

MINUTES – Approved

Public Meeting of the Board of Healthcare Improvement Scotland

Date: 29 June 2022

Time: 10.30 – 14.50

Venue: MS Teams Videoconference

Present

Carole Wilkinson, Chair

Jackie Brock, Non-executive Director

Keith Charters, Non-executive Director

Suzanne Dawson, Non-executive Director

Paul Edie, Non-executive Director

Gill Graham, Non-executive Director

Nicola Hanssen, Non-executive Director

Rhona Hotchkiss, Non-executive Director

Christine Lester, Non-executive Director

Evelyn McPhail, Non-executive Director

Robbie Pearson, Chief Executive

Duncan Service, Non-executive Director

In Attendance

Sybil Canavan, Director of Workforce

Lynsey Cleland, Director of Community Engagement

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

Ben Hall, Head of Communications

Ruth Jays, Interim Director of Community Engagement

Angela Moodie, Director of Finance, Planning and Governance

Lynda Nicholson, Head of Corporate Development

Safia Qureshi, Director of Evidence

Belinda Robertson, Deputy for Director of Improvement

Simon Watson, Medical Director

Apologies

Ruth Glassborow, Director of Improvement

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.</p> <p>The Chair asked the meeting to note that this is the last formal Board meeting for two Board members whose appointments will soon end: Paul Edie and Christine Lester. The Chair extended her thanks for their contribution during the years of their appointments.</p> <p>Apologies were noted as above.</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 23 March 2022	
	<p>The minutes of the meeting held on 23 March 2022 were accepted as an accurate record.</p>	
1.4	Action points from the Public Board meeting on 23 March 2022	
	<p>The action point register was reviewed and the updates against each action accepted.</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 points:</p> <ul style="list-style-type: none"> a) The new Code of Conduct was approved by email as the timeline fell outwith the meetings schedule. b) She attended the NHS Scotland event in Aberdeen the previous week. The HIS Communications Team ran a stall which was very well supported with over 200 attendees. In the poster competition the HIS poster about the homelessness project received a rosette. Hospital at Home was mentioned in the Cabinet Secretary's opening remarks. As well as these highlights, the event afforded an excellent opportunity to engage with stakeholders on a face to face basis. <p>In response to questions from the Board, the following additional information was provided:</p> <ul style="list-style-type: none"> c) Regarding the Centre for Sustainable Delivery, a mapping exercise of our areas of work has been completed to ensure there is no overlap or duplication. HIS' expertise in the innovation pipeline and use of evidence has been recognised. The use of evidence is now embedded in processes and making a difference to decisions being made. The Community Engagement Directorate are also working with the Centre to ensure that community engagement is embedded in its functions. 	

	The Board noted the report.	
1.6.1	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 Chair’s comments about Hospital at Home featuring at the NHS Scotland event and commended Belinda Robertson and her team for its successful delivery. b) The Key Delivery Areas (KDAs) have been reviewed to align with the organisational strategy and enable connected work across programmes. Key outcomes will be developed for each over the coming months. c) An excellent development session on complaints handling was held on 6 June 2022 for the Executive Team and some of the Non-executives Directors. d) Infection prevention and control standards have been published and are an excellent demonstration of our leading role in the development of standards. There is currently a significant challenge in securing clinical expertise for our work given the frontline pressures. e) The Career Ready programme sees five students join HIS for four weeks to gain learning in the work environment. It is also a good demonstration of HIS being an attractive employer to work for. <p>In response to questions from the Board, the Chief Executive and Executive Team provided the following additional information:</p> <ul style="list-style-type: none"> f) Measurement of outcomes in the access to GP services work will use data from Public Health Scotland and also our own data with the assistance of the Data Measurement and Business Intelligence Team. It will also use data from the gathering views exercise. Patient involvement will commence once the GP clusters start and we will work with groups in the area who are already linked with patients. g) The timeline for the Healthcare within Justice programme is at the initial scoping phase to develop methodology. As it’s a new programme, there is a need to identify a baseline before inspection activity commences in 2023. Links are being made with all of the key partners. h) The new KDAs do not include a KDA for older people but this does not mean that the priority of work related to older people has reduced. However, work related to older people is found throughout a lot of our programmes. i) Complaint number 1 related to the Scottish Medicines Consortium (SMC) was a technical issue with a particular programme. It was an unusual event but changes have subsequently been made. Three of the complaints on the report relate to SMC but this increase is due to now treating feedback from companies that SMC work with as complaints. This gives the feedback more visibility. All previous feedback has been dealt with appropriately despite not being logged as a complaint. Overall, more contacts with HIS are now treated as complaints that weren’t treated in this way before and this has also caused a rise in numbers. 	

