NHS
Greater Glasgow
and Clyde

NHS Greater Glasgow and Clyde	Paper No. 21/33
Meeting:	NHS Board
Meeting Date:	29/06/21
Title:	Implementing the Active Governance Approach in NHS Greater Glasgow and Clyde – Phase 1 Update
Sponsoring Director/Manager	Chairman
Report Author:	Head of Corporate Governance

1. Purpose

The purpose of the attached paper is to:

- Provide an update on the Implementation of the Active Governance approach in NHS Greater Glasgow and Clyde (NHS GGC)

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2. Executive Summary

The paper can be summarised as follows:

- Providing an update against the Phase One actions within the Active Governance Programme April 2021 – March 2022.

- Identifying next steps and future activities.

- Seeking approval on key aspects of Board business and providing assurance as to progress against plan.

3. Recommendations

It is recommended that the Board:

- Be assured as to the position with the Active Governance Programme - Appendix A.

- Approve the allocation of Board Members to Standing Committees and Integration Joint Boards as detailed in Appendix B.

- Be aware of the Board's Annual Cycle of Business for 2021/22 – Appendix C.

- Be aware of the allocation of Board Members to the Champion roles and approve the description of the key responsibilities as described in section 2.5.

- Approve the Terms of Reference of the Standing Committee Chairs Network and the Integration Joint Board Leads Network – Appendix D & E.

4. Response Required

This paper is presented for <u>assurance and approval.</u>

5. Impact Assessment

The impact of this paper on NHSGGC's corporate aims, approach to equality and diversity and environmental impact are assessed as follows:

- **Better Health**   <u>**Positive**</u>
- **Better Care**   <u>**Positive**</u>
- **Better Value**   <u>**Positive**</u>
- **Better Workplace**   <u>**Positive**</u>
- **Equality & Diversity** <u>**Positive**</u>
- **Environment**   <u>**Neutral**</u>

6. Engagement & Communications

The issues addressed in this paper were subject to the following engagement and communications activity:

- The issues described within the paper were approved by the Board in April 2021 with senior team engagement across the phases of implementation.

7. Governance Route

This paper has been previously considered by the following groups as part of its development:

- This paper has built on that presented to the Board in April 2021. Appendix A, '*The Active Governance Programme April 2021 to March 2022'* has been regularly considered by the Corporate Directors and also the Corporate Management Team.

8. Date Prepared & Issued

Prepared June 21 and circulated 25.06.21

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1.0 Introduction

1.1 At the Board meeting in April members received a paper describing progress with the implementation of the active governance approach in NHS Greater Glasgow and Clyde (NHS GGC). The Board approved 'The Active Governance Programme April 2021 – March 2022' to be delivered over six Phases. This paper provides an update against Phase One activities.

2.0 Background

2.1 As described previously to the Board, active governance is a key element of the implementation arrangements for the NHS Scotland Blueprint for Good Governance ('the Blueprint') issued under DL (2019) 02 on 1 February 2019.

2.2 To adopt and embed an active approach to governance and deliver good governance, NHS GGC is developing a corporate governance system that applies the active governance approach to the implementation of the NHS Scotland Blueprint for Good Governance. This requires having a cohesive corporate governance system that is specifically designed to facilitate an active approach to corporate governance at Board level. Figure one below, describes the approach.
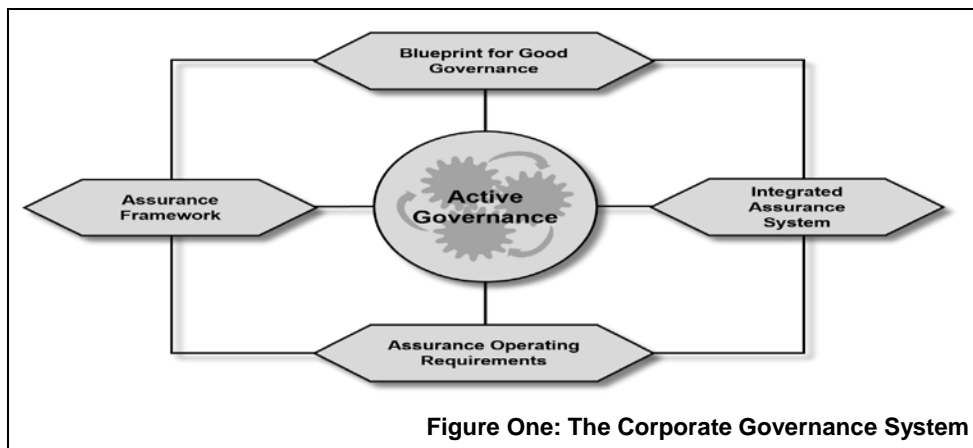

Figure One: The Corporate Governance System

2.3 The actions to develop the corporate governance system form the basis of the NHS GGC Active Governance Programme April 2021 – March 2022 – Appendix A. The implementation phases match the Board meetings from April 2021 and March 2022. Key headings are noted below.

The Corporate Governance System in NHS GGC

The Assurance Framework
The Integrated Assurance System
The Assurance Operating Requirements

Supporting Board Members
Evaluation and Review
Communication and Engagement

2.0 Active Governance Programme - Phase One Update

The following detail provides an update against the Phase One actions within the Active Governance Programme April 2021 – March 2022.

3.1 The Assurance Framework

The Assurance Framework – Phase 1 Actions	Comment
1.1.4 Approve Corporate Risks	See below
1.1.5 Allocate oversight of corporate risks to Standing Committees	See below
1.1.11 Approve the 2021/22 Remobilisation Plan	**Remobilisation Plan – For approval at June Board meeting.**

Action 1.1.4/1.1.5

3.1.2 As part of the work on the Assurance Framework, Azets were commissioned to undertake a review of the existing Corporate Risk Register (CRR). A paper summarising their work was taken to the Audit and Risk Committee (ARC) on the 22nd June. The revised and updated CRR was presented for approval as were the risks to be removed and risks downgraded to operational risk registers for approval. A summary of the process is described below.

