

| NHS Greater Glasgow and Clyde | Paper No. 23/13 |
|-------------------------------|---|
| Meeting: | NHS Board Meeting |
| Meeting Date: | 28 January 2023 |
| Title: | Active Governance Programme Update |
| Sponsor: | Professor John Brown CBE, Chair of NHSGGC |
| Report Authors: | Ms Elaine Vanhegan, Director of Corporate Services and Governance Mr Colin Neil Director of Finance |

1. Purpose

The purpose of the attached paper is to:

- Provide an update on the progress with the NHSGGC Active Governance programme, including the recent work to develop and improve information flows to the NHS Board by constructing an Assurance Information Framework.
- Present the final draft of the NHSGGC Board Protocol for approval.
- Provide an update on routine governance issues including Committee Membership and the Annual Cycle of Business ACOB.
- Describe the action being taken by the Board Secretary to improve the induction of new Board Members and the access to supporting information on the Admin Control and TURAS systems.
- Provide an update on the position in respect of the GGC Royal College of Physicians of Edinburgh (RCPE), Quality Governance Collaborate Fellowship Programme.

2. Executive Summary

The paper can be summarised as follows:

 The paper describes the ongoing activities being developed and delivered to implement the active and collaborative governance approach described in the NHS Scotland Blueprint for Good Governance and ensure that NHSGGC has a continuous approach to corporate governance.

3. Recommendations

It is recommended that the Board:

- Be assured as to the position of the development of the Assurance Information
 Framework as part of the Active Governance Programme.
- Approve the Board Protocol as detailed in Appendix 1.
- Be assured by the work being undertaken to ensure an effective induction process and ongoing Board development.
- Approve the Board Members responsibilities as detailed in Appendix 2.
- Approve the Annual Cycle of Business in Appendix 3 noting it is subject to change over the year.
- Be aware of the approach to taking forward the projects developed as part of the GGC RCPE Fellowship and a further update will come to the Board in June.

4. Response Required

This paper is presented for approval.

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 | Positive |
| • | Better Value | <u>Positive</u> |
| • | Better Workplace | <u>Positive</u> |
| • | Equality & Diversity | <u>Positive</u> |
| • | Environment | Positive |

6. Engagement & Communications

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

The Active Governance programme updates to the Board throughout 2022/23.

7. Governance Route

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

The paper updates a strands of activity approved by the Board and overseen by Standing Committees and CMT.

8. Date Prepared & Issued

Prepared on 20 February 2023 Issued on 21 February 2023



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1.0 Assurance Information Framework

- 1.1.1 As part of the ongoing work to implement the NHS Scotland Blueprint for Good Governance and the development of the NHSGGC Active Governance Programme over the past two years, Board members were updated on the position in respect of the developing Assurance Information Framework (AIF) at the December NHS Board meeting.
- 1.12 As advised in December, a Short Life Working Group (SLWG) has been established to take forward the design of assurance information flows at Board level, aligning this to the work developed as regards information flows to Standing Committees in 2022. The SLWG comprises, the Director of Finance, the Director of Corporate Governance, the Board Chair and Chairs of the Finance Planning and Performance Committee, the Clinical and Care Governance Committee, the Staff Governance Committee, the Audit and Risk Committee and an Integration Joint Board Chair and a Local Authority Stakeholder member.
- 1.13 The SLWG has met twice with further dates being scheduled. At the first meeting colleagues were reminded of the context of the work reflecting on the position of the AIF as part of the overall Blueprint noted below in Figure 1 and embedded within the Integrated Governance Framework displayed in Figure 2.

Figure 1 Blueprint for Good Governance

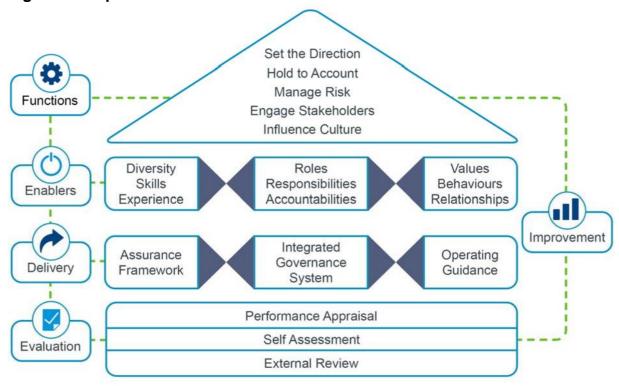
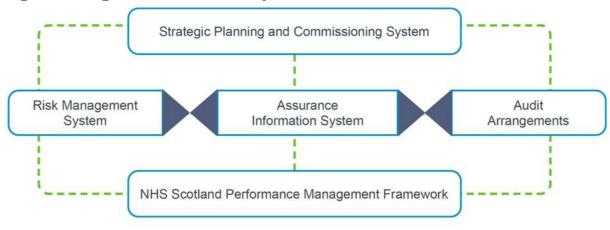


