

## **Bòrd na Gàidhlig Improvement Plan 2020-21**

### **Introduction**

The Improvement Plan Steering Group (IPSG) is a sub-committee of the Audit and Assurance Committee (AAC). The IPSG consists of a board member from the AAC, a member of the leadership team and an employee representative. The Ceannard attends the IPSG. The IPSG has oversight of the Improvement Plan which was developed originally as a result of the Audit Report prepared by Deloitte in 2019.

The purpose of the Improvement Plan is to demonstrate and track that actions are being taken to ensure that the organisation is meeting the required improvements identified in the Audit Reports.

In addition, the Improvement Plan contains improvement actions identified by employees as a result of the Employee Survey undertaken in May 2020.

This plan is effective until a further Audit is undertaken.

The plan will be updated by the Leadership Team who will liaise with the Workstream/Action Leads in order to monitor progress, identify issues and evidence improvements.

The workstreams have been identified as a result of the Audit Report and Employee Survey. Workstreams are agreed by the Audit and Assurance Committee after discussion and review by the IPSG.

A baseline of actions has been agreed by the AAC. Changes to existing actions or new actions can only be agreed by the Improvement Plan Steering Group, which will be reported to the Audit and Assurance Committee.

Risks and Issues associated with the Plan will be reviewed by the IPSG and will be referred to the Audit and Assurance Committee in line with the guidance below.

### **Completion Guidance**

IP Updates and monitoring: LEADERSHIP TEAM

New/Change to actions: To be agreed by the IPSG

Workstream Leads: As named

Responsible for communication of activity and actions to be undertaken by other employees in BnG. Details to be noted in Comments/Update section of plan.

### Workstream status: Red/Amber/Green (RAG)

Indicator	Red	Amber	Green
Time	Expected improvement delivery more than 30 days later than agreed plan	Expected improvement delivery up to 30 days later than agreed plan	Expected improvement delivery on track and no likely risks or issues to indicate otherwise
Scope	A significant change to the scope of the workstream has been agreed with the IPSG in the last quarter	Not used	Project scope remains as agreed with the Project Sponsor and there are no likely risks/concerns to indicate otherwise. This will include minor changes that are routine and can be accommodated without changes to estimate or schedule above the agreed tolerance.
Cost	Costs expected to exceed current agreed estimate by more than 20%	Costs expected to exceed current agreed estimate by between 10-20%	Costs expected to meet current agreed estimate (with 10% tolerance)
Improvements (Benefits)	A reduction in benefits is likely to be more than 10%	Reduction in improvements of around 10%	Improvements are on target
Overall Project Status	RED if one or more of the above indicators are RED.	AMBER if one or more of the above indicators are AMBER and none are RED.	GREEN if all of the above indicators are GREEN.

### Risks and Issues (R&I)

There is a separate agreed R&I log for the overall programme of change. New and Changed R&I will be highlighted in this report.

An issue is anything that is causing an adverse impact on planned progress, cost or quality of the plan including when an action goes to Amber or Red. An issue exists today and must be resolved quickly (as distinct from a risk, which is yet to happen).

Workstream Leads are responsible for resolution and management of issues that can be resolved within their areas.

A risk is an undesirable event that, if it occurred, would impact the delivery or benefits of the plan. A risk is yet to happen and needs to be avoided or mitigated (as distinct from an issue which already exists today). Mitigating actions may be taken to reduce the likelihood of the event happening or to minimise its impact. Contingency action plans may need to be drawn up in case the risk event actually eventuates and therefore the risk becomes an issue.