Azets worked closely with the CMT to refresh the CRR by:

- Removing out of date risks
- De-escalating risks that are purely operational
- Re-wording and re-scoring continuing risks

- Adding new risks arising from remobilisation and other plans, and changes in the risk   environment
- Aligning all risks with corporate objectives
- Allocating governance oversight responsibility to the most appropriate governance committee.

A series of 1-to-1 meetings were held by Azets with members of the Corporate Management Team in order to support management in refreshing the Corporate Risk Register. The first phase of these discussions required all risk owners to review their respective risks on the CRR as at December 2020 and consider whether these were still relevant in the current environment. Thereafter, in the second phase meetings, Azets asked management to identify new risks emerging from e.g., COVID-19, remobilisation activity, and the Board Corporate Objectives for 2021/22.

There was regular liaison with the Director of Finance and the Head of Corporate Governance as part of this process, with regular status updates to meetings of the Corporate Management Team (CMT) and the Risk Management Steering Group (RMSG). The movement in corporate risks are noted below;

- The CRR at December 2020 included 36 corporate risks
- An internal review was undertaken by management in February 2021 to streamline the CRR and remove duplication. This process reduced the number of corporate risks to 30
- In March 2021, further meetings were held with management to review existing risks and identify risks that were either no longer applicable or de-escalated for management to an operational level. This resulted in closure of a further 14 corporate level risks, leaving 16 remaining
- In May 2021, all risk owners were asked to identify any new or emerging risks
- The Corporate Risk Register now includes 18 open risks. 19 risks are proposed for closure, and a further 4 risks have been transferred to operational risk registers.

The refreshed Corporate Risk Register, was presented to the meeting of the ARC on 22nd June. All risks have been aligned to the 2021/22 Corporate Objectives and allocated to a governance committee for monitoring and oversight.

The ARC approved the approach that the CRR will now be reviewed and approved by the relevant governance committee to ensure adequate oversight, with the decision recorded in the minutes of the meeting. For new risks added to the CRR, the relevant governance committee should review whether:
- The risks are clearly described,
- The risk scores seem appropriate,
- Proposed mitigating actions are framed in SMART terms and it is clear how they will address the risks,
- The alignment to corporate objectives is appropriate,
- The risk, and mitigating actions, will be monitored and reviewed regularly as a committee standing agenda item for risk management.

The ARC recommended that Standing Committees undertake the above process over the coming months and that the fully revised CRR should be presented to the Board for

assurance in October 2021 and annually thereafter. The ARC will maintain routine oversight and as part of their routine updates to the Board, the ARC will raise any high risks of concern.

3.2 The Integrated Assurance System

The Integrated Assurance System - Phase 1 Actions	Comments
The Audit Programme	
1.2.10 Agree the 2021/22 Internal Audit Programme with Azets	**Phase 1 agreed by ARC.**
1.2.11 Agree the 2021/22 External Audit Programme with Audit Scotland	**Agreed.**

Action 1.2.13

3.2.1 The Scottish Government has established the Advice, Assurance and Review Group (AARG) which replaces the Oversight Board structure. The first meeting took place on the 7th June, chaired by the NHS Scotland Chief Nurse, Professor Amanda Croft, who was supported by a number of Government colleagues. NHS GGC representation included Jane Grant, Chief Executive and corporate colleagues responsible for the delivery of the recommendations across the reports. The Terms of Reference were approved with a further meeting being scheduled for August 2020.

3.2.2 A comprehensive action plan to address all the recommendations, including those of the External Review led by Drs Montgomery and Frazer, has been put in place to address the issues described. A specific delivery group (Gold Command), chaired by the Chief Executive, has been established to provide updates to the Corporate Management Team and, in turn, to the appropriate governance committee of the NHS Board to ensure focused work is undertaken on all of the recommendations. The Finance Planning and Performance Committee (FP&P) will oversee delivery of the overall plan. A presentation detailing action to date was provided to the June meeting of the FP&P. As part of their routine updates to the Board, the FP&P will raise any risks to the delivery of the action plan or any areas of concern that require Board level consideration.

3.3 The Assurance Operating Requirements

The Assurance Operating Requirements – Phase 1 Actions	Comment
1.3.6 Agree Board Members' responsibilities for 2021/22	Responsibilities reviewed. **The Board is asked to approve the allocation of Board Members to Standing Committees and Integration Joint Boards as detailed in Appendix B.**

1.3.11 Introduce template for Standing Committee Chairs' reports to Board meetings	Template introduced for Standing Committee Chairs' reports as of 15th June. In addition, revised Board and committee paper templates have been introduced with clarity of purpose of papers i.e. *Approval, Assurance, Awareness.* Annual Cycles of Business templates are being introduced across all committees and the Board. **The Board is asked to be aware of the Board's Annual Cycle of Business for 2021/22 at Appendix C**
1.3.12 Agree Terms of Reference of MFT Advisory Group.	Approved at April Board – First meeting scheduled 23rd July.

3.4 Supporting Board Members

Supporting Board Members – Phase 1 Actions	Comments
2.1 Confirm Induction programme for new Board Members	Dialogue continues – key meetings in place. Buddies process under allocation.
2.2 All Board Members to consider registering on the TURAS system	Board members contacted to remind them to register on TURAS.
2.5 Review requirements & roles of Board level Champions	See below
2.6 Confirm Terms of Reference for informal networks of Board Members	See below
2.7 Arrange Board Appraisal programme for 2021/22	First phase of programme to December 2021 initiated.

