

MINUTES – Approved

Public Meeting of the Board of Healthcare Improvement Scotland

Date: 29 March 2023

Time: 10.30

Venue: Virtual Meeting, MS Teams

Present

Carole Wilkinson, Chair

Abhishek Agarwal, Non-executive Director

Jackie Brock, Non-executive Director

Keith Charters, Non-executive Director

Suzanne Dawson, Non-executive Director/Chair of the Scottish Health Council

Gill Graham, Non-executive Director

Nicola Hanssen, Non-executive Director

Judith Kilbee, Non-executive Director

Evelyn McPhail, Non-executive Director

Doug Moodie, Chair of the Care Inspectorate

Robbie Pearson, Chief Executive

Michelle Rogers, Non-executive Director

Duncan Service, Non-executive Director

Rob Tinlin, Non-executive Director

In Attendance

Sybil Canavan, Director of Workforce

Lynsey Cleland, Director of Quality Assurance

Ruth Glassborow, Director of Improvement

Ann Gow, Deputy Chief Executive/Director of Nursing, Midwifery and Allied Health Professions (NMAHP)

Ben Hall, Head of Communications

Angela Moodie, Director of Finance, Planning and Governance

Clare Morrison, Interim Director of Community Engagement

Lynda Nicholson, Head of Corporate Development

Safia Qureshi, Director of Evidence

Simon Watson, Medical Director

Apologies

None

Board Support

Pauline Symaniak, Governance Manager

Declaration of Interests

Declaration(s) of interests raised are recorded in the details of the minute.

Registerable Interests

All Board members and senior staff are required to review regularly and advise of any updates to their registerable interests within one month of the change taking place. The register is available on the Healthcare Improvement Scotland website.

1.	OPENING BUSINESS	<u>ACTION</u>
1.1	Chair's welcome and apologies	
	<p>The Chair opened the public meeting of the Board by extending a warm welcome to all in attendance including those in the public gallery. A particular welcome was extended to Clare Morrison, attending her first Board meeting as Director of Community Engagement.</p> <p>There were no apologies.</p>	
1.2	Register of Interests	
	<p>The Chair asked the Board to note the importance of the accuracy of the Register of Interests and that changes for the Register must be provided to the Planning and Governance Office within one month of them occurring. Any interests should be declared that may arise during the course of the meeting.</p> <p>The Register was approved for publication on the website.</p>	
1.3	Minutes of the Public Board meeting held on 7 December 2022	
	<p>The minutes of the meeting held on 7 December 2022 were accepted as an accurate record. There were no matters arising.</p>	
1.4	Action points from the Public Board meeting on 7 December 2022	
	<p>The action point register was reviewed and updates noted.</p>	
1.5	Chair's Report	
	<p>The Board received a report from the Chair updating them on recent strategic developments, governance matters and stakeholder engagement. The Chair highlighted the following:</p> <ul style="list-style-type: none"> a) The helpful feedback provided by new staff who have attended the informal discussions with the Chair and Chief Executive. b) The request for the Board to approve the Committee Vice Chair positions and to note the Board approved by email the new Chair of the Executive Remuneration Committee. c) A briefing was provided as an appendix summarising the impact of the Chair moving into the role of Chair of the NHS Scotland Board Chairs group which will take place in August. <p>In response to a question from the Board about the timeline for the Patient Safety Commissioner role, it was advised that the Bill is currently at stage one and the Committee has finished taking evidence. Therefore their report is expected by the summer.</p> <p>The Board noted the report and were assured by the activities set out.</p>	
1.6	Executive Report	
	<p>The Board received a report from the Chief Executive and the Executive Team providing information on headline issues and key operational developments.</p> <p>The Chief Executive highlighted the following points:</p> <ul style="list-style-type: none"> a) He reiterated the welcome to Clare Morrison who joined HIS on 23 January and extended congratulations to Safia Qureshi who passed the PgDip Digital Health Leadership course. The Board echoed their congratulations. 	

