LOTHIAN NHS BOARD

Board Meeting 24 March 2010

Nurse Director

STRENGTHENING EQUALITY AND MUTUALITY GOVERNANCE

1 Purpose of the Report

1.1 To propose a replacement committee to take over the remits of the Equality and Diversity Steering Group and the Spiritual Care Committee, in the light of the recent Board decision to merge the two committees and the Board's approval of the Involving People – Improving People's Experience of Care Strategy.

2 Recommendations

Lothian NHS Board is invited to:

2.1 Agree to the establishment of a Mutuality & Equality Governance Committee.

3 Summary of the issues

- 3.1 At its meeting in May 2009, the Board agreed to merge the Equality and Diversity Steering Group and the Spiritual Care Committee. At its July 2009 meeting, the Board approved the Involving People Improving People's Experience of Care Strategy.
- 3.2 The Board requires a governance structure to:
 - Oversee work to ensure that NHS Lothian meets its existing equality & diversity duties, such as the delivery of the NHS Lothian Equality & Diversity Strategy (2007).
 - Oversee work that will ensure that the likely requirements of forthcoming equality & diversity legislation are met, such as the Single Equality Duty arising from the Equality Bill 2009.
 - Oversee work to ensure that NHS Lothian meets its legal duties set out in the NHS Reform (Scotland) Act 2004, Section 7, and other related legislation regarding major service change;
 - Ensures implementation of the following key Chief Executive Letters (CELs):
 - CEL (2010) 04 Informing, Engaging, Consulting People in Developing Health and Community Care Services

CEL (2008) 49 Spiritual Care
 CEL (2008) 10 Refreshed Strategy for Volunteering in the NHS in Scotland
 HDL (2006) 22 NHS Carer Information Strategies
 HDL (2001) 08 Independent Advocacy: A guide for commissioners

- Has regard to existing Human Rights and new patients rights legislation.
- Oversee and monitor implementation of the Framework for Mutuality:-Involving People – Improving People's Experiences of Care Strategy (2009-2013) Involving People Component.
- 3.3 The Participation Standard to be introduced by the Scottish Government in 201011 requires NHS Boards to integrate the level and quality of participation into NHS
 Scotland's overall approach to quality improvement and performance
 management. This will ensure that patient focus and public involvement are core
 drivers of decision making and not an after thought or side issue. NHS Boards will
 be asked to audit against this standard in order to collect systematic, comparable
 information on good practice, in a similar way to the NHS Quality Improvement
 Scotland Clinical Governance & Risk Management standards. The standard has
 three core elements, one of which is corporate governance of participation. This
 core element states: robust corporate governance arrangements are in place for
 involving people, founded on mutuality, equality, diversity and human rights
 principles. This requires evidence that Boards are able to demonstrate leadership
 of this agenda and that the public are inputting to Board Committees.
- 3.4 Other NHS Boards in Scotland have a mixture of committee structures. Some like NHS Greater Glasgow & Clyde and NHS Borders have separate reporting committees for patient focus and public involvement. Others like NHS Highland and NHS Tayside have one committee for this agenda (including equality and diversity and clinical governance), but have commented that with the increasing complexity and widening of this agenda they are considering reviewing their structures.
- 3.5 This paper suggests how a committee combining the above responsibilities might work and what the timescales might be to establish it. The committee should be developed at the Board Committee level, reporting directly to the Board. This will ensure that the Board not only receives the assurance that this important agenda is being addressed, but it will also demonstrate the Board's leadership.
- 3.6 The delivery of strategies to meet the above responsibilities remains the role of executive management, through established NHS Lothian delivery and performance management systems. It is not the function of the replacement committee to duplicate these systems, or absolve line managers of their own responsibilities by taking ownership of this role. For example new management

