



Meeting:	NHS Highland Board
Meeting date:	28 January 2025
Title:	Implementing the Blueprint for Good Governance Improvement Plan
Responsible Executive/Non-Executive:	Sarah Compton Bishop, Board Chair
Report Author:	Ruth Daly, Board Secretary

1 Purpose

This is presented to the Board for:

- Assurance

This report relates to a:

- Local policy

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

- Effective

This report relates to the following Strategic Outcome(s)

Start Well		Thrive Well		Stay Well		Anchor Well	
Grow Well		Listen Well		Nurture Well		Plan Well	X
Care Well		Live Well		Respond Well	X	Treat Well	
Journey Well		Age Well		End Well		Value Well	
Perform well	X	Progress well	X				

2 Report summary

2.1 Situation

This report provides the Board with a six-month update on progress on delivery of the actions included in the Board’s Blueprint for Good Governance Improvement Plan.

2.2 Background

Scottish Government’s Blueprint for Good Governance v.2 (DL (2022) 38) was issued in December 2022. NHS Highland Board carried out a self-assessment against the provisions of the Blueprint and agreed an Improvement Plan in July 2023. Since this time, governance committees have maintained informal oversight of progress in delivering the improvement actions and the Board has received six monthly progress updates.

2.3 Assessment

While the primary implementation phase of the Improvement Plan was from July 2023 to July 2024, it was noted that some actions would extend beyond this timescale. Governance Committees considered progress on the Improvement Plan in November 2024.

The key themes emerging from the self-assessment exercise were: Performance, Finance and Best Value, Risk, Culture, Quality, Board Members development, SBAR development, and Engagement.

The plan contains 17 actions in total of which 12 are now deemed complete. The remaining five actions relate specifically to quality of care, and risk appetite and management. The activities identified to bring these actions to a closure will extend beyond the lifespan of the current Improvement Plan.

Quality of Care

Clinical Governance and Highland Health and Social Care Committees have maintained informal oversight of the actions relating to quality of care. Feedback from a joint ACF and Board session in April 2024 has helped shape this workstream. Work is now underway to review how the organisation is working prior to introducing a quality framework through a measured and planned approach. Patient feedback and experience will be included in the framework dataset and the work is being benchmarked against the approaches other Boards have taken.

Risk appetite and management

Audit Committee maintains informal oversight of these outstanding actions. The review and revision of organisational controls in line with the risk appetite and cascading associated organisational training will be ongoing activity that will extend beyond the life time of the current plan.

Appendix A to this report is the full Improvement Plan recording all progress information.

Future evaluation against the Blueprint for Good Governance

The Blueprint sets out three levels of Board governance evaluation according to the following:

- Appraisal of Board Members' individual performance
- Self-assessment of the Board's effectiveness
- External review of the organisation's governance arrangement

Board Self-Assessment

Scottish Government have advised they will contact Boards early in 2025 regarding the timing of the next self-evaluation exercise. The Blueprint for Good Governance states that NHS Boards should review their effectiveness and identify any new and emerging issues and concerns on an annual basis.

Ongoing consideration is given to the effectiveness of governance arrangements by the Executive team, Board Chair, Vice Chair and Committee Chairs. Recognising increasing pressures on the organisation and staff, and the need to efficiently scrutinise large quantities of information, the concept of 'Frugal Governance' offers an approach which supports the reduction of duplication and more efficient use of committee time. Work is currently underway to identify how this concept can be applied in NHS Highland to enable delivery of our Governance Improvements Plan and uphold the standards as described in the Blueprint for Good Governance.

External Review

To enhance and validate the Boards' self-assessment, an external evaluation of all NHS Boards' corporate governance arrangements will be undertaken in due course. Details of this will be shared with the Board once known.

2.4 Proposed level of Assurance

This report proposes the following level of assurance:

Substantial	<div><div>x</div></div>	Moderate	<div><div></div></div>
Limited	<div><div></div></div>	None	<div><div></div></div>

A substantial level of assurance is proposed on two counts: the Improvement Plan’s progress sits within a robust framework of control to ensure that its improvement actions and objectives can be achieved, and significant progress has been evidenced against the agreed actions.

3 Impact Analysis

3.1 Quality/ Patient Care

3.2 Workforce

3.3 Financial

The provision of robust governance arrangements is key to NHS Highland delivering on its key objectives and to improving workforce, clinical and financial governance.

3.4 Risk Assessment/Management

A risk assessment has not been carried out for this paper.

3.5 Data Protection

N/A

3.6 Equality and Diversity, including health inequalities

There are no equality or diversity implications arising from this paper. However, the proposals will enable a more diverse range of skills and experience to be developed within the membership of the Board.

3.7 Other impacts

No other impacts

3.8 Communication, involvement, engagement and consultation

The proposals in the recommendation have been discussed and agreed with all the Board members.

3.9 Route to the Meeting

The subject of this report has built on the report presented to the Board in July 2023 and elements of the appendix have been considered by Governance Committees during November and December 2023 to oversee progress. The report has been considered by the Board Chair, Vice Chair, Chief Executive, Deputy Chief Executive, and the Board Secretary.

4 Recommendation

The Board is asked to:

- (a) take substantial assurance from the report and Appendix A,
- (b) **note** that informal oversight of progress of delivery of the improvement plan will be undertaken by the Chairs Group and Governance Committees in May 2025, and
- (c) **note** that a further progress update will be submitted to the Board in July 2025.

4.1 List of appendices

- Appendix A – Excel Blueprint for Good Governance Improvement Plan 2023