Strategy
Leadership
Governance

GGI
Public bodies governance maturity matrix

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GGI's maturity matrices

GGI's maturity matrices are developmental tools, derived from good-practice benchmarking principles, to support governance improvement.

This matrix has been produced to support public bodies in assessing their governance effectiveness and set their own improvement trajectories, given the unique nature of their organisational nature and specifically to reflect the requirements of ministerial and departmental accountabilities and assurance. To do this the matrix has been aligned with UK Government Governance Standards, the UK Corporate Governance Code, and Arm's-Length Body (ALB) Governance Guidance. It also draws on benchmarking research conducted by GGI of public bodies and first-hand learning from governance assignments with such organisations.

The matrix is structured across key governance dimensions and aligned to expectations for board effectiveness, leadership, accountability, and organisational stewardship. It enables progression from foundational compliance to sector-leading governance, and is designed to be:

- **Positive and cumulative** – with each level building constructively on the last
- **Outcome-focused** – emphasising what 'good' looks like, not just what is done
- **Sector-aligned** – benchmarking public bodies against good practice

Each element is assessed on a six-point scale:

0 **No Progress:** No action taken or not relevant.

1 **Basic Level:** Principle accepted and commitment to action

2 **Early progress:** Initial actions and ongoing development

3 **Firm progress:** Consistent progress that is evident internally

4 **Results:** Achievements evidenced by external recognition

5 **Maturity:** Systems and practices consistently and reliably produce locally recognised results

6 **Exemplar:** Recognised leader with others learning from our achievements

Uses for the matrix

The matrices are, at their heart, improvement tools that enable structured benchmarking. They support an organisation with:

Self-assessment: the matrix is an ideal tool to support self-evaluation

Gap analysis: the matrix can be used to highlight areas for development using a benchmarked set of criteria

Action planning: the specific nature of the maturity level descriptors can be used to identify key areas for improvement and to plan strategic board development and align it with governance requirements and expectations

Assurance: the outcome of a maturity assessment can form the basis of assurance reporting

Benchmarking and identifying better practice: the matrix provides a structured framework for comparing with others with the aim of shared learning and improvement.

Using the matrix

To use the matrix, as a board or individually, work through each key element area and reflect on the maturity progress levels. Come to a decision on which domain you think the board currently sits in using the indicative statement in the cells to guide how you self-assess.

To score in any domain, all indicative statements should be achieved. It may well be the case that you meet some of the criteria in higher maturity categories, but it is important to score according to the category you meet all criteria for. You must be convinced you have demonstrable evidence to support your judgement.

To support a UK public body's board in conducting a robust self-evaluation using the GGI public bodies governance maturity matrix, the process should be self-challenging, evidence-based, structured, and benchmarked against good practice. The matrix emphasises key governance dimensions aligned with UK Government Governance Standards, the UK Corporate Governance Code, and Arms-Length Body (ALB) Governance Guidance.

The external governance or board effectiveness review is a key document to helping the board check with itself its own maturity and, importantly, help develop a governance and board effectiveness improvement plan.

