

## Approved Minutes

**Meeting: NHS Golden Jubilee Public Board Meeting**

**Date: Thursday 27 November 2025, 10:00**

**Venue: Level 5 East Boardroom/MS Teams**

### Members

|                         |  |
|-------------------------|--|
| Susan Douglas-Scott CBE | Board Chair  |
| Anne Marie Cavanagh     | Executive Director of Nursing  |
| Callum Blackburn        | Non-Executive Director   |
| Carole Anderson         | Executive Director of Transformation, Strategy, Planning and Performance |
| Carolynne O'Connor      | Chief Executive  |
| David McClelland        | Non-Executive Director   |
| Jane Christie-Flight    | Employee Director/Non-Executive Director                                 |
| Linda Semple            | Non-Executive Director   |
| Lindsay Macdonald       | Non-Executive Director   |
| Lynne Ayton             | Executive Director of Operations   |
| Mark MacGregor          | Executive Medical Director   |
| Rebecca Maxwell         | Non-Executive Director   |
| Rob Moore               | Non-Executive Director   |
| Stephen McAllister      | Non-Executive Director (Vice Chair)                                      |
| Steve Plummer           | Non-Executive Director   |

### In Attendance

|                 |  |
|-----------------|--|
| Graham Stewart  | Deputy Director of Finance   |
| Jenny Pope      | Deputy Director of People and Culture  |
| Nicki Hamer     | Head of Corporate Governance and Board Secretary                               |
| Sandie Scott    | Director of Strategic Communications and Stakeholder Engagement (via MS Teams) |
| Stuart Burnside | Incoming Employee Director   |

### Apologies

|              |   |
|--------------|---|
| Jonny Gamble | Executive Director of Finance                                   |
| Laura Smith  | Deputy Chief Executive/Executive Director of People and Culture |

### Minutes

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| Christine Nelson | Deputy Head of Corporate Governance |
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## 1 Opening Remarks

### 1.1 Chair's Introductory Remarks

Susan Douglas-Scott had been delayed, therefore Stephen McAllister opened the meeting with a wellbeing pause and on behalf of the Board, expressed gratitude and thanks to all NHS Golden Jubilee (NHS GJ) Staff who work tirelessly over the festive season.

Susan Douglas-Scott joined the meeting and welcomed Steve Plummer and David McClelland to their first official Board meeting as Non-Executive Directors, as well as welcoming Jenny Pope, Deputy Director of People and Culture, deputising for Laura Smith, and Graham Stewart, Deputy Director of Finance, deputising for Jonny Gamble.

Susan Douglas-Scott welcomed Stuart Burnside as incoming Employee Director and noted the meeting was the last Board meeting Jane Christie-Flight would attend prior to retiring on 31 December 2025.

Susan Douglas Scott provided an overview of the highlights since the previous meeting as follows:

- NHS GJ Chairs met with the Cabinet Secretary on 10 September 2025.
- The annual School Careers Information evening had been held on 16 September 2025. Once more, several teams and professions were represented at the event, which had been very well attended by senior school pupils and Careers Advisors from the local area.
- Susan Douglas-Scott attended the Chairs Away Day Development Sessions, hosted by NHS GJ Conference Hotel.
- Several Board members attended the launch of the NHS GJ Anti-Racism Plan, led by Dr Gwenetta Curry from University of Edinburgh, which had been a very positive and interesting session.
- Susan Douglas-Scott attended a Briefing on the Reform Agenda and the NHS GJ Allied Health Professions Conference and had been the keynote speaker at the NHS Scotland Disability Leadership Event.
- The NHS GJ Ministerial Review had been held on 3 November 2025 which ran smoothly and positive feedback had been received.
- Several Board Members attended the NHS GJ Staff awards, where many NHS GJ employees and teams were recognised and celebrated.

## **1.2 Apologies**

Apologies were noted above.

## **1.3 Declarations of Interest**

There were no changes to the standing declarations of interest.

## **1.4 Matters Arising**

There were no matters arising.

