

# NHS Ayrshire & Arran



<b>Meeting:</b>	<b>Ayrshire and Arran NHS Board</b>
<b>Meeting date:</b>	<b>Monday 8 June 2026</b>
<b>Title:</b>	<b>Integrated Governance Committee Annual Report 2025/26</b>
<b>Responsible Director:</b>	<b>Lesley Bowie, Board Chair</b>
<b>Report Author:</b>	<b>Shona McCulloch, Head of Corporate Governance</b>

## 1. Purpose

This is presented to the Committee for:

- Awareness

This paper relates to:

- Government policy/directive
- Local policy

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

- Safe, Effective and Person Centred

This supports the following Corporate Objectives:

- **Better Value** – Delivering innovative and sustainable services for everyone - oversight of sustainability, reform and resource use
- **Better Workplace** – Creating a great place for us to work - Cross-organisation governance and accountability
- **Better Care** – Improving your experience of care - oversight of programmes and risks impacting care delivery

## 2. Report summary

### 2.1 Situation

The Integrated Governance Committee provides an assurance report annually which sets out evidence and key achievements through the year in discharging its Duties and Remit. The approved Integrated Governance Committee annual report for 2025/26 is presented to Board Members to report on progress and provide assurance that the Committee has delivered its remit.

### 2.2 Background

Each NHS Board Governance Committee is required to provide an annual report to Committee and the Board to provide assurance that the Committee has discharged its role as set out in the agreed Terms of Reference. The Committees' approved Terms of Reference and information on the composition and frequency of the Committee are

considered as an integral part of the Board Standing Orders and reviewed annually each year through a separate process.

The Governance Committee annual reports are part of the overall assurance mechanism for the NHS Board, to provide assurance in support of the Board's annual governance statement that the committees have fulfilled their remit.

Further to recommendation by internal audit, Governance Committees are required to complete an annual Self-Assessment Checklist, an Assurance Mapping template and NHS Board Reporting template as part of the annual report, to provide assurance of committee effectiveness.

## **2.3 Assessment**

To evidence discharge of its duties and remit as detailed in the Terms of Reference, the Integrated Governance Committee annual report details the membership of Committee and provides key messages from activities in the past year. This includes a Self-Assessment Checklist (A1) together with the Assurance Mapping template (A2) and the Reporting to the NHS Board template (A3).

### **Key Messages from 2025/26**

- The Committee maintained effective oversight of strategic risk, with improved reporting supporting robust scrutiny and no matters requiring escalation to the Board.
- A continued focus on the reform agenda and financial sustainability highlighted the challenge of balancing immediate pressures with long-term transformation. Due to ongoing discussions on delivery of Caring for Ayrshire and future monitoring, reporting was paused in-year.
- Digital Strategy and reform remained a key priority, with strengthened governance and reporting arrangements in place to support delivery across a complex portfolio.
- The Committee received assurance on wider strategic programmes and cross-cutting governance areas, recognising ongoing capacity pressures and the need to further develop reporting maturity.

#### **2.3.1 Quality/patient care**

Ensuring good governance in monitoring delivery of programmes across Ayrshire and Arran supports the effective delivery of quality, patient-centred services.

#### **2.3.2 Workforce**

This assurance report has no workforce implications for the organisation and enhances joint working across the NHS Board and Ayrshire Integration Boards.

#### **2.3.3 Financial**

There are no financial implications

#### **2.3.4 Risk assessment/management**

The annual report process ensures an assessment of committee business against the agreed Terms of Reference. This mitigates against the risk of any gaps in assurance and supports the NHS Board's annual assurance statement.

### **2.3.5 Equality and diversity, including health inequalities**

An impact assessment has not been completed because this is an assurance reporting paper.

### **2.3.6 Best value**

This paper support Best Value across the following themes.

- Governance and accountability

### **2.3.7 Other impacts**

No other relevant impacts

### **2.3.8 Communication, involvement, engagement and consultation**

This paper requires no engagement with external stakeholders.

### **2.3.9 Route to the meeting**

The annual report was considered and approved by Integrated Governance Committee on 21 May 2026.

