

Ethical Standards Commissioner

NHS GRAMPIAN: GOOD PRACTICE CASE STUDY

A case study illustrating the creative steps taken by NHS Grampian, particularly in their outreach activity, during an appointment round in August 2022.



Identifying Objectives

Clearly defined objectives were agreed during the early planning phase of the round: to diversify the board and to demystify the role of a board member through effective publicity.



Effective Planning

Evidence based discussions on current board makeup to inform priority criterion and skills required of the successful applicant.



Publicity and Positive Action

Identification of hard to reach groups and development of a comprehensive publicity plan with clear objectives and targets.



Applicant Feedback

33% of previous applicants experienced something new or innovative; 62% attended workshops designed to enhance applicant understanding of the board and how it works.

Background

NHS Grampian launched its Plan for the Future 2022-2038, focussing on: People, Places and Pathways and how it would rebuild healthcare service following the pandemic. This appointment round, commencing in August 2022, was one of the first to get underway under the revised 2022 Code of Practice for Ministerial Appointments to Public Bodies in Scotland ('Code of Practice' or 'Code'). It was a round seeking one member, and specific objectives included widening the diversity of the board and demystifying the role of the board and board members.

The Code of Practice is an important tool in securing the appointments of the right people for the right roles. It is rooted in good practice in recruitment and selection and intended to help selection panels design appointment rounds that deliver the skills, knowledge and experience needed as well as being welcoming and accessible to people from all backgrounds. The new Code is focused on enabling more creative and ambitious approaches to attracting and appointing the best new board members from the widest possible pool of applicants.

Succession Planning

Succession planning takes place to ensure that boards are diverse and effective. Although the Scottish Ministers are ultimately responsible for making board appointments, public bodies can also act to ensure they are prepared to maximise opportunities to attract candidates that meet the body's needs when positions arise. The important thing is that consideration is given to planning ahead, and to the future needs of each body and its board.

Under the 2022 Code, greater emphasis is given to succession planning and its role in planning for a new round. During the early stages of the NHS Grampian planning phase, succession planning was given particular attention with the Board Chair looking forward to review the skills and composition of the Board at an early stage. During the first official meeting of the round, called early engagement, the panel discussed the board's specific needs and succession plans. This ensured that they fully understood the needs of the board and allowed them to develop the required criteria. The Plan for the Future strategy also outlined the future needs of the board, further enhancing the strong understanding the panel had of the requirements being sought.

Diversity

The appointing minister specified as an objective that applications be particularly sought from disabled people, ethnic minority people, people under 50, and people whose sexual orientation is not heterosexual, this being due to their current under reflection on boards (generally). Furthermore, the panel chair made clear from the outset that they wished to improve the diversity of the NHS Grampian board, ensuring it would become more reflective of the communities it serves. At this stage the panel also reflected on management information from previous rounds, noting that historically, while applications had been received from under 50s, female and ethnic minority applicants, they seemed to have disproportionately faced barriers in progressing to the next stage of assessment and were not progressing to the interview stage. This allowed the panel to approach the assessment methods for applicants with an additional level of awareness, and more will be discussed in relation to assessment and diversity outcomes later in this case study.

Positive Action

As a result of the board's current composition [at the time of advertising] the panel had an evidence-based discussion around positive action and whether any positive action measures might be appropriate.



Positive action is a lawful means of addressing inequality and disadvantage for groups of people who share a protected characteristic. Positive action should be proportionate action that aims to reduce disadvantage, meet different needs and increase participation.

As noted, management information from previous rounds revealed that applications had been received from under 50s, female and minority ethnic individuals but none had been shortlisted for interview, which the panel discussed how to address during this round. The panel also recognised their objective to encourage a diverse range of applicants while also considering that many applicants may have little or no experience of applying for public appointments in Scotland. As a result, support mechanisms were put in place to support and encourage applicants. This is discussed more fully under the 'Outreach' heading.

