

Greater Glasgow NHS Board**Board Meeting**

Tuesday, 18 February, 2003

Board Paper No. 03/9(c)

Chief Executive

Governance Aspects**Recommendation:**

Members are asked to:-

- i) receive this discussion paper which sets out the suggested “governance” role for the NHS Board during the implementation of the Acute Services Plan;
- ii) determine whether the arrangements proposed require further strengthening.

1. Background

- 1.1 At the Board’s November meeting, the Vice Chairman asked the Chief Executive to prepare a paper which set out the Board’s “governance” responsibilities as the Acute Services Plan moved to the implementation stage. This discussion paper proposes a way forward and identifies three key strands of the Board’s potential “governance” role: in being assured that the overall project implementation plan is credible and is implemented timeously; in taking directly the key investment decisions about the procurement strategy, consistent with the overview of affordability which underpins the plan; and in being assured that the on-going project management arrangements will meet the requirements for external review and monitoring which the Minister has agreed. Each of these three strands is considered further in the subsequent sections of this paper.

2. Being assured that a credible implementation plan is in place

- 2.1 The NHS Board requires to be assured that a detailed implementation plan for this major project is developed and implemented. Thus far, effort has been concentrated on ensuring that the first three major capital projects which comprise the first phase of implementation proceed through approval to procurement without delay. Over the coming weeks, a key priority for the Project Team will be to develop a more detailed project plan for the implementation of the entire strategy. That plan will set out the key milestones in implementation and will highlight specifically the critical points at which the NHS Board’s “governance” role will be discharged.

3. Taking Key Decisions about the Procurement Strategy, Consistent with Affordability

- 3.1 In addition to its overview of the project management and implementation arrangements, the NHS Board will be involved directly in taking key decisions about the procurement of the new hospital facilities. Thus, in the early months of implementation, the NHS Board will be asked to approve the approach to the procurement on which the legal and financial advisers will guide the Project Team. Subsequently, the NHS Board will also be asked to take the key investment decisions as each stage of the overall plan is implemented in the years ahead. Those decisions will be set in the context of the overview of affordability which will underpin the implementation of the plan: that overview of affordability will itself regularly be updated and be brought to the NHS Board as part of the on-going “governance” arrangements. The decisions will reflect also the procedures for the approval of capital investment recently approved by the NHS Board’s Audit Committee.

4. Being Assured that the project management arrangements will meet the requirements for external review and monitoring which the Minister has agreed

4.1 In approving the strategy submitted by the NHS Board, the Minister for Health and Community Care agreed a set of review and monitoring arrangements along the following lines. First, there will be an annual review of implementation brought before the NHS Board in public session, most probably in the month of August, as this was the month in which the Minister gave his approval to the strategy. That annual review will itself be overseen by Audit Scotland, such that there is a process of external assurance of the updated planning and implementation arrangements. Specifically, the remit agreed with the Auditor General covers three elements: the overall governance and project management processes adopted by NHS Greater Glasgow; NHS Greater Glasgow's arrangements for updating key planning assumptions and the high level capital and revenue estimates; and the arrangements for involving and consulting with stakeholders. The NHS Board will, therefore, require to be assured, through the medium of the quarterly updates prepared, that adequate arrangements are in place to meet the terms of reference set down for Audit Scotland's involvement.

4.2 In addition, the Minister for Health has decided that the continuation of "named services" within Stobhill Hospital and the Victoria Infirmary, during the period prior to the rationalisation of in-patient services, should be the subject of local monitoring. It is expected that two monitoring groups will be created shortly: though independently chaired, there will be an important link between the Chairs of those monitoring groups and the Chair of the NHS Board. The NHS Board will, therefore, wish to be assured also that appropriate arrangements are put in place to support the work of those groups, when final Ministerial decisions have been taken about their composition and remit.

5. Next Steps

5.1 The NHS Board is asked to consider the role set out within this discussion paper and to determine whether further steps should be taken in support of the Board's own "governance" responsibilities for the implementation of the acute services plan.