GOVERNANCE OF THE DEPARTMENT OF HEALTH AND SOCIAL CARE

Our principal purpose is to ensure that we enable all of our colleagues to deliver health and social care services to the people of the Isle of Man which are safe, effective, caring, responsive to people’s needs, efficient and well led.

1 Who we are

1.1 Our values

**WE CARE – committed, appreciative, respectful and excellent**

We are committed to our community and each other. We work together to understand individual needs and enable access to the best customer-centric care services.

We appreciate each other, other points of view and ways of working. We communicate; let people speak and make sure we listen.

We have respect and are ethical in everything we do. We speak up and do the right thing. We act with integrity, are trusting and are trusted.

We thrive on excellence, innovation, and continuously developing ourselves and best practice. We debate, challenge and embrace change.

1.2 Our aims

**Supporting people**

We will support people to take responsibility for their health and wellbeing, and to stay well in their own homes. We will be sensitive and inclusive, providing space and privacy and treating people in a family context wherever possible. Our aim is to reduce the difficulties in getting access to health and social care.

**Statutory responsibilities**

We will fulfil all of our statutory responsibilities diligently and professionally.

**Increasing efficiency**

We will be a cost-efficient organisation. We will use resources efficiently, effectively and consistently. We will reduce waste, including the waste of customers’ time. Our focus will be the needs of health and social care customers.

**Improving safety**

We will respect the trust people place in us by developing and implementing best practice
arrangements to prevent harm to our customers and colleagues and to ensure compliance with applicable law.

**Promoting wellbeing**
We will promote the best health and social care outcomes through effective communications, learning from the experiences of customers, family and colleagues and good practice worldwide. We will actively support healthy choices and lifestyles for everyone.

**Becoming more environmentally responsible**
We support environmental sustainability. This includes, for example, minimising the energy requirements of buildings, choosing environmentally friendly and sustainable building materials, maximising operational energy efficiency, reducing waste and supporting sustainable transport.

**Providing effective services**
Our health and social care system seeks to be effective by delivering affordable services, which provide good outcomes for customers. We will make it easy for people and colleagues to stay informed by making appropriate health and social care information freely available.

**Strategic responsibilities**
We have strategic responsibilities as part of the Isle of Man government: which can be summarised as overseeing both the health and wellbeing of the population and the health and social care economies of the Island, including the charitable or ‘third’ sector. This oversight function, and the intelligence and insights which it provides, can lead to the development of legislation, the production of needs assessments and the provision of advice to other parts of the government.

**Safeguarding**
We have the lead governmental statutory responsibility in relation to safeguarding, both in the context of our services and across the community. We support the independent safeguarding chair: who is appointed by and reports to the Chief Secretary. Our contributions to safeguarding children and adults are in more areas than many of our partners, and our role is often to commence new programmes of work and convene groups of stakeholders.

**Social**
It is inevitable, in view of the range of our services and our size that we play a key role in developing and maintaining a sustainable community. Examples of our contribution include providing grant aid to third sector organisations and the development of local principles for the co-production of public services.

### 1.3 The Seven Principles of Public Life

The seven principles of public life (often referred to as the ‘Nolan Principles’) shall apply generally in the Department of Health and Social Care.

**Selflessness**
Holders of public office should act solely in terms of the public interest. They should not do so in order to gain financial or other material benefits for themselves, their family, or their friends.
**Integrity**
Holders of public office should not place themselves under any financial or other obligation to outside individuals or organisations that might seek to influence them in the performance of their official duties.

**Objectivity**
In carrying out public business, including making public appointments, awarding contracts, or recommending individuals for rewards and benefits, holders of public office should make choices on merit.

**Accountability**
Holders of public office are accountable for their decisions and actions to the public and must submit themselves to whatever scrutiny is appropriate to their office.

**Openness**
Holders of public office should be as open as possible about all the decisions and actions that they take. They should give reasons for their decisions and restrict information only when the wider public interest clearly demands.

**Honesty**
Holders of public office have a duty to declare any private interests relating to their public duties and to take steps to resolve any conflicts arising in a way that protects the public interest.

