

NHS Ayrshire & Arran



Meeting:	Ayrshire and Arran NHS Board
Meeting date:	Tuesday 7 April 2026
Title:	Healthcare Governance Committee meeting 2 March 2026 - 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.

- **Report of Executive Directors**

The Committee received an update from the Executive Nurse Director, which highlighted the following key areas:

Maternity Services – HIS Inspection

The recent Healthcare Improvement Scotland maternity inspection identified a number of areas of good practice, alongside important learning for the service. A review of associated patient safety and quality data was undertaken to provide a comprehensive and balanced overview. This review demonstrated strong performance across several key indicators and confirmed that maternity services within NHS Ayrshire & Arran remain safe.

Acute Services

Significant pressures have continued across the acute sites since the Christmas period. While improvements have been observed in planned care, unscheduled care remains extremely challenging. Delays across sites continue to be considerable, resulting in occupancy levels that exceed what is sustainable for staff. The second meeting of the multi-agency improvement group, including the three local authority Chief Executive Officers, has now taken place, where safe occupancy levels were agreed.

NHS Scotland Support and Intervention Framework – Stage 4

The Committee noted the recent escalation of the Board to Level 4 of the NHS Scotland Support and Intervention Framework. The Executive Nurse Director emphasised the continued priority of maintaining patient safety, high-quality care, and safe staffing levels throughout the period of enhanced oversight.

- **Duty of Candour**

Committee Members received an addendum to the Duty of Candour 2024/25 Annual Report, which had originally been presented to the Committee on 4 August 2025. The addendum was required due to the number of adverse events that had remained outstanding at the time of the initial report.

As of 8 January 2026, 56 adverse events were still to be concluded. Members were assured, however, that for those events which had been completed, there was good compliance with Duty of Candour requirements and appropriate communication with individuals and families had taken place.

The Committee approved the addendum for publication on the NHS Ayrshire & Arran website and for submission to the Scottish Government.

- **Patient Experience Performance Report**

The Committee reviewed the Q3 2025/26 Complaints and Feedback Performance Report. It was noted that delays in complaint closures are largely due to the high volume of complaints currently requiring investigation, alongside staffing challenges within the Complaints Team which have contributed to extended turnaround times.

Members sought assurance regarding communication with patients about waiting times. It was confirmed that the new patient information leaflet within acute services explains the reasons for extended waiting periods and the temporary use of non-clinical spaces, supporting clearer expectations and improved communication.

- **HIS: Ayrshire Maternity Unit: February 2026**

The Committee received an update on the recent Healthcare Improvement Scotland inspection of the Ayrshire Maternity Unit, following publication of the report and

accompanying action plan on 4 February 2026. Members noted that the inspection identified areas of good practice as well as areas requiring improvement, and acknowledged the progress already made against several of the required actions. The Committee commended the work being undertaken within maternity services and were advised that an update on the remaining actions will be provided at the next meeting.

- **Quality and Safety Report**

The Committee received the Quality and Safety Reports for Acute Services and Neonatal Services and were assured by the information presented. Members requested that a future meeting include an update on pressure ulcers and cardiac arrests.

- **Dental Services**

The Committee received an update on Dental Services following the previous report in 2025. It was noted that national work remains underway to consider the strategic future of Dental Services, given the ongoing pressures on NHS dental provision post-pandemic.

Across NHS Ayrshire & Arran, the number of General Dental Practitioners accepting new patients remains stable, with 22 practices currently open to registrations and a new practice recently opened in South Ayrshire in February 2026.

To support improved access, the Public Dental Service has introduced a Weekday Emergency Dental Service at Ayrshire Central Hospital, offering 12 daily appointments. Paediatric waiting times have improved, and work is progressing to reduce adult waiting lists; however, challenges remain in relation to dental waiting times within the prison service.

- **Quality Strategy**

The Committee received an update following the Accelerated Design Event held in October 2026 for the co-design of the NHS Quality Strategy 2026-2030. Members supported the four-month extension with the implementation dates revised to September 2026.

- **NHSAA Adverse Event Policy and Application Guidance**

The Committee Members were assured from the review undertaken that NHSAA Adverse Event Policy and Guidance meets the requirements of Healthcare Improvement Scotland's National Framework for Reviewing and Learning from Adverse Events in Scotland.

- **Significant Adverse Event Review and Action Plan**

The Committee received an update on the SAER improvement plan agreed in January 2025. Of the original 93 reports, 72 have now been closed, with priority being given to those most overdue. Challenges remain in identifying lead reviewers for some SAERs; however, work to build capacity continues through training, ongoing discussions, and performance oversight. Members approved the closure of a further 11 SAERs.

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.