## Workstream 1: Workforce

<b>KPI/Target</b>		<p><b>Target:</b> A management structure will be agreed and costed with a supporting succession plan to include actions to manage any gaps in business-critical roles.</p> <p><b>Impact:</b> A route map to deliver the revised management structure which, when implemented, will deliver the required capacity and capability to achieve the organisation's stated aims and objectives.</p> <p><b>Metric:</b> Proposal and Succession Plan approved by Board</p> <p><b>Timescale:</b> by 31/03/21</p>					
<b>1.1</b>	<b>Ceannard</b>	<b>A revised management structure will be required to deliver organisational strategy with clear roles and responsibilities laid out for each position and a revised structure in place for the beginning of 2021/2022.</b>					
Ref	Lead	Date Added	Improvement/Action	Due Date Revised Date	Deliverable	Comment/Update	Status
1.1.1	Ceannard	25/10/20	Proposal on revised management structure to go to December Board Meeting	December 2020	Board paper	11.01.21 – Paper submitted and further meeting held; proposals agreed on 21.12.20	Closed
1.1.2	Ceannard	25/10/20	Proposal to have a funding plan/strategy in place	31/03/21	Strategy approved by the Board	18.01.21 – Draft MTFP was approved by the board on 2.12.20 with recommendations for further development	Open
1.1.3	Ceannard	25/10/20	Succession plan prepared and agreed by leadership team	28/02/21	Succession Plan	18.01.21 – This follows on from 1.1.1 plus updates to workforce plan – work underway.	Open
1.1.4	Ceannard	25/10/20	Communication and Implementation plan for revised structure developed	31/03/21	Communication and Implementation plan	18.01.21 – This is to be started. Processed later than planned due to additional board meeting required on 21/12/20 for further discussion of revised structure.	Open
1.1.5	Cathraiche	25/10/20	Board to continue to monitor that management structure is effective.	31/10/21	Performance Reviews Reports on implementation of Operational Plan (Quarterly)	18.01.21 – Structure not yet implemented.	Open
<b>1.2</b>	<b>Ceannard</b>	<b>A workforce plan is in place and agreed. An organisation wide training plan is developed and implemented, which centrally captures identified training needs, to ensure the organisation has sufficient skills/capabilities to deliver the strategy.</b>					
Ref	Lead	Date Added	Improvement/Action	Due Date	Deliverable	Comment/Update	Status

				Revised Date			
1.2.1	HR	25/10/20	Workforce plan objectives and actions are reworked to provide sufficient detail	February 2021 board meeting	Workforce Plan	11.01.21 Work still to be completed.	Open
1.2.2	Operations Manager	25/10/20	Undertake individual and organisational training needs analysis through personal development plans	31/01/21	Staff and board members with PDPs Organisational Development Needs identified by leadership team	14.01.21 Guidance issued to staff on 21.12.20, with training session for line managers on 18.01.21 on implementation of guidance, with all staff to complete PDPs by end January 21.	Open
1.2.3	Operations Manager (HR)	25/10/20	Costed training plan developed and agreed by leadership team which links to the training budget, with separate budget for recruitment.	28/02/21	Training Plan	14.01.21 – Draft plan is in progress and will be finalised with input from staff PDPs. Recruitment will no longer be part of the training budget.	Open
1.2.4	Operations Manager (HR)	25/10/20	Updated training policy guidance and procedures	28/02/21	Training Policy	14.01.21 – Work underway, no significant policy changes but clarification to procedures.	Open
1.2.5	Operations Manager (HR)	25/10/20	Training Review report for both staff and board members format drafted and agreed	31/03/21	Training Report	14.01.21 – This will be part of the package of work which includes 1.2.3 and 1.2.4.	
1.2.6	Operations Manager (HR)	25/10/20	Recruitment documentation records consideration for requirements on a case by case basis around Gaelic essential or not	31/12/20	Recruitment documentation	14.01.21 – This process is in place.	Closed
1.2.7	Cathraiche	25/10/20	Board to consider whether spend on training is sufficient.	31/10/21	Training Reports submitted June & Oct; Staff Survey annually – board Oct 21	14.01.21 – Reports will be submitted once training plan is approved.	Open
1.2.8	Operations Manager (HR)	19/01/21 (IP 2019-20)	Strengthen recruitment, selection and onboarding	30/04/21	Annual new recruit survey for staff and board		Open

