

## **Board meeting: 18 May 2018**

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## **2017/18 Board Development Plan**

### **Recommendation/action required:**

The Board is invited to:

- Note that further to the 29 September 2017 Board meeting, the Board agreed to review their Board Development Plan again after around 6 months. The Plan has now been completed (Appendix 1).
- Agree that further review or development of the Board Development Plan is not necessary or proportionate given that the Health Scotland Board will cease to exist in 2019.
- Agree that the priority for the Health Scotland Board during this transition period is securing relevant Board members re-appointment processes, post May 2018 and March 2019, so that robust governance and scrutiny of Health Scotland business can continue into autumn 2019.
- Agree that this and any other relevant Board Development issues will be reflected in the “Governance Transition plan” that came to Board 23 March 2018 and will be updated and return to the 28 September 2018 Board meeting.

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Sponsoring Director:  
Gerry McLaughlin  
Chief Executive

9 May 2018

## **2017/18 Board Development Plan**

### **Purpose**

1. This paper offers an opportunity for the Board to note the completion of the 2017/18 Board Development Plan (Appendix 1) and agree no further action is required other than to pursue the extensions of the relevant non-executives terms.

### **Background**

2. At the Board meeting of 29 September 2017, the Board agreed to review their Board Development Plan in around 6 months' time (Appendix 1).
3. As the Board wishes to be proportionate during this transition period, the Board have already agreed that Health Scotland will no longer participate in the Self-Assessment process. Therefore we will not produce a 2018/19 Board Development Plan. This has been agreed and confirmed with the Scottish Government Sponsor Division and was subsequently reported to Board at the 23 March 2018 meeting as part of the Governance Transition paper and plan.
4. It is proposed that over the transition period, the priority for the Health Scotland Board is securing relevant non-executive Board members re-appointment processes post May 2018 and March 2019, so that robust governance and scrutiny of Health Scotland business can continue into autumn 2019.
5. This and any other relevant Board Development issues can be reported in the "Governance Transition plan" that came to Board 23 March 2018 and will be updated and return to 28 September 2018 Board.

### **Finance and Resource Implications**

6. Finance and resource implications have been included as part of the scheduling of Board meetings and the business of the Board.

### **Staff Partnership**

7. There are no specific staff partnership issues associated with this paper. The Board will be taking staff partnership issues into consideration as part of the Staff Governance Committees work, particularly in relation to involving staff during the changes over the next year or so.

### **Communication and engagement**

8. There are no specific internal organisational communication considerations. External communication connections are highlighted in number 2 of the Board Development Plan. They will further emerge and be reported to the Board as part of the transition reports contained within the quarterly performance reports and other updates the Board receive on for example the Public Health Reform

Commissions, the Public Health Oversight Board and the Public Health Programme Board.

### **Corporate Risk**

9. There are no significant associated risks, other than the risk associated with maintaining Board membership once some Board members terms end (May 2018 and March 2019) and this has been included in the 2018/19 risk.

### **Issues Associated with Transition**

10. It is suggested at this time it would not be necessary or proportionate for the Board to conduct further Board Development. The focus will be on maintaining the non-executive Board membership until autumn 2019, in order to provide effective and robust scrutiny of Health Scotland's business and hand over the health inequalities legacy; a well-informed, motivated engaged workforce with balance finances to the new Public Health Scotland organisation. The Board will use the Governance Transition plan and other reports coming to Committees and full Board to govern this.

### **Promoting Fairness**

11. The Board Development Plan includes specific reference to achieving the benefits of having a Board with such diverse skills and life experience.

### **Sustainability and Environmental Management**

12. The Board continues to use digital communication and reduces the use of hard copy papers whenever possible. Internal Health Scotland offices are used whenever possible for Board meetings and Board Seminar discussions.

### **Action/ Recommendations**

13. The Board is invited to:
  - Note that further to the 29 September 2017 Board meeting, the Board agreed to review their Board Development Plan again after around 6 months. The Plan has now been completed (Appendix 1).
  - Agree that further review or development of the Board Development Plan is not necessary or proportionate given that the Health Scotland Board will cease to exist in 2019.
  - Agree that the priority for the Health Scotland Board during this transition period is securing relevant Board members re-appointment processes, post May 2018 and March 2019, so that robust governance and scrutiny of Health Scotland business can continue into autumn 2019.

