

NHS Ayrshire & Arran



Meeting:	Ayrshire and Arran NHS Board
Meeting date:	Monday 8 December 2025
Title:	Healthcare Governance Committee meeting 3 November 2025 - Chair's Report to NHS Board
Responsible Director:	Jennifer Wilson, Executive Nurse Director
Report Author:	Linda Semple, Non-Executive Director Kay Carmichael, Business Manager

1. Purpose

This is presented to the Board for:

- Discussion

This paper relates to:

- Local policy

This aligns to the following NHSScotland quality ambition(s):

- Safe
- Effective
- Person Centred

2. Report summary

2.1 Situation

This report provides information to Board Members on key items discussed within the Governance Committee's remit, in order to provide assurance 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 items from Committees.

2.3 Assessment

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

- **Mental Health Deep Dive**

Committee members received several updates on Mental Health Services through the Quality and Safety Report and the Annual Update on the Mental Health and Wellbeing Strategy. In response to an action from a previous Committee meeting, a report was provided on CAMHS and neurodevelopmental service waiting times,

along with the current mitigation measures in place. It was agreed that a paper would be presented to the NHS Board in 2026.

- **Food Fluid Nutrition**

The committee received an update on progress against the Health and Safety Executive (HSE) Action Plan following a previous patient safety incident related to dysphagia care. Significant work has been undertaken, including the development of a local dysphagia education framework, strengthening the Mealtime Coordinator role, revising menu cards to align with IDDSI standards, and improving risk management processes. While all original actions have been completed, residual risk remains due to the complexity of mealtime processes, and further efforts are planned, including an independent audit by Health and Safety colleagues and continued investment in the Food, Fluid and Nutrition team to ensure sustainable improvements and patient safety.

- **Health and Social Care Partnership Clinical and Care Governance Annual Reports**

Committee members received the annual reports for 2024/25 and welcomed the detail within each of the reports presented. Members were reminded of the significant work being undertaken across the partnerships. It was noted for 2025/26 reports a standard template will be used to ensure consistency of detail provided.

- **Winter Vaccination Programme 2025/26**

The committee received an update on the Winter Vaccination Programme 2025/26, which aims to protect high-risk groups from flu and COVID-19, reduce winter pressures on health services, and improve uptake among eligible cohorts. Delivery began in mid-September, with most vaccinations scheduled for completion by early December. Key developments include expanded peer vaccination for staff, increased participation by community pharmacies, and a successful test of change delivering flu immunisations in nursery settings, which boosted uptake by over 30%.

- **HAI Report**

The committee reviewed the Healthcare Associated Infection report, noting current performance against national standards for CDI, ECB, and SAB. Particular attention was given to the persistently high rates of community-associated E. coli bacteraemia (CA-ECB), with detailed analysis confirming a strong link to socioeconomic deprivation—99.2% of cases mapped to SIMD, predominantly in the most deprived quintiles. A multi-agency improvement group is addressing this through targeted interventions and a new Community Acquired Infection Learning Review Tool. The committee also acknowledged the positive impact of recent investment in the IPC team and enhanced surveillance, which has contributed to a sustained reduction in SAB rates and improved outbreak management.

- **Unscheduled Care**

Committee members received an update against the Unscheduled Care Improvement Plan for 2025/26. It was noted during the reporting period there had been a reduction in 12 hour waits, improvement in admitted pathway performance and length of stay for emergency admissions had reduced.

- **Operation Koper**

Committee members received an update from the Medical Director on current activity relating to investigations into COVID-19-related deaths in care settings. The Committee was assured of NHS Ayrshire & Arran's processes in meeting the required standards. However, it was noted that teams are experiencing significant pressures in extracting the necessary data.

- **NHS Ayrshire & Arran Framework for Spiritual Wellbeing 2024-2029**

Committee members approved the NHS Ayrshire & Arran Spiritual Care Delivery Plan and Measurement Plan. The delivery plan summarises the core aims and actions

intended to implement the strategy. The measurement plan provides corresponding measures to track progress and impact. The first milestone point was highlighted as April 2026 whereby an update will be provided to the Committee.

- **Triangulation of Reports and Improvement Actions**

Members noted the alignment of multiple reports and updates presented at the meeting, including those on complaints, food and fluid nutrition, and pressure ulcers. Assurance was provided that these findings have been triangulated with ongoing improvement activity, with mitigations and actions in place to drive sustained progress.

2.4 Recommendation

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