

Approved Minutes

Finance and Performance Committee Thursday 13 November 2025, 14:00 hours MS Teams Meeting

Members

Stephen McAllister	Non-Executive Director (<i>Chair</i>)
Callum Blackburn	Non-Executive Director
David McClelland	Non-Executive Director
Jane Christie-Flight	Employee Director
Lindsay Macdonald	Non-Executive Director
Rebecca Maxwell	Non-Executive Director
Steve Plummer	Non-Executive Director

Core Attendees

Carole Anderson	Executive Director of Transformation, Strategy, Planning and Performance
Carolynne O'Connor	Chief Executive
Jonny Gamble	Executive Director of Finance
Lynne Ayton	Executive Director of Operations

In Attendance

Graham Stewart	Deputy Director of Finance
John Scott	Director of Facilities and Capital Projects (Item 4,3)
Mark MacGregor	Executive Medical Director (Item 4.4)
Nicki Hamer	Head of Corporate Governance and Board Secretary
Stuart Burnside	Incoming Employee Director
Susan Douglas-Scott	Board Chair
Zaid Tariq	Deputy Director of Quality, Performance, Planning and Programmes

Minutes

Tracey Wark	Senior Corporate Administrator
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1 Opening Remarks

1.1 Wellbeing Pause and Chair's Introductory Remarks

The Chair opened the meeting and extended a warm welcome to David McClelland and Steve Plummer to their first meeting and all participated in a Wellbeing Pause.

The Committee offered their congratulations to Jonny Gamble and commended the Finance Team who were recently awarded Finance Team of the Year.

1.2 Apologies

No apologies had been received.

1.3 Declarations of Interest

There were no declarations of interest to note.

2. Content Agenda Items – Approval Only

There were no items for approval.

3 Updates from last meeting 13 August 2025

3.1 Unapproved Minutes

Minutes from the meeting held on 13 August 2025 were approved as an accurate record.

3.2 Action Log

Jonny Gamble advised that the action related to discussion on the 2025/26 savings plans had been an agenda item at the Board Seminar of 2 October 2025. The Committee agreed to close this action.

Finance and Performance Committee approved the Action Log.

3.3 Matters Arising

There were no matters arising.

4. Operational/Financial Performance Review

4.1 Operational Performance - Month 5

Lynne Ayton provided an update on the Operational Performance for Month 5 (August 2025) and highlighted that Heart and Lung activity was 1.1% behind plan with National Elective Services and Diagnostics ahead 12% and 9% respectively.

Some of the successes noted:

- 31 day lung cancer target had been maintained at 100%.
- The third CT scanner had been installed early with the first patient scanned in August 2025.
- Additional Electrophysiology weekend activity had commenced to address the >52 week position.
- Overperformance in Cataracts with an additional 1,213 procedures being carried out.
- Four joint rate increased in M5 by 6% to 60%.
- 97.3% theatre utilisation in colorectal surgery.
- Theatre improvement work included replacement of pendant lights in Theatres 5 and 7; refurbishment of Theatre changing rooms; establishment of the

Theatre Governance Framework and cardiac nursing team sickness absence reduced to 6%, thereby reducing agency use.

- Successful NECU Campaign in Orthopaedic administration validations, resulted in 3,616 patients being contacted with a removal rate of 4%.

Some of the challenges noted:

- Reaching the target of no patients waiting more than 52 weeks.
- Orthopaedic patients referred >52 weeks appear as NHS GJ breaches

Heart, Lung and Diagnostics

Cardiac activity was reported at 3% over performance in month and 0.5% behind year to date. At the end of Month Five, nineteen transplants had been performed with a total of 20 year to date at Month 7. Thoracic surgery activity was ahead of plan by 12% and Radiology by 12%. The 31 day Lung Cancer target had been maintained at 100%. Thoracic DOSA reported an improved position at 65% with Cardiac DOSA at 18.4%, a modest reduction from Month Four.

National Elective Services

Lynne Ayton reported that National Elective Services (NES) was 12% ahead of target at the end of Month Five. Orthopaedics was five percent behind in Month and six percent year to date, with a recovery plan agreed.

Foot and ankle activity was 40% behind in month, mainly due to long term absence of a Foot and Ankle surgeon and Arthroplasty surgeon availability.

General surgery was reported at 71% ahead and 21% year to date. Endoscopy activity was reported at 8% ahead in month and two percent year to date. Ophthalmology was 18% ahead in month and 38% year to date. The Committee noted the challenges with Ophthalmology referrals >52 weeks being reported incorrectly as breaches and were assured discussions were underway with Scottish Government to agree appropriate narrative and reporting.