## **1.5 Chief Executive Update**

Carolynne O'Connor reported the following highlights:

- Attendance at the Board Chief Executives (BCE) Meeting which included Planned Care Meetings with a focus on delivery of reduction of waiting lists, which remained challenging. Carolynne O'Connor highlighted that NHS GJ held the waiting list for Ophthalmology and were working on ensuring clarity on how the requirement could be delivered by 31 March 2026.
- NHS GJ Annual Review had been held. Feedback had been very positive in relation to financial position, patient care and performance
- West of Scotland Chief Executives meetings were due to be reviewed in light of the Sub National Planning Groups Development.
- Elective Care Transformation Framework was in progress with proposal and proposed operational matters being discussed. There had been some concern around the implication for Health Boards. Carolynne O'Connor was due to present at BCE meeting on 10 December 2025.
- Sub National Planning work was ongoing with a requirement for NHS GJ to identify how implications for Health Boards and a focus on Comms around this was being developed.
- Attendance at the Scottish Approach to Change Launch Event
- Introductory meetings were held with Peter Heslett, Chief Executive, West Dunbartonshire Council and Brian Forbes, AstraZeneca to discuss further partnership working.

Within NHS GJ, the following highlights were shared:

- Health Improvement Scotland (HIS) unannounced inspection took place with one recommendation being made relating to upgrading of the Estate. This was being progressed.
- Human Tissue Authority Inspection took place. No formal feedback had been received to date but there had been no issues highlighted on the day.
- Attended the AHP Conference 2025 which had been an excellent with some great examples of developments in service and future proposals.
- Attended Our People Awards 2024/25 had been an excellent event with over 240 nominations being received. Carolynne O'Connor expressed congratulations to all the winners.
- Monthly All Staff Sessions continued with approximately 200 attending each session. Ways to include more staff were being considered.
- The Orthopaedics Away Day had been an excellent event with some efficiencies for delivery being identified and work was underway to realise these.
- West College Scotland Executives Visited NHS GJ to discuss how more workforce collaboration could be realised, ideas for sustainability and a potential joint careers event being held.
- Executive Development Sessions continued to be held regularly with discussions that included Succession Planning.

The following events had been recognised by NHS GJ:

- Armistice Day

- Speak Up Week
- Cyber Security Month
- Fraud Awareness Week
- Organ Donation Week
- World Kindness Day
- Antimicrobial Awareness Week
- King's Trust visit to NHS Scotland Academy

Carolynne O'Connor highlighted the following celebrations or upcoming events within NHS GJ:

- NHS GJ Finance Team Award
- Scotland Radiography Team of the Year 2025 Award
- Volunteers Celebration – 5 December
- Christmas Market – 9 December

Carolynne O'Connor highlighted the following celebrations and successes in relation to the Golden Jubilee Conference Hotel:

- Winners of the Sustainability Award for November 2025.
- The Director for the Hotel had been voted in as the European Chair for IACC from 1 January 2026 to 31 December 2028
- The Hotel won the tender to host the Summer School for Strathclyde University for summer 2026 with two cohorts and the tender to host the Audi International Conference.

Susan Douglas-Scott reflected on the hard work being undertaken by the Executive Team in relation to the elective transformation work with Scottish Government and noted the required cultural change and collaboration with NHS Boards across Scotland.

## **2.0 Consent Agenda Items – Approval Only**

Susan Douglas-Scott highlighted the Consent Agenda Items which had been presented to the Board for Approval and provided assurance that these items had been approved through the relevant Governance Committees.

- 2.1 Whistleblowing Quarter Two Report
- 2.2 Health and Safety Quarter Two Report
- 2.3 Health and Care Staffing Programme Quarter Two Report
- 2.4 Whole System Infrastructure Planning Update
- 2.5 Board Performance Report
- 2.6 Centre for Sustainable Delivery Financial 6 Monthly Update
- 2.7 NHS Scotland Academy Financial 6 Monthly Update
- 2.8 Feedback Quarter Two Report
- 2.9 Corporate Governance Quarter Two Report

## **3.0 Governance**

## **3.1 Board**

### **3.1.1 Unapproved Minutes from 28 August 2025 Board Meeting**

The Board approved the minutes of the meeting held on 28 August 2025.

### **3.1.2 Board Action Log**

There were no outstanding actions for discussion.

## **3.2 Clinical Governance**

### **3.2.1 Clinical Governance Performance Report as at Month Five**

Anne Marie Cavanagh presented the Clinical Governance Performance Report for Month Five, reporting a limited level of assurance for stage one and two complaints with 100% of stage one complaints and 17% of stage two complaints responded to within control limits (only one of six had been responded to within the required timescale). An action plan to recover this position would be presented at the next meeting.

Anne Marie Cavanagh reported there had been one instance of Methicillin-Resistant Staphylococcus Aurus (MRSA) and three cases of Clostridium Difficile Infection (CDiff) reported, with moderate assurance being recorded for the quarter. Each case was being investigated and no patient to patient transfer had occurred.