Figure 2 Integrated Governance System



- 1.1.4 In addition, consideration was given to the supplementary guidance in the second edition of the Blueprint, which states that an AIF should deliver relevant, accurate and timely information on a wide range of activities, including:
 - Safety and quality standards
 - Innovation and transformational change
 - Workforce
 - Education, training and development
 - Finance

1.2 Principles

1.2.1 The SLWG has considered how to take this work forward and have reached a consensus on the twelve principles that will underpin the design of the NHSGGC Assurance Information Framework (AIF). By following these principles it is hoped that the AIF will:

- Raise the threshold for what Assurance Information the Board needs to see.
- Reduce the volume of Assurance Information the Board gets.
- Improve the focus of the Assurance Information that goes to the Board.

The Assurance Information Framework must:

- Support setting the direction for the organisation and provide assurance on the delivery of the NHSGGC Purpose, Aims, and Corporate Objectives at organisation level.
- Be guided by the NHS Scheme of Delegation and Integration Schemes, highlighting those matters reserved for the NHS Board.
- Provide assurance on the progress being made with implementing the corporate strategies, commissioning plans and the underlying projects that support the delivery of the NHSGGC Corporate Objectives.
- Support the management and mitigation of the risks to delivery of the Corporate Objectives, as described in the Corporate Risk Register.
- Provide assurance on the delivery of the Operational Priorities included in the Annual Operating Plan minimising duplication.
- Reflect the work already undertaken on Standing Committee metrics and reduce the
 occasions where information is considered by the Board Members when that
 information has already been scrutinised by a Standing Committees and assurance
 given to the NHS Board by that committee.
- Balance exception reporting with highlighting positive performance, presenting information in a manner consistent with the best practice described in the NHS Scotland Blueprint for Good Governance.

1.2.2 The Assurance Information Framework should include:

- All areas of healthcare services delivered by NHSGGC and the HSCPs, including key aspects of Primary Care, Secondary Care and Population Health & Wellbeing
- Specific key performance indicators designed to monitor progress with achieving each of the Corporate Objectives.
- Other success measures and milestones included in the suite of corporate strategies and commissioning plans developed to support the delivery of the NHSGGC Purpose, Aims, and Corporate Objectives.
- Specific operational targets designed to monitor progress with achieving each of the Operational Priorities.
- Triangulation of data and information with other reports and the more qualitative information available on the operation of the healthcare system, particularly those that reflect patient, service user and staff experience.

1.3 Next steps and timeline

- 1.3.1 The SLWG is aiming to create a structure for the AIF and then define the content in terms of KPIs and other quantitative and qualitative data. In terms of structure, issues being considered include depth and breadth of information, and frequency of issue being presented to the Board recognising that there are routine issues at every meeting then others that would be more appropriate to scrutiny at alternate, bi-annually or annually. This will require to be a dynamic process should risks increase over time.
- 1.3.2 The work undertaken to align information to the four Corporate Aims of; Better Health, Better Care, Better Value and Better Workforce is now being reviewed by the SLWG. The focus is on aligning KPIs for the relevant Corporate Objectives under the Aims considering; measures, targets, frequency, format, period, trajectory, and benchmarking reflecting on, outputs and costs. An outline framework has been created to complement that of the approach at committee level. At the next meeting of the SLWG the views and comments will be considered and a way forward agreed.
- 1.3.3 In addition a review of the key corporate strategies is also underway in order to establish delivery milestones and clarify priorities which may also feature in the AIF.
- 1.3.4 In terms of timeframe, it is anticipated that the outputs of the SLWG will be presented to the Board in April with implementation from the June Board.

The Board is asked to be assured that the implementation of the Active Governance Programme continues with the establishment of the SLWG approved by the Board in December 2022.

2. Additional Operating Business

2.1 Board Protocol

Board Members will remember the approach taken to the development of our Board Protocol, supported by Professor Michael Deighan of the Royal College of Physicians in Edinburgh. The draft Protocol was considered at the Board Away Day in November 2022 with amendments made thereafter. The final NHSGGC Board Protocol reflects the requirements within the Blueprint for Good Governance, the Code of Conduct and the Core Values of the organisation and is presented in Appendix 1. This is brought to the Board for approval.