## Workstream 2: Governance and Transparency

<b>KPI/Target</b>		<p><b>Target:</b> Bòrd na Gàidhlig governance measures operate to the required standards  <b>Impact:</b> The organisation operates effectively with appropriate governance structures and transparency  <b>Metrics:</b> Internal Audit Report, External Audit Report, Board and Committee effectiveness reviews.  <b>Timescale:</b> 31 May 2021</p>					
<b>2.1</b>	<b>Head of Finance</b>	<b>A holistic review of the governance arrangements in the organisation will be carried out. Any recommendations arising from this review will be added to this improvement plan.</b>					
<b>Ref</b>	<b>Lead</b>	<b>Date Added</b>	<b>Improvement/Action</b>	<b>Due Date Revised Date</b>	<b>Deliverable</b>	<b>Comment/Update</b>	<b>Status</b>
2.1.1	Head of Finance	25/10/20	Internal Audit process undertaken, and report submitted to Audit and Assurance Committee	28/09/20 audit starts; AAC meeting November 2020	Audit report and recommendations	11.1.21 – Internal Audit report rating Substantial (Controls largely satisfactory although some weaknesses identified, recommendations for improvement made.) 1 Medium & 4 Low recommendations; 1 Low rec has been completed; the remainder are in progress.	Closed
<b>2.2</b>		<b>Ensure compliance with standing orders</b>					
2.2.1	Office Manager	25/10/20 (2019-20 IP)	Training on standing orders for board and staff to ensure compliance. (SO 10, 22 and 57)	31/12/20 amend to 31/03/2021	Training completed	11.01.2021 The training was delayed due to staff absences. It will be re-scheduled to take place before end March.	Open
2.2.2	Cathraiche	25/10/20 (ISA260 – 2019-20	Board to consider whether Standards Officer has sufficient skills and capacity to perform the role effectively and if not, what support/alternative measures can be put in place to bridge gaps identified	0/11/2020 Amend to 31/03/2021	Board SO's Performance Review and support plan	18.01.21 Was delayed due to capacity issues and these will be resolved with appointment of f/t finance and corporate services role.	Open
2.2.3	Office Manager	18.01.20 21 (2019-20 IP)	Preparation of desktop instructions for the preparation and distribution of board and committee papers. (SO22) Develop desktop instructions for the appropriate provision of translation at meetings. (SO10) Further development of the verification checklist to include a line for date for distribution of documents. (SO22)	31/03/2021	Easy to follow information available for all staff involved in this work; consistent approach to delivery.		Open
<b>2.3</b>		<b>Covering Reports should include sufficient information</b>					

2.3.1	Ceannard - LT	25/10/20	Greater information required in Impact sections of reports including links and impact on other plans, budgets and further development and consideration of risk	31/12/2020	More detailed Impacts sections on Covering reports Training for relevant employees on requirements	11.1.21 Draft guidance was created and discussed with all managers at SMT meeting (04/11/2020). Board feedback on quality of papers will provide the monitoring loop on effectiveness.	Closed
<b>2.4</b>		<b>Board Training and Effectiveness</b>					
2.4.1	Cathraiche	25/10/20	Board to agree whether all their main training needs are being met in line with an agreed training plan	30/04/2021 Amend to 30/06/2021	Board training report discussed at board meeting	14.01.21 Draft guidance for PDPs for board members being prepared.	Open
2.4.2	Cathraiche	25/10/20	Board to refamiliarize itself with its governing legislation, Standing Orders, Terms of Reference, to ensure they are aware of process for making key governance changes and are able to challenge when these processes are not followed	31/12/2020 Amend to 31/03/2021	Board regular reading and reviewing included as part of agenda	14.01.21 Informal session to be scheduled.	Open
2.4.4	Ceannard/ Cathraiche	25/10/20	Self-assessment of leadership team, committee and board should be developed into a 3-year programme with external assessment every 3 years	31/03/2022	Board and Committee assessment plan	11.01.21 Paper was presented to AAC on 12.11.20 for Internal Audit review of effectiveness as part of 3-year cycle.	Open
2.4.5	Office Manager	25/10/20	Key governance documents which are on the website should be updated and made available on website immediately	01/06/2021	Website updates within 10 days of approved bilingual document available	14.01.21 Responsibilities for ensuring implementation are being transferred and documented.	Open
<b>2.5</b>	<b>SML</b>	<b>Change Management Support</b>					
2.5.1	Ceannard	25/10/20	Change management support to ensure completion of Change Implementation Plan. Paper to Board on 23/09/20	Dependent on Scottish Ministers approval for spend	Change management support in place and terms of reference agreed	11.1.21 Approval was received on 7.12.20. The contract has been advertised on Public Contracts Scotland (PCS) with a closing date of 18.1.21.	Open
2.5.2	Ceannard/ Cathraiche	25/10/20	Board to continue to monitor implementation of the programme for change and ensure it is delivered effectively	31/10/21	Report to board on implementation of programme for change		Open
2.5.3	Ceannard	25/10/20	First review of timescales for implementing recommendations in improvement plan to be undertaken and cross-organisation input completed.	30/11/20	Implementation Plan timescales agreed	11.1.21 All-staff review of IP was held	Closed
2.5.4	Head of Finance & Corporate Services	25/10/20	Board to improve its processes for capturing and reporting progress on actions arising from Board and Committee meetings and from audit, and board members	16/12/20 Amend to 31/03/21	Board/Committee minutes	14.01.21 There has been increased scrutiny and challenge on these matters. The new role has this action as a key responsibility.	Open