## **2.4 Recommendation**

For awareness. Board Members are asked to receive the report for assurance and note the progress of the Integrated Governance Committee in 2025-2026.

## **3. List of appendices**

Appendix 1 - Integrated Governance Committee annual report for 2025-2026 including

A1 – Self-Assessment checklist

A2 – Assurance Mapping

A3 – Reporting to the Board

## **Integrated Governance Committee Annual Report for 2025/2026**

### **1. Summary**

- 1.1 The annual report together with the Committee Effectiveness Checklist, Assurance Mapping and NHS Board Reporting templates provide detail on the activities of the Integrated Governance Committee plus membership and attendance. The report gives assurance that the Committee has discharged its role as set out in the agreed Terms of Reference.

The Integrated Governance Committee was approved as a standing committee of the NHS Ayrshire & Arran Board in August 2014, to further strengthen governance arrangements across NHS Ayrshire & Arran. The Committee continues to discuss and provide a level of scrutiny and assurance on a number of governance and risk issues that span more than one specific governance strand.

### **1.2 Key Messages**

- Strategic Risk discussions in 2025/26 focused on continued improvement to risk reporting, including refinement of templates and clarity of mitigating actions. Committee maintained oversight of the risks relating to sustainability through reform and digital services and was assured by progress, with no issues requiring escalation.
- Updates on the Board's reform agenda remained a focus in the first half of the year, with discussion progressing from strategic planning to delivery. Committee noted the ongoing challenges associated with financial sustainability and the need to balance short-term improvement with longer-term transformation. Due to ongoing discussions on delivery of Caring for Ayrshire and future monitoring reporting was paused in-year.
- A significant focus was given to the Digital Strategy and Reform Programme. Committee received enhanced reporting to support scrutiny of delivery across a complex portfolio. Progress was noted in infrastructure and system developments; however, challenges relating to resourcing, prioritisation and dependencies on national programmes remained. Committee emphasised the importance of clear prioritisation and realistic delivery planning and was assured by actions in place to strengthen programme governance and capacity.
- Progress with Community Wealth Building and Climate Emergency and Sustainability programmes was reported, with Committee assured by delivery against key actions, whilst noting capacity pressures and the need for continued development of reporting.
- Committee also received assurance across a number of cross-cutting areas, including Corporate Parenting and internal audit activity.

## 2. Remit

2.1 The Committee's remit is defined in the TOR as

- To provide assurance to the NHS Board that issues identified in specific governance Committees that may have an impact across the Board are discussed to thereby ensure joined up corporate governance.
- To provide assurance on matters that do not fit within a standalone governance committee model to enable cross-governance discussion and consideration.
- To provide assurance on specific programmes of work across health and social care to monitor and scrutinise delivery on a regular basis where defined.

2.2 The Committee Terms of Reference were reviewed and amendment proposed on 17 February 2026 as below. The revised ToR will be submitted to the NHS Board on 8 June for approval.

- 3.4 Duties - Caring for Ayrshire - following a change in direction towards delivery and ongoing discussions at CMT, reporting through Integrated Governance Committee will be paused.
- 7.1 Membership – clarity of purpose for “The NHS Non-Executive Director in position as Chair/Vice Chair of each Integration Joint Board will attend to provide representation for the Ayrshire Health and Social Care Partnerships **work as requested.**

2.3 Annex 2 of the report provides assurance mapping against the Committee remit.

## 3. Membership

3.1 Members of the Integrated Governance Committee during 2025-2026 were:

- Lesley Bowie, Board Chair (Committee Chair)
- Sheila Cowan, Non-Executive Member - Chair of Performance Governance Committee.
- Jean Ford, Non-Executive Member - Chair of Audit and Risk Committee
- Linda Semple, Non-Executive Member - Board Vice Chair (Committee Vice Chair) – Chair of Healthcare Governance Committee.
- Liam Gallagher, Non-Executive Member – Chair of Staff Governance Committee
- Marc Mazzucco, Non-Executive Member – Chair of Information Governance Committee

Ex-officio members (attendees):

