

**Ayrshire and Arran NHS Board**  
**Minutes of a public meeting on Monday 3 February 2025**  
**Hybrid meeting - Room 1 Eglinton House and MTeams**

- Present:
- Non-Executive Members:
- Mrs Lesley Bowie, Board Chair
  - Cllr Marie Burns
  - Ms Sheila Cowan, Vice Chair
  - Dr Sukhomoy Das
  - Mrs Jean Ford
  - Mr Liam Gallacher
  - Mr Ewing Hope
  - Dr Tom Hopkins
  - Mr Marc Mazzucco
  - Mrs Sharon Morrow
  - Mr Neil McAleese
  - Cllr Douglas Reid
  - Ms Linda Semple, Vice Chair
  - Mrs Joyce White
- Executive Members:
- Mr Derek Lindsay (Director of Finance)
  - Dr Crawford McGuffie (Medical Director/Deputy Chief Executive)
  - Mrs Lynne McNiven (Director of Public Health)
  - Ms Jennifer Wilson (Nurse Director)
- In attendance:
- Ms Caroline Cameron (Director of Health and Social Care, North Ayrshire)  
left at item 8.3, re-joined at item 12
  - Mrs Vicki Campbell (Head of Primary Care and Urgent Care Services)
  - Mrs Kirstin Dickson (Director of Transformation and Sustainability)
  - Mr Tim Eltringham (Director of Health and Social Care, South Ayrshire)  
left at item 8.3, re-joined at item 12
  - Mrs Nicola Graham (Director of Infrastructure and Support Services)
  - Ms Sarah Leslie (Human Resources Director)
  - Mr Craig McArthur (Director of Health and Social Care, East Ayrshire)
  - Mrs Shona McCulloch (Head of Corporate Governance)
  - Ms Attica Wheeler (Midwifery Director, Associate Nurse Director,  
Women & Children's Services) item 5 + item 8.3

Mrs Angela O'Mahony (Committee Secretary) minutes

The Board Chair welcomed everyone to the meeting, in particular, Mrs Sharon Morrow, new Non-Executive Board Member, who joined the Board on 6 January 2025. The Deputy Chief Executive and Medical Director, Dr Crawford McGuffie, was representing the Chief Executive who was unable to attend the meeting.

**1. Apologies**

Apologies were noted from Ms Claire Burden and Cllr Lee Lyons.

- 2. Declaration of interests (001/2025)**
- There were no declarations noted.
- 3. Minutes of the meetings of the NHS Board held on 7 October and 2 December 2024 (002/2025)**
- The minutes of the meetings held on 7 October and 2 December 2024 were approved as accurate records of the discussion.
- 4. Matters arising (003/2025)**
- Paper 2 - Action Log  
The Board action log was circulated to Board Members in advance of the meeting and all actions had been completed.
- 5. Patient Story (004/2025)**
- 5.1** The Director of Acute Services, Mrs Vicki Campbell, invited Ms Attica Wheeler, Midwifery Director and Associate Nurse Director, Women and Children's Services, to present the patient story.
- This story captured the experience of Ruth and outlined both negative and positive aspects of her patient experience whilst under the care of Gynaecology services. In particular, the anxiety caused when she was offered a late notice outpatient appointment for a gynaecological procedure due to lack of clinical information given about the appointment. Ms Wheeler added that where an intimate examination is planned, where possible patients would be informed of the gender of the staff member/s present or performing the examination.
- Ms Wheeler advised that there was learning for all services as a result of Ruth's feedback. Within Gynaecology, work had begun to develop digital pathways to enable non-clinical staff making and answering calls related to short-notice appointments to direct patients to information they need concerning their appointment.
- The Director advised in reply to a question from a member that Acute services should copy GPs into conversations related to patient issues, however, this may not always be possible due to timelines involved and feedback on the discussion would be shared at a future Primary Care and Secondary Care Interface Group meeting.
- Board Members supported the improvement work taking place to reduce outpatient waiting times and direct patients to information concerning their appointment, particularly for short-notice appointments, so that patients were informed and knew what to expect. Members welcomed the information from Ms Wheeler in respect of the gender/sex of the member/s of staff carrying out a procedure.
- Outcome: Board Members noted the patient story and supported the learning identified to promote patient experience, particularly for short-notice appointments.**