The Patient Coordination Centre Management Restructure had been introduced to improve resilience to the department.

Treatment Time Guarantee (TTG) and Outpatient Waiting Times

Outpatients 12 weeks target of 90% was ahead at 92.3%. A weekly review of the position had been included in the return to Scottish Government with additional activity agreed from Month 7.

Electrophysiology (EP) reported 399 patients on the Patient Tracking List with ongoing weekly scrutiny through the Chief Executive and Chair's report to Scottish Government. The Committee was pleased to note additional EP weekend activity had commenced to address the >52 week position.

Carolynne O'Connor clarified that EP was an area of focus with the Scottish Government pledge for no one waiting over 52 weeks by March next year. It was recognised this was a challenging area and the Executive Leadership Team had

funded a plan to support delivery, but this would not be without risks and any major risks would be highlighted.

The Scottish Adult Congenital Cardiac Service (SACCS) pause in service continued with limited surgical and Catheterisation Laboratory (Cath Lab) interventional activity. The External Review report has been delayed and was expected early November 2025.

The Committee thanked Lynne Ayton for a very clear presentation and commended all involved for their hard work and achievements.

Finance and Performance Committee approved the Operational Performance Report.

4.2 Financial Summary Report – Month 5

Jonny Gamble highlighted that the financial position year to date at Month Five showed a £1.140m surplus with a breakeven forecast position at year end. As discussed at the recent Board Seminar and highlighted within the Operational Performance, NHS GJ was over delivering on the Annual Delivery Plan whilst underspending against plan, demonstrating improved year on year efficiency.

Jonny Gamble provided an update on the financial risks stating that the Transcatheter Aortic Valve Implantation (TAVI) funding had been resolved, with the SACCS service funding and the West of Scotland Service Level Agreement (SLA) uplift outstanding.

Jonny Gamble advised that in capital spend had been slow to start for the 2025/26 Phase Two works. Overall in capital plans were underway to progress this with weekly monitoring of spend being escalated as required. The Committee noted that procurement processes had been slowed due to requirements to procure nationally.

Finance and Performance Committee approved the Financial Summary Report – Month Five Report.

4.3 Capital Plan 2025/26

Jonny Gamble reported the importance of ensuring plans were delivered within the financial year and provided assurance that controls were in place to ensure this would be achieved.

Jonny Gamble advised that the Strategic Capital Planning Group had agreed on the areas of commitment for Capital spend, including Phase Two development, medical equipment, multi-year commitments and areas of sustainability.

Jonny Gamble highlighted the current total funding of £19.2m and outlined the summary of the movement from the agreed plan. He explained that NHS GJ had been successful in bids to the National Investment Board (NIC) who had awarded a further £1.8m in funding. This would specifically fund the final four Heart and Lung machines and fast tracking of Cath Lab Four. It was noted that funding for Phase Two was ring fenced and had been reduced in line with the expenditure forecast.

The Committee noted the summary of funding allocated and were assured by the controls in place around risks of failure within quality, patient care, workforce and financial.

Jonny Gamble drew attention to the pipeline projects which had been approved by the Strategic Capital Projects Group

Lindsay Macdonald complimented Jonny Gamble on the submitted report and asked if there were plans to seek further capital funding for beyond life assets. Jonny Gamble advised that discussions were ongoing with Scottish Government.

Finance and Performance Committee approved the Capital Position 2025/26 update.

Core Decarbonisation Capital Funding

The Committee welcomed John Scott to the meeting to present the Core Decarbonisation Capital Funding update.

John Scott explained the Scottish Government's Health and Social Care Directorates outlined funding plans, governance and planning requirements for NHS Scotland Boards to support energy efficiency and decarbonisation in the 2026/27 financial year and beyond.

The Committee were advised that NHS GJ's share of the funding amounted to 1.8% of £10m in scenario one and 1.8% of £20m in scenario two, thereby £180k and £360k respectively. NHS GJ was required to submit a high level plan by the end of November 2025, subject to ELT approval and a final Board approved plan by the end of January 2026.

John Scott outlined details of two power purchase agreements which were under discussion.

The Committee noted the current funding for 2025/26 projects which included Electronically Commutated (EC) fans, Light-Emitting Diode (LED) lighting, sub metering for electricity, Electric Vehicle (EV) charging stations and a building energy management system.