	<p>j) Regarding ensuring the safety of new innovations, these are underpinned by robust methodology.</p> <p>k) Regarding office use since the start of the test of change period, the data being collected does show some trends such as Monday and Friday being the days with least attendance in the office. The numbers may be affected by the start of the summer holidays and higher Covid-19 prevalence. Most Boards have reported that they expect to wait one or two years before having a settled picture of office attendance. HIS will review its data at the end of the test of change period.</p> <p>l) The iMatter survey has launched and is showing good staff engagement so far. It has returned to using larger teams following concerns expressed last year about anonymity of small teams. The survey may provide additional data in relation to the test of change period.</p> <p>m) Hybrid ways of working can assist with gaining clinical input to our work along with different approaches to securing this.</p> <p>The Board examined in detail the report from the Executive Team and the additional information provided above, and were content with the information reported.</p>	
1.6.2	COVID-19 Inquiry	
	<p>The Head of Corporate Development provided an update on the early stages of the inquiry and highlighted the following points:</p> <p>a) HIS is preparing a proportionate response but the period that the inquiry covers extends to December 2022 so the HIS response will be based on what is known at this time.</p> <p>b) A small group of staff is looking at evidence sources and is being assisted by the Central Legal Office. The group is developing a timeline and a narrative that shows the contribution that HIS has made.</p> <p>c) Priorities in the short term are gaining more clarification, reviewing academic scoping reports and focusing on the health portfolio.</p> <p>In response to questions from the Board, the following additional information was provided</p> <p>d) There is unlikely to be a risk related to finding documentation but work will be done to collate it into one location.</p> <p>e) Although HIS is participating in the inquiry, other organisations will have a larger role. However, HIS will have some key learning to share.</p> <p>f) The UK Covid-19 inquiry will aim not to duplicate requests but there may be some overlap. However, it is likely that the same HIS response can be used for both.</p> <p>The Board noted the update and that future progress will be reported as the inquiry develops.</p>	
2.	SETTING THE DIRECTION	
2.1	HIS Future Strategy Consultation Feedback	
	<p>The Chief Executive provided a summary of the consultation feedback received to date on the future organisational strategy and highlighted the following points:</p> <p>a) He extended his thanks to Charis Miller in the Evidence</p>	

	<p>Directorate who assisted with the collation.</p> <ul style="list-style-type: none"> b) There will be ongoing engagement with members of the Scottish Health Council Committee about the consultation response. c) The wider system in which HIS operates is in a very dynamic state in relation to pressures, the Resource Spending Review (RSR) and the National Care Service (NCS). Therefore it is proposed that further time is taken to refine the strategy in light of this. <p>The Head of Corporate Development added that there has been wide engagement using a variety of approaches, including internal engagement, Scottish Government and public engagement with the assistance of the Community Engagement Directorate.</p> <p>The Head of Planning and Governance advised that a small staff group including communications colleagues is examining the feedback in more depth and in August a strategy session will be held for the Chair and Executive Team to discuss the next draft.</p> <p>The Board considered the feedback presented and the comments above. It was agreed not to approve the strategy at the September Board meeting but to undertake further work then present it to the December meeting which will also allow the five new Board Members to engage with it. However, the Board were keen that although the final strategy will be agreed, there remains scope for flexibility in the future.</p>	
2.2	COVID-19 Latest Operational Update	
	<p>The Director of Finance, Planning and Governance who is lead for the Covid-19 response, provided a verbal update on the latest developments in the pandemic response and highlighted the following:</p> <ul style="list-style-type: none"> a) The Covid Emergency Response Team (ERT) continue to meet but will transition to functioning as a resilience group. b) In discussion with ERT, the Health & Safety Committee and Partnership Forum it has been agreed to lift restrictions in offices from early July. This will align with Scottish Government guidance but colleagues will be asked to remain respectful of those who prefer to maintain distancing. c) The national temporary Covid-19 policies are ending and from 31 August 2022 special leave will no longer be awarded for Covid-19 related absence. This will now be assigned as sick leave. d) There were some positive cases of Covid-19 following a staff face to face event but not an outbreak scenario. e) It is proposed that this Covid-19 update will in future be covered within the Executive Report. <p>The Board considered the latest position and were assured by the actions in place to continue to work within the context of Covid-19. The Board agreed that future updates should be set out within the Executive Report.</p>	
2.3	Workforce Plan 2022-25 Overview	
	<p>The Director of Workforce provided a paper setting out the latest position with Workforce Plan development and associated guidance. She highlighted the following points:</p> <ul style="list-style-type: none"> a) The Workforce Plan supports the strategy and operational delivery but as discussed earlier in the meeting, there are many 	