## **6. Chief Executive and Board Chair's report**

### **6.1 Chief Executive's report**

**(005/2025)**

- The Deputy Chief Executive, Dr Crawford McGuffie, thanked colleagues across health and social care for their commitment and dedication during the recent Storm Eowyn to ensure that the citizens of Ayrshire remained as safe as possible. In addition, there had been a well-planned and collaborative response working with resilience partners including police, fire, ambulance, coast guard, environmental protection and local authorities.
- Scottish Government had confirmed in writing that they could now provide up to £53.5 million brokerage to NHS Ayrshire & Arran (NHSAA) in the current year where this had previously been £27.7 million. The increase in brokerage would improve the Board's financial position this year.
- The current situation within NHS Scotland was challenging for health and care in terms of workforce, finance and performance and this position was reflected in NHSAA. A number of collaborative workshops had taken place in recent months to ensure the Board was in the strongest position possible to address these challenges.
- The Cabinet Secretary had visited the new frailty unit at University Hospital Ayr on 4 November 2024 to see the whole system approach being taken. He had been impressed by the methodology followed and positive initial progress. A follow up meeting had taken place last week when the Board had reported on winter challenges due to Flu and other respiratory illnesses in December 2024 and January 2025 which had impacted this new approach, however, data was beginning to show recovery in performance.
- NHSAA Orthopaedic multidisciplinary team (MDT) had been recognised at the Scottish Hip Fracture Audit meeting in December 2024 as being the most improved in regard to the standard of care provided to hip fracture patients and for the MDT approach being adopted.
- Dr McGuffie had attended a development session within the Board of the local Specialty Doctor and Associate Specialist Doctors (SAS) group at the end of 2024. SAS doctors make up 20% of the UK medical workforce, with 103 locally. They are a very experienced medical group and are integral to service delivery working alongside consultant colleagues. The GMC Workforce Report 2023 had underlined the whole system value of these expert clinicians. The group were keen to progress with their own forum and the meeting had been very positive.
- Dr McGuffie and the Director of Transformation and Sustainability, Mrs Kirstin Dickson, had presented certificates to around 60 staff members who had successfully graduated at the Bitesize leadership Daring to Succeed event held in December 2024. While some of this cohort did not have an official leadership role, they were committed to developing, improving and supporting reform and progressing the Caring for Ayrshire programme.
- The Clinical Development Fellows Community Support network provided workshops in schools to promote employability and careers in the health and care sector, and other wellbeing matters such as healthy life choices and mental health awareness. Additional support was provided for widening access to medicine, with two workshops held in December 2024 for individuals who had reached interview stage.

## **6.2 Board Chair's report**

**(006/2025)**

- The Board Chair, Mrs Lesley Bowie, thanked Non-Executive Board Members for their support and flexibility to ensure that Board and Committee business continued during her period of extended medical leave last year. She particularly thanked Ms Linda Semple for her role as interim Board Chair.
- A Board Chairs' meeting was held on 29 January 2025 at which Fiona Bennett, Deputy Director NHS, Integration and Social Care Finance, had provided an informative update on the planning process for 2025/26. There had been an interesting presentation on work being done by the Centre for Sustainable Delivery (CfSD). The Associate Clinical Director at CfSD had updated on planned care, innovation work and annual planning, noting the strong collaboration and clinical engagement to reach consensus across the country.
- Board Chairs had met with the Cabinet Secretary on 11 December 2024 and 29 January 2025 to discuss winter pressures and the impact of Flu and other respiratory illnesses. At the Board Chairs' meeting in December 2024, the Cabinet Secretary had made reference to his visit to the new Frailty unit at University Hospital Ayr (UHA) and the positive difference in terms of early avoidance.
- A Board workshop had taken place on 13 January 2025 on the theme of effective governance, led by NHS Education for Scotland colleagues. This workshop had provided the opportunity to consider areas for improvement in continuing to develop Board governance. A further Board workshop was held on 30 January 2025 to consider revenue and delivery planning. Both workshops had good engagement and interaction with Board Members which was encouraging.
- Two celebration events were held last week to recognise the commitment of staff with 40 years or more NHS service. 127 employees had joined the events, one of whom had worked in the NHS for almost 50 years. These positive and worthwhile events had provided the opportunity to share memories and experiences over the years.