			need to scrutinise management updates on those areas to a greater degree. (Links to 2.				
2.5.5	Ceannard	25/10/20	Review of governance – internal audit 28/09/20	31/12/20	Internal Audit Report	18.01.2021 Internal Audit report completed and recommendations being implemented.	Closed
2.5.6	Ceannard	25/10/20	A review into effectiveness of committee structure should be carried out – internal audit underway w/c 28/09/2020	31/12/20	Internal Audit Report	18.01.2021 Internal Audit report completed and recommendations being implemented.	Closed
2.5.7	HR	25/10/20	Have SMART targets for each Workstream in IP (KPIs)	30/11/20	Improvement plan targets agreed	11.1.21 After a full consultation process, the IP was presented to the Board for approval on 02.12.2020.	Closed
2.5.8	HR		In order to improve monitoring of progress, a new format of Improvement Plan and Reporting should be established.	08/10/20	Improvement plan	11.1.21 After a full consultation process, the IP was presented to the Board for approval on 02.12.2020.	Closed
<b>2.6</b>		<b>Framework document</b>					
2.6.1	Ceannard	25/10/20	The framework document needs to be updated to reflect the changes agreed with the Sponsor Division.	When SG changes are incorporated	Framework Document	11.1.21 The document was updated (Board meeting 23/09/2020) and is awaiting further Sponsor Division input.	Open
<b>2.7</b>		<b>Developing the Improvement Plan</b>					
2.7.1	Ceannard	26/01/2021	Process and criteria for adding actions to the Improvement Plan to be developed	31/03/21	Process agreed by IPSPG		Open

### Workstream 3: Financial Management

<b>KPI/Target</b>	<b>An annual budget which has clear links to the Medium-Term Financial Plan (MTFP), Operational plan and analysis of deliverables.</b> <b>Improved capability and understanding of the procurement process</b> <b>Impact:</b> Increased effectiveness of planning and use of resources. <b>Metric:</b> Annual budget and reports, Internal Audit Report, External Audit Report <b>Timescale:</b> February 2021						
<b>3.1</b>	<b>Head of Finance</b>	<b>Bòrd na Gàidhlig should have a detailed, standalone annual budget other than the Medium-Term Financial Plan (MTFP). This annual budget should make clear links to the MTFP and the impact the budget has on the funding gaps identified in the MTFP. Clear links should be made to the Corporate plan including analysis of deliverables in plan.</b>					
<b>Ref</b>	<b>Lead</b>	<b>Date Added</b>	<b>Improvement/Action</b>	<b>Due Date Revised Date</b>	<b>Deliverable</b>	<b>Comment/Update</b>	<b>Status</b>
3.1.1	Head of Finance	25/10/20	Budget in place and structure to report on performance against operational plan	Board meeting February 2021	Budget report	18.01.21 – Budget for 21/22 being finalised and links between this and operational plan part of that.	Open