- Claire Burden, Chief Executive (to July 2026)
- Gordon James, Interim Chief Executive (from August 2026)
- Jennifer Wilson, Nurse Director, Lead for Healthcare Governance Committee
- Derek Lindsay, Director of Finance, Lead for Audit & Risk and Performance Governance Committees (to February 2026)
- David Stonehouse, Interim Director of Finance, Lead for Audit & Risk and Performance Governance Committees (from February 2026)
- Crawford McGuffie, Medical Director, Lead for Information Governance Committee and for Risk

- Sarah Leslie, HR Director, Lead for Staff Governance Committee
- Kirstin Dickson, Director for Transformation and Sustainability, Lead for Caring for Ayrshire
- Nicola Graham for Strategic Climate Emergency and Sustainability and Digital Strategy and reform plan
- Lynne McNiven for Organisation resilience
- Shona McCulloch, Head of Corporate Governance
- The Non-Executive Director in position as Chair/Vice Chair of each IJB is also invited to attend meetings to provide representation for each Health and Social Care Partnership. This person can also be a Chair of a Governance Committee as recorded above.

When required lead officers for specific areas of work are invited to Committee.

#### 4. Meeting

4.1 The Committee met on three occasions between 1 April 2025 and 31 March 2026.

4.2 The NHS Board has previously agreed that attendance at Committee meetings should be recorded in the relevant Annual Report. The attendance record of each member is shown below (Y indicates attended).

Member	Dates			
	20/05/2025	28/08/2025	18/11/2025 Cancelled	17/02/2026
Lesley Bowie	Y	Y	-	Y
Sheila Cowan	Y	Y	-	Y
Jean Ford	N	Y	-	Y
Liam Gallacher	N	Y	-	Y
Marc Mazzucco	Y	Y	-	Y
Linda Semple	Y	N	-	Y

#### 5. Committee Activities

5.1 Committee activity and assurance was delivered through the receipt and consideration of regular update reports as evidenced in Annex 2 Assurance Mapping. A Chair's report of key items discussed was provided to NHS Board from each meeting and reports endorsed where appropriate for onward submission to the NHS Board as evidenced in Appendix 3 Committee reporting to NHS Ayrshire & Arran Board 2025-2026.

- Annex 1 - Committee effectiveness checklist for 2025-2026 provides evidence for: The Role and Work of the Committee; Committee Meetings, Support and Information and Committee Membership and Dynamics and provides assurance to support this annual report.
- Annex 2 and 3 - Reflect continued oversight of committee governance arrangements, including Terms of Reference review, annual workplans and forward planning for 2026/27.
- Assurance provided through structured reporting cycles, including scheduled 6-monthly and annual reports aligned to the Committee remit.

- Visibility of cross-committee risks supported through routine reporting of strategic risks and consideration of the full Strategic Risk Register.
- Ongoing reporting to NHS Board, including submission of Committee outputs and key assurance updates through Chair's reports.
- Monitoring of areas where reporting continues to mature, including development of KPIs to support future assurance (e.g. organisational resilience)

## **6. Priorities for 2026-2027**

- 6.1 To continue to receive assurance on the Digital Strategy and Reform Programme, with a focus on prioritisation, delivery planning and strengthening governance arrangements to support implementation within available resources.
- 6.2 To support the development of future governance arrangements for population health, including consideration of a Population Health Committee, ensuring alignment with emerging national policy and strengthening the Board's governance framework.
- 6.3 To continue to review assurance reporting to the Committee, ensuring information is clear, proportionate and supports effective scrutiny across all areas within remit.
- 6.4 To keep under review the remit and role of the Committee within the wider governance structure, ensuring alignment with strategic priorities and cross-committee assurance requirements.

## **7. Chair's Comments**

I wish to thank the Committee for continuing to provide effective scrutiny and constructive challenge across its remit, and for its ongoing contribution to strengthening the Board's governance arrangements. This is evidenced through the breadth of programmes of work considered, including a strengthened focus on digital transformation, and the continued development of assurance reporting and corporate governance processes.