## **7. Performance Governance**

### **7.1 Performance Governance committee (PGC)**

**(007/2025)**

The Committee Chair, Mrs Sheila Cowan, presented the Chair's report from the meeting on 16 January 2025 and the approved minute of the meeting on 6 November 2024.

Members received a verbal update from the PGC light meeting held on 30 January 2025 which had met to scrutinise the month 9 financial management report, covering the period to 31 December 2025. As reported above, Scottish Government had recently confirmed that they could provide £53.5 million brokerage, due to a change in the use of non-recurring spend. A full update would be provided in the financial management report to be discussed later in the meeting.

PGC had received an update on the CRES strategy for 2025/26 being managed through Viridian and executive teams and had commended the good work being done from a strategic perspective. An update had been provided on the internal audit related to waiting list management, with the audit report's recommendations now concluded. The Committee discussed the Board's financial plan 2025/26 and

Caring for Ayrshire whole system plan initial agreement which was also discussed in detail at the Board workshop on 30 January 2025.

**Outcome: Members noted the update and minute.**

## **7.2 Financial management report**

**(008/2025)**

The Director of Finance, Mr Derek Lindsay, presented the Board's financial position to 31 December 2024.

The Board had approved a deficit budget of £53.5 million for 2024/25. The deficit at month 9 was £44.86 million. The Board had committed to meet the agreed £53.5 million deficit budget. As reported above, Scottish Government had provided non-recurring funding related to the regrading of some staff from Band 5 to Band 6. As only a few staff had completed the evaluation process to date, the accrual in the current year was less than anticipated. This non-recurring benefit should enable the Board to meet the £53.5 million deficit budget agreed in the revenue plan.

Members received a detailed breakdown of areas of overspend for the year to date in Acute services, with a £25.6 million overspend, mainly attributable to £15 million pay costs overspend and £8.2 million supplies overspend. The supplies overspend showed stabilisation overall, with a similar position to the last month, although there had been an increase in theatre and surgical supplies spend.

The New Medicines Fund (NMF) was overspent by £6.3 million at month 9 and the overspend at the year end was likely to be around £8.8 million and higher than planned due to additional invoices being received related to new medicines.

The legacy deficit held within reserves for the year to date was £16.3 million overspend, however, this was expected to improve to £15.3 million due to the additional non-recurring funding received from Scottish Government.

North Ayrshire Integration Joint Board (NA IJB) had notified the Board that due to overspend they were likely to incur this year, they were requesting £1.065 million. This had been included in the financial forecast and the position would continue to be monitored.

The report provided details of cash releasing efficiency savings (CRES), with £11.6 million achieved up to 31 December 2024 and while lower than forecast, it was higher than CRES achieved last year. Following new governance and controls put in place, medical agency spend was expected to show an improved position in month 10. Viridian was undertaking work with staff in relation to workforce and this was also expected to yield some additional savings in month 10.

Health and Social Care Partnership (HSCP) savings were shown separately. While these did not contribute to the Board's year end deficit, they did contribute to the 3% CRES targets set by Scottish Government and it was important for HSCPs to bring down IJB overspends in year. A further area of risk related to Primary Care prescribing as this information was available two months in arrears, with the report providing data up to November 2024 and forecast overspend of £2.49 million.

Annex B of the report focused on workforce. Medical agency spend was unusually low in December 2024. The reason for this was unclear and the position would continue to be monitored. Mr Lindsay advised in response to a question from a Member that new procedures had been put in place to ensure that medical agency invoices were provided to Board in a timely manner.

Annex C showed length of stay. While this had not reduced as quickly as planned, the SAFER project was now reducing length of stay in wards where training had taken place and the position was moving in the right direction.

Mr Lindsay highlighted that at month 8 the report had shown significant reduction in length of stay. Acute unfunded beds were able to be closed in November and there had been significantly less nursing agency use. The month 9 position reflected that in December, due to service pressures the position had reversed, with additional unfunded beds having to be opened and more agency nurse spend, however, this was less than in the first six months of the year. Members were advised that a number of non-recurring measures had been put in place to enable the Board to achieve the year end £53.5 million deficit budget and Scottish Government had confirmed they could provide brokerage for that level of deficit.