GGI public bodies governance maturity matrix

Maturity levels / Key elements	0 No	1 Basic level: Principle accepted and commitment to action	2 Early progress: Initial actions and ongoing development	3 Firm progress: Consistent progress that is evident internally	4 Results: Achievements evidenced by external recognition	5 Maturity: Systems and practices consistently and reliably produce locally recognised results	6 Exemplar: Recognised leader with others learning from our achievements
Purpose, vision and values		Lack of clear or current purpose, vision and values and the board recognises the need to develop these with staff and other stakeholders.	The organisation is working on current purpose, vision and values with internal and external stakeholders and has a commitment to have these agreed by the board.	Purpose, vision and values are agreed by the board. These are published and beginning to be used to develop and deliver the organisation's strategy and direction. The board has an inclusive mechanism for ensuring that change matches agreed purpose, values and priorities.	Purpose, vision and values routinely guide how the organisation describes itself and external stakeholders would understand this is how the organisation describes itself.	Purpose, vision and values genuinely underpin the way the organisation thinks, works and behaves. These are reflected in board work, staff recruitment and development and how services are delivered. The board routinely challenges itself to ensure that the organisation lives by its values.	We influence others through our clarity of purpose. We have developed a reputation for value-based leadership which is sector or place leading.
Leadership, strategy and strategic alignment		Leadership accountability is unclear. The organisation accepts that it has no formal leadership framework or strategic direction in place and has committed to addressing this. For the board this means that roles and responsibilities are to be defined.	Organisational purpose, vision and priorities have been documented by the board and senior executive. Leadership responsibilities have been allocated, and development initiated. With initial strategic objectives developed, enabling strategies and plans are aligned to these. Some engagement with external stakeholders on strategy.	An organisational strategy has been developed, and leadership responsibilities are formally linked to it. Board ensures strategic objectives and business priorities are communicated internally. Delivery plans for the strategy in place.	Board evaluates strategic decisions against purpose and impact. Leadership accountability mechanisms are in place and their effectiveness is regularly reviewed/improved. The board reviews the operating environment, and strategic decisions are taken collaboratively with stakeholders. Board formally reviews leadership effectiveness in response to changing environments and tests this with stakeholders.	With internal accountability mechanisms embedded, the board demonstrates sustained progress towards of strategic goals. Leadership and governance effectiveness are externally recognised by peers and stakeholders. Our organisation's impact as a local leader is externally assessed and benchmarked. Leadership adapts to external change whilst maintaining consistent strategic delivery.	Organisational leadership and governance effectiveness are seen as sector or place leading. We engage in thought leadership about best practice. Our leadership model is replicated by others.
Governance and ethical standards		No formal code of conduct or ethical standards framework in place and this is recognised as needing to be developed. Leaders have laid out the need for agreed behaviours and ethical positioning and the plans for putting these in place.	A code of conduct exists at board level. We tend to react informally to ethical issues as they arise and recognise that this is not yet consistent. Mandatory ethical systems such as speaking up arrangements are in place. Senior (non-board) leaders understand the expectation that they, as well as the board, are subject to the Standards in Public Life.	As well as a specific introduction to the board, as part of wider induction processes, new board members are introduced to cultural and ethical expectations. The board has reviewed and updated ethical governance practices. Staff and service user voices are beginning to be included in governance discussions.	The board models and enforces the agreed ethical standards. We regularly review ethical issues, including their social, economic, and environmental impact. We assess our governance culture for effectiveness and make improvements. Decision-making explicitly aligns with organisational values.	The board tracks ethical culture with measurable indicators. We consider governance culture and ethics and their impact as part of our business and strategic planning. Our organisational values are embedded in leadership decisions. Our organisational culture has been tested in our periodic board effectiveness reviews.	We are externally recognised for our approach to ethical governance. We advocate ethical leadership in governance outside our organisation.