The Committee has continued to play an important role in providing oversight of cross-cutting issues and supporting the evolution of the Board's governance framework.

I can confirm that the Integrated Governance Committee has fulfilled its remit. I would like to record my thanks to all members and to the staff who have supported the Committee over this last year.

Mrs Lesley Bowie  
Chair – Integrated Governance Committee  
18/05/2026

Approved by Integrated Governance Committee  
Add date

## Integrated Governance Committee Committee effectiveness checklist for 2025-2026

The Role and Work of the Committee	Yes / No / NA	Comments
The Committee has a clear understanding of its role and authority as set out in its terms of reference.	Yes	Terms of Reference (ToR) are shared with new members/ attendees on joining the committee. ToR are reviewed annually.
The Committee undertakes an annual review of its remit and terms of reference and submits to the NHS Board for approval.	Yes	ToR reviewed by Committee on 17 February 2026. Duties updated at 3.4 to reflect a pause in reporting on Caring for Ayrshire. Membership updated at 7.1 to provide clarity on attendance of Non-Executive IJB Chairs or Vice Chairs. ToR being submitted to NHS Board for approval on 8 June 2026.
The Committee has been provided with sufficient membership, authority and resources to perform its role effectively and independently?	Yes	The Board Chair and Head of Corporate Governance review membership annually and provide appropriate membership and lead officers.
In discharging its role, the focus of the governance Committee is on seeking and reviewing assurances rather than operational issues.	Yes	
Remit - the Committee discharges its role to provide assurance on: <ul style="list-style-type: none"> <li>issues identified in specific governance Committees that may have an impact across the Board are discussed to thereby ensure joined up corporate governance.</li> <li>matters that do not fit within a standalone governance committee model to enable cross-governance discussion and consideration</li> <li>specific programmes of work across health and social care to monitor and scrutinise delivery on a regular basis where defined.</li> </ul>	Yes	There are regular reports on the key areas and specific programmes of work.  The planned Organisational Resilience annual report was not able to progress during 2025/26 as discussions on KPIs were ongoing during the year. The next report will be submitted in November 2026.  Corporate parenting agreed 6 monthly updates to Committee to enhance reporting.
The Committee regularly reviews the strategic risks relevant to its remit and seeks assurance on mitigating controls and actions	Yes	Committee receives a report on risks assigned to Integrated Governance at each meeting. Twice a year the

		<p>overall strategic risk register is also provided for information.</p> <p>There was focused discussion during 2025/26 on the need to improve reporting information on ongoing risks with actions agreed.</p>
The Committee identifies further risk for consideration and escalation from the papers presented and discussion.	Yes	A process is in place to escalate any appropriate risks. None identified in 2025-2026.
The committee receives internal audit reports relevant to its remit and monitors progress against recommendations.	Yes.	<p>A process is in place for Internal audit reports to be tabled which fall under Committee remit and Committee is kept updated on actions taken to comply with recommendations.</p> <p>In 2025/26 this included an internal audit on Business Continuity</p>
The Committee has visibility of the mechanisms that are in place to monitor all aspects of its remit.	Yes	A committee work plan is reviewed annually to ensure that the content remains relevant.
The work of the Committee enables it to assure the Board that policies and procedures which are monitored, as relevant to the Committee's remit, are robust.	Yes	The committee work plan ensures regular reporting to provide assurance on effectiveness.
The Committee links well with other Board committees and the Board itself, and opportunities are taken to share information, learning and good practice.	Yes	<p>Relevant information is presented to the Board for visibility – See Appendix 3.</p> <p>The Members of Integrated Governance Committee are the Chairs of the other Board standing committees which enables sharing of information and learning.</p>
The Committee produces an annual work plan.	Yes	This is produced annually and agreed with Committee, in quarter 4 year for the next financial year.
The Committee periodically assesses its own effectiveness.	Yes	Annual assurance report including this self-assessment with additional templates for assurance mapping and reporting to Board.
<b>Committee Meetings, Support and Information</b>	<b>Yes / No / NA</b>	<b>Comments</b>
The Committee has a designated secretariat	Yes	
The committee meets regularly, at least four times a year, and this is set out in the Terms of Reference.	Yes	Committee met three times in 2025/26: 20 May 2025, 28 August 2025 and 15 February 2026. The

