

South-East and Tayside (SEAT) REGIONAL PLANNING GROUP

FRAMEWORK OF GOVERNANCE

Introduction

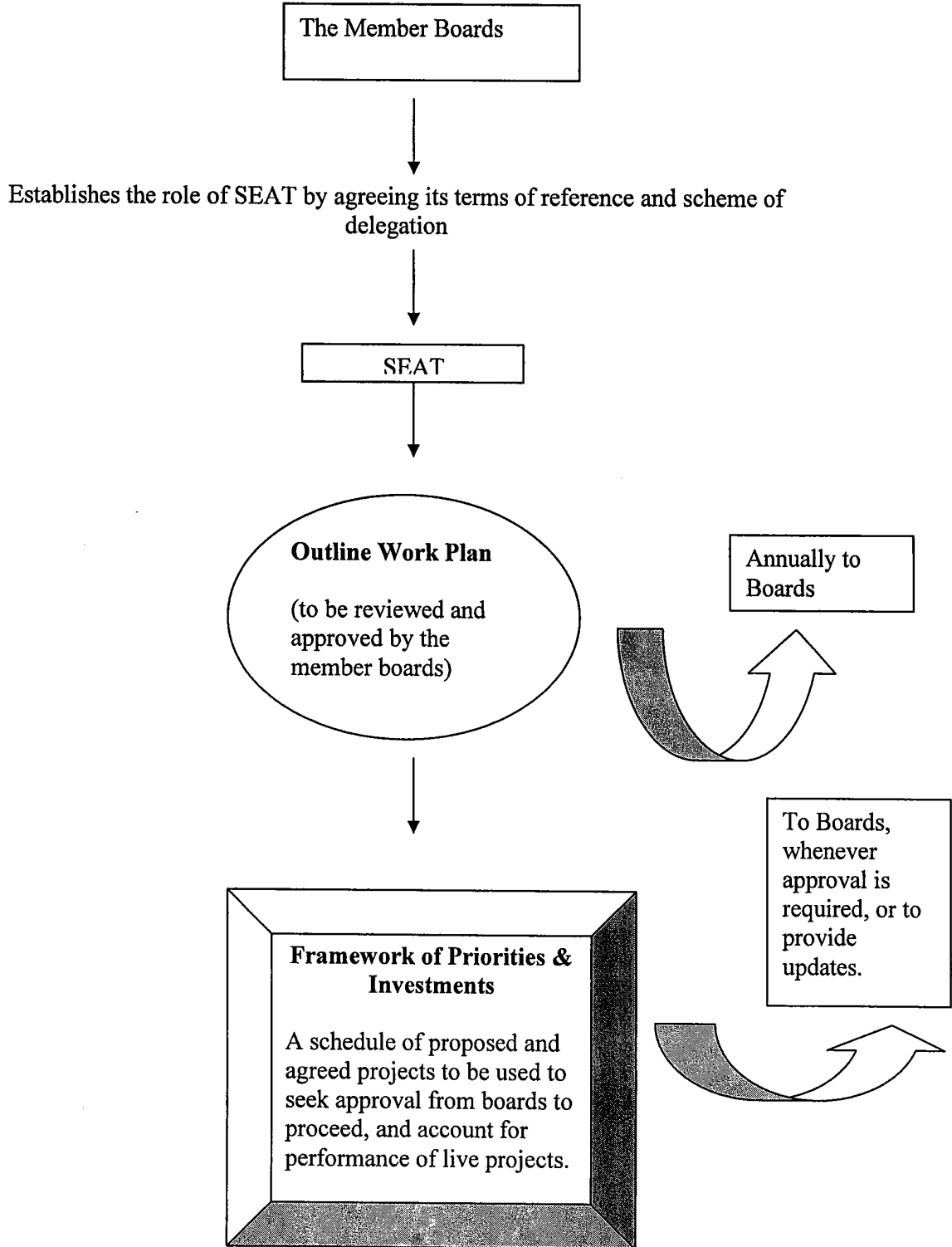
SEAT Regional Planning Group requires to have a framework of governance to describe how decisions will be made when it convenes, and how it will carry out its functions and be accountable for its performance.

This Framework has four key sections:

1. A **Scheme of Delegation**, describing the relationship between SEAT and the member boards, and how boards will delegate authority to SEAT and the individual members, namely the board chief executives.
2. A **Terms of Reference**, describing the remit of the group, how it will make decisions, and how the different control elements of regional planning comes together to form the system of governance for SEAT.
3. A **Statement of the Expected Standards of Corporate Governance and Internal Control** that the member boards expect of each other when implementing the work of SEAT.
4. A **repository of control documents and operating procedures** that will be used to implement, monitor and account for the activities of SEAT. These together will form the system of control for SEAT operations. These will be live control documents and will not normally be presented as part of the framework of governance, but should be available upon request.