Maturity levels	0 No	1 Basic level	2 Early progress	3 Firm progress	4 Results	5 Maturity	6 Exemplar
Board effectiveness and decision making		No structured board evaluation has been completed nor is there an agreed governance framework is in place, but there are plans to address these issues. We understand that we are exposed because our decisions tend to be made without reference to strategy or a recognised governance process.	There is a specific induction process for board members in place. While decision-making lacks formal alignment with strategic goals board members have the organisation's aims in mind when taking decisions. Some limited stakeholder engagement in decisions. We are usually able to base our decisions on evidence and board papers reflect this.	Board appointments made using a skills and experience audit. Decision-making processes align with organisational goals. Stakeholder perspectives begin to be integrated into board decision-making. Data is transformed into useable information for the board.	The board conducts retrospective reviews of major decisions for learning and accountability. In line with expected practice, an independent review of board effectiveness has been conducted within the last three years. As part of our own annual review of our governance we have clear evaluation processes for board effectiveness and individual contributions.	Our decision-making is evidence-based and future-focused. We operate transparently and document our decisions clearly. Board members can articulate how matters for decision that come before it have been developed. The board held a seminar to work through our last board effectiveness review with the review team, and we have periodic reports on any actions and their implementation plans.	We set standards for others in board effectiveness and governance, for example through contractual arrangements. Our governance model influences other organisations. External governance assessments confirm best-practice decision-making.
Stakeholder engagement and transparency		No formal stakeholder review or engagement strategy is in place, and this is understood to be a gap. The board has not reviewed our scheme of publication, and we tend not to report back on any in camera board sessions. Feedback mechanisms are inconsistent.	We consult stakeholders on an ad hoc basis and have started coordinate how we do this. We get back to stakeholders when they ask for information or engagement, and we participate in their stakeholder reviews when they have them. There are arrangements for engaging service users and staff.	Key stakeholders are consulted regularly, and they understand and engage with governance structures. We use stakeholder feedback to shape decision-making. It is simple for staff and service users to find out what the organisational line is on key issues such as who our leadership are, where to get information from, etc.	Our decisions routinely benefit from the input of stakeholders. We have a system for regularly understanding the perspectives of our stakeholders and managing stakeholder relationships. Our annual governance statement is accurate and has been prepared with the general public as an audience.	We use surveys and other devices to benchmark stakeholder engagement against best practice. We aim to act on the feedback. Stakeholder views and influence are formally embedded into our governance.	Our stakeholder engagement is recognised by others as having impact. The sector acknowledges that the transparency of our governance is a model. Stakeholder trust in us and our governance is consistently high.
Performance and accountability		No structured performance tracking or reporting. No agreed set of KPIs. No formality around reporting and ministerial accountability. No evaluation of governance effectiveness. Board unaware of financial and operating impact.	Board understands and recognises the value of quality assured processed data. Board reports are accurate and timely. Budget, cost pressures and efficiency targets are clearly identified to board.	Resources are aligned to sustainable targets, standards and local priorities. All board papers integrate activity, cost, quality, risk and transformation. All in-year plans are costed and trajectory of spend/ savings established to achieve breakeven / target. Quality implications robustly tested.	Systematic outcome-related reporting to board and stakeholders. Board confident it understands how it deploys its capital. Board has agreed public reporting for social, economic and environmental impact / opportunities Unexpected in-year pressures are identified and board show timely reprioritisation of deliverables. Board confident it can both anticipate and respond to a financial crisis / opportunity in a timely fashion.	Annual review of board includes stakeholder input. It demonstrates candid self-awareness and progress against agreed action plans / deliverables. Board adept at staying ahead of problems and opportunities. Can point to case studies of successful escalation and intervention. We can articulate our wider value creation, and we consciously and routinely consider our wider impact.	Our performance on all matters tends to be routinely in the top quartile. We are seen as a leader in terms of having a positive impact on our local economy or on national thinking. We leverage community resources to improve service delivery and outcomes, or as a national organisation we support or influence our peers to succeed with their own missions.