- Agree that this and any other relevant Board Development issues will be reflected in the “Governance Transition plan” that came to Board 23 March 2018 and will be updated and return to the 28 September 2018 Board meeting.

Della Thomas

Executive and Governance Lead

9 May 2018

**2017-18 NHS Health Scotland Board Development Plan**

**Review: 18 May 2018**

Diagnostic Domain Name	Development Objective	Organisation Impact	Milestones and Measures	Timescale	Lead	Review May 2018
<b>Strategic Intent</b>	1. Board members have a shared understanding and consistently articulate the NHS Health Scotland strategic priorities	Increased confidence that priorities are the right ones and those that will achieve the right impact.	<p>i. Opportunity to discuss and review the shape of our strategic direction in the context of the changing external environment.</p> <p>ii. Board sign off 2017/22 A Fairer Healthier Scotland: A strategic framework for action and Health Scotland Delivery Plan 2017/18</p> <p>iii. Revised terms of reference and work programme for Health Governance Committee (HGC), with more specific role in governance and scrutiny of strategic priorities.</p>	<p>Board Seminar 3.2.17</p> <p>Board Seminar 6.10.17</p> <p>Board Meeting 24.3.17</p> <p>Health Governance Programme of business 2017/18 approved at HGC 3.3.17</p>	<p>Chair, CEO, Director Strategy</p> <p>Chair, CEO, Director PHS</p> <p>Chair, CEO, Director Strategy</p> <p>Chair HGC, HGC Members, Director PHS, Directors and Commissioners</p>	<p>Completed 3.2.17</p> <p>Completed Board Seminars 6.10.17, 2.2.18 and 13.4.18</p> <p>Completed 24.3.17</p> <p>Completed 13.1.17 and 24.03.17</p> <p>HGC purpose and remit during transition further reviewed at HGC meeting 8.3.18 and changes made to the Strategic Priorities reporting process with effect from May 2018</p>

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			<p>iv. Evidence of more focused questioning by members of Health Scotland's progress and impact, using scrutiny framework adopted in HGC ToR.</p> <p>v. More specific evidence of governance of internal strategic change priorities through Staff Governance Committee and Partnership Forum.</p> <p>vi. Detailed examples of work are brought to full Board meeting or a Seminar periodically e.g. as with MESAS work (November 2016) which enable deeper understanding of strategic intent and priorities by Board.</p>	<p>HGC ToR and governance scrutiny questions approved at HGC 13.1.17; HGC ToR approved at Board meeting of 24.03.17.</p> <p>SGC 2017/18 programme of business approved at 17.3.17 meeting</p> <p>Board meeting 19.5.17 and/or Board Seminar 6.10.17</p>	<p>Chair HGC, HGC Members, Director PHS</p> <p>Chair SGC, SGC members and Director of Strategy</p> <p>Chair, CEO support from Executive Governance Lead</p>	<p>Completed – evidence captured in agreement to produce fuller records of minutes during this transition period for example record of Board issues and concerns report to 23.3.18 Board meeting.</p> <p>Completed Change &amp; Transition a standing item on each SGC, PF agendas.</p> <p>Completed HWLs to Board Seminar 6.10.17 and subsequently to Board meeting and 8.3.18 HGC.</p>

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<b>Engaging with Stakeholders</b>	2. Board members confidently fulfil their external Health Scotland ambassador role at events or as part of their own on-going business.	Board members confidently articulate information about Health Scotland priorities and activities, increasing its reputation and influence.	i. Use of themes from Board sign off of 2017-22 A Fairer Healthier Scotland: A strategic framework for action and Health Scotland Delivery Plan 2017-18.  ii. Use of weekly public affairs communications as appropriate.	Board Meeting 24.3.17  To be available as a library in SharePoint from 1 March 2017	All Board members  All Board members support from Executive & Governance Lead	Completed 24.3.17  Completed Whilst SharePoint is not available to non-executive members the Public Affairs communications are published on the Board extranet.
	3. Board members seek and receive support/briefing if representing Health Scotland at an external meeting or event.	Board members are well briefed to develop any particular Health Scotland lines, if required to attend a specific meeting on behalf of the	iii. Notification of any significant Health Scotland events or other events are communicated to Board members as appropriate.	On-going	Executive & Governance Lead & Organisational Lead for Strategic Development	Completed Added to all Board meeting agendas for noting from 19.05.17 onwards.
			i. Board members have sought support to source specific briefings.	As appropriate	Relevant Board Members support from Executive & Governance Lead	Completed Specific briefings haven't been requested to date, except for the Chair.