Board Members discussed the report and commended staff for the work being done and improvement initiatives ongoing which were beginning to have a positive impact. While the Board was not where it wanted to be, Members noted the progress made towards achievement of CRES, commending the organisation for the unprecedented level of CRES achieved to date in spite of the significant pressures faced. It was recognised that there were areas of spend which the Board could not influence, such as new medicine costs, and while funding was provided from Scottish Government, this was not sufficient to cover the costs incurred. Members welcomed that Scottish Government would provide brokerage of £53.5 million this year which should enable the Board to meet the agreed year end deficit budget. However, growing demands and pressures facing the Board and demographic shifts in communities meant that the Board would continue to face significant challenges in the years ahead.

**Outcome: Members noted the financial management report to 31 December 2024. Members noted that Scottish Government would provide brokerage of up to £53.5 million this year which should enable the Board to meet the agreed year end deficit budget.**

### **7.3 Performance report**

**(009/2025)**

The Director of Transformation and Sustainability, Mrs Kirstin Dickson, presented the Board's position on key areas of performance mainly covering the period up to November 2024. The report highlighted areas of improvement, particularly progress against delivery plan trajectories for this year, as well as challenges in meeting national targets. There were similar challenges facing other Scottish Boards.

#### **Planned Care**

- New Outpatients and Inpatients/Day case Waiting Times - Clinical colleagues had worked intensively to maintain the elective programme and this had been particularly challenging given the pressures faced over the last couple of months. Demand for new outpatient appointments continued. In December 2024, there were 55,279 patients waiting which was well above the 59,318 delivery plan

trajectory. Inpatient and day case waiting times had also improved in December 2024.

- Imaging - As a result of Scottish Government funding, the Board had managed to maintain 89.5% performance against the Imaging six weeks delivery target, with 3,716 people waiting compared to delivery plan trajectory of 5,572. Endoscopy. There had been a slight increase in the number of patients awaiting Endoscopy, with 2,129 patients waiting at the end of the calendar year, which was broadly in line with the delivery plan. This was mainly due to ongoing issues related to availability of clinical space at both sites and the position was under continuous review.
- Cancer - Performance against the Cancer 31 day target had worsened at 94.3% and the position continued to be reviewed weekly. For the 62 day target, there were challenges related to Urology and delays to surgery. There continued to be challenges across all specialities in cancer pathology and services were reliant on outsourcing to maintain performance.
- Musculoskeletal (MSK) - Compliance was below the national target, with a similar position across Scotland. Continuous efforts were being made to try to improve performance. In November 2024, performance was at 34.9% which showed a 15% improvement since December 2023. A new Service Manager had commenced work and a range of improvement opportunities continued to be developed to maintain improvement.

### **Mental Health**

- Child and Adolescent Mental Health Services (CAMHS) - The Board continued to achieve 100% referral to treatment targets which exceeded the 90% national target. The West Road Centre for Neuro CAMHS and eating disorders would open later this month.
- Psychological Therapies - Performance at November 2024 was 92.8%, a slight improvement compared to the previous month and above the 90% national target, with performance consistently above the Scottish average.
- Members were advised of an area of risk related to resource challenges, with Recovery and Renewal and Action 15 funding baselined to the financial allocation and flexibility given for local use. As funding had reduced there had been an £800,000 reduction to mental health in-year which was being managed through previous reserves carried forward in the current financial year. However, moving to 2025/26, consideration was being given to pulling down capacity in some of these services to manage the reduced allocation of resource which may impact on performance into next financial year. Further details would be shared with Board in due course once the allocation had been confirmed and a process was in place.
- Drug and Alcohol Treatment - Members received an update on performance across the three HSCPs, with strong performance overall at 99.4% which was above the 90% target.

### **Urgent Care Performance**

- Ayrshire Urgent Care Service (AUCS) continued to perform strongly and to achieve 85% target and above, with performance in November 2024 at 92%. There were 279 calls before convey, with 259 people not transferred to hospital. There were 652 calls from care homes to AUCS, with 602 not transferred to

hospital. There were 176 people seen through the emergency mental health services pathway.