Action 2.5 Board Level Champions

In addition to the responsibilities allocated to Board Members that are listed in Appendix B, some Members have agreed to take on additional responsibilities to support the effective governance of NHS GGC.

This includes acting as Board Champions for the following:

- Mental Health – Ian Ritchie
- Health Promoting Health Service – Susan Brimelow
- Staff Health Strategy – Dorothy McErlean
- Organ Donation – Ian Ritchie
- Environment & Sustainability – Allan MacLeod
- Whistleblowing – Charles Vincent
- Equality & Diversity (Disability) – Anne Marie Monaghan
- Equality & Diversity (BAME) – Amina Khan
- NHS Charities (Royal Hospital for Children) – Ian Ritchie
- NHS Charities (Beatson West of Scotland Cancer Centre) – John Matthews
- Veterans – Alan Cowan

The NHSGGC approach to active governance programme recognises that the Standing Committee Chairs also act as Champions for the Corporate Objectives and issues owned by their Committees, and that it is important that all Board Members should have an interest in issues being considered by the various Champions.

The benefits of a Board Champion include the provision of independence and advocacy on a subject matter, acting as a sponsor of an area of interest. A good example has been the benefit of having a Champion for the early stages of the Staff Health and Wellbeing Strategy to support the Director of Human Resources and Organisational Development to drive forward the Strategy, providing a critical friend and supporting the promotion of activities available to the staff. Similarly, having a Whistleblowing Champion has helped the Board launch its implementation of the Whistleblowing Standard, including supporting communications and raising the profile of the subject.

Representing the Board as a Champion includes the following key responsibilities**:**
- Promoting a continuous improvement culture and supporting the Board's commitment to being a learning organisation.

- Identifying and sharing best practice and innovative approaches with the Board and the Executive Leadership Team.

- Acting as an advocate for the relevant Board corporate objectives and supporting strategies, policies and implementation plans.

- Supporting the Executive Leadership Team in the development of the Board strategy by offering advice and guidance prior to consideration by the Board or the relevant Standing Committee.

- Contributing to the implementation of the Board strategy by actively supporting communication and engagement campaigns.

- Identifying and sharing best practice and innovative approaches with the Board and the Executive Leadership Team.

- Attending relevant committees, networks, groups and meetings to offer a Board Members' perspective and share information from the Board.

- Provide assurance and feedback to the Board and the relevant Standing Committees from their work and engagement with key stakeholders, including the public, our staff and other external parties.

- Supporting the development of new stakeholder networks and advisory groups, including those that involve people from outside NHSGGC.

- Representing the Board at appropriate regional and national events.

It is important to note that Board Champions have no operational role and are not responsible for making decisions on specific issues or cases.

The Board is asked to be aware of the allocation of Board Members to the Champion roles and approve the description of the key responsibilities as described above.

In addition to the Champions role, Board Members also provide support to the executive team in a number of operational areas. These include:
- Glasgow Centre for Population Health – John Matthews, Linda de Caestecker.
- Moving Forward Together Advisory Group – John Matthews, Ian Ritchie, Margaret Kerr, Ketki Miles, Francis Shennan, Paula Speirs.
- Pharmacy Practices Committee – John Mathews, Margaret Kerr, Charles Vincent.
- Board Appeals – Caroline Bamforth, Simon Carr, Jim Clocherty, Sheila Meechan, Ketki Miles, Anne-Marie Monaghan, Ian Ritchie, Paul Ryan, Paula Speirs, Flavia Tudoreanu, Michelle Wailes.
- Freedom of Information Reviews – Jacqueline Forbes, Francis Shennan.

The Board is asked to be aware of the additional responsibilities allocated to Board Members.

Action 2.6 Terms of Reference of Informal Networks

In addition to the existing Board Committees, NHSGGC has established two informal networks to improve the flow of information across the Board and establish closer working relationships between key members of the Board. Although these networks are not decision-making bodies and do not form part of the formal governance system, the value of networking to provide peer support, work collaboratively, share best practice, influence stakeholders, and improve engagement and communications across the health and social care system has been recognised and encouraged by the Board.

The Standing Committee Chairs Network and the Integration Leads Network provide a regular opportunity for the senior non-executive Board Members to meet informally with the

Chair and the Chief Executive and consider any issues or risks that may be of concern to the Board but have not yet surfaced through the existing reporting systems. This is seen as an important step forward in delivering the active governance approach across NHS GGC.

The introduction of the IJB Leads Networks has also provided the Board Chair and Chief Executive with an opportunity to support the Lead IJB Members and encourage and facilitate collaborative leadership and the sharing of best practice across the Health & Social Care Partnerships in Greater Glasgow & Clyde. This Network has created another space where Board Members can consider the wider context in which we operate and identify cross-system risks to the successful delivery of our services.

The Draft Terms of Reference for the Networks are attached as Appendix D and E.

The Board is asked to approve the Terms of Reference of the Standing Committee Chairs Network and the Integration Joint Board Leads Network.

3.5. Communication and Engagement

Communications and Engagement – Phase 1 Actions	Comment
4.1 Encourage public & media virtual attendance at Board meetings.	The usual notification of the Board meeting will be supplemented with promotion of the meeting on the Involving People Network. We will continue to report on the key issues discussed at the Board and this will be issued to staff, media and via the Involving People Network.

3.6 The Active Governance Programme Next Steps

3.6.1 All Phase One actions have been delivered and progress continues across all other phases of the Active Governance Programme with programme management support in place. Azets continue to undertake specifically commissioned work further progressing risk and taking forward the actions under strategic planning and commissioning and information assurance of the programme either through the audit programme or a consultancy approach.

3.6.2 The Board development seminar on July 27th 2021 will consider actions *1.2.5* Risk Appetite, *2.3* Board members attendance at a NES Active Governance Workshop and *2.8* Review of the RCPE Governance Review findings and recommendations.