Maturity levels	0 No	1 Basic level	2 Early progress	3 Firm progress	4 Results	5 Maturity	6 Exemplar
Assurance and stewardship		We know that we have unreliable board oversight and assurance arrangements. We do not have a current assurance framework in place, and we are conscious that this leaves us exposed. We have agreed to address this. If we have not tested ourselves on our internal audit arrangements within the last three years, there are plans to do this shortly.	As a board, we have discussed our audit committee arrangements/programme. We get reports of the audit committee's work at each board meeting. Board involved in assessing strategic risk and has a current assurance framework in place. Board commissions annual reviews of committees, including their cycles of business. Critical incident and business continuity plans are in place.	Internal audit action points are routinely addressed and only by exception not picked up. The audit committee looks at the full range of our governance and compliance systems and internal audit plan has these all in scope. Our committees are serviced by the board secretariat. Changes we have made as a result of our annual review of our committees.	We routinely hold external accreditations and subject ourselves to peer review for elements of our compliance and governance. Information from these external checks is routinely fed into relevant committee working and assurance arrangements. Our assurance framework tracks level three assurances. Annually we have a board seminar session with internal and external audit to understand the effectiveness of our control systems.	We participate with peers and partners around assurance issues to share insights and lessons learned. We scenario test business continuity and critical incident plans with relevant peers. Where services we provide cross organisational boundaries, we work with our partners to look at the whole service user journey and not just the element of the journey we ourselves are responsible for.	We are regarded by similar organisations as a leader in terms of sustainable outcomes and impact against resources. Our assurance models influence public sector best practice. We support other organisations with their business resilience and business continuity.
Probity and reputation		National standards of conduct and behaviour are the default position of our organisation. We understand our exposure to this and have plans for a systematic approach to standards. We know where gaps are in critical systems around probity such as in HR processes, conflicts of interest declarations, how up to date and accessible our public information is, etc.	Fit and proper assessment records are routinely in place for all in leadership roles and our conflicts of interest register for board and senior staff is up to date. Current codes of conduct in place. Our public information is accessible and matches our scheme of publication. Freedom to Speak Up arrangements are widely publicised internally, and we track our uptake levels against national benchmarks. The annual FTSU report to the board is properly discussed and challenged.	Board gathers external evidence of its reputation and standing. Risk appetite thinking includes reputation. Partners, suppliers and providers must show they have similar ethical standards to ours. Internal staff surveys or feedback proactively looks for insight into how the leadership is seen and matters such as psychological safety.	Partners, suppliers and providers are expected contractually to demonstrate how they meet their ethical and any other such standards, such as through Living Wage accreditation or sustainability measures. Reputation management is an aspect of risk management assessments. Our last board effectiveness review tested board members' willingness to raise issues (such as conflict of interest) when they felt it appropriate.	We can demonstrate that our reputation is recognised independently, and this has improved recruitment and partnership working. Our last board effectiveness review specifically looked at internal and external perceptions and visibility of our board and leadership.	We seek and acquire independent assessment of the high standards of our ethical governance and probity. Our credibility adds to our influence and ability to recruit.
Decision-making		Delegation arrangements are out of date and / or it is not clear whether they are being followed. Consultations not systematically undertaken.	The scheme of delegation has been reviewed within the last 24 months and dovetails with other formal documentation such as job descriptions, terms of reference, etc. There is a system for distributed performance and budget information, and managers receive information within 30 days of the month's end. Reports are characterised by within organisation data. Critical incident and business continuity plans are in place.	The audit committee routinely reviews delegations. There are systems for live data on performance and financial data. Board members can describe how they triangulate information in support of their decision making, Board seminars include consideration of internal audits and other reviews, such as previous board effectiveness reviews, in the spirit of professional curiosity and self-challenge.	The board and its committees are involved in matters at an appropriate level of materiality. Papers relate to assurances on the assurance framework. Performance information is no older than 30 days and there are forecasts to show future expected performance. Impact assessments are routinely completed and discussed. The audit committee reviews key decisions from time to time. Committees routinely have time set aside for deep dives.	The board, staff and stakeholders are confident in the validity of the board's assurances and decision-making. Decisions are framed against risk appetite, risk tolerance and their relationship to strategic objectives. Benchmark data is routine in reports. From time to time the board involves external stakeholders in reviewing the effectiveness and impact of past decisions in the spirit of continuous learning.	The robustness and transparency of our decision-making has earned us national recognition, so we are able to influence policy development and priorities. Case studies from this organisation are used to support decisions taken by other public bodies.

