

NHS Ayrshire & Arran



Meeting:	Ayrshire and Arran NHS Board
Meeting date:	Monday 08 December 2025
Title:	Performance Governance Committee meeting on 27 November 2025 - Chair's report to NHS Board
Responsible Director:	Derek Lindsay, Director of Finance
Report Author:	Sheila Cowan, Committee Chair

1. Purpose

This is presented to the Board for: Discussion.

This paper relates to: Local policy to ensure good governance practice in reporting from board committees

This aligns to the NHS Scotland quality ambitions of Safe, Effective and Person Centred. Good governance practice supports the effective delivery of services across the organisation.

2. Report summary

2.1 Situation

This report provides information to Board Members on key issues discussed within the Governance Committee's remit, in order to provide assurance to the Board that those matters have been identified and are being addressed, where required.

2.2 Background

The Board Model Standing Orders advises that Board meeting papers will include the minutes of committee meetings which the relevant committee has approved. To ensure that there is no delay in reporting from committees this paper provides a timely update on key issues from committees.

2.3 Assessment

Key issues agreed by Committee are noted below. Identification of organisational risks, stakeholder considerations and other impacts were included in papers to the Committee.

- The committee received an update on the progress against the actions from the Internal Audit Report on Patient Flow Management (rated substantial

improvement required). Members received excellent assurance of the work taking place and all actions are nearing completion.

- The Strategic Risk Register was received and reviewed. Discussion took place on the process and the Board Chair has taken an action to look at this to ensure updates are aligned to the governance schedule. It was suggested that all action planning and additional effective controls are put in place to enhance the mitigation of risks to tighten the controls and details within the risk register.
- The committee reviewed and scrutinised the month 7 Financial Management report and noted a target deficit of £40.2m for 2025/26. This will be discussed at the next Board meeting on 08 December. The committee did not feel assured regarding this position and additional work is required to put action plans in place for the continued cost overruns and savings un-achievement versus the plan.
- The Quarter 2 finance review letter has been received from the Scottish Government and work is ongoing to close the actions contained within the letter. A status report on completion of these actions will be shared with PGC members, alongside a review of the Q3 finance letter at the next PGC in January.
- Members reviewed and discussed the Performance Management report which showed mixed results in terms of alignment with Annual Delivery Plan targets and trajectories. As part of the performance section a presentation was provided on Unscheduled Care including Length of Stay/SAFER. The committee felt assured of the work taking place in this area. A presentation was also provided on Planned Care which also provided members with a high level of assurance with a significant movement in high risk areas such as ENT and Dermatology. Good work has also taken place with regard to the Redesign of the Diabetes Service and the reduction in waiting times for MRI. Continued monitoring of this will take place as part of the PGC agenda.

As part of the deep dive schedule an update was received on cancer services for which there had been some concern. Good work is taking place in all areas of the service in order to reduce the current 62 day waiting times target which is high in some specialties.

- The committee received the timetable for the Budget Setting Process for 2026/27 and were assured that a three year plan will be put in place. A further update to this will be received by the committee at the January 2026 meeting.

2.4 Recommendation

The Board is asked to be aware of and discuss the key items highlighted and receive assurance that issues are being addressed, where required.