The Board is asked to approve the NHSGGC Board Protocol.

2.2 Board Members Induction

A review of Board Members Induction is underway, led by the Board Secretary. This will build on the report produced in 2020 by Non-Executive Directors, Alan Cowan and Amina Khan when, due to the Pandemic, recommendations were not fully implemented. The Board Secretary will work alongside both Alan Cowan and David Gould and ensure processes are robust moving forward.

In addition, the Board Secretary has requested feedback from all Non-Executive Board Members on their access to TURAS, LearnPro and the Buddy System. She is in the

process of collating this feedback to build into the programme to ensure ongoing improvement and good governance.

The Board is asked to be assured by this review of Induction processes.

2.3 Board members responsibilities – Committee/IJB Membership

The template recording Board Members responsibilities has been updated. Board members are asked to note the appointment of Mehvish Ashraf as of 8th January 2023. Mehvish replaces Amina Khan's role as Non-Executive Board Member whose tenure ends on 31st March 2023. Mehvish will join the Acute Services Committee, East Renfrewshire IJB and Glasgow City IJB. For a period, the membership of the Staff Governance Committee will reduce by 1 to 7 Members. The recruitment process is underway for 2 new Non-Executives at which point committee membership will be rebalanced. The detail of all membership can be seen in Appendix 2. In addition, from April, the dates of the Standing Committee Chairs and IJB Leads Network will also be noted.

The Board is asked to approve the changes to Board Members responsibilities as per Appendix 2.

2.4 Annual Cycle of Business

The Board's Annual Cycle of Business (ACOB) is presented for approval and can be seen in Appendix 3. Of note is the inclusion of routine updates from IJB Leads from April 2023, in the same format as the Board receives updates from the Standing Committee Chairs. This will take the form of a written update from respective IJB Leads and will include a link to the minutes should Board Members require more details of the discussions at an IJB. By the nature of Board business the ACOB requires to remain a dynamic tool for planning and may be subject to change. Any changes will be tracked and the rationale for that change made clear, to ensure transparency.

Be assured by the work being undertaken to ensure an effective induction process and ongoing Board development.

2.5 RCPE Fellowship

Board members are advised that the Royal College of Physicians of Edinburgh, Quality Governance Collaborative Fellowship Programme has been completed. The recommendations from the various governance projects will be considered by the Corporate Management Team, confirming to the Board those recommendation which should be endorsed. Proposals will be brought to the June Board meeting for approval, along with the next iteration of this continuous improvement programme focussing on governance. Any relevant actions will be incorporated in the NHSGGC Active Governance Programme for 2023/24.

The Board is asked to be aware of this approach.

3.0 Recommendations

It is recommended that the Board:

- Be assured as to the position of the development of the Assurance Information Framework as part of the Active Governance Programme.
- Approve the Board Protocol as detailed in Appendix 1.
- Be assured by the work being undertaken to ensure an effective induction process and ongoing Board development.
- Approve the Board Members responsibilities as detailed in Appendix 2.
- Approve the Annual Cycle of Business in Appendix 3 noting it is subject to change over the year.
- Be aware of the approach to taking forward the governance projects developed as part of the GGC RCPE Governance Fellowship and a further update will come to the Board in June.

4.0 Implementation

Implementation is part of the Active Governance approach and core to the Blueprint for Good Governance.

5.0 Evaluation

The evaluation of the success of the Active Governance Programme will form part of the self-assessment in the spring of 2023.

6.0 Appendices

Appendix 1 – The Board Protocol

Appendix 2 – The Board Members Responsibilities Template

Appendix 3 – The Annual Cycle of Business

Appendix 1

NHS Greater Glasgow and Clyde Board Protocol - Context

To deliver good governance in healthcare, the <u>NHS Scotland Blueprint for Good Governance</u> requires all NHS Boards Members must act morally, ethically and fairly.

To ensure this approach is delivered, the Board of NHS Greater Glasgow and Clyde have adopted a **Code of Conduct** that sets out the standards of behaviours expected of Board Members.