- b) He visited NHS Fife recently with the Deputy Chief Executive/Director of NMAHP and this provided an excellent opportunity to see services in operation in Victoria Hospital, Kirkcaldy. The Executive team will be doing more work to build relationships on a geographical basis.
- c) The Follow up Review of the Beatson West of Scotland Cancer Centre showed important progress.
- d) Regarding the Accelerated National Innovation Adoption process, it is good to note that Scottish Health Technologies Group and the Director of Evidence are closely involved.
- e) The redeployment register has fallen considerably, demonstrating the organisation's ability to develop people within HIS.

In response to questions from the Board, the Chief Executive and Executive Team provided the following additional information:

- f) News had been received the previous day that Scottish Government (SG) will fund the volunteering platform. Thanks were extended to Tom Steele, Chair of the National Volunteering Board for his assistance with this.
- g) Regarding temporary service changes during the pandemic that will become permanent, there will be a requirement for the Service Change Sub-Committee to consider these.
- h) Regarding clinical involvement in Scottish Intercollegiate Guidelines Network guidelines, the issue is that it is taking longer to secure clinical input but there is appropriate input and no risk to the quality of guidelines.
- i) The numbers of complaints received are so low that it is difficult to identify themes within them. If a theme emerged then targeted improvement work would be delivered to address it.
- j) The Citizens Panel work examining access to GP Services includes the impact on older people as part of looking at different demographics.
- k) The amount of the additional allocation for our dementia improvement work has not been confirmed although a letter of intent has been received. Staff have been redeployed into other roles. This allocation has been one of the largest for the organisation over the previous eight years so discussions are ongoing with SG about moving it to baseline funding.
- l) The staff who have been redeployed recently have been a mixture of moving to different jobs within HIS and exiting the organisation. More information on this will be prepared for the Staff Governance Committee.
- m) Business continuity actions have been stood down in relation to the recent eFinancials incident. Performance levels have returned to those before the outage and although there are still some issues, they are not material and payment deadlines are being met. The system will be audited as part of the audit of the Annual Report and Accounts.
- n) A brand refresh is underway to ensure that all of the HIS brands work together.

The Board examined in detail the report from the Executive Team and the additional information provided above, and were assured by the information reported.

Director of Workforce

2.	SETTING THE DIRECTION	
2.1	HIS Future Strategy 2023-28 and Communications Plan	
	<p><i>Jane Illingworth, Head of Planning & Governance, joined the meeting for this item.</i></p> <p>The Chief Executive introduced the strategy advising that it represents a more integrated organisation with growing confidence that flexes its resources to maximise its strategic advantage.</p> <p>The Head of Planning and Governance highlighted the following points:</p> <ul style="list-style-type: none"> a) Case studies have been added since the previous draft presented to the Board to illustrate approaches in the strategy. b) The appendix sets out actions to deliver the priorities and based on feedback the priorities now better reflect One Team. c) Since the draft presented to the Board in January some roles have been clarified, for example the Community Engagement Directorate future vision is now available. d) The strategy is written to be relevant to the workforce. e) The Equality Impact Assessment has been completed with assistance from the Equality & Diversity Advisor. It applies to the organisation as well as the impacts sought externally. <p>The Chair of the Scottish Health Council (SHC) advised that the SHC Committee had received and discussed the strategy. They welcomed the opportunity to contribute at each stage of its development and were very positive about the final document.</p> <p>The Head of Communications introduced the communications that will support the launch of the strategy:</p> <ul style="list-style-type: none"> f) Familiarity has been built internally, for example through the focussed staff huddle and Chief Executive message. g) The formal launch will be week commencing 17 April 2023 and will feature a week of activities followed by ongoing engagement such as podcasts and conversation pieces, for both internal and external audiences. <p>The Chair of the Quality and Performance Committee advised the meeting that a paper will be provided to the next meeting of the Committee outlining initial proposals for assuring progress with the strategy.</p> <p>Having considered the strategy and the associated communications plan, the Board were content to approve both. Thanks were extended to Jane Illingworth, Lynda Nicholson, Ben Hall and the Communications Team for their work to bring the strategy to fruition.</p>	
2.2	Scrutiny Activity Plan 2023-24	
	<p>The Director of Quality Assurance provided the planned activity of quality assurance for the next year and highlighted the following key points:</p> <ul style="list-style-type: none"> a) The plan may need to be adjusted during the year to reflect any responsive reviews or follow up on assurance findings. b) Some aspects of the plan are subject to ongoing funding discussions such as the work with police custody suites and the phase 2 Adult Support & Protection inspections. HIS is working closely with all partner agencies and all have agreed to support 	