### **Unscheduled Care Performance**

- As reported earlier in the meeting, from mid-December 2024, there had been a challenging six week period due to flu and other respiratory illnesses, with the highest occupancy levels since 2022. Notwithstanding the challenges faced during this period, performance against the ED 4 hour target continued to improve. A People First reset programme had been undertaken across both front doors and hospital sites looking at how to make systems and processes better for staff and patients across hospital. The Board was seeing improvement in relation to ED 12 hour breaches at University Hospital Crosshouse as well as ambulance turnaround times. While performance had reduced particularly in December due to system challenges, some improvements were now being seen and work undertaken had improved the patient journey.

### **Delayed Discharges**

- There was continued strong performance in East Ayrshire which remained consistently below the Scottish average. Main issues related to adults with incapacity and complex discharges. A single patient had experienced a delay over 14 days and discussion had taken place with Public Health Scotland on the circumstances related to this.
- For North Ayrshire (NA), the position had been steadily deteriorating since May 2024. The main challenges related to workforce and financial resource and capacity issues. There were significant overspends for care at home and care homes in NA and a financial recovery plan was in place. NA HSCP continued to prioritise hospital referrals but limited capacity was impacting on performance. Regular updates were being provided at weekly Collaborative Response and Assurance Group (CRAG) meetings, including issues related to adults with incapacity. The IJB's Financial Working Group had oversight of the financial improvement programme, with 52 actions planned for this year in regard to patient delays, improving sickness absence to increase capacity and improved partnership working with Acute and Social Work, looking at areas such as unmet need and services in the community to avoid deterioration. NA IJB had indicated to Scottish Government that additional investment would help address the challenges related to growing demand for social care in the community and a response was awaited.
- Delayed discharge performance in South Ayrshire (SA) remained volatile, with some periods of improvement reflected in the data. In early December 2024, there were 50 patients delayed. Winter challenges during the festive period had contributed to a further increase in delayed transfers of care in SA. The most significant challenges related to capacity constraints for care homes and care at home. There were around 70 vacancies for the in-house service and while everything possible was being done to address this, the position was challenging. SA was working closely with Acute colleagues, particularly around the frailty ward. While this work had been impacted due to significantly increased demands in December and January, there was opportunity for these two areas to achieve positive results in reducing delayed transfers of care.



## **Workforce Sickness Absence**

- The organisation was seeing the impact of seasonal illnesses such as flu and staff absence numbers had increased. It was important to have trajectories in place to manage sickness absence and move back to the 4% national target. In relation to Agenda for Change (AfC) pay reform and the reduced working week, NHSAA had moved 99% of services to new AfC work patterns. NHS Boards awaited clarity from Scottish Government on further reductions to the working week. Work continued to address ongoing vacancy challenges. In terms of the recruitment process, it was currently taking around 12 weeks to recruit to posts.

Board Members were encouraged by the improved performance against some targets notwithstanding the significant winter pressures faced over the festive period and the impact on both patients and staff. While the Board had difficult financial challenges which would continue in the years ahead, Members recognised the collaborative work being done in Acute and the HSCPs and had a level of assurance that improvements were beginning to be seen. Issues were being discussed and scrutinised at Governance Committee meetings and the addition of PGC light meetings would enable closer oversight of performance on a month-by-month basis.

**Outcome:** Board Members noted the position reported and welcomed the detailed updates on the key performance risk areas which provided assurance that mitigating actions were being taken forward with the aim to improve performance in these key areas.

## **8. Healthcare Governance**

### **8.1 Healthcare Governance committee (HGC) (010/2025)**

The Committee Chair, Ms Linda Semple, presented the Chair's report from the meeting on 13 January 2025 and the approved minute of the meeting on 4 November 2024, chaired by the interim chair, Mrs Joyce White. A full update on patient experience and quality and safety in neonatal would be discussed later in the meeting.

**Outcome:** Members noted the update and the minute.

### **8.2 Patient Experience (011/2025)**

The Nurse Director, Ms Jennifer Wilson, presented the Patient Experience quarter 2 report. The report had been discussed in detail at the HGC meeting on 13 January 2025.

Stage 1 complaints had reduced slightly compared to the previous quarter and the Board was meeting the target.