The Code of Conduct not only sets out how the provisions of the Code should be interpreted and applied in practice, it also gives guidance on the rules regarding remuneration, allowances, expenses, gifts and hospitality, lobbying, registration of interests and the confidentiality of information. The Code of Conduct for Board Members has been developed in line with the Principles of Public Life in Scotland. These are:

- **Duty** Members have a duty to uphold the law and act in accordance with the law and the public trust placed in them. They have a duty to act in the interests of the public body of which they are a member and in accordance with the core tasks of that body.
- **Selflessness** Members have a duty to take decisions solely in terms of public interest. They must not act in order to gain financial or other material benefit for themselves, family or friends.
- Integrity Members must not place themselves under any financial, or other, obligation to any individual or organisation that might reasonably be thought to influence them in the performance of their duties.
- **Objectivity** Members must make decisions solely on merit when carrying out public business including making appointments, awarding contracts or recommending individuals for rewards and benefits.
- **Accountability and Stewardship** Members are accountable for their decisions and actions to the public. They have a duty to consider issues on their merits, taking account of the views of others and must ensure that the public body uses its resources prudently and in accordance with the law.
- **Openness** Members have a duty to be as open as possible about their decisions and actions, giving reasons for their decisions and restricting information only when the wider public interest clearly demands.

- **Honesty** Members have a duty to act honestly. They must declare any private interests relating to their public duties and take steps to resolve any conflicts arising in a way that protects the public interest.
- **Leadership** Members have a duty to promote and support the Principles of Public Life in Scotland by leadership and example, to maintain and strengthen the public's trust and confidence in the integrity of the public body and its members in conducting public business.
- Respect Members must respect fellow members of their public body and employees of the body and the role they play, treating them with courtesy at all times. Similarly they must respect members of the public when performing duties as a member of the public body.

Board Members are also required to demonstrate and uphold the **Core Values** of NHS Greater Glasgow and Clyde. These are:

- Care and compassion
- Dignity and respect
- · Openness, honesty and responsibility
- Quality and teamwork.

Board Members must apply the principles of the Code of Conduct and the Core Values of NHS Greater Glasgow and Clyde in their dealings with fellow members of the Board, its employees and other stakeholders.

In addition, to support collaborative working relationships and assist in the conduct of Board business a Board Protocol has been introduced to ensure that best use is made of the time and the contribution of the Board Members, that the views of Members are heard, and meetings are conducted in a manner consistent with the Code of Conduct and the Core Values of NHS Greater Glasgow and Clyde. The Board Protocol will also assist Members to make enquiry and challenge the executives in an appropriate manner, ensuring a healthy relationship exists between the Board Members and the Executive Leadership Team.

THE PROTOCOL

Following a Board development session facilitated by Professor Michael Deighan, Director of the RCPE Quality Governance Collaborative, the Board of NHS Greater Glasgow and Clyde has adopted the following **Board Protocol** with the primary aim of ensuring mutual trust, respect and honesty at meetings of the NHS Greater Glasgow and Clyde Board and its Committees.

Board Members must commit to:

- Attending the meetings of the NHS Board and the development sessions included in the Board's annual schedule of meetings
- Attending the meetings of the Standing Committees and the Integration Joint Boards that they have been appointed to by the Board
- Reading briefing papers and associated documents prior to meetings
- Participating wholeheartedly in discussions by actively contributing and scrutinising throughout meetings
- Complying with rules on the confidentiality of information and papers.

Board Members must display tolerance and sensitivity by:

- Questioning and challenging in a respectful manner
- Being persistent rather than forceful or dismissive
- Responding positively to colleagues need for support when challenging or being challenged.

Board Members must acknowledge diverse points of view by:

- · Listening to and treating all ideas with respect
- Avoiding giving offence and being ready to apologise
- Avoiding taking offence and staying open to persuasion
- Encouraging all Board Members to contribute to discussions
- · Leaving time for others to input to discussions
- Avoiding displaying a bias toward personal agenda.

Board Members must make the best use of time by:

- Focussing on strategic issues, rather than operational issues more relevant to consideration by the Executive Leadership Team
- Adhering to meeting timings, including starting on time and remaining for the full meeting
- Ensuring no distractions are permitted
- Ensuring comments, questions and answers are succinct and concise
- Leaving time for others to contribute.

To support Board Members to comply with the NHSGGC Board Protocol, the conduct of meetings will be regularly reviewed by the participants, any areas of improvement identified, and the Protocol refreshed to ensure it remains relevant and acceptable to Board Members.