**Leadership**
Holders of public office should promote and support these principles by leadership and example.

1.4 The Department

The Minister for Health and Social Care heads the department. For convenience, the statutory and operational functions of the department will be referred to throughout this document as “the DHSC”.

The Isle of Man Government Code¹ states at paragraph 2.7:

A Minister’s general statutory authority in relation to his or her Department is set out in the Government Departments Act 1987. Section 3 (1) of the Act states:

“Subject to subsections (2) and (3) [which deal with delegations], the functions of each Department shall be exercised by the Minister in the name and on behalf of the Department.”

The effect of the Act is to give each Minister authority to exercise all the functions of his or her Department or to delegate authority where this is desired. Generally, it is desirable that Ministers should devolve to their Departmental Members responsibility for a defined range of Department work.

¹ See: https://www.gov.im/lib/docs/hr/ERP/codeofconductforpublicservants.pdf
In addition, paragraph 2.9 of the Government Code states:

*When conducting Departmental business the Minister may as he or she deems appropriate invite:*

- a) the Minister and Members to meet collectively to agree policy, budgetary and legislative priorities in accordance with any timescales agreed by the Council of Ministers;

- b) the Minister and Members to meet collectively to receive reports on a regular basis on the Department’s financial and operational performance.

Section 1 (2) of the Government Departments Act 1987 provides that:

*Each Department shall consist of -*

  (a) the Minister; and

  (b) one or more other members, who shall be members of Tynwald.

It is, therefore, a statutory requirement that each Department shall have at least one Member to support the Minister. At the time of writing this document, the Department of Health and Social Care has four Members of Tynwald in addition to the Minister. For convenience, the Minister and Members will be referred to throughout this document as "the Department".

Section 3 of the Government Departments Act 1987 goes on to say:

1. Subject to subsections (2) and (3), the functions of each Department shall be exercised by the Minister in the name and on behalf of the Department.

2. The Minister may authorise any member or officer of the Department, or any other person, to exercise any functions of the Department in his place, either alone or jointly with him or with any other such person or persons.

3. Any person authorised under subsection (2) to exercise any functions of the Department may authorise any officer of the Department to exercise any of those functions in his place.

4. The Department may make standing orders regulating the exercise by any person of any functions of the Department which he is authorised to exercise under subsection (2) or (3).

5. Where any person has under subsection (2) or (3) authorised any other person to exercise any functions of the Department in his place, he is not thereby prevented from exercising those functions himself.

An explanation of this section is given in the Government Code’s paragraphs 3.4 and 3.5:

The effect of section 3 (1) of the Act (see above) is to vest all the functions of the Department in the Minister but the Minister is able to delegate some or all of those functions, albeit final responsibility for all the functions will remain with the Minister.

The section includes a reference to Members and, whilst full Departmental authority is vested in the Minister, the Member is a specified class of person to whom the Minister may
delegate functions of the Department.

The DHSC delegations made by the Minister to Members and officers are updated from time to time, and current copies accompany this document. The delegations referred to are thematic (although accompanied by detailed description schedules), with the current areas of functions delegated to each Member being:

- children and family services and chair of the clinical recommendations committee;
- community care, including commissioned services;
- corporate services;
- hospital services.

The delegations made by the Minister to Members include the explicit restriction that:

Nothing in the Schedule [of functions] shall be taken to impinge on the authority of the Chief Executive to manage the staff of the Department, nor to execute his responsibilities as Departmental Accounting Officer.

In practice, the above points mean that the Chief Executive is delegated to manage and deliver the services (the operations) of the DHSC. Where there is any lack of clarity between what constitutes the functions of the DHSC on the one hand, and its operations on the other hand, the matter will be resolved at a meeting of the Department.

1.5 The Chief Executive

The delegation made by the Minister to the Chief Executive covers the operations of the DHSC as mentioned above.

In addition, the Chief Executive is the Accountable Officer of the DHSC: an office that carries a number of personal responsibilities. The role of the Accountable Officer in the Isle of Man Government is set out in Financial Direction A.5 of the Financial Regulations, an extract of which is below.