Finance and Performance Committee noted the Core Decarbonisation Capital Funding update.

Business Continuity Plan

John Scott advised the Infrastructure Business Continuity Plan would be submitted and outlined some of the challenges within the Plan, including processes around risk assessment and risk impact and how these could be prioritised.

Finance and Performance Committee noted the Business Continuity Plan.

4.4 Golden Jubilee Research Institute Mid-Year Report

The Committee welcomed Mark MacGregor, Executive Medical Director, to the meeting to present an update from NHS GJ Research Institute and commended the income performance which had exceeded the mid-year target by 20%, despite Research Project Approvals and participant recruitment being slightly below target.

Mark MacGregor advised 17 research projects had been approved, 341 participants had been recruited, invoiced income was £897k, which exceeded the six month target of £750k. Five research project audits had been completed, sickness absence remained low and TURAS completion rates had increased to over 80%.

The Committee noted there had been three incidents related to office security which were under review.

Stephen McAllister commended the strong operational efficiency in research delivery and financial management.

Finance and Performance Committee approved NHS Golden Jubilee Research Institute Mid-Year Review.

4.5 Whole System Infrastructure Planning Update

The Committee welcomed the Whole System Infrastructure Planning update provided by Carole Anderson and noted NHS Boards were required to submit up to three priority proposals between 2026 and early 2027 to support long-term service transformation.

The Committee commended the work to date and were advised that Carole Anderson would lead this work with Executive colleagues.

Finance and Performance Committee approved the Whole System Infrastructure Planning Update.

5 Strategic Planning Update

5.1 Annual Delivery Plan Update Quarter Two Update

Zaid Tariq presented the Annual Delivery Plan (ADP) Quarter Two update for 2025/26 and advised that the ADP was monitored through the Delivery Planning template and quarterly reporting to Scottish Government was no longer required.

Zaid Tariq provided an overview of the 12 deliverables. Eight had green status and four amber with none reported as red status. A further improvement was forecast for Quarter Three, projecting 11 green and one amber status.

Carolynne O'Connor thanked Zaid Tariq for a very detailed and clear presentation. Carole Anderson provided assurance around the impact on any vulnerabilities around cyber security and highlighted that regular scrutiny and updates were provided through the Digital Steering Group. Jonny Gamble advised a risk paper would be submitted to the November 2025 Audit and Risk Committee.

Stephen McAllister commended the detail within the report and welcomed the inclusion of comparative data from previous periods.

Finance and Performance Committee discussed the Annual Delivery Plan Update Quarter Two Update.

5.2 Climate Emergency Sustainability Annual Report

Carole Anderson presented the Climate Emergency Sustainability Annual Report (CESAR) explaining that NHS Scotland Boards had a duty to publish an annual account which collectively provided information and data used to compile the NHS Scotland Annual Report.

The Committee received a detailed overview of the key points, including total carbon emission comparisons year on year. New details within the report included supply chain, patient travel and staff commuting detail. Site waste comparisons reported improvements across various waste categories.

Carole Anderson highlighted the delivery of the Climate Change and Sustainability work plans would reduce spend on energy use and waste management. Delivery risks were assessed within the overall Programme governance structure.

It was noted that the new Greenspace and Biodiversity Sub Group had been established to support the Climate Change and Sustainability Strategic Group (CCSSG) and NHS GJ staff were engaged in a variety of work plans.

Carole Anderson commended Fergal McCauley, Sustainability Manager, for his work to date on developing the report and to the Communications Team for formatting and designing the report. Callum Blackburn also praised the work completed to date.

Carole Anderson commented on the ongoing work to develop zonal areas to further improve sustainability, for example trials underway to switch off heating and other systems in wider areas, but there remained areas where this would not be feasible. Another consideration would be further improvements to waste management segregation as part of the Surgical and Diagnostic Centre.

The Committee noted the scoping work being undertaken regarding installation of additional electric vehicle points, sustainable travel and procurement.

Financial and Performance Committee approved the Climate Emergency Sustainability Annual Report 2024/25.

5.3 Public Bodies Climate Change Duties Report 2024/25

Carole Anderson outlined the salient points of the report explaining that it was a mandatory requirement for all public sector bodies to submit an annual report by the end of November after the reporting year.

A new Greenspace and Biodiversity Sub Group had been introduced to support CCSSG. Carbon emissions had increased by 10.27% between 2023/24 and

2024/25, with the highest emissions from some medical gases, business travel and building energy, due to the opening of the new Surgical Centre.