Board Members' Responsibilities from 1 March 2023

| | | | | | | Board Standing Committe | es | | | | | | Integration | Joint Boards | | |
|--------------------------------------|--------------------------------|----------------------------|----------------|-----------------------|---------------------------------|-----------------------------------|------------------------------------|--------------|-------------------------|---------------------------------------|---------------------|-------------------|--------------|--------------|--------------|---------------------|
| Board Members | Appointment | | Audit and Risk | Acute Services | Clinical and Care Governance | Finance, Planning and Performance | Population Health and Wellbeing | Remuneration | Staff Governance | Endowments Management Committee | East Dunbartonshire | East Renfrewshire | Glasgow City | Inverciyde | Renfrewshire | West Dunbartonshire |
| Professor John Brown (Chair) | From 01/12/15 | To 30/11/23 | | Ex-officio Ex-officio | | | | | | | | | | | | |
| Mrs Jane Grant | Chief Executive | | | | | Exc | officio | | | | | | | | | |
| Dr Jennifer Armstrong | Medical Director | | | 1 | 1 LX | 1 | | | | | | | | | | |
| Dr Emilia Crighton | Interim Director of Pu | blic Health | | | | 1 | 1 LX | | | | | | | | | |
| Professor Angela Wallace | Nurse Director | | | 1 | 1 | 1 | | | | | | | | | | |
| Mr Colin Neil | Director of Finance | | 1 LX | 1 | | 1 LX | | | | 1 LX | | | | | | |
| Other Director | | | | 1 COO (LX) 1 DHROD | | 2 IJBCOs | 2 IJBCOs | 1 DHROD (LX) | 1 DHROD (LX) 1 IJBCO | | | | | | | |
| Ms Ann Cameron-Burns | From 01/01/22 | To 31/12/25 | | | | 1 | | 1 | 1 CC | | | | | 1 | 1 | |
| Professor Iain McInnes | From 01/04/21 | To 31/03/25 | | | 1 | 1 | | | | | | | | | | |
| Dr Lesley Rousselet | From 01/07/21 | To 30/06/23 | | 1 | 1 | | | | | | | | | | | 1 |
| Cllr Jacqueline Cameron (Ren) | From 21/06/22 | To 30/04/27 | | | | | 1 | 1 | | | | | | | | |
| Cllr Chris Cunningham (GC) | From 08/06/22 | To 30/04/27 | | 1 | | 1 | | ' | | | 1 | | | | | |
| Cllr Martin McCluskey (Inv) | From 08/06/22 | To 30/04/27 | 1 | | | <u> </u> | 1 | | | | | | | | | |
| Cllr Colette McDiarmid (ED) | From 08/06/22 | To 30/04/27 | | 1 | | | | | 1 | | 1 | | | | | |
| Cllr Michelle McGinty (WD) | From 08/06/22 | To 30/04/27 | 1 | | | | | | 1 | 1 | 1 | | | | | |
| Cllr Katie Pragnell (ER) | From 04/07/22 | To 30/04/27 | | | 1 | | | | | 1 | | | | | | |
| Ms Mehvish Ashraf | From 09/01/23 | To 08/01/27 | | 1 | | | | | | | 1 | 1 | 1 | | | |
| Ms Susan Brimelow | From 01/04/15 | To 31/03/23 | 1 | 1 | 1 VC | 1 | | | | | | | | | | |
| Mr Simon Carr | From 01/09/15 | To 31/08/23 | | 1 | | 1 | | | | | | | 1 L(VC) | 1 | | |
| Mr Alan Cowan | From 01/07/16 | To 30/06/24 | 1 | | | 1 | | | | | | | 1 | 1 L(C) | | |
| Ms Jacqueline Forbes | From 01/07/16 | To 30/06/24 | 1 | | | 1 | | | | | 1 L(C) | 1 | | | | |
| Ms Dianne Foy | From 01/07/22 | To 30/06/26 | | | 1 | | 1 | | | | | 1 | | | | |
| Mr David Gould | From 01/02/22 | To 31/01/26 | | | 1 | | | | | 1 | | | | 1 | | |
| Ms Margaret Kerr | From 01/04/19 | To 31/03/27 | 1 VC | | | 1 C | | | | 1 | | | | | 1 | |
| Ms Amina Khan- to March 31st | From 01/04/19 | To 31/03/23 | | | | | | | 1 | |] | 1 | 1 | | | |
| Rev John Matthews | From 01/07/16 | To 30/06/24 | | | | 1 VC | 1 C | 1 VC | | 1 | | | 1 | | 1 L (C) | |
| Ms Ketki Miles | From 01/06/20 | To 31/05/24 | | | | 1 | | 1 | 1 CC | | 1 | | | | | |
| Ms Anne-Marie Monaghan | From 01/07/16 | To 30/06/24 | | | | 1 | 1 | | | | | 1 L(VC) | 1 | | | |
| Mr Ian Ritchie | From 01/07/16 | To 30/06/24 | | 1 C | 1 | 1 | 1 VC | 1 C | | | 1 | | | | | |
| Dr Paul Ryan | From 01/06/21 | To 31/05/25 | | 1 VC | 1 C | 1 | | | 1 | | 4 | | | | | |
| Mr Francis Shennan | From 01/06/20 | To 31/05/24 | . | | | | 1 | | 1 | | | | 1 | | 1 | 4 1000 |
| Ms Rona Sweeney Mr Charles Vincent | From 01/07/16 From 01/02/20 | To 30/06/24 To 31/01/24 | 1 | | | 1 | | | 1 | | <u> </u> | | 1 | | | 1 L(VC) |
| Ms Michelle Wailes | From 01/06/21 | To 31/05/25 | 1 C | | | 1 | | | ' | 1 C | | | ' | | | 1 |
| INS INICIIEIE WAIIES | 110111 01/00/21 | 10 3 1/03/23 | | | | ' | | | | 1 VC | <u> </u> | | | | | |
| Total Non Executive Board Members (| including Chair) | 28 | 9 | 8 | 8 | 15 | 7 | 5 | 7 | 7 | 3 | 5 | 9 | 4 | 4 | 3 |
| Total Membership including Executive | Board Members | 33 | 10 | 10 | 10 | 19 | 8 | 5 | 8 | 8 | 3 | 5 | 8 | 4 | 4 | 3 |
| No of Meetings | | | 5 | 6 | 4 | 6 | 4 | 3 | 4 | 4 | 6 | 6 | 6 | 6 | 6 | 7 |
| Quorum | | | 4 | 4 | 4 | 7 | 4 | 3 | 4 | 4 |] | | | | | |

