

INDEPENDENT MEMBER (IM) SCRUTINY & ASSURANCE TOOLKIT



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**WE LISTEN,
LEARN AND
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University Health Board

BACKGROUND

- Health Boards are corporate bodies and their functions must be carried out in accordance with their statutory powers and duties.
- Health Boards principle role is to ensure the effective planning and delivery of the local NHS system.
- Board membership comprises of Executive Directors & IMs, who form part of the corporate decision-making body and have equal voting rights.
- IMs are involved at a strategic level - responsibility for operational decisions sits below Board.
- Each organisation has a range of committees which are responsible for providing advice and assurance to the Board on areas within their remit. This is the primary area where scrutiny is focused.

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OVERVIEW OF IM SCRUTINY ROLE

- To participate as members of identified Committees and Board with regular attendance, with the expectation that papers will be made available one calendar week before each meeting to allow them to be read ahead of the meeting
- Responsible for supporting the Chair in being clear about the information needed in order to discharge their role, including assurance and scrutiny
- Satisfying themselves of the integrity of financial and quality intelligence, including getting out and about, observing and talking to patients and staff (walkarounds/ambassadorial role).
- Sharing collective responsibility for decisions.

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DIVERSE NATURE OF IM ROLE



Strategy



Support



Stretch



Stakeholder



Scrutiny



Safety

The role can change from meeting to meeting as well as during a meeting as the agenda progresses

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INDEPENDENT MEMBER FOCUS

Oversight	Insight	Foresight
<p>Assurance and Compliance</p> <p>Systems and processes.</p> <p>Monitor performance and track how things are going. Understanding the risks inherent to the Health Board’s activities– risk appetite and tolerance of failures.</p>	<p>What is going on and Why?</p> <p>Pause, step back and look at the big picture.</p> <p>Bring people together – look at the interactions between various parts of the organisation and its partners.</p> <p>Discover the Important things</p> <p>Determine What Indicators Matter.</p> <p>Real-time data driven decision-making.</p>	<p>What could happen in the future? Constant horizon scanning for opportunities and threats.</p> <p>Embrace multiple viewpoints and listen to diverse voices.</p> <p>Clear thinking about “what” must be anticipated or undertaken.</p> <p>Forecasting policy implications</p> <p>Leading for the Future – aligned to the strategic direction</p> <p>Scenario based decision making.</p>

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AGENDA PLANNING

- Maximise the use of the Consent Agenda to ensure that adequate time is made on the Main Agenda for **business critical, strategic** matters.
- Agenda planning meetings are key and include both Chairs and Vice-Chairs.
- Consider the length of the meeting – is **adequate time** aligned to each item to allow for appropriate focus on the issue – enabling appropriate challenge to gain assurance?
- Are there a mix of topics on the agenda (strategic / assurance) which balance the remit of the meeting?
- Ensure that each agenda item has a **clear purpose** and **desired outcome**.
- Use the Risk Register, Integrated Performance Dashboard, information gained from walkabouts and staff sessions plus stakeholder feedback, benchmarking and audit reports to steer and plan the agenda to focus on **business critical activity**.

FOCUS OF PAPERS

- Exception based reporting. Report templates are key as they guide to the **purpose** and the **desired outcome**.
- Is it clear why items are being presented? If not, **make this point in the meeting**. Focussed papers help manage the effectiveness of meetings avoiding them running over time.
- Ask yourself **“so what?”**. If this isn't clear, let the presenter know.
- Appropriate challenge leads to assurance – acknowledging that some further actions may be necessary to manage risks
- Minimise duplication – ‘Less is More’ – avoid information overload i.e. **discourage the use of appendices**.
- Encourage visualisation tools by **praising** them when they are used – interactive, presentations, videos.
- Look for consistency across papers – aligned to strategic objectives, consistency of messaging and **praise** when you see this.

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REPORT PRESENTERS

- Teeing-up discussion – be clear that you will be taking the paper as read and **seek only new or changed information** from the presenter over that which is covered in the report.
- Ensure a **consistent** approach. Some presenters are more engaging or have a topic that may interest you more – don't get swayed by this, manage the item for the purpose it is there.
- Is there contradictory evidence, are there clear logical explanations showing an improving trend?.
- **Feedback** / request changes if you consider that you are not receiving the right information at the right time in the right way – also use triangulation to help bolster the position – are all the necessary steps being taken to address the position?.

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EXECUTIVE COLLABORATION

- Executive portfolio representation in meetings and **integrated executive working** - are the right people in the room? If not, why not? Bring other officers into the discussion to add their perspective on an issue out of their portfolio to add richness to the discussion.
- Encourage Executives to **call upon one another** to share presentations of items as appropriate.
- Consider if it would be helpful to have a meeting with the Executive lead prior to a Board Committee taking place to set out the points which may need further clarification at the Committee?