The Board approved the Clinical Governance Performance Report Update.

### **3.2.2 Healthcare Associated Infection Report**

Anne Marie Cavanagh presented the Healthcare Associated Infection Report (HAIRT), advising there had been one Surgical Site Infection but no escalation had been required.

Hand Hygiene compliance was reported at 94% which was a reduction from 98% previously reported. Steps were being taken to further improve compliance.

The winter vaccination programme continued with a positive uptake being noted.

An unannounced Safe Delivery of Care Acute Inspection took place on 2 September 2025. The outcome report would be discussed during a future governance cycle, but the high level of care and compassion experienced within NHS GJ had been highlighted.

The Board approved the Healthcare Associated Infection Report Update.

### **3.2.3 Clinical Governance Committee Update**

Linda Semple presented the Clinical Governance Committee Update from November 2025, noting the Committee had expressed concern on SAERS not being managed timeously and had requested progress was prioritised and an update provided at the February 2026 meeting.

Linda Semple advised that Mo Asif, Consultant Thoracic Surgeon had provided an update on the service provision for Thoracic Care which the Committee had found very interesting and had commended the service on improvements made which had resulted in significant impact in patient outcomes.

The Board noted the Clinical Governance Committee Update.

### **3.2.4 Clinical Education Annual Report**

Anne Marie Cavanagh presented the Clinical Education Annual Report which had been undertaken to ensure objectives within the Clinical Education Strategy had been met and provided insight into the performance of NHS GJ Medical Practitioners.

Anne Marie Cavanagh highlighted the success of the International Nurse Recruitment which had ensured a complete wraparound and holistic approach to the programme.

The Board reflected on the excellent outcomes achieved and asked how feedback from Centre for Sustainable Delivery (CfSD), NHS Scotland Academy (NHSSA) and the Research Institute had been incorporated into the report. Anne Marie Cavanagh advised that the aforementioned areas produced their own reports but evidence of collaboration could be seen. Despite being a research rich organisation, NHS GJ did not conduct a lot of practice based research currently. Discussions were underway with University of Strathclyde to identify areas for collaboration.

Mark MacGregor advised of a change in the structure for revalidation of Pharmacists, part of which included research, which was increasing interest.

The Board approved the Clinical Education Annual Report.

## **3.3 Staff Governance**

### **3.3.1 Staff Governance Performance Report as at Month Five**

Jenny Pope presented the Staff Governance Performance Report for Month Five.

NHS GJ Board noted the sickness absence rate of 7.5%, 0.4% higher than the previous month. The rolling 12 month sickness absence rate rose by 0.1% to 6.4%. Absence due to anxiety/stress/depression or other psychiatric illness had increased by 0.9% to 32.0%.

Turnover was reported at 0.6%, with the rolling turnover remaining at 7.4%. Agenda for Change appraisal was reported at 65.7% and 131 doctors out of 134 (97.8%) had a completed appraisal.

Stephen McAllister highlighted concern across NHS Scotland over the rate of absence, stressed the importance to identify reasons for the increase and noted the potential impact on operational delivery. Carolynne O'Connor agreed this area required further focus and advised that the HR Team were working on improvements and additional support for Managers and Teams.

Jenny Pope advised that more in depth discussions were planned to take place with Executive Leadership Team and Staff Governance and Person Centred Committee.

The Board discussed the absence category of other causes – unknown and whether further information could be identified.

David McClelland asked how NHS GJ's absence rate compared to other Health Boards.

Jane Christie-Flight highlighted that absence figures in Scotland were higher than England and it may be prudent to review how the policy was presented. Mark MacGregor noted that definitions could vary between Scotland and England.

The Board approved the Staff Governance Performance Report for Month Five.

### **3.3.2 Staff Governance and Person-Centred Committee Update**

Rob Moore presented the Staff Governance and Person Centred Committee Update from the November 2025 meeting, noting there had been lots of areas to cover during the meeting and positive comments had been made regarding the quality and clarity of papers provided.

Rob Moore noted that the Committee had welcomed new Non-Executive Directors to the meeting and had thanked Jane Christie-Flight for her service.

The Board noted the Staff Governance and Person Centred Committee Update.

## **3.4 Finance and Performance**

### **3.4.1 Operational Performance – Month Five**

Lynne Ayton presented the Operational Update, reporting a deficit in Cardiology and Scottish Adult Congenital Cardiology Service (SACCS). The Cardiology deficit had been due to a number of laboratory breakdowns and some workforce issues.