Maturity levels	0 No	1 Basic level	2 Early progress	3 Firm progress	4 Results	5 Maturity	6 Exemplar
Board support and our committees		The board has not reviewed its committee structure within the last three years. There has been no external board effectiveness review within the past four years. We have a board secretary post established, and during any periods of vacancy this is covered.	The board secretary is called on routinely to assure the board that all its regulatory and compliance obligations are being fulfilled. All committees have terms of reference approved by the board, so their role is clearly defined and delineated. Committees take responsibility for monitoring and managing strategic risks relevant to their work. Management groups do not report into board committees.	Board and committee workload and agendas for committees are planned with ToRs are reviewed annually. This is guided by the annual appraisal of committees. There is an annual cycle of planned board business guided by an up-to-date assurance framework. Audit committee activities, including the work of internal and external auditors, are aligned to the annual business cycle.	Board and committee effectiveness is tested and measured and their contribution to the governance process and efficiency of the organisation is measured, reported and acted upon. Agendas are partly driven by risk. With the audit committee the board reviews risk appetite and risk tolerance annually.	There has been a board effectiveness review within the last three years, and this has been used to sense check the committee structure and board reporting arrangements. Terms of reference are plain English.	How we establish and run our committee structure is used as an exemplar for others.
Appraisal process of directors, and other feedback		The role and responsibilities of board members are not codified as formal role descriptions, and the annual appraisal process is out of time/incomplete. No consistent induction is offered.	There is a formal induction programme for board members and individual development plans are in place and up to date. The board reviews its effectiveness internally every year. The annual statement of governance includes such issues as board and committee attendance. Board members have opportunities to attend external learning and networking events.	Board members share learning from external events and networking in a systematic way. We have a senior independent director (SID) in place. The annual appraisal of all directors is up to date, and this includes the chair by the SID. The chair is involved in the appraisal of the CEO and consulted about the performance of the senior leadership team.	The annual appraisal process includes an assessment of development needs of the board as a whole as well as those of individual members. Board development is informed by a variety of inputs such as our most recent board effectiveness review, and regulatory requirements, and stakeholder feedback. The board seeks constant feedback.	We have gained a reputation for continuous development and improvement. The board consciously evaluates the added value it brings the organisation through a process of self-challenge at development sessions, stakeholder feedback and other systems such as reverse mentoring.	A place on our board is regarded as a national appointment of choice. Continuous learning and innovation in governance are embedded. We have earned a reputation for these attributes beyond our borders.

External governance or board effectiveness reviews are key for getting the most from this matrix

An external governance or board effectiveness review provides a critical, independent perspective that enhances the credibility, objectivity, and robustness of a public body's self-assessment and improvement processes – and will help to make the most of this maturity matrix. This is why all codes of governance require them every three to five years.

They are an essential keystone of competent corporate governance. Unlike internal reviews, which may be constrained by familiarity or internal biases, external reviews bring impartial expertise, benchmarked insights, and alignment with best practice standards, such as the UK Corporate Governance Code and Arm's-Length Body (ALB) Governance Guidance. The unique value of such reviews lies in their ability to:

- **Ensure objectivity and independence:** External reviewers, free from internal dynamics or conflicts of interest, provide unbiased assessments of governance structures, board dynamics, and decision-making processes. This objectivity builds trust among stakeholders, including ministers, regulators, and the public, by demonstrating a commitment to transparent and accountable governance.

- **Benchmark against best practice:** External reviews draw on sector-wide expertise and comparative data, enabling boards to measure their performance against peer organisations and established standards (e.g., UK Government Governance Standards). This benchmarking identifies gaps and highlights opportunities for adopting innovative practices from leading organisations.

- **Enhance credibility and assurance:** For public bodies accountable to ministers and departments, an external review offers robust evidence of governance maturity, supporting assurance reporting and compliance with regulatory expectations. It strengthens stakeholder confidence by demonstrating that governance practices have been rigorously evaluated by independent experts.

- **Drive strategic improvement:** External reviews provide actionable recommendations tailored to the organisation's context, helping boards develop targeted improvement plans. These plans align with the GGI Public Bodies Maturity Matrix, enabling progression from foundational compliance (Level 1) to exemplar status (Level 6) by addressing specific weaknesses in areas like leadership, stakeholder engagement, or decision-making.