Stage 2 complaints had reduced slightly compared to the previous quarter. These complaints continued to be challenging in terms of complexity and length of time taken to respond. The Board was below the national target although performance had increased compared to quarter 1 in 2023. As a result, the Nurse Director had commissioned an end-to-end review of complaint procedures led by the Director of Clinical and Care Governance. A report would be provided at a future HGC setting out opportunities for improvement in responding to complaints.

There continued to be a low level of Scottish Public Services Ombudsman (SPSO) activity which was positive and indicated that although the Board was taking time to respond to complaints, the quality of complaint responses had addressed the complainant's concerns. Complaint themes remained unchanged. HGC received regular deep dive reports which enabled alignment of improvement actions as a result of complaint activity.

Feedback through Care Opinion (CO) remained positive in terms of the number of people using CO and in response rates to posts which remained agile. In addition, patient surveys provided real time feedback which was used in clinical areas to identify learning in specific areas. The report highlighted some of the feedback received. The Director thanked those individuals who had provided feedback, as well as staff working in all of those areas, noting that this showed the impact of every staff member across the system.

**Outcome: Board Members noted the performance in responding to complaints and themes identified, in particular, the ongoing theme related to waiting times. Members were encouraged that SPSO activity remained low.**

### 8.3 Quality and safety in Neonatal services

(012/2025)

The Director of Acute Services, Mrs Vicki Campbell, invited Ms Attica Wheeler, Director of Midwifery and Associate Nurse Director, Women and Children's Services, to provide an overview report of quality improvement activity in Neonatal services. The report had been discussed in detail at HGC on 13 January 2025.

The report focused on the following core measures of the Scottish Patient Safety Programme (SPSP) and Excellence in Care (EiC) supplementary measures.

#### Core

- Reduce "term" admissions to the neonatal unit (NNU)
- To optimise the management of care of pre-term babies

#### Supplementary

- Percentage of infants with a measured documented temperature within one hour of admission

Ms Wheeler advised that there had been sustained improvement with less "term" babies admitted to NNU. Measures had been put in place to avoid reduction in babies' temperature at birth, for example, use of a heater in maternity theatres and ensuring the baby had skin to skin contact at birth.

Efforts to optimise the management of care of pre-term babies stemmed back to interventions from the labour ward, for example, over the last 18 months if a baby was to be born prematurely they would be given magnesium sulphate which had delivered improvement. The team received specialist training in order to deliver care and met the British Association of Perinatal Medicine guidance for staffing levels to look after these most vulnerable patients.

The Board was consistently above the >95% target for measurement of infant documented temperature within one hour of admission, with 100% observed in the majority of occasions.

It had been agreed that going forward the report would also include more generic measures of improvement to showcase wider improvement work being done for this vulnerable group of patients.

**Outcome:** Board Members noted the overview report of quality and safety in Neonatal services and commended the team for the continuous improvement made over a number of years in challenging circumstances.

#### **8.4 Quality Strategy implementation**

**(013/2025)**

The Nurse Director, Ms Jennifer Wilson, provided an assurance report on implementation of the Quality strategy. The report was discussed in detail at HGC on 13 January 2025.

In June 2023, HGC agreed that the current Quality Strategy would be extended to include the period 2023-2025. With this extension came a commitment that a robust implementation plan would be developed to support further delivery of the strategy. The Board approved this in August 2023. Building capacity for improvement would enable the Board to be able to deliver Excellence in Care in future years.

The Director provided an overview of the status of deliverables in the strategy. 279 staff had completed the Ayrshire and Arran Improvement Foundation Skills (AAIFS) course between October 2020 and November 2024. This involved individuals working alongside trained QI advisors with an active improvement project aligned to their area which had led to tangible outcomes. A compassionate listening service was being delivered by chaplaincy teams, with 3,300 staff offered sessions to services and 89% of them having attended. There had been improvements in access to mental health services and trauma informed care, particularly for addiction reviews, at HMP Kilmarnock.

Board Members discussed this important report which demonstrated the continuous improvement culture within the organisation. Members thanked staff who had undertaken AAIFS training and were helping to deliver improvement programmes across the system. Members recognised the focused work being done to increase volunteering, the important role of volunteers within the organisation and the potential route to employment.