Planning

During the planning phase, a priority criterion was agreed that focussed on seeking a member with insight to health inequalities and disadvantage through lived experience, voluntary or professional roles. Two additional and 'general essential' criteria were also developed, one of which included assessment against the NHS Values, which went over and above assessment of skills, knowledge and experience.

Once the criteria were agreed the panel turned their focus to the wider application pack with a keenness to ensure it was accessible, transparent and coherent.

Discussions focussed on ensuring the application process was straight forward and easy to access. Clarity was provided in the applicant pack in relation to the time commitment required for the appointment and the remuneration offered. The pack would include a short application form with the aim of encouraging more applications. During the planning phase the panel agreed the assessment methods as described below.

Assessment methods

The panel agreed that an anonymised written application was an appropriate and proportionate initial method of assessment, with the criteria developed designed to be focused and limited so that applicants were not overburdened. The second and final stage of assessment included a board paper exercise, where applicants were asked to review a paper and prepare a verbal presentation to pre-set questions, which were issued one week prior to interview.



The anonymisation of applications can be a beneficial way for panel members to mitigate unconscious bias.

Assessment methods cont.

The decision to include this bespoke board paper exercise was agreed through reflection and learning from previous rounds, where this type of exercise adequately reflected the type of work that would be required of a board member (predictive validity). It gave the opportunity to ensure that the priority criterion and general essential criterion of “ability to contribute effectively to the decision make of the board” could be tested and explored as well as giving applicants opportunity to showcase them. The second part of this stage included a formal interview.

The panel chair reflected that the methods of assessment were simple and clear and that limiting the criteria being sought limited the complexity of the round, allowing applicants to focus on experience (lived, voluntary or professional) and values.

Outreach

A comprehensive publicity plan was developed with clear objectives and targets. This included a communication via NHS Grampian daily staff briefings (17,000 people) and local radio and community networks and organisations targeting under-reflected groups.

Outreach workshops were developed to encourage a diverse applicant pool, whilst also offering the opportunity to provide advice to potential applicants on the application process. Applicants were also invited to listen in to a board meeting with the overall aim of removing some of the mystery of board work. Indeed, demystifying the role of boards and boards members became a central focus for the panel in their outreach activities. Online and in person information sessions were offered, and the applicant pack included an illustrative example to show how the priority criterion could be evidenced. This was both included in the applicant pack and discussed at the workshops. Board members also made themselves available to provide general advice based on their own experiences of the public appointments process and being a board member.

The board members also circulated the appointment advert, with the aim of ensuring that individuals were given encouragement to apply from their peers.

Applicant Survey

An applicant survey was carried out approximately one month after the announcement that an appointment had been made. The survey had a lower-than-average response rate at 22% with 88% of responders providing demographic data. The diversity statistics provided however were encouraging, with 57% female; 43% under 50; 29% ethnic minority; 29% disabled; 14% LGBT and 29% first time applicants. This was a strong response rate and may reflect some of the diversity targets identified by the minister and the outreach work agreed by the panel. We must keep in mind however that this is only a snapshot view of those who responded.

33% of those who have previously applied for a public appointment experienced something new or innovative during the process and responses to questions about the advert and attraction were positive. Bespoke supplementary questions were asked to seek feedback on the outreach events offered by the panel. 62% of responders attended the workshop offered, and the remaining 38% wanted to but could not due to timing.

Applicant Survey cont.

50% of those who attended felt the workshop partially enhanced their understanding of what was expected during the appointments process, and 38% felt it fully or partially enhanced their understanding of what being a board member is like. None of the responders took up the opportunity to speak with a board member, although 50% listened to a board meeting and 25% of those felt that it partially removed the mystery of board work.

Successes

This was a successful round with plenty of good practice demonstrated throughout. Starting off with a robust and thorough discussion regarding the board's succession planning allowed the panel to focus on the creation of clear and focussed criteria (the merit / requirement for the board). The assessment methods chosen were clear and competent in determining who would be best for the role with no unnecessary requirements asked of applicants, ensuring that the pool of applicants was not unnecessarily restricted.