1. THE SCHEME OF DELEGATION

1.1- The Overall Process



1. THE SCHEME OF DELEGATION (continued)
1.2- Schedule of Delegated Authority from Member Boards to SEAT

DELEGATE	Description of Agreed Authority / Responsibilities
<p align="center">SEAT (through the designated Chair of SEAT)</p>	<ul style="list-style-type: none"> • To take forward the member boards' objectives and responsibilities with regard to regional planning in accordance with HDL (2004) 46. • To operate within its terms of reference. • To develop a work plan for member boards' approval, and implement the Framework for Priorities and Investment (as approved by the member boards).
<p align="center">Chief Executives of Member Boards</p>	<ul style="list-style-type: none"> • To represent his or her Board at SEAT and act on its behalf. • To operate within the terms of reference of SEAT and to ensure that the board's statutory responsibilities for regional planning are met. • To ensure that this Framework of Governance has been presented to and agreed by his or her Board. • To present SEAT documents to his or her Board for approval, as required by this Framework of Governance. • If designated as the lead member of a project within the Framework of Priorities & Investment, to lead the delivery of that project with the autonomy normally granted to a Chief Executive if acting entirely within his or her own host board. • To be accountable for the performance of projects assigned to him or her within the Framework of Priorities & Investment. • Generally to act in such a way as to deliver the goals of regional planning
<p align="center">SEAT Project Officers (these are individuals who are identified by SEAT to lead work commissioned by them)</p>	<ul style="list-style-type: none"> • To operate within the scope of his or her job description and any further delegated authority that may be given by the lead member for the project.

2. TERMS OF REFERENCE OF THE SEAT REGIONAL PLANNING GROUP

2.1.1 The remit of the Group is assist in the delivery of the following NHS Scotland objectives:

- To plan, fund and implement services across NHS Board boundaries.
- To harness and support the potential of Managed Clinical Networks.
- To develop integrated workforce planning for cross-Board services.
- To facilitate the commissioning and monitoring of services which extend beyond NHS Board boundaries, services between members and out with the region on an inter-regional or national basis;
- To harmonise NHS Board service plans at the regional level.
- To plan emergency response across NHS Board boundaries.
- To support the delivery of NHS Boards' duty to co-operate for the benefit of the people of Scotland.

2.1.2 The above remit is to be delivered by the Group. However the member Boards remain accountable and responsible for the continued delivery of their statutory duties and general corporate governance requirements.

2.2 OUTCOMES FROM THE SEAT REGIONAL PLANNING GROUP (“The Group”)

2.2.1 The Group will agree a **Work Plan** (from an annual Regional Planning Workshop), of the prioritised services / issues that it and the partner organisations will be considering for review every year. The members must present this (and any subsequent amendments) to their boards for approval. This Work Plan is the SEAT equivalent of the “annual regional planning agenda” referred to in HDL (2004) 46.

2.2.2 The Work Plan will be an integrated work plan and will include service, workforce, financial and other appropriate planning issues.

2.2.3 The **Work Plan** will schedule specific projects currently being taken forward by SEAT, and schedule those projects agreed to come on-line in future years. It is the responsibility of the member organisations to ensure that their local plans are congruent with the agenda.

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2.2 OUTCOMES FROM THE SEAT REGIONAL PLANNING GROUP (“The Group”)

- 2.2.4 The Group will maintain a **SEAT Framework of Priorities and Investments**. This document will contain all projects that have progressed beyond the initial review stage, and require approval from member boards to progress to implementation. This document will also provide an analysis of the progress of projects that have previously been approved by the boards for implementation, and is therefore key to effective performance management of the Group’s agenda.
- 2.2.5 The Group will also maintain a **Regional Workforce Plan** which will inform and be cognisant with the SEAT workplan.
- 2.2.6 The Group will prepare an **Annual Report** of its activities, which will be sent to all members and partner organisations, and will be used as the focus for any public accountability processes.
- 2.2.7 The Group will support the retained accountability duties of member organisations, by making available any information to those organisations, which will support public reporting and the development of Local Delivery Plans.
- 2.2.8 The member boards will make consideration of matters arising from the SEAT Regional Planning Group, as a standing Board agenda item.

2.3 MEMBERSHIP OF THE SEAT REGIONAL PLANNING GROUP

- 2.3.1 The executive members of the SEAT Regional Planning Group are the Chief Executives of NHS Borders, NHS Fife, NHS Forth Valley, NHS Lothian and NHS Tayside.
- 2.3.2 Every member remains personally and legally accountable for their decisions both to their local Board and the Chief Executive of the NHS in Scotland. (This accountability incorporates the duty of regional planning as set out in SE guidance). All of the member Boards must formally recognise and approve the Scheme of Delegation in Section 1 of this Framework of Governance.
- 2.3.3 Once a decision is reached, each Board is bound by collective responsibility. The minutes of the meeting will reflect the decision of the Group.
- 2.3.4 The position of Chair of SEAT will rotate every three years as agreed by the executive members.