		November meeting was cancelled due to a limited agenda and attendance.
The scheduling of those meetings is appropriate to meet the body's business and governance needs	Yes	Scheduled to fit the overall Board committee and risk reporting plan.
The length of Committee meetings is appropriate to allow the Committee to discharge its role.	Yes	2 hours is scheduled for each meeting.
Papers presented to the Committee are of a high standard and an effective format and ensure that members have access to appropriate information	Yes	Papers are in accordance with required templates and are continuously monitored for improvement
The Committee receives adequate information in relation to national policy and direction to enable it to fulfil its role and responsibilities.	Yes	There is an information flow via the Chief Executive, Directors and Board Chair for national policy and direction, for example the Blueprint for Good Governance in NHS Scotland.
The Committee agenda is well managed and ensures that all topics within the remit are considered.	Yes	The annual work plan provides the main structure, the Head of Corporate Governance has discussion with Board Chair and Chief Executive as required and pre-meetings with the Board Chair.
The agenda and papers are circulated in advance of meetings to allow adequate preparation by committee members and attendees.	Yes	Papers are circulated 5 working days in advance of the meeting as set out in the ToR, through 2025-2026 the Committee has continued with a flexible approach to verbal updates and late papers when needed.
Minutes are prepared and circulated as set out in the Terms of Reference.	Yes	
The Committee provides an effective annual report on its own activities.	Yes	An Annual Report is produced which is discussed and approved by the Chair and Committee members.
An action log/matters arising are well managed and indicate who is to perform what and by when.	Yes	An action log is maintained and managed with updates provided to each meeting.
<b>Committee Membership and Dynamics</b>	<b>Yes / No / NA</b>	<b>Comments</b>
Chair and Membership of the committee has been agreed by the NHS Board and a quorum set	Yes	The Chair of Committee is the Chair of the NHS Board. Membership is agreed by the NHS Board as the Chairs of the other Board standing governance committees. The quorum is set at three.

A Vice Chair of the Committee has been proposed by the Chair and agreed by Committee.	Yes	This is the Board Vice Chair.
Membership of the Committee is appropriate with the correct blend of skills, knowledge and experience.	Yes	Integrated Governance is made up of the chairs of the five other standing governance committees.
All members of the Committee contribute to its deliberations on an informed basis.	Yes	This is monitored by the Chair.
Committee members are offered an appropriate induction on joining and development opportunities to support them in undertaking their role.	Yes	An induction discussion takes place with the Board Chair for new members.
The leadership of the Committee by the Committee Chair is effective and supports input from all members.	Yes	
Committee members attend meetings on a regular basis and if not this is reported to the Board Chair for action.	Yes	Attendance is included in the annual report and is provided to Board Chair for Non-Executive annual appraisals. Through 2025/26: 3 members attended all 3 meetings; 3 members attended 2 meetings. There were no concerns from the attendance recorded.
The Accountable Officer and other senior officers normally attend the committee as considered appropriate, as noted in the terms of reference.	Yes	There was good attendance from ex officio members when required for relevant papers/discussion.
Support provided to the Committee by executives and senior management is appropriate.	Yes	Good support to the Committee is in place from all relevant areas with leads for specific programmes of work engaging with the Head of Corporate Governance as required.

## Annex A2 - Assurance Mapping

### (Review of papers submitted against the Integrated Governance Committee Remit 2025-2026)

Remit: To provide assurance -

- to the NHS Board that issues identified in specific governance Committees that may have an impact across the Board are discussed to thereby ensure joined up corporate governance.
- on matters that do not fit within a standalone governance committee model to enable cross-governance discussion and consideration; and
- on specific programmes of work across health and social care to monitor and scrutinise delivery on a regular basis where defined.