3.1.2	Head of Finance	25/10/20	Set out outcomes which the budget aims to progress demonstrating the impact on MTFP	Board meeting February 2021	Budget presented for approval	18.01.21 – Budget for 21/22 being finalised and links between this and operational plan part of that.	Open
3.1.3	Head of Finance	25/10/20	Add additional review in procurement exercise documenting qualitative considerations	30/11/2020	Qualitative measures added to procurement process	18.01.21 – This needs to be confirmed that the process was put in place.	Open
3.1.4	Operations Manager	25/10/20	Training on procurement should be provided to those involved in procurement process	15/12/2020	Training	14.01.21 First session delivered (8/10/2020); 2nd session delivered at the all staff development session on 08.12.20. A further session to be delivered by SG colleagues is planned for all-staff conference in April 21.	Closed

## Workstream 4: Financial Sustainability

<b>4.1</b>	<b>Business Case</b>						
<b>KPI/Target</b>	<p><b>The business case developed will be informed by recommendations from Annual Audit report</b>  <b>Impact:</b> The organisation will have a plan which sets out how it will achieve optimum outcomes.  <b>Measures:</b> Business case submitted to SG  <b>Timescale:</b> 31 March 2021</p>						
<b>Ref</b>	<b>Lead</b>	<b>Date Added</b>	<b>Improvement/Action</b>	<b>Due Date Revised Date</b>	<b>Deliverable</b>	<b>Comment/Update</b>	<b>Status</b>
4.1.1	Ceannard	25/10/20 (2019/20 action)	Business Case to be updated to focus on making best use of totality of funding with clear outcomes delivered	31/03/2021	Business case	11.01.21 – Updated version presented to Board; showing outcomes based on existing funding scenario; and alternative version with increased funding. Further work required.	Open
<b>4.2</b>	<b>Head of Finance</b>	<b>Medium Term Financial Plan</b>					
<b>Ref</b>	<b>Lead</b>	<b>Date Added</b>	<b>Improvement/Action</b>	<b>Timescales</b>	<b>Deliverable</b>	<b>Comment/Update</b>	<b>Status</b>
4.2.1	Head of Finance	25/10/20 (2018/19 action)	MTFP to updated to include: <ul style="list-style-type: none"> <li>- Best- and worst-case scenarios</li> <li>- Analysis of previous year statistics</li> <li>- Links between staffing changes and MTFP</li> <li>- Detail on actions to close the funding gap</li> <li>- Additional section on assumptions and risks</li> </ul>	Revised draft – December 2020; Final version – February 2021	MTFP	11.01.21 – Updated version presented to the Board on 02/12/20. Planned to present final version to Board at meeting on 24/02/21.	Open



4.2.2	Head of Finance	25/10/20 (2019/20 action)	MTFP to be updated to reflect changes implemented by the organisation and the impact of the current Covid19 pandemic and in conjunction with reviews of other plans.	Revised draft – December 2020; Final version – February 2021	MTFP	11.01.21 – Updated version presented to the Board on 02/12/20. Planned to present final version to Board at meeting on 24/02/21.	Open
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## Workstream 5: Value for Money

<b>KPI/Target</b>		<b>Target:</b> Stakeholder consultation on funding will be complete and results assessed <b>Impact:</b> The completion of this work will allow the organisation to plan for new funding agreements due in 2022 onwards <b>Metric:</b> Board report prepared on consultation process and findings <b>Timescale:</b> 31/03/2021					
5.1	Director LP & CD	<b>When preparing for the next expected multi-year agreements, BnG should carry out a wider stakeholder consultation on the revised approach to grant funding and assess the potential impact on wider Gaelic organisations and the wider Gaelic community</b>					
Ref	Lead	Date Added	Improvement/Action	Due Date Revised Date	Deliverable	Comment/Update	Status
5.1.1	Director LP & CD	25/10/20 (2018/19 action)	Consultation Plan completed and findings agreed.	31/03/21	Consultation Plan Board Updates	11.1.21 Consultation carried out (closed November 20) and first review of findings discussed by officers.	Open
5.1.2	Director LP & CD	25/10/20 (2018/19 action)	Analysis of 3-year funding. Does it provides better value for money than 1 year or one-off grants?	31/03/21	Self-assessments from funded organisations Stakeholder feedback Internal evaluation of impact	11.1.21 Process underway. Responses to consultation being presented to CPG on 02/02/21.	Open