	<p>dynamic factors influencing this.</p> <ul style="list-style-type: none"> b) The timeline requires a draft to be provided to Scottish Government by the end of July but the Staff Governance Committee will review it first at their meeting on 3 August 2022. Scottish Government will provide feedback about any gaps in the first draft. c) The plan needs to take account of many factors including new commissions, workforce risks, the RSR and our ambitions to be the best public sector employer. The RSR and subsequent budget implications will play a role in shaping the future workforce, as will hybrid working and shared services. d) The organisation's headcount will be reviewed to ensure future years are affordable. This will be discussed with the Executive Team and Partnership Forum. <p>In the discussion that followed, the Board raised points about the impact of current pay negotiations and the cost of living crisis which could raise the risk of industrial action. They also noted how original plans for the coming years had shown a growth in workforce but the RSR will require a reduction in staffing to pre-Covid levels.</p> <p>The Board noted the update and were content with the direction of travel given the number of current variables.</p>	
<p>3.</p>	<p>ASSESSING RISK</p>	
<p>3.1</p>	<p>Risk Management: strategic risks</p>	
	<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> <ul style="list-style-type: none"> a) There are 11 risks on the register which is a reduction of one since the March report. This is due to closure of a workforce risk following review by the Staff Governance Committee. b) Risk ratings have changed due to the application of the new appetite in the Risk Management Strategy approved by the Board in March. The highest rated risks relate to the impact of Covid-19, cyber security and service change. c) The new Risk Manager will be undertaking a review of the strategic risks register to ensure consistency. d) The Audit and Risk Committee reviewed the strategic risk register at its meeting the previous week and were content with the information presented. <p>It was agreed to review the wording and mitigations for risk 1131 in relation to the NCS as the bill has now been published.</p> <p>The Board considered the strategic risk register and, subject to the comment 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	Annual Accounts 2021-22	
	<p><i>Rebecca McConnochie, Deloitte, joined the meeting for this agenda item.</i></p> <p><u>Draft Annual Accounts 2021-22</u></p> <p>The Director of Finance, Planning and Governance provided the draft accounts and advised the following:</p> <ol style="list-style-type: none"> a) There was a net expenditure of £34.5m with an underspend of £0.2m which is within the 1% tolerance. b) 86% of spend was on staff costs and that had increased by 9% during the year as a result of staff numbers increasing. At year end the whole time equivalent was 494. c) £1.6m was spent on the Delta House refurbishment bringing the total spend on that to £1.9m. It is expected to cost £2.2m in total which is line with the Scottish Government budget. d) Dilapidation decreased during the year from £0.5m to £0.4m. e) The Accounts have been produced in line with the relevant standards. f) The movement schedule details changes since the Annual Accounts workshop. g) The Accounts have already received detailed scrutiny by the Board offline and at the Annual Accounts workshop. They were considered by the Audit and Risk Committee at its meeting on 23 June 2022 and they were content to recommend to the Board that the Annual Accounts for 2021-22 are adopted. <p>The Chair of the Audit and Risk Committee confirmed that the Committee recommended adoption. She advised that the process of preparation of the Annual Accounts which allows the Board to have early sight of them is welcome.</p> <p>Thanks were extended to the Finance Team and to Deloitte for their collaborative working.</p> <p>The Board approved the Annual Accounts for 2021-22.</p> <p><u>External Audit: Report to those charged with governance (ISA 260)</u></p> <p>Deloitte presented the ISA260 reported and highlighted the following points:</p> <ol style="list-style-type: none"> h) The report was provided to the Audit and Risk Committee who requested some wording changes in relation to HIS' financial sustainability. i) No significant financial adjustments were required in the accounts. j) Some adjustments were needed regarding disclosures but that's common across Boards. k) There will be a transition to a new External Auditor in October 2022. Deloitte will provide a handover and assist with this year's after action review. <p>The Board noted the ISA260 report.</p> <p><u>Audit Assurance Letters</u></p> <p>The Director of Finance, Planning and Governance presented the two</p>	