- **Supports professional curiosity and fosters learning and innovation:** By incorporating perspectives from other sectors or public bodies, external reviews introduce fresh ideas and innovative approaches to governance. They encourage boards to challenge assumptions, adopt forward-thinking strategies, and align with emerging trends in public sector governance.

- **Support accountability and transparency:** External reviews often involve stakeholder input, ensuring that the voices of staff, service users, and partners are considered. This inclusive approach enhances transparency and demonstrates a commitment to stakeholder engagement, a key element of the GGI maturity matrix.

Key areas to include when commissioning an external review

When commissioning an external governance or board effectiveness review, public bodies should ensure the scope is comprehensive, evidence-based, and aligned with their strategic objectives and the GGI Public Bodies Maturity Matrix. The following areas should be insisted upon to maximise the review's value:

- **Board composition and dynamics:** Assess the board's diversity, skills, and experience to ensure it reflects the organisation's needs and stakeholder expectations. Evaluate board dynamics, including collaboration, challenge, avoidance of pre-occupation bias or groupthink and psychological safety, to ensure effective decision-making.

- **Alignment with strategic objectives:** Examine how well the board's activities, decisions, and committee structures align with the organisation's purpose, vision, and values, as well as its strategic goals. This includes reviewing whether enabling strategies (e.g., workforce, digital, financial) support the overarching strategy.

- **Decision-making processes:** Evaluate the robustness, transparency, and evidence base of decision-making, including the quality of board papers, use of data, and alignment with risk appetite and strategic priorities. Assess whether delegations and accountability mechanisms are clear and effective.

- **Stakeholder engagement:** Review the extent to which the board engages with stakeholders (e.g., staff, service users, partners) and incorporates their feedback into governance processes. This should include an assessment of transparency, such as the accessibility of public information and the effectiveness of feedback mechanisms.

- **Ethical and cultural standards:** Examine the board's commitment to ethical governance, including adherence to codes of conduct, management of conflicts of interest, and promotion of standards like the Seven Principles of Public Life. Assess how the board models and monitors organisational culture.

- **Assurance and risk management:** Evaluate the effectiveness of the assurance framework, including the role of the audit committee, internal and external audit processes, and risk management practices. Ensure the review tests the board's ability to anticipate and respond to risks and opportunities.

- **Board effectiveness and development:** Assess individual and collective board member performance, including appraisal processes, induction programmes, and ongoing development. The review should consider the board's capacity for self-challenge and continuous improvement, supported by external benchmarks.

- **Compliance with governance standards:** Ensure the review verifies alignment with relevant standards, such as the UK Corporate Governance Code, ALB Governance Guidance, and sector-specific requirements. This includes testing compliance with probity, transparency, and accountability obligations.

- **Stakeholder and peer input:** Require the review to incorporate 360-degree feedback from internal and external stakeholders, including staff, service users, and peer organisations, to provide a holistic view of governance effectiveness and reputation.

- **Actionable recommendations:** Insist on a clear, prioritised action plan with measurable outcomes, timelines, and responsibilities. The plan should align with the GGI maturity matrix, enabling the board to track progress toward higher maturity levels (e.g., from Level 3 to Level 5).

When commissioning the review, public bodies should select an external provider with proven expertise in public sector governance and ensure the process is collaborative, involving board members, senior leaders, and key stakeholders. The review should be conducted at least every three years, as recommended for Level 4 maturity in the GGI matrix, to maintain momentum in governance improvement.

By prioritising these areas, an external governance or board effectiveness review becomes a powerful tool for public bodies to achieve sustainable, transparent, and impactful governance, positioning them as sector leaders in line with the GGI maturity matrix's exemplar level.

To be avoided are reviews undertaken by a singleton consultant. Your review provider should undertake the review using a team of appropriately experienced reviewers led by a senior individual who has held a board position themselves. The reviewer should be able to demonstrate a sound methodology that uses multiple classes of evidence and an approach to triangulation they can explain. The review team should demonstrate they have an internal QA process to test their findings and recommendations. A regulatory report is not a satisfactory substitute for an independent governance or board effectiveness review as they are designed for a different purpose.