The Committee reviewed the detailed report and recognised the ongoing work to reduce and mitigate risk and impact across the site. Work was ongoing in Procurement to understand how climate change related to the supply chain. Carole Anderson highlighted the wider influence of partnership working with other establishments and Universities to further progress this work.

Callum Blackburn commended the report and work to date.

Finance and Performance Committee approved the Public Bodies Climate Change Duties Report 2024/25.

6. Corporate Governance

6.1 Strategic Risk Register

Jonny Gamble presented the Strategic Risk Register and referenced the discussion held at Board Seminar on risk appetite work and advised on the ongoing work. In addition, the Executive Leadership Team Risk Group would continue to collectively assess each risk, which supported a better understanding on the strategic risk position for the organisation.

Jonny Gamble advised there were 8 risks for the Committee with no new risks added in the period. The main updates included Risk SR244, Capital Infrastructure had reduced, Risk 252 financial risk for 2025/26 had been reduced from 15 to 10 and Risk B001/22 Laboratory Services IT system risk had reached its target score, which would be retained until user acceptance testing had been completed.

The Committee was pleased to note that three risks had been de-escalated from the Strategic Risk Register to the Divisional Risk Register: SR-245 Health and Safety, DR-232 NORS Retrieval Services and B004/22 CfSD Commitment to NHS Scotland Recovery.

Finance and Performance Committee approved the Strategic Risk Register.

6.2 NHS Scotland Academy Financial Six Monthly Update

Jonny Gamble presented the NHS Scotland Academy (The Academy) Financial 6 Monthly Report as at 30 September 2025.

The Academy had reported a £134k underspend at Month 6 and was forecasting a full year underspend of £275k. This was mainly due to changes and delays in recruitment for core academy support and a reduction in travel and consumables for courses. There were plans to use the underspend for additional supervision payments and clinical leadership for the Cataract Programme.

The Committee were advised that Scottish Government Planned Care Directorate had confirmed, in writing for 2025/26, recurring funding of £522k for National Ultrasound Training Programme (NUTP) and £51k non-recurring for refurbishment.

Finance and Performance Committee approved the NHS Scotland Academy Six Monthly Update.

6.3 Centre for Sustainable Delivery Six Monthly Update

Jonny Gamble presented the Centre for Sustainable Delivery (CfSD) Financial Six Monthly Report as at 30 September 2025.

CfSD was forecasting a £739k underspend, mainly due to vacancies within the teams. Scottish Government Policy team would process £125k of the underspend for return for the Clinical Laboratory Science (CLS) Programme, leaving a balance of £614k to be allocated to additional programmes that could be achieved by March 2026 or the underspend would require to be returned.

It was noted that Scottish Government had confirmed a transfer of CfSD budget to cover the costs of the Advanced National Innovation Adoption (ANIA) programme overspend.

Finance and Performance Committee approved the Centre for Sustainable Delivery Six Monthly Update.

7 Consent Agenda Items – For Awareness Only

There were no Consent Agenda Items presented for awareness.

8 Update to the Board

The Committee reflected on the excellent operational performance, whilst noting the third CT scanner had been installed early, with the first patient scanned in August 2025. The SACCS pause in service continued with limited surgical and Cath Lab interventional activity. The External Review report had been delayed and was expected early November 2025.

The Committee was pleased to note additional EP weekend activity had commenced to address the >52 week position.

The Committee noted the challenges with Ophthalmology referrals >52 weeks being reported incorrectly as breaches and were assured discussions were underway with Scottish Government to agree appropriate narrative and reporting.

The Committee welcomed an update from NHS GJ Research Institute and commended the income performance which had exceeded the mid-year target by 20%, despite Research Project Approvals and participant recruitment being slightly below target.

The Committee welcomed the Whole System Infrastructure Planning update and noted NHS Boards were required to submit up to three priority proposals between 2026 and early 2027 to support long-term service transformation.

The Committee approved the Financial Summary Report for Month 5 2025/2026.

The Committee approved the Capital Position 2025/26.

The Committee approved the Climate Emergency Sustainability Annual Report 2024/25.

The Committee approved the Public Bodies Climate Change Duties Report 2024/25.

The Committee approved the Strategic Risk Register.

The Committee approved both the NHSSA and the CfSD Financial 6 Monthly reports.

9. Any Other Competent Business

None.

10. Date and Time of Next Meeting

Thursday 12 February 2026, 14:00-16:00, MS Teams.