^{**} A meeting of the Trustees shall be deemed to have been held when a quorum of at least one third of the Trustees are present, of whom at least 2 of those present are non-executive members of the Health Board

Updated on 17 February 2023

| Frequency | Bi-Monthly | Audit and Risk | Acute Services | Clinical and Care | | | | | | | | | | | Integration Joint Boards | | | | |
|-----------------------------|--|--|--------------------|--------------------|--------------------------------------|------------------------------------|--------------------|--------------------|---|-----------------------------|--|--------------------|--|-----------------------|---|--|--|--|--|
| | Bi-Monthly | | | Governance | Finance, Planning and Performance | Population Health and Wellbeing | Remuneration | Staff Governance | Endowments Management Committee | East Dunbartonshire | East Renfrewshire | Glasgow City | Inverciyde | Renfrewshire | West Dunbartonshir | | | | |
| Donal Marchan Donales d | | | | | 04/04/23 - 9.30 am | 18/04/23 - 2.30 pm | | | | | | | | | | | | | |
| Board Members Required | 33 | | 16/05/23 - 9.30 am | | | | | 23/05/23 - 1.30 pm | 09/05/23 - pm | | | 10/05/23 - 9.30 am | | | 16/05/23 - time tbc | | | | |
| Quorum | 10 | 06/06/23 - 9.30 am 20/06/23 - 9.30 am | | 20/06/23 - 2.00 pm | 13/06/23 - 9.30 am | | 28/06/23 - 9.00 am | | | | 28/06/23 - 10.00 am | 28/06/23 - 9.30 am | 24/06/23 (am) | 30/06/23 - 12.00 pm | 20/06/23 - time tbc | | | | |
| Chair/NHS Lead | John Brown | | , | | | 04/07/23 - 2.30 pm | | | | | | | | | | | | | |
| Vice Chairs | John Matthews Ian Ritchie | | | | 01/08/23 - 9.30 am | | | 22/08/23 - 1.30 pm | 08/08/23 - pm | | 16/08/23 - 10.30 am | | | | 15/08/23 - time tbc | | | | |
| Membership | As above | | , | 05/09/23 - 2.00 pm | | | | | | | 27/0923 - 1.00 pm | 27/09/23 - 9.30 am | 16/09/23 (am) | | 19/09/23 - time tbc | | | | |
| 2023/24 Board Dates | 25/04/23 - 9.30 am | | | | 03/10/23 - 9.30 am | 17/10/23 - 2.30 pm | | | | | | | | | | | | | |
| | 27/06/23 - 9.30 am* | | | | | | 29/11/23 - 9.00 am | 07/11/23 - 1.30 pm | 14/11/23 - pm | | 22/11/23 - 10.30 am | 29/11/23 - 9.30 am | 25/11/23 (am) | | 21/11/23 - time tbv | | | | |
| | 29/08/23 - 9.30 am | | | 05/12/23 - 2.00 pm | 05/12/23 - 9.30 am | | | | | | | | | | | | | | |
| | 31/10/23 - 9.30 am* | | | | | 23/01/24 - 2.30 pm | | | | | | | 27/01/24 (am) | | | | | | |
| | 19/12/23 - 9.30 am | | | | 06/02/24 - 9.30 am | | | 20/02/24 - 1.30 pm | 13/02/23 - pm | | | | | | 20/02/24 - time tbc | | | | |
| | 27/02/24 - 9.30 am* | | | 05/03/24 - 2.00 pm | | | 06/03/24 - 9.00 am | | | | | | 31/03/24 (am) | | 19/03/24 - time tbc | | | | |