Notes on reviews

To clarify the similarities and differences between a governance review, board effectiveness review, regulator's report, and internal review, we have provided a concise explanation followed by a table summarising their purpose, scope, who conducts them, output, frequency, and alignment with the GGI Public Bodies Maturity Matrix (July 2025). These reviews are critical tools for assessing and improving governance in UK public bodies, and understanding their distinctions helps boards utilise them effectively for self-evaluation.

Governance review: A broad evaluation of the organisation's governance framework, including structures, processes, policies, and compliance with standards (e.g., UK Corporate Governance Code, ALB Guidance). It assesses how the board, committees, and leadership align with strategic objectives, ethical standards, and stakeholder expectations.

Board effectiveness review: A focused assessment of the board's performance, dynamics, and decision-making processes. It evaluates board composition, skills, diversity, leadership, and alignment with organisational goals, often including individual member contributions. A competent governance review will incorporate all the elements of a governance review in it.

Regulator's report: An external assessment by a regulatory body (e.g., National Audit Office, Care Quality Commission, Office for Students, the Regulator of Social Housing, etc) to ensure compliance with legal, financial, or operational standards. It can focus also on accountability, risk management, and public interest obligations, often with a sector-wide perspective. This does not cover the same breadth as a governance review and does not enable between sector comparison or learning, and is skewed by regulator interest and preoccupation. It is not good practice to use regulator reviews as board assurance because they have not been prepared for this purpose.

Internal review: An organisation-led evaluation, typically conducted by internal audit teams or management, to assess specific processes, policies, or performance areas. It is narrower in scope and focuses on internal controls, compliance, or operational efficiency.

Comparison table

Aspect	Governance review	Board effectiveness review	Regulator's report	Internal review
Purpose	Assess the overall governance framework, including structures, policies, and alignment with strategic objectives and standards.	Evaluate the board's performance, composition, dynamics, and decision-making effectiveness.	Ensure compliance with regulatory, legal, or financial standards; assess public accountability and risk management.	Review specific internal processes, controls, or performance to ensure compliance and efficiency.
Scope	Broad: Covers board, committees, leadership, ethical standards, stakeholder engagement, and compliance with external standards (e.g., UK Corporate Governance Code).	Focused: Board-specific, including skills, diversity, decision-making, and alignment with organizational goals.	Broad or specific: Focuses on compliance, financial management, or operational standards, often with sector-wide implications.	Narrow: Specific to internal processes, policies, or functions (e.g., HR, finance, risk management).
Who conducts it	Often external consultants (e.g., GGI) or a mixed internal-external team; may involve board and stakeholder input.	Typically external facilitators for independence (e.g., per UK Corporate Governance Code) or internal with external validation.	External regulatory body (e.g., NAO, CQC) or government department.	Internal audit team, management, or designated staff; occasionally with external input.
Output	Comprehensive report with findings, maturity level assessments (e.g., GGI matrix), and recommendations for governance improvement.	Report on board performance, strengths, weaknesses, and action plan for enhancing board effectiveness.	Formal report with findings, compliance status, and recommendations; may include public or parliamentary reporting.	Internal report or audit findings with recommendations for process or policy improvements.
Frequency	Typically every 2–3 years or as needed for significant governance changes; aligns with strategic planning cycles.	Annually for internal reviews; externally facilitated every 3 years (per GGI Matrix, Maturity Level 4).	Varies by regulator; may be periodic (e.g., annual) or triggered by issues or inspections.	Ongoing or scheduled (e.g., annual internal audits); frequency depends on organisational needs.
Evidence base	Board papers, policies, stakeholder feedback, risk registers, assurance frameworks, and external benchmarks.	Board meeting records, skills audits, member appraisals, stakeholder feedback, and external benchmarks.	Financial records, performance data, compliance documents, and site inspections; often benchmarked against sector standards.	Internal data, process documentation, performance metrics, and staff feedback.
Stakeholder involvement	High: Includes board, staff, and external stakeholders (e.g., service users, partners) to assess engagement and transparency.	Moderate: Primarily board members, with some stakeholder input (e.g., 360-degree feedback).	Variable: May involve stakeholder interviews or public input, depending on the regulator's scope.	Low to moderate: Primarily internal staff, with occasional external input for specific reviews.
Alignment with GGI Matrix	Directly supports all matrix elements (e.g., Purpose, Leadership, Assurance, Stakeholder Engagement) for maturity assessment and gap analysis.	Key for 'Board Effectiveness and Decision-Making' and 'Appraisal Process'; supports Levels 3–6 with external validation.	Supports 'Assurance and Stewardship' and 'Probity and Reputation'; provides external benchmarks for Levels 4–6.	Supports 'Assurance and Stewardship' and 'Performance and Accountability'; critical for internal evidence at Levels 2–4.
Bench-marking	Benchmarks against UK Governance Standards, ALB Guidance, and peer organisations for best practice.	Benchmarks against board performance standards (e.g., NHS Providers, ICSA frameworks) and peer boards.	Benchmarks against regulatory standards and sector-wide performance (e.g., NAO reports).	Limited benchmarking, primarily against internal policies or past performance, unless external standards are applied.
Examples	GGI-led governance review, NAO governance assessment for ALBs.	Independent board effectiveness review (e.g., per UK Corporate Governance Code).	NAO report on ALB financial management, CQC inspection report.	Internal audit of conflicts of interest processes, HR policy compliance review.