**Outcome:** Board Members noted the assurance report on progress with implementation of the Quality strategy.

### **9. Board governance and strategy**

#### **9.1 Governance committee and Integration Joint Board membership (014/2025)**

The Head of Corporate Governance, Mrs Shona McCulloch, presented changes to Committee membership following the Board Chair's return in early December 2024 and the appointment of Mrs Sharon Morrow as a new Non-Executive Board Members in January 2025. These changes had previously been shared with Board Members in draft. Ms Linda Semple had now stepped into the Vice Chair role alongside Mrs Sheila Cowan, who remained as Vice Chair.

**Outcome:** Board Members approved changes to membership.

## **9.2 Board corporate calendar 2025/26**

**(015/2025)**

The Head of Corporate Governance, Mrs Shona McCulloch, presented the corporate calendar which gave oversight of Board meeting, workshop and Governance Committee dates, as well as Corporate Management Team, IJB and sub-committee meetings. As dates had been agreed slightly later than normal they were still to be formally approved by two committees.

**Outcome: Board Members approved the Board calendar of meetings.**

## **9.3 Health and care delivery planning**

**(016/2025)**

The Director of Transformation and Sustainability, Mrs Kirstin Dickson, outlined arrangements for the delivery plan. Scottish Government guidance was sent to Boards on 29 November 2024 in relation to financial and delivery plans for 2025/26. The report also provided a copy of the NHS Scotland Joint Commissioning Letter and Delivery Plan Guidance.

The Board had been asked to submit an early draft of the plan in January. Feedback was due in February and final draft plans should be submitted by March 2025. Board workshops had taken place to consider planning arrangements with Board Members.

In reply to a question from a Member on timing for publication of the new Population Health Framework, the Board Chair advised that Mr Richard Foggo, Co-Director of Population Health, had provided a presentation at the Board Chairs' meeting on 29 January and the new Framework was due to be published around March 2025. The Chair would arrange for the presentation to be shared with Members.

**Outcome: Board Members noted arrangements for the delivery plan for NHS Ayrshire & Arran and Scottish Government.**

## **9.4 Capital Investment Plan 2025-2030**

**(017/2025)**

The Director of Infrastructure and Support Services, Mrs Nicola Graham, presented the capital investment plan (CIP) 2025-2030. The plan had been prepared in line with the confirmed 5% increase in core funding. The report had been scrutinised at Corporate Management Team on 14 January and PGC on 16 January 2025.

The report reflected the contents of the Scottish Government budget letter 2025/26 and 2024/25. In addition to the usual capital planning process, Boards had been asked to prepare a do minimum business continuity plan (BCP) equivalent to 133% of the core allocation. Once BCP funding had been confirmed by Scottish Government, the CIP would be updated to reflect the detail of the activities to be progressed.

For the CIP, demand for funds exceeded the available allocation and a plan had been developed collaboratively with colleagues from across the Board, including an equipment life cycle plan, following a prioritisation process based on 12 criteria, as outlined in the report. A detailed review was taking place on a quarterly basis and

should slippage be identified this would be re-allocated according to the priority list. Details of funding and planned expenditure were provided in the report's appendices.

**Outcome:** Board Members approved the plan and noted the prioritisation process being taken forward as outlined in the report.

## **10. Audit and Risk**

### **10.1 Audit and Risk Committee (018/2025)**

The Committee Chair, Mrs Jean Ford, presented the chair's report from the meeting on 24 January 2025 and approved minutes of the meeting on 18 November 2024.

**Outcome:** Board Members noted the update and minute.

## **11. For information**

### **11.1 Board briefing (019/2025)**

The Board Chair encouraged all Board Members to read the briefing and highlighted the Good News stories from across the organisation.

### **11.2 East Ayrshire Integration Joint Board (020/2025)**

Board Members noted the minute of the meeting held on 23 October 2024.

### **11.3 North Ayrshire Integration Joint Board (021/2025)**

Board Members noted the minute of the meeting held on 14 November 2024.

### **11.4 South Ayrshire Integration Joint Board (022/2025)**

Board Members noted the minute of the meeting held on 13 November 2024.

## **12. Any other competent business (023/2025)**

There was no other business.

## **13. Date of Next Meeting**

The next public meeting of the NHS Ayrshire & Arran Board will take place at 9.30 am on Monday 31 March 2025

Signed by the Chair, Lesley Bowie

Date: 31 March 2025