Duties as noted in Terms of Reference	20 May 2025	28 August 2025	18 November 2025 (Cancelled)	17 February 2026
The Committee shall be responsible for ensuring an integrated approach across all strands of governance within NHS Ayrshire and Arran.				
The specific responsibilities of the Integrated Governance Committee (IntGC) are to:				
Cross-cutting governance	✓	✓	✓	✓
Discuss and consider specific themes and issues relating to governance and risk that have implications for the Board's Governance Committees.	<ul style="list-style-type: none"> <li>• Strategic risks delegated to Committee plus a summary of NHSAA full strategic risk register</li> </ul>	<ul style="list-style-type: none"> <li>• Strategic Risks delegated to IntGC</li> </ul>	Meeting cancelled	<ul style="list-style-type: none"> <li>• Strategic Risks delegated to IntGC</li> </ul>
Review actions taken by the organisation on recommendations made by the Committee or the NHS Ayrshire & Arran Board on all governance matters, through routine monitoring of progress against actions.	<ul style="list-style-type: none"> <li>• Integrated Governance Committee (IntGC) annual assurance report 2025-2026</li> </ul>			<ul style="list-style-type: none"> <li>• IntGC meeting dates 2026/27</li> </ul>
Consider and scrutinise the health system's compliance with relevant legislation and performance against national standards with regards to governance.	<ul style="list-style-type: none"> <li>• NHSAA Governance committee work plans 2025-2026</li> </ul>			<ul style="list-style-type: none"> <li>• IntGC Terms of Reference annual review and updates</li> </ul>
Provide assurance to the NHS Board on governance issues that have application across Ayrshire and Arran and when required on specific programmes of work across health and social care to monitor and scrutinise delivery on a regular basis.				<ul style="list-style-type: none"> <li>• NHS Ayrshire &amp; Arran Draft internal audit plan for 2026-27</li> </ul>

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- on specific programmes of work across health and social care to monitor and scrutinise delivery on a regular basis where defined.

Duties as noted in Terms of Reference	20 May 2025	28 August 2025	18 November 2025 (Cancelled)	17 February 2026
Agreed programmes of work 2025-2026	✓	✓		✓
<ul style="list-style-type: none"> <li>• Caring for Ayrshire</li> </ul>	<ul style="list-style-type: none"> <li>• Verbal update on CFA and reform programme</li> </ul>	<ul style="list-style-type: none"> <li>• No update due to ongoing discussions on programme delivery</li> </ul>		<ul style="list-style-type: none"> <li>• No update due to ongoing discussions on programme delivery</li> </ul>
<ul style="list-style-type: none"> <li>• Community Wealth Building (CWB) assurance</li> </ul>	<ul style="list-style-type: none"> <li>• CWB assurance update</li> </ul>	<ul style="list-style-type: none"> <li>• CWB assurance update</li> </ul>		<ul style="list-style-type: none"> <li>• CWB assurance update</li> </ul>
<ul style="list-style-type: none"> <li>• Climate Change and Sustainability (6 monthly reporting)</li> </ul>	<ul style="list-style-type: none"> <li>• Climate Emergency and Sustainability Update</li> </ul>	<ul style="list-style-type: none"> <li>• NA</li> </ul>		<ul style="list-style-type: none"> <li>• Climate Emergency and Sustainability Update (deferred from November meeting)</li> </ul>
<ul style="list-style-type: none"> <li>• Organisation Resilience<sup>1</sup> (Annual reporting)</li> </ul>	<ul style="list-style-type: none"> <li>• Not available</li> </ul>	<ul style="list-style-type: none"> <li>• Not available</li> </ul>		<ul style="list-style-type: none"> <li>• Not available</li> </ul>
<ul style="list-style-type: none"> <li>• Digital strategy and reform assurance (6 monthly reporting)</li> </ul>	<ul style="list-style-type: none"> <li>• NA</li> </ul>	<ul style="list-style-type: none"> <li>• Digital strategy and reform assurance report</li> </ul>		<ul style="list-style-type: none"> <li>• Digital strategy and reform assurance report</li> </ul>
<ul style="list-style-type: none"> <li>• Corporate parenting strategy (Annual reporting)</li> </ul>	<ul style="list-style-type: none"> <li>• NA</li> </ul>	<ul style="list-style-type: none"> <li>• NA</li> </ul>		<ul style="list-style-type: none"> <li>• Corporate Parenting annual assurance report</li> </ul>
<ul style="list-style-type: none"> <li>• To monitor and review strategic risks falling within Committee remit</li> </ul>	<ul style="list-style-type: none"> <li>• Strategic Risks delegated to IntGC</li> </ul>	<ul style="list-style-type: none"> <li>• Strategic Risks delegated to IntGC</li> </ul>		<ul style="list-style-type: none"> <li>• Strategic Risks delegated to IntGC</li> </ul>
<ul style="list-style-type: none"> <li>• To review internal audit reports aligned to the Committee</li> </ul>	<ul style="list-style-type: none"> <li>• Business continuity</li> </ul>	<ul style="list-style-type: none"> <li>• No reports</li> </ul>	<ul style="list-style-type: none"> <li>• Business continuity actions update</li> </ul>	

