

**NHS 24
BOARD**

**14 MAY 2020
ITEM NO 5
FOR APPROVAL**

RAPID REVIEW OF STANDING ORDERS

Executive Sponsor:	Director of Service Development
Lead Officer/Author:	Associate Director of Planning and Performance
Action Required	This paper is for approval.
Key Points to consider	<p>Following the agreed action at the April 2020 NHS 24 Board, a rapid review of the NHS 24 Standing Orders has been undertaken, with a view to ensuring that, in these extenuating times, we remain in compliance with our own Standing Orders and also to consider if we do need to suspend any temporarily.</p> <p>Although the original intention was to keep the scope to Standing Orders (Section 4), within parallel work being undertaken on review of the wider Governance Framework, other areas have been highlighted and therefore they have been included within this review, to ensure consistency and reduce any ambiguity.</p> <p>The Board is asked to approve the proposed set of recommendations. These have been discussed and approved by the EMT, Board Chair, Board Vice-Chair and Chair of the Audit & Risk Committee.</p> <p>The Board is also asked to note two further items for recommendation and noting, in relation to minuting of private Board meetings and new NHS Scotland Model Standing Orders.</p>
Strategic alignment and link to overarching NHS Scotland priorities and strategies	The Review has been undertaken to ensure that there is appropriate governance in place as the organisation responds to COVID-19, whilst at the same time allowing the Chief Executive and EMT to make decisions rapidly, where required.
Key Risks	This review has been undertaken to ensure that key risks related to decision making are taking within the risk appetite of the Board and to ensure compliance with the current NHS 24 Standing Orders.
Financial Implications	There have been no financial implications identified, following this review.
Equality and Diversity	There have been no equality and diversity issues identified arising from this report.

1. RECOMMENDATIONS

Following the agreed action at the April 2020 NHS 24 Board, a rapid review of the NHS 24 Standing Orders has been undertaken, with a view to ensuring that, in these extenuating times, we remain in compliance with our own Standing Orders and also to consider if we do need to suspend any temporarily.

Following the review, the Board are asked to approve the following set of recommendations. These have been discussed and approved by the EMT, Board Chair, Board Vice-Chair and Chair of the Audit & Risk Committee.

Section	Description	Recommendation
Section 2, para 42	SG approved specific delegated authorities. NB: these relate to specific items such as compensation payments, ex-gratia payments, fraud	For noting. No required change to limits with SG.
Section 4, 4.1.2	This states that the Board “shall meet in a public place”, although note that para 7.2 does explicitly allow for Boards meetings taking place via video or tele conference.	For clarity, we would suggest that 4.1.2 is temporarily suspended
Section 4, 4.2.2	This relates to all papers being will be delivered, or sent by post at least 5 days before the Board meeting.	Although all papers are now uploaded via admincontrol, rather than sent by post, again for clarity, we would recommend that we temporarily amend this to deliver papers via email or to a secure online portal.
Section 4, 4.2.6	All papers placed before the Board will require to have been fully considered and approved by EMT, prior to distribution to the Board.	Recommended for temporary suspension and that, during the current period, the Board will not always require written reports. Where a board decision is required and there is no written report it will be made clear in the verbal presentation and minuted accordingly what processes and supporting documentation were used to arrive at the recommendation being made to the Board.

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<p>Section 4, 7</p>	<p>This relates to Quorum in Board and Committee meetings, which is currently six members (4 Non-Executive and 2 Executive Directors) and three non-executive members respectively. In the situation where other non-execs are required to act as Committee Chair, this is covered adequately within the scope of the respective Committee ToRs, rather than these Standing Orders. <i>Refer to Section 10, 3.3 below for reference to EMT Quorum</i></p>	<p>No recommendation to amend quorum temporarily.</p>
<p>Section 7, 2.10, 2.12</p>	<p>This relates to Schedule of Retained Decisions requiring whole Board approval. Summarised below those most relevant, at this time: 2.10 relates to approval of contracts with an annual value in excess of £500k. 2.12 relates to procurement of goods and services in excess of £100k, for which no revenue budget has been previously allocated or in excess of £250k for capital budgets 2.13 Approval of the retention of management consultants where total contract is over £100k</p>	<p>Recommend suspending need for whole Board approval for 2.10, 2.12 and 2.13 and instead delegating to approval by Chair, Chief Executive and Director of Finance.</p>
<p>Section 8</p>	<p>This relates to the Scheme of Delegation. Note that temporary (increased) delegated authority levels have already been approved and put in place.</p>	<p>Although temporary, increased delegated authority levels have already been approved, for completeness we should capture these here.</p>
<p>Section 9</p>	<p>This relates to Procurement and Tendering, for example where we have required to rapidly commission external services (Helpline).</p>	<p>Procurement rules do not require to be changed or amended. Guidance is however changing quite significantly and therefore any decision on commissioning and procurement route needs to be made in conjunction with our Finance and Procurement team to ensure we are aware of the latest advice/rules. This could include in certain circumstances making a direct award or not requiring to do full a OJEU tender exercise.</p>

<p>Section 10, 3.3</p>	<p>This relates to EMT Quorum, which is currently six EMT members.</p>	<p>In line with the agreed COVID-19 EMT Governance arrangements, it is recommended that quorum is temporarily reduced to four members of the EMT, of which two must be the CEO and/or Director of Service Delivery and Medical and/or Nurse Director.</p>
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2. ADDITIONAL POINTS TO NOTE

2.1 Noting of Private Meeting

Following a request made by the Cabinet Secretary, through Board Chairs, NHS 24 are required to record in the main Board Minute if a Private Meeting was held and the rationale for doing so.

It is therefore recommended that, going forward, the public minute reflects that the Board resolved to meet in private. Following approval, the Standing Orders will be updated to reflect this refinement.

2.2 NHS 24 Standing Orders and Corporate Governance Framework

The Board are asked to note that following the introduction of the “Blueprint for Good Governance” in February 2019, the NHS Scotland Corporate Governance Steering Group was established to review current practices within NHS Boards. One of the areas identified for review was the production of model Standing Orders which reflect best practice.

The new model Standing Orders template has now been issued and these should now be used by all Health Boards, replacing existing standing orders already in place.

The Board are asked to note that, following early work undertaken to review alignment of NHS 24 Standing Orders with the draft Model Orders, the NHS 24 Standing Orders, and, if appropriate, the NHS 24 Corporate Governance Framework, will be updated, for review by the Audit and Risk Committee in June 2020 and subsequent approval by the NHS 24 Board.