



NOT PROTECTIVELY MARKED

Public Board Meeting

**July 2019
Item No 11**

THIS PAPER IS FOR DISCUSSION

**GOOD GOVERNANCE - BLUEPRINT SELF ASSESSMENT IMPROVEMENT
ACTION PLAN**

Lead Director Author	Tom Steele, Chair Lindsey Ralph, Board Secretary
Action required	The Board is asked:- 1. Discuss progress against the Good Governance Improvement Action Plan 2019/20.
Key points	The Good Governance report and improvement action plan was approved by the Board on 24 April 2019 and submitted to the Cabinet Secretary for Health and Sport on 26 April 2019. The action plan has been updated with progress against each action with a RAG status added to demonstrate the current status of each action.
Timing	The Board agreed to monitor progress against the action plan at each Board meeting.
Link to Corporate Objectives	Good governance is essential to provide high quality, safe, sustainable services through robust, accountable and transparent corporate governance systems.
Equality and Diversity	Not required.



SCOTTISH AMBULANCE SERVICE BOARD

BLUEPRINT FOR GOOD GOVERNANCE REPORT – 2018/19 SELF ASSESSMENT IMPROVEMENT ACTION PLAN

SECTION 1: PURPOSE

To enhance corporate governance within the Service and ensure delivery of a consistent, effective and transparent governance approach.

SECTION 2: RECOMMENDATIONS

The Board is asked to discuss and monitor progress of the improvement action plan.

SECTION 3: BACKGROUND

The Good Governance report and improvement action plan was approved by the Board on 24 April 2019 and submitted to the Cabinet Secretary for Health and Sport on 26 April 2019.

The Board agreed that the actions to strengthen governance arrangements would be monitored at each Board meeting under the leadership of the Chair. The Board will also continue to seek out best practice and implement the recommendations and templates for a Once for Scotland approach, adopting best practice, as these emerge from the National Corporate Governance Group leading on this work.

SECTION 4: DISCUSSION

The status of actions are annotated in the RAG status update as follows:

- Task completed
- No identified risk to action target completion date
- Target completion date extended and rationale provided for movement
- Target completion date exceeded with further explanation required and/or to be provided at meeting

Doc: Board Governance Action Plan	Page 1	Author: Board Secretary
Date: 2019-07-31	Version 3	Review Date: bi monthly

IMPROVEMENT ACTION PLAN UPDATE – JULY 2019					APPENDIX 1
No	Area for Improvement	Recommendations and Benefits	Lead	Status	Timeline
1	Setting Direction	Schedule Board development sessions as part of the 2030 strategy development phase, to allow time for Board members to explore more widely, options for future solutions.	Board Secretary	This is a standing item on Board Development agendas for 2019/20.	April 2019
2	Setting Direction	Agree the next phase of the Board Engagement Strategy to encourage broader discussion with a wider range of stakeholders to develop Board understanding of our changing context.	Chair		December 2019
3	Setting Direction	Build on our Board Performance reporting to focus on outcome measures. Agree how we can better use data for intelligence and reporting.	Chair and Chief Executive		September 2019
4	Holding to Account	Allocate a Board Development Session in the 2019/20 cycle for discussion on what questions Board members should be asking to ensure effective scrutiny and supportive challenge.	Board Secretary	Board Development session allocated – October 2019	In 2019/20 Schedule
5	Holding to Account	Update and disseminate Board paper guidelines to consider the best and consistent use of; Executive Summary, “discussion” and “noting” on papers to ensure delivery of intended actions and reduced paper length in line with core governance elements.	Board Secretary	Model templates are being developed for a Once for Scotland approach adopting best practice. Board Secretary has been engaged in this process.	September 2019