3.6.3 Mrs Jen Haynes is assuming the role of Board Secretary within her post as Corporate Services Manager – Governance, and will also support Board Members individually and collectively in their induction, training and development activities. Key tasks in this respect are detailed in Appendix F. Work is underway nationally to determine specific requirements for the Board Secretary role and this will be kept under review.

3.6.4 Work is underway to revise the Standing Committee Terms of Reference in conjunction with the Scheme of Delegation ensuring alignment to the Corporate Objectives. These will be presented to forthcoming Committees for review and approval.

A further update will be provided to the Board in August.

3. Conclusions

Good progress has been made with the implementation of the NHSGGC Active Governance programme. Appendix A provides the Board with an updated version of the programme plan.

All actions allocated to Phase One have been completed to timescale and work is in progress to ensure that the Phase Two work will be completed in time for review at the August Board meeting. Work has also been commenced to ensure that where necessary a start has been made on those actions that will be delivered in Phase Three.

The appropriate level of resources to deliver the programme have been recruited. This includes external support from Azets.

Overall the risk to successful delivery of the programme and the implementation of the active governance approach in NHSGGC is considered low.

The Board is asked to be assured as to the position with the Active Governance Programme.

4. Recommendations

It is recommended that the Board:

- Be assured as to the position with the Active Governance Programme - Appendix A.

- Approve the allocation of Board Members to Standing Committees and Integration Joint Boards as detailed in Appendix B.

- Be aware of the Board's Annual Cycle of Business for 2021/22 – Appendix C.

    Be aware of the allocation of Board Members to the Champion roles and approve the description of the key responsibilities as described in section 2.5.

- Approve the Terms of Reference of the Standing Committee Chairs Network and the Integration Joint Board Leads Network – Appendix D & E.

5. Implementation

This paper presents a detailed update on the implementation over the 6 Phases described in the plan that is attached at Appendix One.

6. Evaluation

The evaluation of the success of the Active Governance Programme will be considered in Phase 6 of the programme.

7. Appendices

Appendix A - The Active Governance Programme April 2020 – March 2022

Appendix B – Board Members' Responsibilities from 1 July 2021

Appendix C – The Board's Annual Cycle of Business 2021/22

Appendix D – Terms of Reference of the Standing Chairs Network

Appendix E - Terms of Reference of the Integration Joint Board Leads Network.

Appendix F - The role of the Board Secretary

The Active Governance Programme - April 2021 to March 2022 – Update June 2021					
1	**The Corporate Governance System**	**Phase**	**Executive Lead**	**Sponsor**	**Oversight Committee**
1.1	**The Assurance Framework**				
1.1.1	Reaffirm purpose, aims & values	**Completed**	JG	JB	Board
1.1.2	Approve corporate objectives	**Completed**	JG	JB	Board
1.1.3	Allocate oversight of corporate objectives to Standing Committees	**Completed**	JG	JB	Board
1.1.4	**Approve corporate risks**	**1 ARC approved approach**	MW	AMacL	ARC
1.1.5	**Allocate oversight of corporate risks to Standing Committees**	**1 Completed**	MW	AMacL	ARC
1.1.6	Approve performance indicators	3	MW	SC	FP&P
1.1.7	Allocate oversight of performance indicators to Standing Committees	3	MW	SC	FP&P
1.1.8	Allocate oversight of strategic & commissioning plans to Standing Committees	3	JA	SC	FP&P
1.1.9	Approve operational objectives & targets for 2021/22 Remobilisation & Operating Plans	2	JG	JB	Board
1.1.10	Allocate oversight of operational objectives, operational risks & targets to Standing Committees	2	JG	JB	Board
1.1.11	**Approve 2021/22 Remobilisation Plan**	**1 For Board approval 29th June**	JG	JB	Board
1.2	**The Integrated Assurance System**				
	Strategic Planning & Commissioning				
1.2.1	Identify & map links between achievement of corporate objectives & existing strategic & commissioning plans	3	JA	SC	FP&P
1.2.2	Identify requirements for new strategic plans to support corporate objectives	3	JA	SC	FP&P
1.2.3	Ensure alignment between Health Board & IJB planning & reporting processes	3	JA	SC	FP&P
1.2.4	Confirm arrangements for Strategic Planning Groups to review IJB Strategic Commissioning Plans.	3	JA	SC	FP&P
	Risk Management				
1.2.5	Confirm the Board's risk appetite	2	MW	AMacL	Board
1.2.6	Identify current corporate risks & update corporate risk register	2	MW	AMacL	ARC
1.2.7	Identify operational risks to delivery of 2021/22 Remobilisation Plan & update operational risk registers	2	MW	AMacL	Board
	Assurance Information				
1.2.8	Define requirements for information flows to Board & Standing Committees	3	MW	SC	FP&P
1.2.9	Provide guidance on the format, presentation & timing of performance & financial reports.	3	MW	SC	FP&P
	Audit Programme				
1.2.10	**Agree the 2021/22 Internal Audit Programme with Azets**	**1 First phase agreed @ ARC**	MW	AMacL	ARC
1.2.11	**Agree the 2021/22 External Audit Programme with Audit Scotland**	**1 Agreed**	MW	AMacL	ARC
1.2.12	Commission an external review of audit arrangements	6	MW	AMacL	ARC
	NHS Scotland Performance Management Framework				
1.2.13	**Agree the ongoing arrangements for the Oversight Boards**	**1 Completed**	JG	JB	Board
1.2.14	Deliver the Oversight Board requirements	5	JG	JB	Board
1.2.15	Contribute to the CGSC review of the Performance Management Framework	6	JG	JB	Board

