

Ethical Standards Commissioner

HARNESSING BOARD ROOM DIVERSITY – NHS DUMFRIES & GALLOWAY

The difference that diversity
makes to your board's governance

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BODY: NHS DUMFRIES & GALLOWAY

CATEGORY: HOLISTIC

KEY LEARNING POINTS FROM THIS CASE STUDY

- *Internal mentoring and buddying speeds up and enhances the capacity of new members to use their uniqueness for the benefit of the whole.*
- *Co-creating leadership across non-executives and executives.*
- *Adapting the working pattern of meetings to maximise reflexivity and learning for all board members.*
- *The timescales involved in creating a diversity friendly culture.*

Background

The current operational context for NHS Dumfries and Galloway is increasingly challenging. There are growing costs for delivering health services, especially in acute services such as hospitals. Brexit has added to the pressure, bringing uncertainty about rising costs and affecting staff retention. The ageing population puts pressure on all health services. At the same time there is a phenomenon in rural locations such that family members live at greater distances from each other. This means that, in Dumfries and Galloway, specific issues such as the pressure on carers becomes strategically important to the health board.

In 2015 the board realised that in order to work well in this context it would need to be able to think about different ways of continuing to do its work. As a consequence, it set about a program of change. The first step was to deliberately use the public appointments process to recruit a different mix of board members to increase the diversity of thought, skills and experience in the boardroom. The board saw this as a necessity so that it could embed resilience and the type of flexibility required to navigate the challenges.

This case study examines three measures that interact to build a supportive culture making best use of everyone's backgrounds and differences to enhance the board's work. These are:

- mentoring and internal buddying
- regular monthly non-executive only meetings and
- a series of 'Challenge Days' which are part of a wider Leadership Development program for both executive and non-executive board members.

The study also looks at making meetings more inclusive by adapting timings to suit all members and by the use of accessible communications technologies.

Main areas with diversity focus for NHS Dumfries & Galloway's Board and the difference that they make to the way diversity is harnessed

Area of focus	Activities
<p>INTERNAL MENTORING AND BUDDYING <i>Using their diverse backgrounds and experiences to tap into different resources and knowledge</i></p>	<ul style="list-style-type: none"> • Enhances how the whole person, including their background, fits with the role and into the board. • Affirmation that the new members have picked up on the same issues and systemic themes as more established members • Transfer of knowledge, such as how to use influence to best effect in meetings • Increased confidence to challenge and question collective views.
<p>STREAMLINING OF MEETING PATTERNS <i>Reorganising the board's work to be on predictable days</i></p>	<ul style="list-style-type: none"> • Enables greater equality of involvement for those who are located remotely and those have challenging work and/or family commitments • Increases informal overlap time between board members.
<p>NON EXECUTIVE ONLY MEETINGS <i>Increasing collective space for diverse viewpoints, with diversity of perspective being deployed</i></p>	<ul style="list-style-type: none"> • Enhances reflection and develops reflexivity • Sharing learning • Increased sense of building an understanding that is broader and around the edges of issues. • Diverse attributes of the whole board are enhanced.
<p>CHALLENGE DAYS <i>Enhancing thoughtful analysis taking into account a wider range of factors.</i></p>	<ul style="list-style-type: none"> • Enhances ability to lead and adapt to major change and to foresee potential developments and consequences by scenario thinking together. • Parity of esteem across the non-executive and executive members • Deploying the perspectives and skills of all participants to create comprehensive and welcome constructive challenge. • Learning about complex issues together • Robust testing of ideas preceding implementation.

The key elements in achieving the difference and how the activity is maintained

INTERNAL MENTORING AND BUDDYING

Over the last four years mentoring and buddying arrangements have been put in place for new members and for when specific roles are being transferred from one board member to another.