The Accountable Officer of a designated body is the person whom Tynwald may call to account in respect of the stewardship of the resources within the control of the designated body.

The Accountable Officer is personally responsible for making certain financial decisions that are considered high risk and where identified within statutory financial directions.

They are also able to make certain compliance exemptions in accordance with these statutory financial directions.

The responsibilities of the Accountable Officer cannot be delegated, however, the Accountable Officer must ensure that they appoint an appropriate Deputy to make decisions in their absence.
The Accountable Officer is also the Departmental Budget Holder.

2 Corporate Governance in the DHSC

2.1 What is corporate governance?

The DHSC needs to have a structure in place that delivers prudent and effective leadership and proper oversight of its operations to ensure that it is working in the best interests of its customers.

Corporate governance is the means by which organisations are led and directed so that decision-making is effective and the right outcomes are delivered. In the DHSC, this means concentrating on our principal purpose and delivering safe, effective services in a caring and compassionate environment in a way which is responsive to the changing needs of customers. A robust governance structure, which encourages proper engagement with stakeholders and strong local accountability, will help us to maintain the trust and confidence of the Island’s community.

Good corporate governance is dynamic. The DHSC is committed to improving governance on a continuing basis through a process of evaluation and review. An effective governance structure therefore requires that attention be paid to all aspects of quality in the DHSC.

2.2 Leadership

Every part of the Isle of Man Government should be led effectively. Leadership in the DHSC is provided by the Department, as defined in 1.2 above, by the Executive Leadership Team (“the ELT”) and by a number of quality committees. The ELT is comprised of the Chief Executive and all officers of director level.

The ELT is an advisory body to the Chief Executive and is responsible collectively for the performance of the DHSC.

There shall be a clear division of responsibilities between the Department (which the Minister chairs) and the ELT. In any situation where clarity is in doubt, it is for the Minister to reach a decision which will then be communicated to relevant parties.

The Minister and Chief Executive are responsible for leadership of the Department and the ELT, respectively: ensuring that everyone taking part in either body is fully effective in all aspects of their role and leading on setting the agenda for meetings.

The DHSC may engage lay people in governance roles where they challenge constructively and help develop proposals on strategy.

2.3 Effectiveness

The Department, the ELT and any associated committees should have the appropriate balance of skills, experience, independence and knowledge of the DHSC to enable them to discharge their respective duties and responsibilities effectively.
All politicians and directors serving in the DHSC should be able to allocate sufficient time to discharge their responsibilities effectively.

All politicians and directors serving in the DHSC will receive appropriate induction on joining the Department, the ELT and any associated committees and should regularly update and refresh their skills and knowledge. Both politicians and directors should make every effort to participate in the training that is offered.

The Department, the ELT and any associated committees will be supplied in a timely manner with relevant information in a form and of a quality appropriate to enable them to discharge their respective duties.

2.4 Accountability

The Department, through the Minister, is responsible to the Council of Ministers and Tynwald for the functions and policies of the DHSC. The Department relies upon the ELT for support in providing information and advice in respect of the functions and policies of the DHSC.

The ELT will present a fair, balanced and understandable assessment of the DHSC’s position and prospects.

The ELT is responsible for determining the nature and extent of the significant risks it is willing to take in achieving the strategic objectives of the DHSC; and will maintain sound risk management systems.

The ELT will operate formal and transparent arrangements for considering how it should apply corporate reporting, risk management and internal control principles and for maintaining an appropriate relationship with any external scrutiny body.

2.5 Relations with stakeholders

The Department must represent the interests of the Isle of Man Government, Tynwald and the public.

Notwithstanding the role of the Department, the ELT also has responsibility for ensuring regular and open dialogue with the stakeholders of the DHSC.

3 The ELT

3.1 Leadership

In view of its size (both in terms of expenditure and number of employees) and its importance to the Isle of Man community, the DHSC must have effective leadership. The ELT is responsible collectively for the performance of the DHSC.