- arrangements have been put in place for the Spiritual Care Service as agreed by the Spiritual Care Committee.
- 3.7 A remit at Appendix 1 reflects the strategic level of the committee. This remit should provide a corporate focus and ensure the Board of the governance, accountability and delivery of these important duties. It is proposed that the terms of reference of this committee are considered at the first meeting and strengthened and expanded appropriately.
- 3.8 The committee should be named the Mutuality & Equality Governance Committee.
- 3.9 Membership for the committee should reflect its more strategic level than existing structures. It will be important to ensure that representatives communicate effectively with their respective parts of the organisation. It is suggested that membership includes:
 - At least three non-Executive members of the Board (with one in the Chair)
 - At least 3 executive members (potentially Director of Human Resources, Nurse Director, Director of Public Health)
 - Others in attendance to represent leads in Equality and Diversity, Involving People, Spiritual Care and Bereavement and service management
 - Staff Partnership and public representation (x4 each)
- 3.9.1 The Lothian NHS Board Chair has invited Julie McDowell to chair the committee.
- 3.10 The membership of the committee would be approximately half that of the current Equality & Diversity Steering Group. Other individuals may be invited to attend as necessary for the agenda of a particular meeting, and there may be representatives of key partner agencies such as NHS Health Scotland's Equalities & Planning Directorate in attendance.
- 3.11 Reporting arrangements will include submission of minutes from all meetings to the Board, along with a regular (once or twice annually) progress report on the key strategies listed above (and any other deemed relevant by the committee), and an annual report on the work of the committee itself. Minutes will also be passed to the Healthcare Governance & Risk Management Committee and the Staff Governance Committee (see Appendix 1 and 2).
- 3.12 The committee should have its first meeting in May 2010, after a final meeting of the Equality & Diversity Steering Group in March 2010. The Spiritual Care Committee has ceased to operate as a distinct structure.
- 3.13 The remit of the Healthcare Governance & Risk Management Committee would retain responsibilities for a Framework of Mutuality Involving People, Improving People's Experience of Care Strategy, specifically the 5 commitments related to improving patient experience. This would continue to include all aspects of monitoring and continually improving person-centred care in NHS Lothian. This will fit with the new national NHS Scotland Quality strategy.

- 3.14 The Committee would assure the Board of delivery against legal duties as scrutinised by the Scottish Health Council and the Equality and Human Rights Commission.
- 3.15 The Staff Governance Committee will retain the governance of all duties on the Board in relation to employee rights and employer duties.

4 Impact on Health Inequalities

4.1 The structure proposed will ensure effective governance of the key areas of work listed above. Each programme will be subject to equality impact assessment to identify positive and negative equality impacts, and recommendations to address these. The work will also include activities to promote equality impact assessment and health impact assessment across all NHS Lothian departments and functions, and the development of legal and other evaluatory tools to review corporate governance of equality. The committee will ensure that NHS Lothian meets its statutory responsibilities in respect of equality & diversity and will therefore have a positive impact on health inequality.

5 Resource Implications

5.1 There are no adverse resource implications arising from this paper.

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12 March 2010

List of Appendices

Appendix 1: Terms of Reference and Remit for the Mutuality & Equality Governance Committee

Appendix 2: Proposed Mutuality & Equality Governance Committee reporting arrangements

Mutuality & Equality Governance Committee

Terms of Reference

Remit:

- Provide leadership and agree the strategic direction to develop and deliver mutuality, equality and diversity and spiritual care, and pay due regard to Human Rights Legislation.
- Ensure implementation of the relevant directives and other instruction from the Scottish Government
- Assure the delivery of Board strategies to promote this agenda and give direction to future strategy.

Membership:

As set out in paragraph 3.9

Frequency of Meetings:

Meetings of the Committee shall be held at such intervals as the Committee may determine in order to conduct its business. In any event, meetings shall normally be held four times a year.

Quorum:

No business shall be transacted at a meeting of the Committee, unless at least two Non-Executive Board members are present. Any Non-Executive Board Member may deputise for a member of the Committee at any meetings.

Reporting Arrangements:

The Committee will report to the Board by means of submission of minutes to the next available Board meeting.

APPENDIX 2

Comparison of reporting arrangements for Mutuality and Equality Governance Committee with previous structure

Proposed Mutuality and Equality Governance Committee reporting arrangements