1.3	**The Assurance Operating Requirements**				
	Operating Instructions				
1.3.1	Review Standing Orders	2	EVH	JB	Board
1.3.2	Review Standing Financial Instructions	2	EVH	AML	ARC
1.3.3	Review Scheme of Delegation	2	EVH	JB	Board
1.3.4	Review Integration Schemes	5	EVH	JB	Board
1.3.5	Review Policy Framework	6	EVH	JB	Board
	Board & Standing Committees Operating Arrangements				
1.3.6	**Agree Board Members' responsibilities for 2021/22**	For Board approval 29th June	EVH	JB	Board
1.3.7	Confirm Terms of Reference of Standing Committees	2	EVH	JB	Board
1.3.8	Review governance arrangements for the ACF & APF	3	EVH	JB	Board
1.3.9	Review Standing Committee work programme for 2021/22	2	LX	SCC	Board
1.3.10	Review Board work programme for 2021/22	2	EVH	JB	Board
1.3.11	**Introduce template for Standing Committee Chairs' reports to Board meetings**	1 Completed – plus paper templates	EVH	JB	Board
1.3.12	**Agree Terms of Reference of MFT Advisory Group**	1 Completed	JG	JB	Board
2	**Supporting Board Members**	**Phase**	**Executive Lead**	**Sponsor**	**Oversight Committee**
2.1	**Confirm Induction programme for new Board Members**	**1 Completed**	EVH	JB	Board
2.2	**All Board Members to consider registering on the TURAS system**	**1 Completed**	EVH	JB	Board
2.3	Board Members to attend NES Active Governance Workshop	2	EVH	JB	Board
2.4	Evaluate RCPE Fellowship pathfinder initiative & determine requirement for 2022/23	5	AMCP	AC & DMcE	SGC
2.5	**Review requirements & roles of Board level Champions**	**1 Completed, to note on 29th June**	EVH	JB	Board
2.6	**Confirm Terms of Reference for informal networks of Board Members**	**1 Completed for Board approval 29th June**	EVH	JB	Board
2.7	**Arrange Board Appraisal programme for 2021/22**	**1 Underway**	EVH	JB	Board
2.8	Review RCPE Governance Review findings & recommendations	2	EVH	JB	Board
3	**Evaluation & Review**	**Phase**	**Executive Lead**	**Sponsor**	**Oversight Committee**
3.1	Prepare the Annual Governance Statement	2	EVH	AMacL	ARC
3.2	Draft the governance report for the Annual Review	4	EVH	JJ	Board
3.3	Complete the self-assessment of Board effectiveness	6	EVH	JB	Board
3.4	Confirm an external provider for the Active Governance Evaluation Report	6	EVH	AMacL	ARC
4	**Communications & Engagement**	**Phase**	**Executive Lead**	**Sponsor**	**Oversight Committee**
4.1	**Encourage public & media virtual attendance at Board meetings.**	**1 Completed**	SB	JB	Board
4.2	Develop & commence a NHSGGC Board Visiting Programme	3	SB	JB	Board

V-final / 23/4/21

Key			
	Phase 1	May/June 2021	
	Phase 2	July/August 2021	
	Phase 3	September/October 2021	
	Phase 4	November/December 2021	
	Phase 5	January/February 2022	
	Phase 6	March/April 2022	
	ARC	Audit & Risk Committee	
	FP&P	Finance, Planning and Performance Committee	
	LX	Lead Executive	
	SCC	Standing Committee Chairs	
	SGC	Staff Governance Committee	

JA	Jennifer Armstrong
JB	John Brown
SC	Simon Carr
AC	Alan Cowan
JG	Jane Grant
DMcE	Dorothy McErlean
AMacL	Allan MacLeod
EVH	Elaine Vanhegan
MW	Mark White

Appendix B

NHS Greater Glasgow and Clyde
Active Governance Programme

Board Members' Responsibilities from 1 July 2021

Board Members	Appointment	Board Standing Committees							Endowments Management Committee	Integration Joint Boards					
		Acute Services	Audit and Risk	Clinical and Care Governance	Finance, Planning and Performance	Public Health	Remuneration	Staff Governance		East Dunbartonshire	East Renfrewshire	Glasgow City	Inverclyde	Renfrewshire	West Dunbartonshire
Professor John Brown	From 01/12/15 To 30/11/23							Ex-officio	Ex-officio						
Jane Grant	Chief Executive							Ex officio	Ex-officio						
Dr Jennifer Armstrong	Medical Director	1		1 LX	1										
Professor Linda de Caestecker	Director of Public Health		1		1	1 LX									
Dr Margaret McGuire	Nurse Director	1		1	1										
Mark White	Director of Finance	1	1 LX		1 LX					1 LX					
Other Director		1 COO (LX)					1 DHROD (LX)	1 DHROD (LX)							
Dorothy McErlean	From 01/10/16 To 30/09/24				1		1	1 CC					1	1	
Professor Iain McInnes	From 01/04/21 To 31/03/25			1	1										
Chair, Area Clinical Forum	*to be confirmed by* *Cabinet Secretary*	1		1											1
Councillor Caroline Bamforth	From 14/06/17 To 30/04/22			1					1						
Councillor Jim Clocherty	From 14/06/17 To 30/04/22	1	1												
Councillor Mhairi Hunter	From 01/06/17 To 30/04/22					1	1								
Councillor Jonathan McColl	From 19/06/17 To 30/04/22		1						1						
Councillor Sheila Mechan	From 14/06/17 To 30/04/22				1			1							
Councillor Iain Nicolson	From 01/06/17 To 30/04/22					1	1								
Susan Brimelow	From 01/04/15 To 31/03/23	1	1	1 C	1							1			
Simon Carr	From 01/09/15 To 31/08/23	1 VC			1 C							1 L(VC)	1		
Alan Cowan	From 01/07/16 To 30/06/24				1		1 VC	1 CC					1 L (VC)		
Jacqueline Forbes	From 01/07/16 To 30/06/24		1		1					1 L(C)	1				
Margaret Kerr	From 01/04/19 To 31/03/23		1 C						1 VC					1	
Amina Khan	Frm 01/04/19 To 31/03/23							1	1		1	1			
Allan MacLeod	*From 01/4/15 To 31/07/21*		1						1					1 L(C) To 31/7/21
Rev John Matthews	From 01/07/16 To 30/06/24				1 VC	1 C	1		1			1		1 L (VC)	
Ketki Miles	From 01/06/20 To 31/05/24		1						1	1					
Anne-Marie Monaghan	From 01/07/16 To 30/06/24				1	1						1 L(C)	1		
Mr Ian Ritchie	From 01/07/16 To 30/06/24	1 C		1 VC	1	1 VC	1			1					
Dr Paul Ryan	From 01/06/21 To 31/05/25	1		1				1							
Francis Shennan	From 01/06/20 To 31/05/24					1		1						1	
Paula Speirs	From 01/06/20 To 31/05/24	1		1									1		
Rona Sweeney	From 01/07/16 To 30/06/24				1				1 C			1		1 L(VC)	From 1/8/21
Flavia Tudoreanu	From 01/04/19 To 31/03/23					1	1				1	1			
Charles Vincent	From 01/02/20 To 31/01/24							1				1			
Ms Michelle Wailes	From 01/06/21 To 31/05/25		1 VC											1	From 1/8/21
Total Non Executive Board Members	**26**	8	9	8	13	8	8	8	9	3	4	8	4	4	4
Total Membership including Executive Board Members	**31**	13	11	12	18	10	10	10	11	3	4	8	4	4	4
No of Meetings		6	4	4	5	3	3	5	4	6	7	6	6	5	7