The personal attributes of Executive Leadership Team members will be:
- showing commitment constantly to the department’s purpose and values, coupled with exemplary role modelling and coaching of the behaviours underpinning them;
• building relationships based on trust – with each other, in the department and with people who interact with the department;
• developing and learning continuously and encouraging others to do so;
• making evidence-based decisions quickly;
• delivering results;
• dedication to continuous improvement;
• acting as ‘steward of a whole’ and not ‘owner of a part’; and,
• being more interested in action than activity.

The general duty of the ELT and of departmental directors individually, is to act with a view to promoting the success of the organisation and maximising the benefits for the public.

The role of the ELT is to provide effective leadership of the DHSC within a framework of prudent and effective controls that enable the assessment and management of risk.

The ELT will set the DHSC’s strategic aims at least annually taking into consideration the views of the Department and state them in a service delivery plan. The ELT will ensure that the necessary financial and human resources are in place for the DHSC to meet its priorities and objectives and, then, periodically review progress and management performance.

The ELT is responsible for ensuring the quality and safety of health and social care services and for applying appropriate principles and standards of professional and clinical governance in the DHSC.

The ELT must also ensure that the DHSC functions effectively, efficiently and economically.

All departmental directors must take decisions objectively in the best interests of the DHSC and avoid conflicts of interest. All departmental directors have a responsibility to challenge constructively during discussions and help to develop proposals on priorities, risk mitigation, values, standards and strategy. All departmental directors will demonstrate high standards of probity and responsibility.

The ELT will meet sufficiently regularly to discharge its duties effectively.

The ELT will ensure that adequate systems and processes are in place to measure and monitor the DHSC’s effectiveness, efficiency and the quality of its health and social care services delivery. The ELT will regularly review the performance of the DHSC in these areas against regulatory and contractual obligations, and approved plans and objectives.

The ELT will ensure that relevant processes to collect, analyse and report information are developed and agreed to understand and assess progress and delivery of performance. Where appropriate and, in particular, in high risk or complex areas, independent advice (for example, from the Treasury Assurance Advisory Division) will be commissioned by the ELT to provide an adequate and reliable level of assurance.

3.2 Information and support

The Department and the ELT will be supplied in a timely manner with relevant information in a form and of a quality appropriate to enable them to discharge their respective duties. The ELT is responsible for having this information prepared. Management has an obligation to
provide such information, and departmental directors should seek clarification or detail where necessary.

The responsibilities of the Chief Executive include ensuring good information flows across the Department, departmental directors and their committees, between politicians and officers, and between senior management and any lay representatives.

The ELT will ensure, wherever possible, that it has sufficient information and understanding to enable challenge and to take decisions on an informed basis. When complex or high-risk issues arise, the first course of action should normally be to encourage further and deeper analysis to be carried out in a timely manner within the DHSC. On occasion, the ELT may reasonably decide that external assurance is appropriate.

Where appropriate, the ELT will take account of the views of the Department on the service delivery plan in a timely manner and communicate to the Department where its views have been incorporated in the plan: and, if not, the reasons for this.

3.3 Financial, quality and operational reporting
The ELT will present a fair, balanced and understandable assessment of the DHSC’s position and prospects.

The responsibility of the ELT to present a fair, balanced and understandable assessment extends to all public statements and reports, and to information presented in accordance with statutory requirements.

3.4 Quality committees
Quality governance can be defined as the combination of structures and processes which oversee department-wide quality performance, including:

- ensuring that required standards, as agreed with the Department, are achieved;
- investigating and taking action on sub-standard performance;
- planning and driving continuous improvement;
- identifying, sharing and ensuring delivery of best practice; and,
- identifying and managing risks to quality of care.

Quality must underpin everything the DHSC does, and so its governance is one of the most important responsibilities of the ELT. In carrying out this responsibility, the ELT will be supported by a number of committees.

The names, number of and terms of reference of the quality committees will be kept under review, and may be amended as appropriate. A list of the current quality committees accompanies this document.

Reports from each quality committee will be prepared and presented regularly to the ELT and the Department.

Full update made in October 2018