Similarities

Evidence-based: All rely on documented evidence (e.g., board papers, performance data, policies) to assess performance or compliance.

Improvement focus: Each aims to identify gaps and recommend actions to enhance governance, effectiveness, or operations.

Alignment with standards: All draw on or align with governance standards (e.g., UK Corporate Governance Code, ALB Guidance) to varying degrees.

Board involvement: All require some level of board engagement, whether through providing data, participating in interviews, or acting on recommendations.

Support for GGI matrix: Each contributes to self-evaluation using the GGI Maturity Matrix by providing evidence or benchmarks for specific elements (e.g., Assurance, Board Effectiveness).

Differences

Scope and focus: Governance reviews are the broadest, covering the entire governance framework, while board effectiveness reviews focus specifically on the board's performance. Regulator's reports prioritize compliance and public accountability, and internal reviews target specific internal processes.

Independence: Governance and board effectiveness reviews often involve external facilitators for objectivity, while regulator's reports are always external. Internal reviews are typically conducted by internal teams, limiting independence.

Audience and impact: Regulator's reports often have public or parliamentary audiences and can influence policy or funding. Governance and board effectiveness reviews are primarily for internal improvement, while internal reviews are for internal management and assurance.

Frequency and trigger: Board effectiveness reviews are often annual (internal) or triennial (external), governance reviews are less frequent, regulator's reports depend on regulatory cycles, and internal reviews are ongoing or need-based.

Improving this matrix and keeping it up to date

If you have any comments on this maturity matrix or you would like further information on GGI's governance and leadership improvement work, see our website: **www.good-governance.org.uk**

About us

GGI exists to help create a fairer, better world. Our part in this is to support those who run the organisations that will affect how humanity uses resources, cares for the sick, educates future generations, develops our professionals, creates wealth, nurtures sporting excellence, inspires through the arts, communicates the news, ensures all have decent homes, transports people and goods, administers justice and the law, designs and introduces new technologies, produces and sells the food we eat – in short, all aspects of being human.

We work to make sure that organisations are run by the most talented, skilled and ethical leaders possible and work to build fair systems that consider all, use evidence, are guided by ethics and thereby take the best decisions. Good governance of all organisations, from the smallest charity to the greatest public institution, benefits society as a whole. It enables organisations to play their part in building a sustainable, better future for all.

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