NHS Ayrshire & Arran

Meeting:	**Ayrshire and Arran NHS Board**
Meeting date:	**Monday 10 August 2026**
Title:	**Performance Governance Committee meeting on 30 July 2026 – Chair's report to NHS Board**
Responsible Director:	**David Stonehouse, Interim Director of Finance**
Report Author:	**Linda Semple, Committee Vice 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.

This supports the following Corporate Objective:

- Better Value – Delivering innovative and sustainable services for everyone. 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.

- Both the Performance Management Report and the Strategic Risk register have been reframed and now provide coherent links to the deep dives for both performance and best value. This shows good governance and enables members to clearly see the lines of communication from the Financial Management Report to all the different pieces of work reported through the best value savings plan.

- As mentioned above, members received the new format of the Strategic Risk register and the risks related to Performance Governance were reviewed. The detail supporting risk mitigation sits operationally and are discussed within the relevant committees. Lead Directors will articulate this verbally as and when required as part of board discussion of the overall risk register.

- Members were assured from the performance and best value deep dives which were presented at the meeting which showed what is happening within the services in terms of quality and efficiency improvement.

- The 15 box grid was interrogated by members and cognisance was taken from the benchmarking provided within the report.

- Members were assured regarding the process for best value for going forward and recognition was given to the fact that additional savings are required in year. Assurance was given that the team are progressing with establishing additional targets to enable the gap to be closed and are looking to accelerate some areas flagged for year two and beyond.

2.4 Recommendation

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