| | * Followed by Endowments Board of Trustees | | _ | | | | | | | * Some IJB dates still to b | e confirmed | | | | • | | | | |
| 2023/24 Board Seminar Dates | 30/05/23 - 9.30 am | | | | Other Attendees | | | | Key | | | | Board Champio | ns | | | | | |
| | 25/07/23 - 10.00 am- 4.00 pm | | DOF | | DOF | нні | DHROD | DHROD | C = Chair | | DHROD = Director of Hun | | Mental Health | | Mr Ritchie | | | | |
| | 26/09/23 - 9.30 am | | DHROD | | CO Acute | 2 CPHM | | | CC = Co Chair VC = Vice Chair | | Organisational Developme DEF = Director of Estates | | Staff Health Stra Organ Donation | | Ms Cameron-Burns Mr Ritchie | | | | |
| | 28/11/23 - 10.00 am-4.00 pm | | CO Acute | | DEF | 2 IJB COs | | | L = Lead LX = Lead Executive | | DCPE = Director of Comm Engagement | | Environment & S Whistleblowing | | Ms Wailes Mr Vincent | | | | |
| | 30/01/24 - 9.30 am | | DEF | | DHROD | GCPH Director | | | CE = Chief Executive | | CO Acute = Chief Officer | | Equality & Divers | | Ms Monaghan | | | | |
| | 26/03/24 - 10.00 am-4.00 pm | | | | | Health Scotland | | | MD = Medical Director ND = Nurse Director DOF = Director of Financ DPH = Director of Public | e | IJB CO = IJB Chief Office HHI = Head of Health Imp CPHM = Consultant in Pu | rovement | Equality & Divers Equality & Divers NHS Charities (F NHS Charities (E Veterans | sitý (LGBTQ+) RHC) | Ms Khan Ms Miles Ms Sweeney Mr Ritchie Mr Cowan | | | | |



Board Annual Cycle of Business - 2023/24

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 | 25 April 2023 | 27 June 2023 | 29 August 2023 | 31 October 2023 | 19 December 2023 | 27 February 2024 | Corporate Objective Coverage |
|---|------------------------|------------------|-----------------|-------------------|--------------------|---------------------|---------------------|---------------------------------|
| Standing Items | | | | | | | | |
| Introductory Remarks, Welcome and Apologies | Chair | х | х | х | х | х | х | |
| Declarations of Interest | Chair | х | х | Х | х | х | х | |
| Minutes of previous meeting | Chair | х | х | х | х | х | х | |
| Matters Arising and Rolling Action List | Chair | х | х | х | х | х | х | |
| Chair's Update | Chair | х | х | х | х | х | х | |
| Chief Executive's Update | CE | х | х | Х | х | х | х | |
| Patient Story | DoN | x | х | Х | х | х | х | |
| Better Health | Lead | 25 April 2023 | 27 June 2023 | 29 August 2023 | 31 October 2023 | 19 December 2023 | 27 February 2024 | Corporate Objective Coverage |
| COVID-19 | DoPH | х | х | х | х | х | х | COBH1-COBC10 |
| Public Health Screening Programme Annual Report | DoPH | | Х | | | | | СОВНЗ |
| Population Health & Well Being Committee Chairs Report and Minutes | Chair of the Committee | х | х | х | х | Х | х | COBH1-5 |