	<p>ongoing multi-agency inspections.</p> <p>c) As well delivering the core assurance work, the directorate is undergoing organisational change to be fit for the future and align to the organisational strategy. Appointed so far are two associate directors, a Chief Inspector and a deputy director.</p> <p>In response to questions from the Board, the following additional information was provided:</p> <p>d) The total footprint of our inspections needs to adapt as we evolve our inspection focus. However, planning does take account of the end to end inspection process including additional time for follow up. The plan continues to take a risk and intelligence based approach to deciding where we undertake an inspection.</p> <p>e) The backlog of inspections was mostly related to independent healthcare providers as we couldn't access services during the pandemic. By the end of the financial year, the number of outstanding inspections will have reduced to two. The variability of this sector is already built into the methodology.</p> <p>f) Regarding joint work, strong partnership working has been key and positive feedback from the Chair of the Care Inspectorate is welcomed.</p> <p>g) Responding to Concerns is a process concerning the safety and quality of care at a system level so it does not address individual complaints. HIS will signpost these complaints as appropriate or assess them if within our remit. It does link to inspection activity and is an unpredictable area in terms of volume though most concerns currently relate to staffing. In these instances, HIS works with its partner agencies.</p> <p>h) Risks are being captured in respect of delivering organisational change at the same time as progressing the directorate work programmes. The posts detailed above will assist with the process and once the new structure is in place, it will provide the directorate with greater resilience.</p> <p>The Board noted the annual scrutiny plan.</p>	
3.	ASSESSING RISK	
3.1	Risk Management: strategic risks	
	<p>The Board received a report on the current status of risks on the strategic risk register and their management. The Director of Finance, Planning and Governance advised the following:</p> <p>a) There are 11 risks on the register. Ten have not changed since the last report but one, related to finance, has decreased from high to medium due to gaining more certainty on some funding.</p> <p>b) Following the Board's risk appetite session in January 2023, appetites statements are being developed and will be provided to the Board seminar in May 2023.</p> <p>c) Work is underway to source a new risk management system as the current system, Compass, is a legacy system that is now out of support. The Audit and Risk Committee will be updated on this in due course.</p> <p>In response to questions from the Board, the following points were clarified:</p> <p>d) To mitigate the cost of a new risk management system, several</p>	