Board		Board Standing Committees							Endowments Management Committee	Integration Joint Boards					
		Acute Services	Audit and Risk	Clinical and Care Governance	Finance, Planning and Performance	Public Health	Remuneration	Staff Governance		East Dunbartonshire	East Renfrewshire	Glasgow City	Inverclyde	Renfrewshire	West Dunbartonshire
Frequency	Bi-Monthly								15/04/21 (am)						
Board Members Required	30	18/05/21 (am)						11/05/21 (am)		20/05/21 (am)	12/05/21 (am)	05/05/21 (am)	17/05/21 (pm)		27/05/21 (am)
Quorum	10		01/06/21 (am) 22/06/21 (am)	08/06/21 (pm)	15/06/2021 (am)					24/06/21 (am)	23/06/21 (pm)	23/06/21 (am)	21/06/21 (am)	25/06/21 (am)	24/06/21 (pm)
Chair/NHS Lead	John Brown	20/07/21 (am)			21/07/21 (pm)	20/07/21 (pm)			13/07/21 (am)						
Vice Chairs	John Matthews Ian Ritchie				10/08/21 (am)			03/08/21 (am)			11/08/21 (am)				19/08/21 (pm)
Membership	As above	21/09/21 (am)	14/09/21 (am)	14/06/21 (pm)						16/09/21 (am)	22/09/21 (am)	22/09/21 (pm)	20/9/21 (am)*	17/09/21 (am)*	23/09/21 (pm)
2021/22 Board Dates	27/04/2021				12/10/21 (am)	13/10/21 (pm)			19/10/21 (am)						
	29/06/2021*	16/11/21 (am)				23/11/21 (am)	02/11/21 (pm)			18/11/21 (am)	24/11/21 (am)		1/11/21 (am)*	19/11/21*	25/11/21 (pm)
	17/08/2021		14/12/21 (am)	14/12/21 (pm)	07/12/21 (am)							01/12/21 (am)			
	26/10/2021*	18/01/22 (am)				19/01/22 (pm)			25/01/22 (am)	20/01/22 (am)	26/01/22 (am)*	19/01/22 (am)*	24/1/22 (am)*	28/1/22(am)*	
	21/12/2021				08/02/22 (am)			01/02/22 (am)							24/02/22 (pm)
	22/02/2022*	22/03/22 (am)	15/03/22 (pm)	01/03/22 (pm)			01/03/22 (am)		08/03/21 (am)	24/03/22 (am)	16/3/22 (am)*	23/03/22 (am)*	21/03/22 (am) *	25/3/22(am)*	24/03/22 (pm)
	* Followed by Endowments Board of Trustees														* Dates still to be finalised

2021/22 Board Seminar Dates
- 25/05/21 (am)
- 27/07/21 (all day) Development Session
- 28/09/21 (am)
- 30/11/21 (all day) Development Session
- 25/01/22 (am)
- 29/03/21 (all day) Development Session

Other Attendees

DOP			DOP	HHI	DHROD	DHROD
DHROD			CO Acute	2 CPHM		
CO Acute			DEF	2 IJB COs		
DEF			DHROD	GCPH Director		
				Health Scotland		

Key

C = Chair	DHROD = Director of Human Resources and Organisational Development
CC = Co Chair	DEF = Director of Estates and Facilities
VC = Vice Chair	DCPE = Director of Communications and Public Engagement
L = Lead	CO Acute = Chief Officer Acute
LX = Lead Executive	IJB CO = IJB Chief Officer
CE = Chief Executive	HHI = Head of Health Improvement
MD = Medical Director	CPHM = Consultant in Public Health Medicine
ND = Nurse Director	
DOF = Director of Finance	
DPH = Director of Public Health	