	<p>assurance letters and advised the following:</p> <ul style="list-style-type: none"> l) The letter of significant issues is a letter from the Chair of the Audit and Risk Committee to Scottish Government stating that they are not aware of any significant issues of fraud. m) The letter of representation is a letter from the HIS Chief Executive to Deloitte confirming the accuracy of the financial statements. It follows standardised wording. n) The Audit and Risk Committee received both letters at its meeting on 23 June 2022 and were content to recommend to the Board that they are signed. <p>Having considered the letters, the Board approved their signing.</p>	
4.2	Whistleblowing Champion Annual Report	
	<p>The Non-Executive Whistleblowing Champion provided their annual report and highlighted the following points:</p> <ul style="list-style-type: none"> a) There have been no cases of whistleblowing in HIS but vigilance is being maintained to ensure nothing is missed. b) The Champion is assured that the system in place in HIS is working well and everything is being captured that needs to be. c) There are still improvements to be found in learning from the rest of the system. d) The Independent National Whistleblowing Officer is giving a firmer steer about where whistleblowing might sit within Boards. Some Boards have moved it to sit within the remit of their Audit and Risk Committee or Clinical Governance Committee but there is a variety of arrangements. However, it is proposed that in HIS it remains within the remit of the Staff Governance Committee but still reports to the full Board via this annual report. <p>In response to a question from the Board, the Non-Executive Whistleblowing Champion advised that across all Boards the new process and increased visibility is causing more whistleblowing cases to arise, some of these are Covid related.</p> <p>Having discussed the paper, the Board accepted the annual report on whistleblowing in HIS.</p>	
4.3	Organisational Performance Report Quarter 4	
	<p>The Director of Finance, Planning and Governance provided a summary report of quarter 4 performance and highlighted the following information from within the report:</p> <ul style="list-style-type: none"> a) The report is a new style of report which summaries the key points from the full report that was provided to the Quality and Performance Committee. b) 96 projects were active including IIOB (Internal Improvement Oversight Board) activities at the end of Q4, which is one less than the previous quarter. 74 projects were on target and 22 were running behind plan. Four projects were completed and there are three new projects. c) The Quality and Performance Committee discussed the projects running behind target which are mostly due to Covid-19 and associated system pressures. The Committee also noted that the backlog with the Independent Healthcare inspections has reduced and they received the high/very high operational plan risks which had increased from one to four. 	

	<p>d) An update on the Remobilisation Plan was also provided to the Committee and they discussed five new commissions.</p> <p>In response to a question from the Board, it was advised that it was not an onerous task to create the summary report from the full performance report.</p> <p>The Board examined the performance report. They welcomed the new style of report and gained assurance from the progress reported.</p>	
4.4	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 May 2022 and highlighted the following points:</p> <ul style="list-style-type: none"> a) The full financial performance report was provided to the Audit and Risk Committee at its meeting the previous week. b) Spend to date is £6.2m which represents a £0.2m overspend. This has been driven by spend on laptops which was brought forward and by lower than anticipated staff turnover. This is expected to correct itself but will be closely monitored. c) The full year financial forecast is £0.4m over budget but the RSR supersedes budget assumptions. d) The RSR is not a budget but is an outline of spending plans for the rest of parliament up to 2026/27. The health and social care budget has a 3% increase but in reality this is a reduction due to higher than predicted inflation. e) The significant points in the RSR are the proposal to hold total public sector pay bills at 2022-23 levels and to return the workforce to pre-covid levels. Boards are asked to self-fund any pay increases above 2%. This could equate to approximately £1m for HIS this year. Achieving pre-covid staffing levels in HIS equates to a 13% reduction in staff numbers. f) More detail will be available after all Boards have submitted their quarter 1 financial results. The Executive Team is already examining actions to ensure there is flexibility in our financial position. <p>In response to questions from the Board, the following additional information was provided:</p> <ul style="list-style-type: none"> g) The full year forecast assumes that we will return to the original budget assumptions over the next 10 months. If staff turnover remains low then there is some risk associated with this but it is too early to quantify. h) For HIS to return to pre-covid staffing levels this means 55 less staff but alongside this there will be a need to examine the operational plan to decide what work will not be delivered in light of reduced staff numbers. Territorial Boards have a bigger challenge because they need to protect frontline services, therefore there will be higher losses in back office functions. HIS can assist Boards with this challenge through our work programmes. i) It is the baseline that is affected by the RSR and additional allocations continue to grow as there is a lot of investment in programmes to address pressures. j) The balance in our budget will shift between baseline funding and additional allocations if it is only baseline that is affected by the 	