IMPROVEMENT ACTION PLAN UPDATE – JULY 2019					APPENDIX 1
No	Area for Improvement	Recommendations and Benefits	Lead	Status	Timeline
6	Holding to Account	Review arrangements for Remuneration Committee in line with new national guidance to ensure effective operation and complete training in Performance Management and Pay for Committee Members.	Chair/ Remuneration Committee Chair	<p>Chair, Remuneration Committee Chair, Chief Executive and Director of HR and OD attended Scottish Government Remuneration Committee events in April 2019 and a meeting to discuss the learning from the events was held in May 2019.</p> <p>NHS Scotland Good Practice Performance Appraisal guide has been issued to all Remuneration Committee members.</p> <p>The Chief Executive and Directors have reviewed and agreed portfolios, deliverables and SMART objectives for 2019/20 which are aligned to the Strategy, Annual Operational Plan and Corporate Risk Register for Remuneration Committee approval.</p>	March 2020
7	Assessing & Assuring Risk	Approve the Board's risk appetite and tolerances.	Chair/Board	The Board's Risk Appetite statement was approved by the Board in May 2019 and the next steps for the risk tolerance levels were agreed.	May 2019
8	Assessing & Assuring Risk	Complete the review of Corporate Risks to reduce variability in grading, risks more tangible and assess in line with Board agreement on risk tolerance and risk appetite.	Board	<p>Risk appetite discussed by Board at its Development session on 24 April.</p> <p>CRR was approved at Board meeting on 29 May 2019 and work is progressing to set risk tolerances.</p> <p>A full review of the Corporate Risk Register is being completed and progressed through the Service's Audit Committee with an update to the Board in September 2019.</p>	June 2019

IMPROVEMENT ACTION PLAN UPDATE – JULY 2019					APPENDIX 1
No	Area for Improvement	Recommendations and Benefits	Lead	Status	Timeline
9	Assessing & Assuring Risk	Approve and monitor the implementation of the revised Risk Management strategy across the Service to spread knowledge of updated practice and ensure underpinning risk governance reporting is in place.	Audit Committee Chair/ Director of Finance & Logistics	Committee work plan to be updated to incorporate this action.	March 2020
10	Engaging Stakeholders	To ensure appropriate governance arrangements are in place to support effective collaboration in the delivery of mental health triage tools; to receive evaluation and agree next steps.	Board		March 2020
11	Engaging Stakeholders	Receive assurance on effective stakeholder engagement with Integrated Joint Boards (IJBs) and alignment of plans.	Chair and Chief Executive		March 2020
12	Engaging Stakeholders	Receive feedback on our first Scottish Citizens' Panel and the evaluation of this approach.	Board		October 2019
13	Engaging Stakeholders	Staff Governance Committee to receive a review of our approach to staff engagement and recommendations for further enhancement.	Chair of Staff Governance Committee/ Director of HR and OD/ Employee Director	Committee work plan to be updated to incorporate this review.	December 2019

IMPROVEMENT ACTION PLAN UPDATE – JULY 2019					APPENDIX 1
No	Area for Improvement	Recommendations and Benefits	Lead	Status	Timeline
14	Engaging Stakeholders	Clinical Governance Committee to receive a review of our approach to patient feedback and agree proposals for developing more systematic ways.	Non Executive Lead/Director of Care Quality and Strategic Development	Committee work plan to be updated to incorporate this review.	December 2019
15	Influencing Culture	Allocate a Board Development session to review and enhance existing arrangements for Board members to meaningfully engage with staff.	Board Secretary	Board Development session in October 2019.	In 2019/20 schedule
16	Influencing Culture	The Board, through the Staff Governance Committee, will receive updated policies that reflect 'Once for Scotland' development.	Staff Governance Committee	The Service is engaged in the Once for Scotland Workforce Policies Programme and attended regional engagement events in January and March 2019. The Service is currently providing feedback to the consultation on six core policies.	December 2019
17	Influencing Culture	Staff Governance Committee to review and provide assurance to the Board that training to support a compassionate leadership approach is delivered.	Board	Committee work plan to be updated to incorporate this review. As part of this assurance, work has commenced in response to the recommendations made in the recently published Sturrock Report.	March 2020
18	Influencing Culture	Staff Governance Committee to receive a report and update the Board on what matters to staff and proposals for progressing these.	Board	Committee work plan updated to incorporate this review.	December 2019

IMPROVEMENT ACTION PLAN UPDATE – JULY 2019					APPENDIX 1
No	Area for Improvement	Recommendations and Benefits	Lead	Status	Timeline
19	Influencing Culture	Review the format and reporting of patient experience to both the Clinical Governance Committee and Board to ensure we encourage an approach which deals with system causes and promotes learning.	Director of Care Quality & Strategic Development	Review underway by Director of Care Quality and Strategic Development.	December 2019