The vice chair mentors new board members during the first year of their appointment. This mentoring is to support them in their role. It is as much about drawing on their life circumstances and background as about their skills. The mentoring enables them to learn how the board works and explore what they are making of the business at hand. It helps them to find their voice and place in the boardroom. The mentoring conversations also help new board members work out how to fit the health board work in with their other busy responsibilities, such as being a carer, having a young family or running their business. At the core of the mentoring the new board member is being supported to work out how best to use their skills. The approach taken is one of appreciative enquiry such as *'if that's what you think then why aren't you saying something?'*. These gentle but firm prompts in the privacy of a mentoring conversation have the impact of authoritative encouragement to participate fully in board discussions.

The people involved in the scheme explained that, as the mentor got to know the mentee, it helped the mentee notice the connections between what was going on in their outside lives and the challenges that were facing the health board.

For example, one of the board members has caring responsibilities and a significant background of knowledge of the world of carers. This brings a lot of insights about what carers need from the health board. This is both practical; such as around issues like hospital discharge, because carers need to be ready and able to care for their loved one being discharged. It is also about emotional support, helping carers with their own health and resilience. At a board and strategic level, having this person take on the role of carers' champion helped the organisation to consider the way in which it operated. It aided significantly in the development of the [Carers Strategy 2017-2021](#).

In another example, as the health board was going through its planning process for designing the new hospital in Dumfries, one of the board members who has a significant background in volunteering, could see connections that her fellow board members weren't necessarily able to. She discovered through the mentoring that her personal experience of volunteering was a significant area of expertise that the health board could benefit from. In the first instance, when the new Dumfries hospital was being planned, they were able to significantly improve the plans by looking at how volunteers could be used. In the new hospital they now have 239 volunteer in 21 different types of roles. For example there are 55 'Welcome Guides' volunteers who meet and greet patients and visitors helping them with things like e-kiosks and self-check-in or with getting wheel chair assistance. Embracing volunteering is seen as strategically important, enhancing accessibility, reducing isolation and also encouraging local people to consider careers in the NHS (which then helps with local staff recruitment and retention). The Board has agreed to roll out this approach into the 4 localities in 2019.

"[In our board room] we need to be thinking about everything in the round. In my opinion mentoring and buddying are critical to maintaining maximum usage of diversity, because if you do have issues like mental health, caring, juggling complex lives, being able to identify what people's specific needs are, together with someone more experienced in boards takes time, from which the insights to the board are invaluable."

Grace Cardozo, non-executive board member.

Buddying relationships are also used. This is where a pair of board members are asked to support each other's learning journey. Recently this was used for two new board members. In the first 6 months, these board members met up, comparing what they were thinking and experiencing as they became used to the work. Buddying had the effect of really helping these people to get to know each other's values, skills and contributions at quite a deep level. It meant connecting as people with an appreciation of each other's backgrounds and life experiences.

In another example, buddying was set up to transfer the role of Staff Governance Chair. The board member who had been chairing the Staff Governance sub group separated out what was essential and what were the wider, less core aspects to staffing governance, and over a series of meetings helped the new Chair of Staff Governance, so that they didn't have to go through such a steep learning curve themselves.

"It is not obvious what someone's CV/experience brings and what their capabilities are. The established group don't know you deeply. So buddying and mentoring support [helped everyone] get to know exactly where [each other was] coming from."

Penny Halliday, Vice Chair.

STREAMLINING OF MEETING PATTERNS

NHS Dumfries and Galloway try as much as possible to make the board activity fall on the same days of the week, rather than spread out ad hoc. This makes it easier and more equal for those who have portfolios of busy lives and long distances to travel to plan ahead for their health board work.

What had happened in the past, when board member business was done more ad hoc, on any day, would be that by default, those board members who were local to Dumfries town and/or semi-retired would end up, by accident of availability, being the ones involved the most. This in turn meant that these members would become a bit of an inner group, of a few, who were more visible at public events. This would unconsciously and unintentionally marginalise board members who had to travel long distances and had busy working lives outside the health board.

Mondays have now been chosen as their main 'corporate days'. Putting as much of the non-executive duties on Mondays means they maximise the chance of crossing over with each other in the non-executive room in between their corporate work.