	<p>RSR. Future financial reporting will capture this.</p> <p>k) In terms of setting out scenarios, not knowing the pay award yet is the biggest challenge. If HIS has to fund 3% then this equates to 15 whole time equivalent (WTE) staff. This model could be managed through attrition and the Internal Improvement Oversight Board's process mapping activity. There is also the possibility of sharing roles with other Boards. However, the biggest challenge at the moment is the lack of certainty as the RSR sets out intentions rather than detailed budgets.</p> <p>l) Discussions will be held with our Scottish Government sponsor division about the workforce challenges and the risks related to the infrastructure that supports additional allocations.</p> <p>Having scrutinised the report, and subject to the uncertainties related to the RSR, the Board were assured by the financial performance set out.</p>	
4.5	Workforce Report	
	<p>The Director of Workforce took the meeting through the workforce report and highlighted the following points:</p> <p>a) Work is underway to turn the report into a summary version as the full report is provided to the Staff Governance Committee.</p> <p>b) There has been an increase in headcount of 33 and the attrition rate is slightly improved.</p> <p>c) The current sickness absence rate is 2.6%.</p> <p>In response to questions from the Board, the following additional points were provided:</p> <p>d) The average days to start figure is skewed by senior roles which tend to have a longer lead in time. It is not known what the longest time is to reach offer stage but this information will be checked.</p> <p>e) The change in national policy such that covid related illness will be recorded as sick leave from 1 September 2022 is likely to lead to a rise in sickness absence rates.</p> <p>f) There is a risk that Boards could recall secondees to tackle pressures or headcount challenges.</p> <p>Having scrutinised the report, the Board were assured by the workforce information set out.</p>	Director of Workforce
5.	ENGAGING STAKEHOLDERS	
5.1	Communications Strategy	
	<p>The Head of Communications provided a new communications strategy and highlighted the following points to the Board:</p> <p>a) The new strategy has arisen from a thorough review of HIS' communications function and includes activities to ensure the organisation gets recognition for the work that it delivers.</p> <p>b) A dedicated press office will be set up to source success stories from within the organisation and ensure they are placed with media outlets.</p> <p>c) Work will be done to ensure that HIS is integral to any media stories as often HIS is cut out of these stories.</p> <p>d) There is now an excellent range of skills within the Communications Team including research and podcast production.</p> <p>e) The costs of the strategy are in the headcount of the team.</p>	

	<p>f) Vacancies have been filled but a renewed structure will bring better results.</p> <p>In response to questions from the Board, the following answers were provided:</p> <p>g) The on call arrangements will not be onerous as it involves having one person available at weekends and public holidays, and an informal arrangement is already in place for this.</p> <p>h) There is a need to get right the corporate narrative so that the contribution of HIS is explained well, especially in the current challenging circumstances.</p> <p>i) The use of awards ceremonies will be reviewed to ensure they provide worthwhile outcomes and a HIS awards ceremony may be considered in due course.</p> <p>j) The work includes identifying our key audiences which includes staff. This will enable better targeting of communications.</p> <p>k) There is a communications forum for national Boards and a communications leads group, both of which promote the work of the national Boards.</p> <p>l) Training options will be explored to ensure that the Executive Team, Non-Executive Directors and any specialists who will be doing media interviews have the skills needed.</p> <p>m) Opportunities will be sought with both local and national media outlets.</p> <p>The Board welcomed the Communications Strategy and the plans set out within it.</p>	
6.	GOVERNANCE	
6.1	Governance Committee Annual Reports 2021-22	
	<p>The Director of Finance, Planning and Governance provided a summary of the Governance Committee annual reports for 2021-22 and highlighted the following points:</p> <p>a) All Committees reported that they met their remit and all reviewed their terms of reference.</p> <p>b) The success of the risk deep dives was highlighted throughout the reports.</p> <p>c) The actions that each Committee identified for the next year are captured in the appendix and an update will be provided to the Board midway through the year.</p> <p>The Board considered the annual reports presented and were assured that the Governance Committees had met their remits.</p>	
6.2	Code of Corporate Governance	
	<p>The Director of Finance, Planning and Governance presented an updated Code of Corporate Governance and outlined the key changes:</p> <p>a) There are updates to the terms of reference for the Board and Committees following review during the annual reporting cycle and changes within the Standing Financial Instructions. There are no changes in the Standing Orders section.</p> <p>b) Regarding spend or business cases, the wording has been clarified about what comes to the Board for approval.</p> <p>c) The procurement thresholds have changed to bring HIS into alignment with other Boards and to meet Internal Audit</p>	