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2.3 MEMBERSHIP OF THE SEAT REGIONAL PLANNING GROUP

2.3.5 The Group will invite any other organisation or officers to attend meetings as it sees fit. Those who will be routinely invited to SEAT meetings will be: Directors of Planning for the member boards; Regional Planning Director; Regional Workforce Planning Director;; Director (National Services Division); representatives of - the Chief Executive (NHS Scotland), the Scottish Ambulance Service, NHS Education Scotland, , Dumfries & Galloway NHS Board; the Postgraduate Dean for SE Scotland; Director of Pay Modernisation (SEHD); SEAT Workforce Champion and the lead representative from each functional group, recognised by SEAT.

2.4. IMPLEMENTING THE WORK PLAN AND THE FRAMEWORK OF PRIORITIES AND INVESTMENTS

2.4.1 SEAT cannot progress any item on the **Work Plan** or implement any project on the **Framework of Priorities and Investments** without the prior approval of member Boards. This would normally be via approval of the Annual Workplan.

2.4.2 Once all member board approvals are in place, SEAT is free to decide how to progress its workload. Each project will have a lead member assigned to it.

2.4.3 Once a member has been given lead responsibility for an item in the **Work Plan** or **Framework of Priorities and Investments**, he or she has complete authority from SEAT to progress the matter, as if the matter was an issue contained within his or her Board. The lead member will account to the SEAT Regional Planning Group by updating the **Framework of Priorities and Investments**.

2.4.4 All members are required to conduct SEAT business under the same standards of internal control and corporate governance as is generally expected of chief executives in NHS Scotland (*Section 3*). The lead member for a particular SEAT project will be primarily responsible for standards of internal control for activities within the scope of the project, on the understanding that all members have established adequate systems of internal control in their organisations.

2.4.5 For all items in the **Framework of Priorities and Investments**, a **Project Agreement** will be developed. This will describe the precise scope and objectives of the project, including timescales and, accountability arrangements, as well as the associated resources required to deliver the project. This **Project Agreement** will define the parameters within which the member with lead responsibility for the project can operate.

2.4 IMPLEMENTING THE WORK PLAN AND THE FRAMEWORK OF PRIORITIES AND INVESTMENTS

2.4.6 In the event of the SEAT Regional Planning Group being in disagreement with the aspects of the delivery of the implementation of a **project agreement**, or if the Group wishes to amend or discontinue an agreed project, then a resolution to overrule the lead member responsible for the project (as stated in the **project agreement**) or alter the project terms of reference must be approved by the Group. An event of this nature should be reported back to the member boards.

2.5 SCOPE OF ACTIVITY TO BE ADDRESSED BY THE SEAT REGIONAL PLANNING GROUP

2.5.1 The national regional planning framework grants SEAT the authority to act on behalf of its members in the delivery of the following tasks:

- Develop and progress a co-ordinated approach to service delivery for and on behalf of constituent NHS Boards;
- Facilitate commissioning and monitoring of services which extend beyond NHS Board boundaries, services between members and out with the region on an inter-regional or national basis;
- Develop strategic workforce solutions which support service delivery models;
- Commit and monitor resources, within the agreed financial framework, for the purposes for which it was approved;
- Determine commissioning policy for those services within its workplan;
- Agree a prioritisation framework for the regional planning group, reflective of those within individual NHS Boards;
- Commission reviews or other research in order to inform decisions.
- Agree, monitor and update action plans;
- Develop delivery plans (often in collaboration with other Regional Planning Groups) for highly specialised services;
- Performance manage regional Managed Clinical Networks.
- Establish sub-groups as appropriate.

2.6 EXCEPTIONAL MATTERS

- 2.6.1 There may exceptionally be decisions that require significant expenditure commitments (or controversial service changes), which would be beyond the scope of delegated authority conventionally awarded to Board chief executives. In these exceptional circumstances, the member NHS Boards can delegate the authority to act on their behalf to executive sub-committees of each Board as opposed to their Chief Executive. It would be for the member NHS boards to determine the membership of this executive sub-committee. The 5 executive sub-committees would then meet together (as opposed to the 5 Chief Executives acting on their own delegated authority) to form the Regional Planning Group.
- 2.6.2 The undertaking of work not previously foreseen in the agreed **Work Plan or Framework of Priorities and Investments** can be classed as an exceptional matter. This may be because the issue relates to a matter that requires an emergency response.
- 2.6.3 In these exceptional circumstances, the Chair of each executive sub-committee will act on behalf of his or her Board.
- 2.6.4 The Chair of SEAT has the authority to make decisions in emergency situations on behalf of the group, following consultation with the other members. If the issue falls within the agreed **Work Plan or Framework of Priorities and Investments**, then it can be formally endorsed at the next meeting of the Group. If the issue is not within these documents, then it should be formally endorsed at the next meetings of the member Boards.
- 2.6.5 It is intended that the members of the Regional Planning Groups will work together in order to reach consensus. In the event of a material dispute arising, a meeting will be convened between the Chief Executives and Chairs of the member boards in order to resolve the issue, recognising the back-up arrangements set out in Section 4 of Annex 3 of HDL (2004) 46 Regional Planning Guidance.

