

Leadership Team Governance Meeting Notes

Meeting Date	Wednesday 8 August; 10:30 by video conference
Attendees	Rosemary Agnew, Ombudsman (Chair) Niki Maclean, Director Andrew Sheridan, Head of Improvement, Standards and Engagement Fiona Paterson, Corporate Services Manager
Apology - Observer	Adele Keddie, Executive Casework Officer Scott Ramsay, Executive Casework Officer

Item	Subject	Main points of discussion	Decisions taken	Actions agreed	Due	Lead
1.	Minutes, action point updates and matters outstanding	LT noted the minutes as published and reviewed action points. Outstanding actions discussed included the workforce planning training		HR identifying training options for LT/HR/Heads	September 2023	Director
2.	Confirmation of governance decisions taken at LT operational meetings	LT confirmed the governance decisions taken at LT operational meetings during Q1.	Decisions confirmed.			



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3.	Confirmation of the quarterly Casework Performance Dashboard	LT confirmed the quarterly Q4 Casework Performance Dashboard as presented at the quarterly Casework Performance Management Meeting	Performance report confirmed.			
4.	Confirmation of the Customer Service Complaints report	LT confirmed the Customer Service Complaints report as presented at the quarterly Casework Performance Management Meeting	Report confirmed and outcomes noted.	Publication of the Q1 CSC report approved.	August 2023	CSM
5.	Confirmation of the Equalities, diversity, inclusion and accessibility report	LT noted the template for a quarterly Equalities, diversity, inclusion and accessibility report as seen at the Casework Performance Management Meeting has been approved and is being taken forward by the IDEA group.	Template approved.			
6.	Legal actions update	The Ombudsman provided a verbal update on current legal activities, including that there are currently two cases subject to litigation, and that we have also sought specific advice about non litigation related matters. The two cases going through litigation are a Judicial Review and a small claims action in the				



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		Sheriff's Court. The JR is currently pending and requires no immediate action of the SPSO and the small claim is subject to a procedural hearing at the end of August.				
7.	Financial report	LT noted the 2022-23 year-end position, with a small overspend of £15k, due to the late agreement and accrual of the Cost of Living (CoL) payments.				
		The Director informed the meeting that the cash in bank position was in line with requirements.				
		At this point in the year the 2023-24 budget is predicted to have an overspend, in part due to the CoL agreement, and a meeting has been arranged with the SPCB to discuss the funding position.				
		The strong payment performance was noted.				
		The 2024-25 budget is due for submission on 4 September 2023 and will include a CoL of 3%.				
8.	Financial report – addition - Clinical Adviser Rate Review 2023.	LT noted information tabled and agreed the following: 1. SPSO will standardise rates to a single rate, at the current highest rate, from 1 September				



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		2023. It was noted this will be circa £13K per annum increase in costs, with a £6.5k increase cost in this year's budget.				
		 In light of the budget position, a decision will be taken in Q4 regarding a premium rate for specialisms where identifying and appointing advisers is problematic. 				
		3. In light of the budget position, a decision will be taken in Q4 regarding aligning the rate of pay with PHSO.				
		LT also noted the success of the recent recruitment campaign managed by the Lead Adviser, but acknowledged there were still gaps in some specialisms.				
9.	External Audit report	The LT were updated on the audit progress to date, in line with the agreed Audit Plan, and the minor adjustments that were tabled at the clearance meeting. All adjustments have been made to the accounts as requested.				
		The LT gave their thanks to the Corporate Services and ISE teams for their work on this audit.				



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10.	Internal Audit report	LT noted the first activity for the year focussing on decision-making in case management and quality assurance was underway, with the report due by end August. The close meeting was very positive. The LT noted the strong links between the audit activities and identified areas of risk in the operations register.				
11.	Risk and Incident report	LT discussed the risks to completing BP activities at this point in the year. LT members were asked to remind their managers to complete the updated team operational risk registers by end of August for LT review, following the training session held in July. The updated 2023-24 strategic and operational risk registers will be finalised for Q2 reporting. LT noted the incidents recorded.		Finalise the updated strategic an operational risk registers	End September 2023	Omb
12.	Business plan report	LT noted the Q1 BP performance and approved the summary for publication		Publication of the Q1 BP approved.	August 2023	CSM



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13.	Corporate Services Assurance report	LT noted the assurance provided by the general report and the supporting reports for Human Resources, Information Communications Technology, Internal Professional Advice, Information Governance, and the annual Equalities, Diversity and Inclusion. LT gave their thanks to the Lead Professional Adviser for the very successful recruitment drive for clinical professional advisers undertaken this year.				
14.	Any other business	None.				

Approved for publication on 15 August 2023

Rosemary Agnew, Scottish Public Services Ombudsman