and Social Care Committee has responsibility for a wide range of community and hospital services and a budget of approx. £400 million. An effective Committee will make better decisions leading to improved outcomes for those receiving care and their families.

3.3.2 Workforce

Two places for staff side representatives are included within the Committee's membership. These have been vacant for some time despite on-going efforts to fill the positions. Operational pressures are impacting on capacity of staff to get involved in representing staff side.

3.3.3 Financial

There are no direct financial consequences of this paper. Good governance contributes to the efficient and effective use of resources within the Committee's control.

3.3.4 Risk Assessment/Management

An effective Committee will be better placed to identify risks and opportunities and scrutinise proposed mitigating action by management.

3.3.5 Equality and Diversity, including health inequalities

The Committee has a range of stakeholders represented in its membership, including users of services and their carers. Agreement has been reached with Highland Third Sector Interface regarding Third Sector membership for the coming year.

3.3.6 Other impacts

N/A

3.3.7 Communication, involvement, engagement and consultation

All members of the Committee received an invitation to complete the original self-assessment questionnaire and to the Development Session discussion.

3.3.8 Route to the Meeting

Discussion between Chief Officer, Chair and Vice Chair. Revised Action Plan drafted by Chair.

4 Recommendation

The Committee are recommended to take moderate assurance that the Action Plan for 21/22 has been implemented as operational pressures have allowed.

A Decision is sought as follows:

- **Decision** – Agreement to the updated Action Plan at Appendix 2

4.1 List of appendices

The following appendices are included with this report:

- Appendix No 1 Action Plan 21/22
- Appendix No 2 Action Plan 22/23

APPENDIX ONE: 21/22 COMMITTEE SELF ASSESSMENT ACTION PLAN

	Development Area	Intervention	Owner	Timeframe	Status
01	Improve awareness and understanding of assurance and the quality of assurance reports.	<p>Develop an effective assurance training and awareness plan to be delivered across the year to non-executives, executives and senior management.</p> <p>Incorporate training session on assurance to HHSCC in a Development Session</p>	<p>RD/RF/FH</p> <p>AC/LB</p>	<p><i>December 21</i></p> <p><i>Likely June 22 for Committee Development Session</i></p>	<p>Some information included in lay members inductions</p>
02	<p>Consider implementing a “level of assurance” approach SBARs to clarify the</p> <ul style="list-style-type: none"> • purpose of the report • corporate objectives • risks it is addressing • level of assurance management provides 	<p>Develop a proposal for a revised SBAR and committee agenda / minuting process to cover level of assurance approach and present for review and agreement.</p> <p>Use revised SBAR, agenda and minuting process</p>	<p>SC/LB</p>	<p><i>When available</i></p>	<p>Complete New SBAR now in use. Level of assurance circulated to Committee in March</p>
03	Quality of reports	<p>-Implement revised SBAR and assurance approach</p> <p>-Agenda setting meetings to agree clear instructions for report writers on purpose/scope of reports</p> <p>-Agenda setting meetings to agree priority reports for review by Chair and Chief Officer</p>	<p>SC/LB</p> <p>AC/LB/SC</p> <p>AC/LB/SC</p>	<p>When available</p> <p>Immediate</p> <p>Immediate</p>	<p>Commenced and on-going</p>

04	Knowledge and Understanding of Committee Members	<p>Agree an annual programme of Development Sessions as part of Committee Workplan</p> <p>August Development Session to incorporate session on current Integration Agreement (IA)</p> <p>Session on Assurance to be arranged as part of Board wide programme as at 01 above</p> <p>Develop induction session for all new members</p>	<p>AC/LB</p> <p>LB</p> <p>RD/AC/LB</p> <p>AC/RD/SC</p>	<p>09/21 then annually in March/April</p> <p>24/08/21</p> <p>Tbc Likely June 22</p> <p>11/21</p>	<p>Development Sessions Paused until April 22</p> <p>Development session took place focussing on IA and NCS</p> <p>Lay members induction complete</p> <p>New induction for Board members introduced</p>
05	Timing/Agendas	<p>Directorate Leadership Team to draft Annual Workplan for consideration by Agenda setting meeting and then full Committee</p> <p>Development Sessions to be moved to month in between Committees</p> <p>Six meetings a year timetabled</p>	<p>LB</p> <p>AC/SC</p> <p>RD/SC/AC</p>	<p>For March/April 22 Meeting</p> <p>Immediate</p> <p>Year 22/23</p>	<p>22/23 plan drafted by Chair due to operational pressures, & considered by SLT.</p> <p>Development Sessions now moved</p>

APPENDIX TWO: COMMITTEE SELF ASSESSMENT ACTION PLAN 22/23

	Development Area	Intervention	Owner	Timeframe	Status
01	Improve awareness and understanding of assurance and the quality of assurance reports.	Incorporate training session on assurance to HHSCC in a Development Session	RD/AC/LB	June 2022	
02	Implement a “level of assurance” approach. SBARs to clarify the <ul style="list-style-type: none"> • purpose of the report • corporate objectives • risks it is addressing • level of assurance management provides 	Use revised SBAR, agenda and minuting process <p style="color: red;">Circulate Level of Assurance Framework to Committee Members with March papers</p> <p style="color: red;">Chair to summarise purpose and ‘ask’ of Committee at start of each Agenda item and restate ‘ask’ at end of discussion.</p>	SC/LB SC AC	On-going March 2022 On-going	
03	Quality of reports	Implement revised SBAR and assurance approach Agenda setting meetings to agree clear instructions for report writers on purpose/scope of reports Agenda setting meetings to agree priority reports for review by Chair and Chief Officer	SC/LB AC/LB/SC AC/LB/SC	On-going On-going On-going	Commenced

		Timetable for report submissions to allow for review of priority items by Chair and CO	SC/LB/AC	On-going	
04	Knowledge and Understanding of Committee Members	Agree an annual programme of Development Sessions as part of Committee Work plan	AC/LB	Annually in March	Development Sessions Paused until April 22
05	Timing/Agendas	Timing for agenda items to be discussed at agenda setting meetings Target times to be included in Agendas	AC/LB/SC SC	Immediate and On-going Immediate and on-going	

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