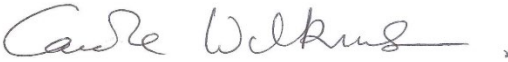
	<p>options are being examined such as the national procurement exercise for territorial Boards or the use of Office365 as a risk system. An update will be provided to the June 2023 meeting of the Audit and Risk Committee.</p> <p>e) Regarding the finance risk reducing, there is now certainty on pay awards for 2022/23 and 2023/24 which Scottish Government will fund. Additional allocations have been received for this year and confirmations are starting to be provided for next year. There is still a risk but the impact is less.</p> <p>f) Regarding the cyber security risk, a one year post has now been approved to support delivery of the areas of focus identified in the national cyber security audit.</p> <p>The Board considered the strategic risk register and, subject to the comments above, gained assurance that the risks presented were being effectively treated, tolerated or eliminated.</p>	
4.	HOLDING TO ACCOUNT – INCLUDING FINANCE AND RESOURCES	
4.1	Integrated Planning 2023-24 including Financial Plan	
	<p>The Director of Finance, Planning and Governance provided a paper setting out the position in relation to planning for 2023-24 including the budget for 2023/24 and the five year plan. The following key points were highlighted:</p> <p>a) HIS has been allocated £33.6m for 2023/24 which includes a 2% uplift. The financial plan presented has a budget of £33.8m which is an overspend but within the 1% tolerance level.</p> <p>b) Savings will be realised through pay costs, IT and the Delta House sub-let.</p> <p>c) The proposed work programme shows a reduction of 21 projects. This will continue to be refined ahead of submission of the Annual Delivery Plan to Scottish Government in June 2023.</p> <p>d) £400k has been set aside for areas for investment including website redevelopment, a second IT server and an associate Medical Director. There are also organisational development and learning costs for support for the One Team redesign. This list will continue to be reviewed.</p> <p>e) The whole time equivalent staff is currently 430 and that will stay broadly flat through 2023/24.</p> <p>f) Pay costs will increase by £1.9m due to the pay award and one-off payment but this will be fully funded by Scottish Government.</p> <p>g) Additional allocations total £7.5m which is a similar value to last year but over a reduced number of projects. £5.6m of this is covered by letters of comfort but HIS is carrying a risk in relation to the remainder.</p> <p>h) In terms of risks, the paper highlights independent healthcare which is financially challenging and will only breakeven in 2023/24; eRostering costs are £370k but it has been excluded from the budget as the implementation plan is fluid; the corporate services recharge has always provided an underlying underspend but this may not be the case next year.</p> <p>i) The recurring savings required of £1.6m are significant and although there are initiatives to achieve this, any delays will risk it not being achieved.</p> <p>j) The five year plan includes a number of assumptions and savings equal to £6m are required over the next five years.</p>	

	<p>k) A balanced budget will be submitted to Scottish Government but it carries more risk and a higher reliance on recurring savings than in the past.</p> <p>In response to questions from the Board, the following additional information was provided:</p> <ul style="list-style-type: none"> l) The funding for Hospital at Home has now been confirmed m) There are initiatives in place to secure the savings and each directorate has a responsibility to deliver. One Team will help to realise benefits. The savings will be tracked and are evenly phased so any slippage will be identified early and corrective action taken. The Audit and Risk Committee as well as the Board will have oversight. <p>Having scrutinised the paper and considered the detailed discussions on the budget at the Audit and Risk Committee meeting on 2 March 2023, the Board approved the 2023/24 budget and the five year plan. They endorsed the work on the work programme to date ahead of receiving the annual delivery plan in June 2023.</p>	
4.2	Organisational Performance Report	
4.2.1	Quarter 3 Performance Report	
	<p>The Director of Finance, Planning and Governance provided a summary report of quarter 3 performance against the work programme and highlighted the following information from within the report:</p> <ul style="list-style-type: none"> a) The full performance report was provided to the Quality and Performance Committee and focussed on the work HIS is delivering to support the system during winter pressures. b) Of the key performance indicators, 14 out of 18 are on target, they remainder being behind target. c) There are currently 89 projects on the work programme and 73% are on target. The main reason for projects being behind target is pressures within the health and care system. Projects continue to pivot in response to those pressures. d) Certainty of funding continues to be a challenge such that some projects are paused with their staff placed on redeployment, creating significant risks to delivery. e) 14 new commissions were received over the financial year and some requests declined. <p>The Board examined the performance report and gained assurance from the progress reported.</p>	
4.2.2	Financial Performance Report	
	<p>The Director of Finance, Planning and Governance provided a summary report setting out the financial position as at the end of February 2023 and highlighted the following points:</p> <ul style="list-style-type: none"> a) The January position was provided to the Audit and Risk Committee and there has not been significant change since. The position remains as £150k underspent which is within the 1% tolerance. The year-end position is predicted to be breakeven or to be within the 1% tolerance figure, although some risks remains due to the very late pay award and higher non-pays spend in March. b) There is a £400k overspend on the pay budget but this has been offset by savings in non-pays. 	