High level management information data has been provided in relation to the desired outcome for the round, including:

- **Gender:** 54% of applications received from women; 57% of those invited to interview were women.
- **Ethnicity:** 22% of applications received indicated they were from an ethnic minority community; 42% of those invited to interview indicated they were from an ethnic minority community.
- **Disability:** 30% of applications received indicated they had a disability; 43% of those invited to interview indicated they had a disability .
- **Age:** 58% of applications received were aged under 50; 71% of those invited to interview were aged under 50.
- **Sexual orientation:** 24% of applications received indicated they were non-heterosexual; 29% of those invited to interview indicated they were non-heterosexual.

One of the key objectives of the round was in relation to diversity. The reflective approach to planning the round, including the use of management information to consider previous round limitations and reasons for failure (particularly in attracting and shortlisting candidates from a diverse background) was also a key consideration for the panel, from early engagement through to assessment, as the panel focussed on ensuring their approach to each stage was inclusive, clear and transparent. The panel approached the design and delivery of assessment with previous limitations in mind, with a view to improving upon these.

Finally, the overall objective of 'demystifying' the role of a board member and of the board provided opportunities for the panel to make the role more attractive to a more diverse range of people.

Key Learning

The ability for everyone involved in the process to reflect and learn from individual rounds is an essential part of the overall continuous improvement of the public appointments process, and the panel chair was reflective and balanced in their post-round report provided to the appointing minister and the Ethical Standards Commissioner.



Good practice is not limited to what went well during a round.

The panel chair reflected that in future they would consider how to provide even greater clarity in what is being asked of applicants and is confident in their view that illustrative examples of what 'good' looks like is particularly useful to applicants.

The panel chair also reflected on the practical exercise, the clarity of what was being asked of applicants and how this might be further developed in future rounds. These general comments were also reflected somewhat in the applicant survey, with some applicants expressing concern around the clarity of what skills were being sought.

The panel chair considered the timing of the information sessions, which were held in the early evening, and whether it may be beneficial to vary the times of these to ensure they are as inclusive as possible. Interestingly, 38% responders of the applicant survey wanted to attend an outreach event but couldn't due to timing. It is therefore encouraging to see the panel chair reflecting on the sessions.

The panel chair was also reflective of the demystification of the board and how this can be achieved outwith the public appointments process. Visibility of board members and board work was identified as requiring greater visibility on an ongoing basis, so that people from across communities aspire to be board members.

The fact that this board is keenly engaged in succession planning means that some of this learning can be built into future succession planning and addressed by the board itself immediately (e.g. the demystification points), rather than waiting for a new appointment round to commence.

Outcome

The successful appointment was announced on 19th June 2023:

<https://www.gov.scot/publications/public-appointment-member-appointed-to-grampian-nhs-board/>

12 Months On

12 months following the appointment, the NHS Grampian Board Chair was asked to complete a survey seeking views on what difference the appointment has made to the board. The ESC is particularly interested in the difference appointments make to the work of the board in relation to board behaviour, board impact and board measures development (i.e. how the board knows it is working). The 12 month on survey helps to establish how far any key objectives of the appointment round were met (in this case, a key objective was appointing someone who could bring insight from their own experience of health inequalities and disadvantage and bringing experience and understanding of diverse communities). The board chair highlighted that in undertaking their new role, the member underwent a detailed and extensive induction process which included formal and informal discussions to assist and support their understanding of the board and its work. The board chair observed that in relation to the activities of the board understanding of diversity has improved. Finally, the board chair concluded by noting that the board also has a greater awareness of lived experience and that, although it continues to be a work in progress, diversity of practice is well underway.

New perspectives reflective of local communities which were previously in the "seldom listened to" category.

**On the difference that the appointment has made to the board
NHS Grampian Body Chair**



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