	<p>recommendations. This means that amounts up to £5k no longer need three quotes and a decision can be made by the individual. For context, the total spend that would have been affected last year by this is £500k.</p> <p>d) Non-competitive tenders for clinical advisers now need to be approved by the Medical Director or the Director of Nursing, Midwifery and Allied Health Professionals.</p> <p>e) The Audit and Risk Committee received the updated Code at its meeting on 23 June 2022 and were content to recommend to the Board that it is approved.</p> <p>In response to comments from the Board about opportunities for informal meetings for Non-Executive Directors, it was agreed that the Chair and Governance Manager will review this but that no changes were needed to the Code presented.</p> <p>The Board considered the detail of the updated Code and were content to approve it.</p>	Governance Manager
6.3	Governance Committee Chairs: key points from the meeting on 13 April 2022	
	<p>The Chair advised that the Chairs discussed risk deep dives and how useful these are proving to be, new ways of working for the Board and its Committees, and the implications of the organisation's future strategy on our legislative powers.</p> <p>The Board noted the key points.</p>	
6.4	Audit and Risk Committee: key points from the meeting on 23 June 2022; approved minutes from the meeting on 16 March 2022	
	<p>The Committee Chair highlighted three areas of the Committee's work:</p> <p>a) Business resilience is more prominent on the Committee's agenda and includes sustainability, business continuity and IT infrastructure.</p> <p>b) The Internal Audit annual plan for 2022-23 was approved by the Committee and will be shared with the other Committee Chairs to note areas of audit that fall within their remits.</p> <p>c) The Committee examined in detail the financial performance report.</p> <p>The Board noted the key points and minutes.</p>	
6.5	Quality and Performance Committee: key points from the meeting on 18 May 2022 and approved minutes from the meeting on 23 February 2022	
	<p>The Committee Chair highlighted the following points:</p> <p>a) The Committee received the Quality Assurance framework and were assured with the progress reported in this area.</p> <p>b) A paper was provided about the transfer to HIS of the decision support programme but the Committee sought more information on the finances and exit plan. Therefore it will come back to the next meeting.</p> <p>c) Responding to Concerns case numbers are increasing and work is being done to understand the cause.</p> <p>In response to a question from the Board, the Director of Quality</p>	

	<p>Assurance advised that the reason for the increase in Responding to Concerns cases is multifactorial. Publicity about the process has prompted more cases and the increased pressures in the system currently is also increasing numbers. If the high level continues, the resources to deliver the work will be reviewed. Common themes across complaints and concerns are also being examined.</p> <p>The Board noted the key points and minutes.</p>	
6.6	<p>Scottish Health Council Committee: key points from the meeting on 19 May 2022 and approved minutes from the meeting on 17 February 2022</p>	
	<p>The Committee Chair highlighted the following points:</p> <ul style="list-style-type: none"> a) The Governance for Engagement sub-committee seeks assurance that all directorates are including engagement in their work. It is coming to the end of the first cycle of this work and the next cycle will focus on reviewing this information but will be more light touch. The third cycle will align to the framework for quality engagement. b) The Committee will hold a face to face development session the following day which will be the first opportunity since the start of the pandemic to meet this way. <p>The Board noted the key points and minutes.</p>	
6.7	<p>Staff Governance Committee: key points from the meeting on 11 May 2022 and approved minutes from the meeting on 9 March 2022</p>	
	<p>The Committee Chair advised that the Committee discussed equality networks which are now all in place within HIS. Next steps are to ensure that the input of the networks is maximised within our work programmes.</p> <p>The Board noted the key points and minutes.</p>	
6.8	<p>Succession Planning Committee: key points from the meeting on 15 June 2022 and approved minutes from the meeting on 25 January 2022</p>	
	<p>The Committee Chair advised that five new Board Members are being appointed and therefore there will not be a need for Board recruitment in the near future. Accordingly the Committee will refocus its work and have oversight of Board development.</p> <p>The Board noted the key points and minutes.</p>	
7.	<p>ANY OTHER BUSINESS</p>	
	<p>There were no items of any other business.</p>	
8.	<p>DATE OF NEXT MEETING</p>	
8.1	<p>The next meeting will be held on 28 September 2022.</p> <p>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.</p>	
	<p>Name of person presiding: Carole Wilkinson</p>	

Signature of person presiding:

Carole Wilkins

Date: 28/9/22