Lynne Ayton reported that Heart, Lung and Diagnostics Division (HLD) were 1.1% behind the Annual Delivery Plan (ADP) target, National Elective Services (NES) was 12% ahead and Radiology was 9% ahead of Plan.

Treatment Time Guarantee (TTG) and Outpatient Waiting Times were reported as outpatients (12 weeks) 92.3% achieved against a 90% target. There were three SACCS patients and 399 Electrophysiology (EP) patients waiting over 52 weeks. Challenges being experienced were long waiting Ophthalmology patients appearing as breaches by NHS GJ and Orthopaedic patients being referred who were unable to proceed with surgery.

Lynne Ayton provided an overview of service highlights which included the 31 day lung cancer target being maintained at 100%, improvement to the Thoracic Day of Surgery Admission (DOSA) rate to 65% and the rate for Cardiac at 18.4%, which was a modest reduction from Month Four. The CT3 installation had been completed on 21 August 2025 but recruitment was providing challenges. Additional EP weekend activity had commenced to support the 52 week wait position and Cardiac CT waits remained low.

Cardiovascular Magnetic Resonance (CMR) remained challenging with demand outstripping capacity. Work was underway to reduce waits of over 6 weeks to 15% by year end and funding was in place to support the additional activity.

The pause in SACCS service continued with limited surgical activity taking place. The external review report had now been received and outcomes would be addressed.

Over-performance in Cataract service continued with an additional 1,213 cases reported. The four joint rate had increased in month five by 6% to 60%. There had been significant increase in Colorectal Surgery activity, working closely with NHS Greater Glasgow and Clyde.

Lynne Ayton provided an overview of the theatre improvement work with pendant lights in theatres five and seven replaced, theatre changing room refurbishment complete and a theatre governance framework established. Sickness absence in the Cardiac Nursing Team had reduced to 6%.

In Business Services, National Elective Co-ordination Unit (NECU) Orthopaedic administrative validation had resulted in 2,816 patients being contacted and a removal rate of 4%.

Susan Douglas-Scott commended the excellent performance and noted the achievement by NECU.

Jane Christie-Flight asked if progression had been made with EP patients regarding remodelling and repatriation of patients. Lynne Ayton advised that discussions were ongoing, noting that progress had been slow. Carolynne O'Connor advised that a concerted effort was being made to progress this work and that provision of additional detail was awaited.

Rebecca Maxwell noted the DOSA cancellation rate was positive against the Scotland wide target but not for NHS GJ's target and asked if improvement would be seen when theatre improvements were complete. Lynne Ayton advised of a variance across areas and that these cancellations were avoided wherever possible to limit impact on patients and families. Work was underway to continue to reduce instances.

The Board approved the Operational Performance Report for Month Five.

### **3.4.2 Financial Summary Report – Month Five**

Graham Stewart presented the Financial Summary Report for Month Five, reporting a continued planned position to breakeven at year end, achieve the efficiency target of £8.4m and meet the Capital Plan of £19.2m.

Year to date position reported a surplus of £1.140m and Capital Expenditure of £2.2m. Work was underway to meet the Capital Expenditure Plan. Graham Stewart reported that income to date was £110.913m, a positive variance of £0.078m.

Achieving the Balance position showed an overachievement in year to date performance due to vacancies removed and success in front loading procurement schemes. Progress to date had been reliant on non-recurring savings but work was underway to move to recurring savings in the future where possible.

Graham Stewart provided an update on the income and expenditure risks, highlighting that good progress had been made on many of the risks.

Looking forward to next year, Graham Stewart highlighted the Agenda for Change programme and ongoing discussions regarding Phase Two recruitment costs with Scottish Government. Recurring savings were challenging but progressing. Pressures in Service Level Agreements (SLAs) were being re-costed and discussed with West of Scotland Directors of Finance.

Susan Douglas-Scott thanked Graham Stewart for the Finance update and noted the positive progress towards a breakeven position at year end.

Carolynne O'Connor advised that the financial position was encouraging and acknowledged the challenges being faced.

The Board approved the Financial Summary Report for Month Five.

### **3.4.3 Capital Position 2025/26**

Graham Stewart presented the Capital Position for 2025/26 for Month Five and highlighted the appendix to the report which detailed the Capital Allocations.

Funding had been confirmed as £19m and was now £19.1m. Core Formula Capital had not increased, despite the expansion (only 5%). Bids were continuing to be made for additional capital where required.