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		Chair. Their contribution thus achieves the desired outcome for the organisation.				
<b>Holding to Account</b>	4. Board members have increased their governance and scrutiny skills, particularly in relation to prioritisation, measuring impact and pace and purposefulness of stakeholder engagement.	Increased confidence that priorities are the right ones, will achieve the right impact and have been tested with the necessary stakeholders.	<p>i. HGC governance and scrutiny questions are considered to underpin Board ToRs and Board members embrace these in their roles on Board and Committees.</p> <p>ii. Board Seminars capture items on measuring and understanding impact and priority agendas.</p> <p>iii. Annual impact report is met with approval by the Board</p> <p>iv. Board has opportunity to note Health Scotland's stakeholder engagement plan.</p>	<p>Consideration at 24.3.17 Board meeting</p> <p>Board Seminar 7.4.17 and 6.10.17</p> <p>Board meeting 22.6.17</p> <p>TBC</p>	<p>Chair, Executive Executive &amp; Governance Lead</p> <p>Chair, Executive &amp; Governance Lead</p> <p>Director of Strategy</p> <p>Director of Strategy</p>	<p>Completed This was considered suitable for HGC. SGC has now formally considered use of these questions in committee and has decided there is no need to embrace for SGC.</p> <p>Completed 7.4.17 and 6.10.18</p> <p>Completed 22.06.17</p> <p>Completed 23.3.18 The Stakeholder Engagement Plan 2018/2019 was approved at this Board</p>



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			v. Board members are confident that they have a sufficient overview of the pattern and conduct of Board business to enable them to consolidate their governance and scrutiny skills on a continuing basis.	Board and Committee minutes are issued promptly post meetings.	Chairs, Lead Directors, Support from Executive & Governance Lead	and will return to Board 28.9.18 for further review.  Completed
				Board action plans are improved 17.2.17 and CEO updates includes on-going strategic themes, 24.3.17 onwards	CEO, Executive & Governance Lead	Completed 24.3.17 onwards
			vi. Regular updates provided on progress towards establishment of a new public health body and on Health Scotland's contribution to this change process.	Board members seek conversations with Executive & Governance Lead in relation to background to items or test out ideas as appropriate – on-going.	Board members Executive & Governance Lead  Chair, CEO	Completed Updates given at each Board meeting. Board Seminar 6.10.17 covered further and Board Seminars 2.2.18 and 13.4.18  Completed – forms a Standing item on Board agenda.

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				Chair and CEO updates to Board meetings, as part of Board seminars and informal networking sessions – on-going.		
<b>Board Dynamics</b>	5. Board members understand and appreciate the diversity of skills and experience that they collectively bring and make positive use of them to improve Board decision-making.	A Board that exemplifies good practice in mobilising diversity as an aid to decision-making.	<p>i. Effective use of Board Self-assessment survey and Board development session December 2016.</p> <p>ii. Opportunities are created for informal full Board networking (e.g. similar in purpose to Grassmarket session in 23.9.16).</p> <p>iii. Read across has been established with the Commissioner for Ethical Standards in Public Life in Scotland Board Chairs working group.</p>	<p>Board Development Plan is discussed 17.2.17 and re-visited after approx. 6 months 29.9.17 Board meeting</p> <p>At least two opportunities are created in the normal business scheduled as part of a Board seminar or before an already scheduled Board meeting.</p> <p>On-going through Chair's update</p>	<p>Chair, Supported by Executive &amp; Governance Lead</p> <p>Chair, Supported by Executive &amp; Governance Lead</p> <p>Chair</p>	<p>Completed 29.9.17 No further plans to conduct self-assessment process agreed at 23.3.18 Board meeting.</p> <p>Completed 29.9.17 no further action required</p> <p>Completed Health Scotland has submitted evidence contributing to</p>

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						the research July/ August 2017.