REGULAR PATTERN OF NON-EXECUTIVE ONLY MEETINGS

For the last three years, NHS Dumfries and Galloway have held a regular pattern of non-executive only meetings that provide an informal discussion space. They are different to the formal board meetings with the Executive which are open to the public. These are voluntary to attend and last a few hours on the same day each month.

They are chaired, planned and facilitated by a different board member each time, allocated to the role in rotation. Each day is theme based, often exploring the background to key issues in health. This is not a decision-making space, or even a rehearsal for decisions, but

a key reflective space and a learning exchange space. The meetings are minuted and shared each time with those who don't make it.

One of the key things that regularly comes out of the meetings is working out what they each need to learn more about over the coming period. For example in one meeting they worked through using the Audit Scotland Report – [the Role of Boards](#) – including its checklist 'Questions for board members' to establish who they needed to ask what in order to get assurance.

CHALLENGE DAYS

In 2015 the board co-created a leadership development program for themselves and the executive team. This includes a programme of themed Challenge Days. They are planned, topic based, externally facilitated, intense learning days. The themes looked directly at challenging areas of the health agenda. At the same time, the days were planned to also work consistently on the vision, values and purpose of the board. By learning together on hard challenging areas, where everyone is stretching and developing, the executives and non-executives have fostered a parity of esteem across the different roles.

As a result of the rhythm of challenge days and the regular non-executive meetings, the board members are clearer that their collective decisions are robust and are therefore more confident in their collective leadership.

FLEXIBLE WORKING PRACTICES APPLIED EQUALLY TO BOARD AS STAFF

This is one of a few public boards which has implemented maternity leave for a board member. They have regular use of inclusive technology to support remote working, using conferencing software for meetings. In the geography of Dumfries and Galloway, round travel trips can involve more than six hours driving for a meeting making the use of remote access options all the more important.

TIMESCALES FOR CO-CREATING A DIVERSITY ENHANCING CULTURE

Buddying and mentoring can take between 6 months to a year to have the desired impact. This amount of time is critical in allowing the new board member to work at their best with the complexity of issues facing the board.

The challenge days have a more immediate impact of deepening respect and robust debate. The impact can be felt in the subsequent board meetings. Challenge days with the IJB's *'have been a life-saver in developing relationships'* Penny Halliday, Vice Chair.

The rhythm of regular non-executive days took 6 months to establish. The rotating of the chair/ facilitator preparing these was crucial to truly co-creating right relaxed culture.

Taken together these measures create a board that is functioning at a higher level because the members can challenge each other and draw upon their rich diversity. Collectively they are able to reach strategic conclusions faster. It has created a sea change over a 2-3 year period in the 'way things are done around here'.

The diversity in governance indicators in evidence

- Board members listen intelligently to each other, using each other's background and experiences.
- Board members who have expertise in specific areas are utilised as champions. Examples in this case study relate to a carers champion and a volunteering champion.
- Different skills, knowledge, experience and perspectives are deployed, allowing comprehensive challenge.
- Board discussions in the different spaces are characterised by airing disparate viewpoints
- Board members are satisfied that robust testing of ideas precedes implementation.

Checklist for actions that boards that wish to replicate these activities can use

- ✓ Establish a mentoring offering for new board members
- ✓ Set up internal mentoring for when specific roles are being transferred to new board members.
- ✓ Establish buddying relationships between board members.
- ✓ Run a regular program of topic-based Challenge Days which develop the leadership of the whole of the board (executives and non-executives). Consider using external facilitation.
- ✓ Create a regular meeting for the non-execs to reflect and learn together away from the pressures of the main board meeting.
- ✓ Arrange the work of the board to be mostly falling on predictable days, so that those who are geographically distant and/or who have other responsibilities that keep them busy can schedule their board work
- ✓ Deploy board members to use their diversity experience to champion aspects of improvement and themes of work.
- ✓ Encourage getting to know each other's backgrounds and life experiences as these may inform extremely useful insights.

Further contact / information

Penny Halliday, Vice Chair, penny.halliday@nhs.net Dumfries and Galloway Health Board.