Updated on 16 June 2021

Board Annual Cycle of Business – 2021/22   **Appendix C**

Draft for Awareness

Corporate Objective alignment

Better Health
- COBH1 **To reduce the burden of disease on the population through health improvement programmes that deliver a measurable shift to   prevention rather than treatment.**
- COBH2 **To reduce health inequalities through advocacy and community planning.**
- COBH3 **To reduce the premature mortality rate of the population and the variance in this between communities.**
- COBH4 **To ensure the best start for children with a focus on developing good health and wellbeing in their early years.**
- COBH5 **To promote and support good mental health and wellbeing at all ages.**

Better Care
- COBC6 **To provide a safe environment and appropriate working practices that minimise the risk of injury or harm to our patients and our people.**
- COBC7 **To ensure services are timely and accessible to all parts of the community we serve.**
- COBC8 **To deliver person centre care through a partnership approach built on respect, compassion and shared decision making.**
- COBC9 **To continuously improve the quality of care, engaging with our patients and out people to ensure healthcare services meet their needs.**
- COBC10 **To shift the reliance on hospital care towards proactive and co-ordinated care and support in the community.**

Better Value
- COBV11 **To ensure effective financial planning across the healthcare system that supports financial sustainability and balanced budgets.**
- COBV12 **To reduce cost variation, improve productivity and eliminate waste through a robust system of efficiency savings management.**
- COBV13 **To exploit the potential for research, digital technology and innovation to reform service delivery and reduce costs.**
- COBV14 **To utilise and improve our capital assets to support the reform of healthcare.**

Better Workplace
- COBW15 **To ensure our people are treated fairly and consistently, with dignity and respect, and work in an environment where diversity is valued.**
- COBW16 **To ensure our people are well informed.**

- COBW17 **To ensure our people are appropriately trained and developed.**
- COBW18 **To ensure our people are involved in decisions that affect them.**
- COBW19 **To promote the health and wellbeing of our people.**
- COBW20 **To provide a continuously improving and safe working environment.**

Agenda Item/Topic	Lead	June 2021	August 2021	September 2021* (additional meeting)	October 2021	December 2021	February 2022	Corporate Objective Coverage
Standing Items								
Introductory Remarks, Welcome and Apologies	**Chair**	x	x	x	x	x	x	
Declarations of Interest	**Chair**	x	x	x	x	x	x	
Minutes of previous meeting	**Chair**	x	x		x	x	x	
Matters Arising and Rolling Action List	**Chair**	x	x		x	x	x	
Urgent Items of Business	**All**	x	x		x	x	x	
Chairman Update	**Chairman**	x	x		x	x	x	
Chief Executive Update	**CE**	x	x		x	x	x	
Patient Story	**DoN**	x	x		x	x	x	
Service Delivery								
COVID-19 Update	**CE**	x	x		x	x	x	**COBH1-COBC10**
QEUH & RHC Update	**CE**	x	x		x	x	x	**COBC6**
Integrated Performance Report	**DoF**	x	x		x	x	x	**COBC7**
Revenue and Capital Report	**DoF**	x	x		x	x	x	**COBV11**

Healthcare Associated Infection Report	**DoIPC**	x	x		x	x	x	**COBC6**
GP Out of Hours Update	**DoGPOOH**		x			x		**COBC7**
Remobilisation Plan	**DoF**	x						**All**
Financial Plan 2021/22	**DoF**			x				**COBV11**
Winter Plan 2021/22	**MD**				x			**COBC6-11**
Primary Care Improvement Plans	**DoPC**				x		x	**COBC6-11**
Glasgow Health Sciences Partnership Oversight Board Update	**HoCG**				x			**COBH1**
Transformational Change								
Remobilisation Plan Update	**MD**	x	x		x	x	x	**All**
Governance and Assurance								
Minutes and Chairs Reports of Board Governance Committee • **Acute Services Committee** • **Area Clinical Forum** • **Audit and Risk Committee** • **Clinical and Care**	**Chairs of Governance Committees**	x	x		x	x	x	**All**

Governance Committee • **Finance, Planning and Performance Committee** • **Public Health Committee** • **Pharmacy Practices Committee** • **Staff Governance Committee**								
Implementing Active Governance	**HoCG**	x	x	x	x	x	x	**COBC6/COBC8**
Review of Governance Committee and Integration Joint Board Membership	**HoCG**	x						**COBC6/COBC8**
Public Health Screening Programme Annual Report 2020/21	**DoPH**		x					**COBH3**
Annual Review of Governance	**HoCG**			x				**COBC6/COBC8**
Governance Statement 2020/21	**Chair of ARC**			x				**COBV11**
Annual Report and Consolidated Accounts for 2020/21	**DoF**			x				**COBV11**
Annual Report for the Board of NHSGGC and	**Auditor**			x				**COBV11**

Auditor General for Scotland 2020/21									
Endowments Funds Accounts to 31 March 2021	**DoF**			x					**COBV11**
Board Calendar of Meetings 2022/23	**HoCG**				x				**All**
Clinical & Care Governance Report	**MD**				x				**COBC6**
Research and Development Annual Report	**MD**				x				**COBV13**
FOI Annual Report	**HoCG**				x				**All**
Patient Private Funds 2020/21	**DoF**					x			**COBV12**
Staff Governance Annual Report	**Chairs of SGC**					x			**COBW15-20**
Whistleblowing Annual Report	**HoCG**		x						**COBW15-20**

Abbreviations	
DoF	Director of Finance
COO	Chief Operation Officer
CO, GCHSCP	Chief Officer, Glasgow City HSCP
MD	Medical Director
CE	Chief Executive
HoCG	Head of Corporate Governance and Administration
DoGPOOH	Director of GP Out of Hours
DoEF	Director of Estates and Facilities
DoHROD	Director of Human Resources and Organisational
DoPC	Director of Primary Care
DoPH	Director of Public Health
DoEH	Director of eHealth
DoIPC	Director of Infection Prevention and Control
Chair of ARC	Chair of Audit and Risk Committee
Chairs of SGC	Chairs of Staff Governance Committee

Standing Committee Chairs Network - Terms of Reference

Purpose

To provide an opportunity for senior non-executive Board Members to meet informally and consider any issues or risks that may be of concern to Board Members but have not yet surfaced through the existing reporting systems.