## Workstream 6: Communication

<b>KPI/Target</b>		<b>Target:</b> Ensure effective communication internally <b>Impact:</b> Improved employee satisfaction <b>Metrics:</b> Employee Survey continues to display evidence of improvement over periods of time. Employee feedback via employee rep at Improvement Plan Steering Group, Employee wellbeing survey reporting 90% staff expect to have their POPs. <b>Timescale:</b> 31 July 2021					
Ref	Lead LNI	Date Added	Improvement/Action	Due Date	Deliverable	Comment/Update	Status

				Revised Date			
6.1	Operations Manager	<b>Improving internal communication, particularly around the Improvement Plan</b>					
6.1.1	Staff member, IP SG	25/10/20	Establish a mechanism for monitoring staff opinion in relation to specific actions undertaken as a result of the improvement plan	12/11/20	Employee feedback on IP	18.01.21 Process agreed by IP SG and discussed at all staff meeting. Invite to first discussion sent out w/c 13/01/21.	Closed
6.1.2	Chair, IP SG	25/10/20	Extend invite to other members of staff to observe conduct of Improvement Committee meetings e.g. (Trade Union representatives)	12/11/20	Employee rep attendance at IP SG	26.01.21 Steering group reviewed the mechanisms and agreed an alternative route forwards which will be reviewed after 6 months.	Closed
6.1.3	Cathraiche	25/10/20 (2018/19 action)	Board and staff engagement – board should evaluate whether engagement is effective and whether more should be done through reflection on staff survey report and other assessments and agree actions (BnG-03-1920-15)	31/12/20	Board engagement actions	18.01.21 Some progress has been made on this with a number of different actions tested. Made more challenging by online only meetings.	Open
6.1.4	Office Manager	25/10/20 (2019/20 action)	System for reporting reason as to which language a paper is presented in – consistency of system for checking Gaelic/English are increased	02/12/2020	Paper submission process	14.01.21 Written guidance for cover papers developed which includes guidance on language use.	Closed
6.1.5	Operations Manager	25/10/20	Internal communications – review to see what further improvements can be made	30/11/2020	Internal Comms Strategy	14.01.21 Operations Manager & Communications officer developed and distributed Communication Survey for staff, 4-19 November 20; the outcomes were discussed at all-staff development session on 08.12.20.	Closed
6.1.6	Operations Manager	26/01/21	Ensure notification is placed on sharepoint to inform staff that meetings of board, committee or Improvement Plan Steering Group are available	31/03/2021	Message on sharepoint consistently		Open
6.2		<b>Develop a culture of recognition – The following statement was classed as critical in the most recent employee survey – “Management within Bòrd na Gàidhlig recognises strong job performance”.</b>					
6.2.1	Operations Manager	25/10/20	Encourage recognition as part of normal performance conversations (linked to values)	31/12/20 Amend to 31/03/21	SLT/Management development on positive reinforcement	14.01.20 A question has been added to POPs to ask which value staff member is going to focus on in the next period, and then discussed at next POP. Further work on this will be delivered through managers’ training session on 18.01.21.	Open