Notes: <sup>1</sup> Reporting not yet possible as reporting KPIs not yet agreed. Assurance given that Organisational Resilience reporting on KPIs that are being agreed with updates sought from Directors, will be provided to the November 2026 meeting.

## Annex A3 - Integrated Governance Committee reporting to NHS Ayrshire & Arran Board 2025-2026

Reporting duties	20 May 2025	28 August 2025	18 November 2025 (Cancelled)	17 February 2026
Reporting action to the NHSAA Board	<p>Key items reported:</p> <ul style="list-style-type: none"> <li>• Strategic risk register: Members ongoing scrutiny of strategic risks relating to sustainability through reform (Caring for Ayrshire) and Digital Services. Members were assured by progress with mitigating actions and ongoing review arrangements. Welcomed the summary report of the full Strategic Risk Register</li> <li>• Members approved the Committee Annual Report 2024–2025 for onward submission to the NHS Board.</li> <li>• Members discussed Internal Audit on Business Continuity Planning. Assured by progress against recommendations and agreed revised timelines for completion.</li> <li>• Received a six month update on Climate Emergency and Sustainability and Members were assured by continued progress against key deliverables within the Sustainability Strategy.</li> </ul>	<p>Key items reported:</p> <ul style="list-style-type: none"> <li>• Strategic Risk Register - ongoing scrutiny of strategic risks relating to Caring for Ayrshire and Digital Services. Committee was assured by the breadth of activity and strengthened focus on both short- and longer-term mitigation.</li> <li>• Digital Strategy and Reform: Members welcomed improved reporting format, enabling clearer oversight of strategic programmes, commissioned projects, and operational delivery. Members were assured by progress and governance arrangements.</li> <li>• Received an update on Community Wealth Building and Members were assured by positive progress across workstreams, with emerging community benefits noted. In relation to Apprenticeships Members encouraged further development to support organisational and community wealth building objectives.</li> </ul>	None as meeting cancelled	<p>Key items reported:</p> <ul style="list-style-type: none"> <li>• Strategic Risk Register: Ongoing scrutiny of strategic risks relating to Caring for Ayrshire and Digital Services, noting planned evolution of the risk profile. Members were assured by progress and ongoing improvements to risk reporting arrangements.</li> <li>• Digital Strategy and Reform: Members were assured by progress across programmes, including clear identification of areas not on track and associated recovery actions.</li> <li>• Received the Community Wealth Building Annual assurance report for Year 3. Members noted continued progress and alignment with national policy developments.</li> <li>• Annual report on Corporate Parenting: Members supported the updated governance arrangements outlined and were assured by the programme approach and ongoing oversight arrangements to support delivery of statutory duties.</li> </ul>

## Annex A3 - Integrated Governance Committee reporting to NHS Ayrshire & Arran Board 2025-2026

Reporting duties	20 May 2025	28 August 2025	18 November 2025 (Cancelled)	17 February 2026
Confirmed that these were brought to the NHSAA Board	Y Integrated Governance Annual Report 2024/25 submitted to NHS Board on 2 June	Y	NA	Y Community Wealth Building Year 3 report submitted to NHS Board on 7 April