3. THE EXPECTED STANDARDS OF CORPORATE GOVERNANCE AND INTERNAL CONTROL

INTRODUCTION

Paragraph 2.4.4 of the SEAT Regional Planning Group's *Framework of Governance* makes reference to the "standards of internal control and corporate governance as is generally expected of chief executives in NHS Scotland."

The standards of corporate governance and internal control which apply to NHS Boards will apply to the work of SEAT. In the event of a query arising about this, e.g. if wording differs between Boards' governance documents, the Chair for the time being of SEAT shall decide the issue.

SCOPE OF CORPORATE GOVERNANCE

Six key subjects make up Corporate Governance for the member boards:

- **Clinical Governance** – How we deliver our clinical services.
- **Patient Focus and Public Accountability** – How we inform individual patients and involve them and other stakeholders in the manner by which we deliver our clinical services.
- **Staff Governance** – How we engage our employees and their representatives.
- **Financial Governance** – How we manage our financial resources.
- **Research Governance** – How we conduct research & development.
- **Educational Governance** – How we teach and train healthcare professionals.

The principles of corporate governance are covered at slightly greater length in Annex A.

4. REPOSITORY OF CONTROL DOCUMENTS

It is recommended that SEAT develop standardised templates to implement the above terms of reference. The templates should be maintained centrally and made widely available for use. These are then elements of the overall Framework of Governance.

Items to be included:

- Template for the **Work Plan**
- Template for the **Framework of Priorities and Investments**

This needs to be designed in a way that will allow new projects and existing commitments to be presented efficiently, providing high level information to the member boards. It could be used to seek approval of new items, and present updates on progress. The detail will be in the individual Project Agreements.

- Template for the **Project Agreement**

This is the key control document to be presented to SEAT for approval. This should contain everything you need to know about the project. e.g. SMART objectives, funding requirements, service implications, lead Chief Executive, project staff, monitoring arrangements etc etc.

Annex A

THE EXPECTED STANDARDS OF CORPORATE GOVERNANCE AND INTERNAL CONTROL

THE PRINCIPLES OF CORPORATE GOVERNANCE

In the following, the “organisation” is taken to be both the member boards individually, and when they come together as the Regional Planning Group. All of the organisation’s activities, policies and procedures should be consistent with these principles. In the absence of a specific procedure, employees should comply with the requirements of these principles.

General

1. The organisation will discharge its responsibilities in accordance with the relevant legislative requirements of European Parliament, and the United Kingdom and Scottish Parliaments. The organisation will also comply with any Directions or guidance issued by the Scottish Ministers.
2. No person will receive less favourable treatment regardless of individual differences or be disadvantaged by conditions or requirements which cannot be shown to be justifiable.

Clinical Governance

3. The organisation will plan for, and monitor the provision of a range of services consistent with the overall strategy of NHS Scotland, as established by Scottish Ministers.
4. The organisation will provide care in accordance with relevant and nationally recognised standards and with all due care and attention.
5. The organisation will work in partnership with others in the development of healthcare and the general well being of the public.
6. The organisation will provide undergraduate and postgraduate education to the standards required by the relevant funding authorities.

Patient Focus and Public Accountability

7. The organisation will conduct its activities in an open and accountable manner. Its activities and organisational performance will be auditable.
8. The organisation will give patients the knowledge to make it possible for them to become active partners, with professionals, in making informed decisions and choices about their own treatment and care.

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9. The organisation will establish mechanisms to inform, engage and consult patients and members of the public to inform its decision-making appropriately.

Staff Governance

10. The organisation recognises the importance of working in partnership with its staff.
11. The organisation will ensure that its employees are well informed, appropriately trained, involved in decisions that affect them, treated fairly and consistently, and provided with a safe working environment.

Financial Governance

12. The organisation will perform its activities within the available financial resources at its disposal.
13. The organisation will conduct its activities in a manner that is cost-effective and demonstrably secures value for money.

Research Governance

14. The organisation will conduct research & development activity in accordance with the Research Governance framework.

Educational Governance

15. This is taken forward through the applications of principles 1, 2, 6, 9 and 10.