6.2.2	LT	25/10/20	Employee achievement is recognised as part of the normal team meetings	30/11/20 Amend to 28/02/21	Feedback on employee achievement noted at team meetings by all employees	14.01.21 Underway but not complete	Open
<b>6.3</b>	<b>Improvements arising from Employee Survey April 2020 and agreed by the whole team in September 2020</b>						
6.3.1	Manaidsearan	25/10/20	Follow and implement the Learning & Development policy and provide opportunities for the team (Link to Workstream 1)	31/01/2021	Managers reporting that they are comfortable with L&D policy and processes	14.01.21 This will be evaluated at the managers' development session on training needs identification on 18.01.21.	Open
6.3.2	Operations Manager - process	25/10/20	CPD/Self-led learning (e.g. webinars, books, peer learning). Employees should have an agreed amount of time to undertake learning activities. Learning Activity should be reviewed at the 6 weekly review and recorded in People HR. (Link to Workstream 1)	31/12/2020 Amend to 31/03/2021	People HR Report PDP process	18.01.21 Discussions and agreements on how to take this forward made at managers' development session on 18.01.21	Open
6.3.3	LT	25/10/20	Recognition of wider skillset across the organisation and how it could be used in different situations. (Link to Workstream 1, Action 2.2)	28/02/2021	PDPs Skills matrix	14.01.21 This is underway, for example, the all-staff session on 08.12.20 comprised different training sessions all delivered by our own staff and we will continue to create these opportunities. It is reinforced by the increased cross-team working on projects and initiatives.	Open
6.3.4	Operations Manager	25/10/20	Implement time off for volunteering activities through special leave policy – reminder at POP that this is available	31/12/2020	Volunteering process	14.01.21 Draft special leave policy, which has been consulted on, includes time off for volunteering. Staff requested a specific amount of time to be agreed. LT on 13.12.20 agreed 1 day volunteering pa per person. This was communicated to all staff through Dè tha Dol.	Closed
6.3.5	Operations Manager	25/10/20	Discuss wellbeing policies regularly and improve access of these to the team – following outcomes of Wellbeing Surveys	30/11/2020	Wellbeing Review	14.01.21 There are regular reminders about wellbeing support and information on policies at Dè tha Dol; two wellbeing surveys have been carried out; and HR will deliver a session tailored to the results on 16.02.21.	Closed
6.3.6	Manaidsearan	25/10/20	Performance success is measured on outputs of work rather than time at work. Ensure a focus on individual	28/02/2021	POP Objectives	14.01.21 POPs link objectives to the operational plan and the review of	Closed

			achievements that should be linked to the operational plan via POPs.			objectives includes recognition of achievements.	
6.3.7	Operations Manager	25/10/20	Clear communication and systems to let employees know relevant information about what is happening in the organisation e.g. re-introduction to the office – linked to 6.3.9	30/04/2021	Team meeting minutes Information on news page on sharepoint Internal Comms strategy	14.01.21 Regular updates to all staff on sharepoint and at Dè tha Dol (followed by notes from the meeting for those staff who were not present).	Open
6.3.8	Office Manager	25/10/20	Workload – while continuing to work from home, support wellbeing appropriately e.g. regular screen breaks etc	30/11/2020	Wellbeing Review POPs	14.01.21 Two wellbeing surveys carried out and outputs to be developed at 18.02.21; H&S training and review delivered at staff conference in April 20; this to be refreshed in April 21. All staff are encouraged to request equipment to facilitate home-working safely and to access online support.	Closed
6.3.9	Operations Manager	25/10/20	As part of Internal Communications strategy, present overview of all organisational set meetings, purpose, and feedback mechanisms	31/01/2021	Internal Comms Strategy	14.01.21 Comms guidance for e-mail, chat, etc issued in June 20; internal communications survey carried out in November and outputs discussed and priorities agreed at all staff session on 08.12.20, including purpose of Dè tha Dol (formal and informal). Further development is ongoing.	Open
6.3.10	Cathraiche		Feedback on information provided for board, external stakeholders, and recognition of what has been delivered.	28/02/2021 Amend to 31/05/2021	Comms reports	18.01.21 Mechanism for providing feedback from board meetings is established. Stakeholder survey to be carried out.	Open
6.3.11	Operations Manager		Employees have time to review information and are signposted to where the information can be found.	31/01/2021	Employee Communication Agreement	14.01.21 The comms group are considering how best to develop this and will be drafted for consultation by end January 21.	Open