	<p>c) Regarding Additional Allocations, funding of £7.1m has been received and Scottish Government have been advised that no further funding is required in 2022/23 due to delays in funding resulting in slower delivery or pausing of projects in the second half of the year.</p> <p>d) The year-end process for the Annual Accounts will be: draft performance and accountability report to the Board in April 2023; full set of draft accounts to the Board in May 2023; formal review of the annual report and accounts by the Audit and Risk Committee and the Board in June 2023.</p> <p>The Board scrutinised the financial report and were content with the position reported. They noted that additional scrutiny had been provided by the Audit and Risk Committee earlier in the month and they commended the work to achieve the current financial position given the challenges this year.</p>	
4.2.3	Workforce Report	
	<p>The Director of Workforce took the meeting through the summary workforce report and highlighted the following points:</p> <p>a) The headcount at the end of February is 581, of these 544 are on payroll while the remainder are secondees.</p> <p>b) During the financial year 85 people left the organisation while 109 joined, representing an increase of 24.</p> <p>c) The sickness absence rate is currently 2.4% and the main causes remain stress, anxiety and depression.</p> <p>d) There have been 98 recruitment campaigns over the financial year.</p> <p>The Chair of the Staff Governance Committee confirmed that the Committee had received and scrutinised the full workforce report.</p> <p>Having scrutinised the report, the Board were assured by the workforce information set out.</p>	
4.3	One Team Update	
	<p>The Chief Executive provided an update on the One Team programme which covered the following areas:</p> <p>a) The purpose of One Team is to create a whole organisation approach to our work that builds flexibility and resilience.</p> <p>b) A One Team programme board has been established to lead the work and is chaired by the Chief Executive. Governance and reporting mechanisms are in place.</p> <p>c) There are four workstreams: efficiencies; redesign; workforce; working environment.</p> <p>In response to questions from the Board, the following additional points were made:</p> <p>d) The work will be inclusive through the use of staff surveys, staff focus groups, sofa sessions, frequently asked questions and communications in relation to each workstream.</p> <p>e) A development pool will support better succession planning and skills analysis, and help with the identification of single points of failure.</p> <p>f) The Board will receive reports on One Team progress and it is embedded within the performance report. Committees will receive</p>	

	<p>reports on the elements specific to their remits.</p> <p>g) Communications and branding will link to the strategy and help people to see the organisation as a connected whole. Case studies will be used.</p> <p>The Board noted the update on One Team.</p>	
5.	ENGAGING STAKEHOLDERS	
5.1	Healthcare Staffing Programme (HSP)	
	<p><i>Lesley MacFarlane, Portfolio Lead; Nancy Burns, Portfolio Lead; Kelly Waldie, HSP Programme Advisor and Sandra Ross, Excellence in Care Improvement Advisor joined the meeting for this item.</i></p> <p>The Deputy Chief Executive/Director of NMAHP introduced this item and the presentation from staff covered the following areas:</p> <ul style="list-style-type: none"> a) HIS has been given responsibilities under the Health and Care (Staffing) (Scotland) Act 2019 which will be enacted on 1 April 2024. Ahead of this, some facets of the act have been incorporated into current practices. b) HIS' duties include monitoring and reporting on Health Boards' compliance. c) The work programme is underpinned by the One Team approach and the Quality Management System. d) Themes are emerging including systems and workforce under significant pressures. e) Details were provided of work delivered with NHS Ayrshire and Arran and the positive impact of this. <p>In response to questions from the Board, the following information was given:</p> <ul style="list-style-type: none"> f) The support provided is tailored to the individual Board but there will be areas of common learning that can be applied to the work with the next Board and aspects that can be scaled up, for example safety huddles. g) Where it is a requirement of Boards to work with us rather than a request, the approach will be supportive and underpinned by building good relationships. We will emphasise that HIS is available to help Boards to meet their duties under the act. h) As the legislation is not yet fully enacted, there is no requirement for HIS to intervene but in future it is likely that monitoring reports or a high profile issue will lead to a HIS intervention. Most of these interventions will be system level support to ensure the safety of care. The enactment comes at a challenging time for Boards alongside staff recruitment and retention issues and financial challenges. i) The learning from the work has been captured and care studies created. j) There is complexity in the work and the performance management culture influences it as well. These aspects will be examined in the Board masterclass later in the year. <p>The Board gained assurance from the information presented and thanked staff for an excellent presentation.</p>	