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ROLE OF THE COMMITTEE CHAIR

- Setting the **tone**, tee-up the desired focus of discussion. Keep everyone **focussed** - Adhoc presenters may need support if not familiar with the setting.
- Consider if it would be helpful for the Committee Chair to have a pre-meet with other IMs ahead of the meeting to look at the issues and decide how these are best managed during the meeting?
- Ensure you have read the **Chairs Brief** and that it has been shared with the Vice Chair.
- Managing the Time – **set clear expectations** for presenters on timings. This can be planned at agenda planning stage by including timings on the agenda, and reiterated when introducing the agenda item at the meeting. Do not allow discussions to stray into operational territory.
- Lead by example and consider how other IM's can complement the Chair – **tag team** each other.
- Give the **Vice-Chair** an opportunity to Chair Committees under the guidance of the Committee Chair (at least once per annum)
- Clearly **sum-up the conclusions** of the discussion, suggest SMART objectives be used to measure delivery of **actions**, noting the resolution agreed to ensure everyone is clear on the outcome and next steps

MEETING CULTURE

- Commitment
- Enthusiasm
- Preparedness
- Style of contributions – scrutiny which **constructive**/supportive **challenge**, not criticism/deconstructive feedback.
- Use the right questions for the right circumstances – use powerful questions (e.g. what do we need to do to ensure....)
- Consider whether there are strong personalities influencing items.
- Create the right atmosphere in the room, encouraging **openness** and **transparency** with professionalism
- Adherence to Virtual Meeting Etiquette principles.

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IM LISTENING

Passive listening (focusing on encouraging speaker to open up)

- Avoid being judgemental or defensive
- Avoid expressions like ‘that’s good’, ‘excellent’, ‘that’s right’,
- Instead use responses such as:
 - Tell me more about...
 - Is there something else we could be doing to improve...
 - I’m interested to hear what you think of ...
 - I’d like to hear what you feel about ...

Active listening (to check understanding)

- It seems that you...
- Let me see if I understand you

IM QUESTIONING

- Asking concise, strategic and **purposeful** probing questions to clarify issues. Your role is to **scrutinise** the information presented and **seek assurance** that the Health Board is achieving its strategic objectives.
- Recognise the difference between being reassured and receiving assurance
- Often the most **'obvious' or simple** questions lead to the most insightful answers – remember to ask about the obstacles and risks to delivery and what can be done to support delivery.
- Avoid venturing into the operational detail, remain focussed on the **what, why and when** rather than the 'how'.
- Avoid commentary.
- Use **secondary 'follow-up' questions** to ensure you gain the assurance you need.
- Triangulation of intelligence – seek opportunities to **cross-reference** reports, comments made and different perspectives/contributions.
- Ensure questions are not just confined to the consent agenda.
- **Questions asked on consent agenda** may be worthy of **exploring further** in the main meeting.
- Equitable questioning / contributions are essential, mentor new Members as necessary.

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EXAMPLES OF ISSUES TO CONSIDER AND QUESTIONS TO ASK;

Does the management response accurately reflect the audit recommendations?

How do we know that the assurances provided draw appropriate attention to risks, weaknesses and/or areas for improvement which should be addressed?

How is learning shared across the Health Board to avoid duplication and learn lessons?

What assurance is being provided that the recommendations are being implemented, monitored and followed up?

How was this issue escalated to ensure due process was followed?

What sources of secondary or independent evidence could support the perspective set out in the report?

What are the obstacles including risks to delivery and how can actions be supported?

ASSURANCE 'V' REASSURANCE



Assurance: being assured because the Committee/Board has *reviewed* reliable sources of information (evidence) and *is satisfied* with the course of action



Reassurance: being *told* by the Executive and staff that performance actions are satisfactory

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ORGANISATIONAL INSIGHT

- What assurance can you provide that the plans are meaningful and underpinned by robust evidence?
- How do we know that we have an appropriate level of understanding of the purpose and work of the organisation when setting strategy?
- How do we know that the Board has clearly articulated and communicated its risk appetite?
- How do we know we are monitoring performance and quality against the most appropriate standards?
- How does the issue under discussion support the achievements of the Health Board's strategic goals?
- What assurance can you provide that demonstrates that there is effective and accurate budgeting and in-year forecasting?

ORGANISATIONAL INSIGHT

- Triangulate – what has been seen / heard during walkabouts and what appears in reports.
- Ensure **regular contact** and discussion with senior leaders at the organisational level
- Obtain **softer intelligence** outside of the meeting – e.g. site visits
- Where appropriate, consider a **deep-dive** – aligned to key indicators – risk register, integrated dashboard and audit reports (Internal & External), explore stakeholder feedback and benchmarking data.

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CROSS-COMMITTEE WORKING

- **Minimise** cross-committee **referrals** to remove unnecessary duplication
- Referring where appropriate:
 - What are you referring?
 - Why are you referring it?
 - What is the outcome that you are anticipating from this referral?
- **Regular catch-ups** with other Committee Chairs

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GOVERNANCE FRAMEWORK

- Standing Orders
- Standards of Behaviour Policy (Nolan Principles)
- IM Role Descriptions
- Board Secretary – is a source of advice and support to the Health Board Chair and other Board Members. Has the role of being the guardian of good governance.
- Business Intelligence – scrutiny of service delivery performance reports including the organisational annual report.
- Risk Register & Board Assurance Framework – aid understanding of issues requiring scrutiny.

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ESCALATION TO THE BOARD

- The Committee Chair will approve the Highlight Report to the Board following each meeting
- **Focussed updates** – using the Highlight Report Template
- ‘Assurance’ versus ‘Reassurance’
- ‘Cascade’ versus ‘Escalate’
- Where **‘escalate’** it will ensure **discussion** on the main agenda **at Board**

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