| Better Care | Lead | 25 April 2023 | 27 June 2023 | 29 August 2023 | 31 October 2023 | 19 December 2023 | 27 February 2024 | Corporate Objective Coverage |
|---|------------------------|------------------|-----------------|-------------------|--------------------|---------------------|---------------------|---------------------------------|
| QEUH & RHC Update | DoEF | х | х | х | х | х | х | COBC6 |
| Winter Plan | MD | | | | х | | | All |
| Annual Delivery Plan - Update | MD | | | | х | | | COBC6-10 COBV11 |
| NHSGGC Board Performance Report | DoF | х | х | х | х | х | х | COBC7 |
| Healthcare Associated Infection Report | DoIPC | х | х | х | х | х | х | COBC6 |
| Clinical & Care Governance Annual Report | MD | | | х | | | | COBC6 |
| Research and Development Annual Report | MD | х | | | | | | COBV13 |
| Patient Private Funds 2021/22 | DoF | | х | | | | | COBV12 |
| Acute Services Committee Chairs Report and Minutes | Chair of the Committee | х | х | х | x | х | х | COBC06-10 |
| Clinical & Care Governance Committee Chairs Report and Minutes | Chair of the Committee | х | х | х | х | х | х | COBC06-10 |
| Area Clinical Forum Chairs Report and Minutes | Chair of the Committee | х | х | х | х | х | х | COBC06-10 |
| Pharmacy Practices Committee Chair's Report and Minute | | | | | х | | | COBC06-10 |
| Better Value | Lead | 25 April 2023 | 27 June 2023 | 29 August 2023 | 31 October 2023 | 19 December 2023 | 27 February 2024 | Corporate Objective Coverage |
| NHSGGC Finance Report | DoF | х | х | Х | Х | Х | Х | COBV11 |
| Financial Plan 2022/23 | DoF | | | х | | | х | COBV11 |
| NHSGGC Digital Strategy | DoEH | | | | | х | | |
| Governance Statement 2021/22 | Chair of ARC | | х | | | | | COBV11 |

| Annual Report and Consolidated Accounts for 2021/22 | DoF | | х | | | | | COBV11 |
|--|----------------------------------|------------------|-----------------|-------------------|--------------------|---------------------|---------------------|---------------------------------|
| Annual Report for the Board of NHSGGC and the Auditor General for Scotland 2021/22 | Auditor | | х | | | | | COBV11 |
| Finance Planning and Performance Committee Chairs Report and Minutes | Chair of the Committee | х | х | х | x | x | х | COBV11-14 |
| Audit & Risk Committee Chairs Report and Minutes | Chair of the Committee | х | х | х | х | x | х | COBV11-14 |
| IJB Leads Report | GGC Lead | х | х | х | х | x | х | COBV11-14 |
| Better Workplace | Lead | 25 April 2023 | 27 June 2023 | 29 August 2023 | 31 October 2023 | 19 December 2023 | 27 February 2024 | Corporate Objective Coverage |
| Staff Governance Annual Report | Co-Chairs of the Committee | | х | | | | | COBW15-20 |
| Whistleblowing Annual Report | DoCGA | | | х | | | | COBW15-20 |
| Staff Governance Committee Chairs Repot and Minutes | Co-Chairs of the Committee | X | х | х | х | х | х | COBW15-20 |
| Governance | Lead | 25 April 2023 | 27 June 2023 | 29 August 2023 | 31 October 2023 | 19 December 2023 | 27 February 2024 | Corporate Objective Coverage |
| Implementing the Active Governance Approach | DoCGA | х | х | х | х | х | х | COBC6/COBC8 |
| Annual Review of Governance | DoCGA | | х | | | | | COBC6/COBC8 |
| Review of Governance Committee and Integration Joint Board Membership | DoCGA | | х | | | | | COBC6/COBC8 |
| Annual Cycle of Business | DoCGA | х | х | х | х | х | х | COBC6/COBC8 |
| Board Calendar of Meetings 2023/24 | DoCGA | | | | X | | | COBC6/COBC8 |

| Corporate Risk Register | DoF | Х | | х | | COBW6-20 |
|-------------------------|-------|---|---|---|--|-------------|
| Terms of Reference | DoCGA | | х | | | COBC6/COBC8 |
| Reports to be Confirmed | | | | | | |
| | | | | | | |
| | | | | | | |

| Abbreviations | |
|---------------|--|
| DoF | Director of Finance |
| COO | Chief Operating Officer |
| CO, GCHSCP | Chief Officer, Glasgow City HSCP |
| MD | Medical Director |
| CE | Chief Executive |
| DoCGA | Director 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 Development |
| DoPC | Director of Primary Care |
| DoPH | Director of Public Health |
| DoEH | Director of eHealth |
| DoIPC | Director of Infection Prevention and Control |