5.2	Equality Mainstreaming Report Update	
	<p>The Director of Community Engagement presented this paper which is an update required every two years and includes progress on the four equality outcomes identified in the 2021 Equality Mainstreaming report. It demonstrates most progress on outcomes one and four but the next two years will focus activities on outcomes two and three. The report also provides details of the ethnicity and disability pay gaps with actions to address these.</p> <p>The meeting noted that the draft report had already been considered by the SHC Committee, the Staff Governance Committee, the Equality and Diversity Working Group, Partnership Forum and the Executive Team.</p> <p>The Board noted the report.</p>	
5.3	Corporate Parenting and Children's Rights Report 2020-23	
	<p>The Director of Quality Assurance provided this combined report, advising that there was a requirement to publish this report and the criteria are set out in a Scottish Government framework. The pandemic has impacted some of the planned work but there is still some good progress and we continue to build our corporate parenting role.</p> <p>The meeting noted that the report had already been considered by the Quality and Performance Committee and the Staff Governance Committee.</p> <p>In response to questions from the Board, the following additional information was provided:</p> <ul style="list-style-type: none"> a) Corporate parenting is embedded across the organisation through the Children and Young People Working Group and by some of our work programmes working directly with children and young people. Case studies and impact assessment forms are shared. b) There are practical actions that can be incorporated into recruitment processes to assist care experienced people but these depend on the individual choosing to disclose this information. <p>The Board noted that a corporate parenting Board masterclass will be delivered during April. The Board considered the draft report and were content to approve it for publication. Thanks were extended to Chris Third and Maureen Scott for their contribution to the report.</p>	
6.	GOVERNANCE	
6.1	Governance Committee Chairs: key points from the meeting on 25 January 2023	
	The Chair advised that the meeting had considered the continuation of the risk deep dive approach; committee development needs; and cross-cutting issues. The Board noted the key points.	
6.2	Audit and Risk Committee: key points from the meeting held on 2 March 2023; approved minutes from the meeting on 23 November 2023	
	The Committee Chair advised that the key topics discussed were risk appetite and how staff take ownership of risk; good progress with the format of the financial report; and the change in both internal and external auditors. The Board noted the key points and minutes.	

6.3	Quality and Performance Committee: key points from the meeting on 22 February 2023; approved minutes from the meeting on 2 November 2022	
	The Committee Chair highlighted the discussions on a new paper about projects at risk; the Committee's support for changes to the format of the Sharing Intelligence for Health and Care Group; and a presentation on primary care improvement work. The Board noted the key points and minutes.	
6.4	SHC Committee: key points from the meeting on 2 March 2023; approved minutes from the meeting on 17 November 2022	
	The Chair of the SHC highlighted issues related to service change in respect of temporary changes made during the pandemic now being becoming permanent and the implications for engagement. The Board noted the key points and minutes.	
6.5	Staff Governance Committee: key points form the meeting on 1 March 2023; approved minutes from the meeting on 6 December 2022	
	The Committee Chair highlighted that the key points had been covered by agenda topics at this meeting except matters in relation to the working environment including hybrid working and One Team. The Board noted the key points and minutes.	
6.6	Succession Planning Committee: key points from the meetings on 19 January and 15 March 2023; approved minutes from the meetings on 15 June 2022 and 19 January 2023	
	The Committee Chair advised that the recent meetings had focussed on the Board vacancy and oversight of the Aspiring Chairs programme. The Board noted the key points and minutes.	
7.	ANY OTHER BUSINESS	
	There were no items of any other business.	
8.	DATE OF NEXT MEETING	
8.1	The next meeting will be held on 28 June 2023. Members of the press and public were excluded from the remainder of the meeting due to the confidential nature of the business to be transacted, disclosure of which would be prejudicial to the public interest.	
	Name of person presiding: Carole Wilkinson Signature of person presiding:  Date: 28/6/2023	