Remit

To influence the setting of the agenda for future Board meetings and identify topics to be addressed at Board Development Sessions.

To consider the wider context in which the Board operates and identify any new, cross-system risks to the success of the organisation, ensuring that these are addressed at an early stage - either at Board level or one of the Standing Committees.

To consider the relationship, interdependencies and balance to be struck between the Board's activities in support of good governance, the pace of change, and the effective delivery of services.

To receive briefings, advice and guidance from the Chief Executive and other appropriate members of the Executive Leadership Team on issues, risks and topics that are of interest to all Standing Committee Chairs.

To engage with the Chief Executive and other appropriate members of the Executive Leadership Team, providing non-executive insight, support and advice on the challenges the Executives face in leading and managing NHS Greater Glasgow & Clyde.

To share and consider any issues that have been informally raised by non-executive Board Members with the Standing Committee Chairs and provide an additional channel for Board Members feedback to the Chair and the Chief Executive.

To agree information, advice and key messages to be passed on to the Board Members by the Standing Committee Chairs.

To provide Standing Committee Chairs with peer support, shared experience and best practice in providing non- executive leadership to the Standing Committees.

Membership

Membership of the Network will include the Board Chair, Vice Chairs, Standing Committee Chairs, Chief Executive and the Head of Corporate Governance & Board Administration. Members of the Executive Team will be invited to attend meetings as appropriate.

Meetings

The Network will be chaired by a Standing Committee Chair and meetings will be held bi-monthly in advance of the Board meeting. There will be the opportunity to hold additional ad-hoc meetings should the need arise.

Review

The Network will review its Terms of Reference and membership on an annual basis and agree any changes with the NHS Board.

Integration Joint Boards Leads Network - Terms of Reference

Purpose

To provide an opportunity for the lead NHS Board Member (acting as either IJB Chair or Vice Chair) to meet informally and consider any issues or risks that may be of concern to NHS Board Members that have not yet surfaced through the existing reporting systems.

Remit

To influence the setting of the agenda for future NHS Board and IJB meetings and identify topics to be addressed at NHS Board and IJB Development Sessions.

To consider the wider context in which the NHS Board and the IJB operate and identify any new, whole system risks to the success of the health and social care system, ensuring that these are addressed jointly by the NHS Board and the IJBs.

To receive briefings, advice and guidance from the Chief Executive and other appropriate members of the Executive Leadership Team on issues, risks and topics that are of interest to all IJB Leads.

To engage with the NHS Chief Executive and other appropriate members of the NHS Executive Leadership Team, providing the IJB Leads' insight, support and advice on the challenges the Executives face in leading and managing in the health and social care system.

To share and consider any issues concerning NHS GGC that have been informally raised by NHS IJB Members with the IJB Leads and provide an additional channel for IJB Members to feedback to the NHS Chair and NHS Chief Executive.

To agree information, advice and key messages to be passed on to the NHS IJB Members by the IJB Leads.

To provide IJB Leads with peer support, shared experience and best practice in providing non-executive leadership to the IJBs.

Membership

Membership of the Network will include the NHS Board Chair, Vice Chairs, IJB Leads, NHS Chief Executive and the Head of Corporate Governance & Board Administration. The HSCP Chief Officers and members of the Executive Team will be invited to attend meetings as appropriate.

Meetings

The Network meetings will be chaired by one of the IJB Leads and will be held bi-monthly in advance of the NHS Board meeting. There will be the opportunity to hold additional ad-hoc meetings should the need arise.

Review

The Network will review its Terms of Reference and membership on an annual basis and agree any changes with the NHS Board.

Key aspects of the role of the Board Secretary

Develop the service delivery business plan for the provision of an effective and efficient secretariat service to the NHS Board, Standing Committees, Professional Advisory Committee, Sub Committees and Senior Management Groups/meetings. This plan will cover at least one year of the Board's business cycle with effective committee and forward plans.

Ensure that governance arrangements, policies, procedures and current legislation are followed at all formal Board meetings, Standing Committees of the NHS Board and groups.

Provide advice and guidance to the Board Chair/Chief Executive, Directors and other Senior Managers on managing items for consideration by the Board, Committees and all other formal meetings and for managing the process of the dissemination of national Circulars.

Act as the main point of contact for the 26 Non Executive Board members ensuring regular Declaration of Interests are made, effective Induction processes are in place which are regularly evaluated.

Ensure all formal Board meetings, committees and groups are appropriately conducted and quorate by providing expert advice on procedures and maintaining records of these.

In addition, the post holder will develop, implement and maintain an effective system for the provision of reports to a wide range of committees and Board meetings. The post holder will be responsible for advising Directors and Managers on the appropriate reports required and make arrangements for these to be put to the relevant committees.

Create, implement and maintain a system for the effective management of all follow up action required from all decisions of Committee meetings to meet agreed timescales and facilitate co-ordination between various committees.

Responsible for the provision of an effective administrative and PA function to the Board Chair/Chief Executive Officer, Board-wide Directors and an effective Public Affairs function.

Work closely with the Board Chairman and the Head of Corporate Governance to allocate members to relevant standing committees of the Board supporting training requirements and annual review.

Ensure an annual review of governance is undertaken in line with the Blueprint for Good Governance and the Board's Governance Assurance Framework.

Organise and provide secretariat input to the range of Board Meetings, Committees and Governance groups that are convened to manage the Board's business. All of these meetings must be organised and served in line with good governance practice and adhere to the relevant legislation, policies and procedures that apply.

Extract May 2021