Capital Delivery Group and Strategic Capital Planning Group continued to closely monitor the position and additional bids had been prepared should any opportunities for additional capital arise.

Mark MacGregor noted the challenge in medicine was now more capital intensive, for example scanners or robots which required depreciation and ongoing technological advances to be taken into consideration, resulting in a strategic concern.

The Board approved the 2025/26 Capital Position Report for 2025/26 for Month Five.

#### **3.4.4 Finance and Performance Committee Update**

Stephen McAllister provided an update from the Finance and Performance Committee meeting in November 2025, highlighting the Committee had been delighted by the Financial and Operational Performance to date, recognising the challenges and were assured that these were being well managed.

Stephen McAllister referred to Mark MacGregor's comment and the Infrastructure Planning Programme, noting there was not a lot of cash in the system, highlighting the importance of identifying areas where the most benefit could be realised with the funding available and the potential opportunity for NHS GJ to support this approach.

The Board noted the Finance and Performance Committee Update.

#### **3.4.5 Audit and Risk Committee Update**

Lindsay Macdonald provided an update from the Audit and Risk Committee (ARC) meeting in November 2025, advising that the Committee was evolving, being more strategic and holistic in oversight of risks and collaborating more.

Lindsay Macdonald highlighted some of the current risks the Committee were monitoring and commended the progress being made.

Lindsay Macdonald advised that ARC would now delegate Internal Audit Actions to the relevant Governance Committees. Good progress had been made on the External Audit tracker and long standing issues were being addressed.

The Committee had commended the progress of the NIS audit with efforts underway to address any remaining outstanding actions by 31 March 2026.

An external partner was being identified to carry out a cyber risk assessment on behalf of NHS GJ.

The requirement to focus on risks relating to strategic objectives had been noted and Executive Leadership Team would undertake to ensure that risk reviews were carried out timeously.

Carolynne O'Connor was pleased to note the Committee had evolved to become more strategic.

The Board noted the Audit and Risk Committee update.

### **3.4.6 Annual Delivery Plan Quarter Two Update**

Carole Anderson presented the Annual Delivery Plan update for Quarter Two, highlighting the appendices circulated to the Board and outlined the key ministerial priorities, the impact of the Scottish Government Delivery Planning Guidance, the Population Health and Reducing Health Inequalities work and the impact of the Reform Agenda.

Carole Anderson provided an overview of progress from Quarter one to Quarter two and an indicative Quarter three position, detailing the status of deliverables, the projected improvements, risks and deliverable changes.

Carole Anderson reported there were no significant concerns and predicted a further improved position in Quarter three.

Susan Douglas-Scott commended the progress made and thanked everyone concerned for their hard work.

The Board approved the Annual Delivery Plan Quarter Two update.

### **3.4.7 Climate Emergency Sustainability Annual Report 2024/25**

Carole Anderson thanked Fergal McCauley and the Communications Team for producing the Climate Emergency Sustainability Annual Report for 2024/25.

Carole Anderson outlined the key mandatory submission dates and provided an overview of the total carbon emissions, noting the impact of the opening of phase two of the Expansion, especially within theatres and highlighted efforts to reduce medical gas and inhaler use.

Carole Anderson provided an overview of work ongoing to reduce levels of waste and water usage, public transport use and travel.

Carole Anderson highlighted a 10% increase in total emissions but that work was ongoing on supply chain impact on carbon emissions. There had been an 8% increase in building energy and a slight increase in overall waste but highlighted better waste segregation measures were being put in place and the increase in the size of the organisation.

Susan Douglas-Scott highlighted the increase in activity would also impact emissions.

Callum Blackburn commended Carole Anderson, John Scott and Fergal McCauley and their teams on the progress made and noted that a baseline had now been identified which would enable progress to be measured.

The Board approved the Climate Emergency Sustainability Annual Report for 2024/25, noting the positive impact and focus on this area.

### **3.4.8 Public Bodies Climate Change Duties Report 2024/25**

Carole Anderson presented the Public Bodies Change Duties Report 2024/25, highlighting the mandatory requirement for this report and outlined the various parts within the report.

From a governance aspect, the Climate Change and Sustainability Steering Group was in place which reported to Finance and Performance Committee and then Board.

Within Part three: Emissions, Targets and Projects, Carole Anderson highlighted a requirement to demonstrate the current position of the organisation and what measures were being put in place for further reductions. It was acknowledged that further theatres remained to be opened.

Carole Anderson advised that for Part Four: Adaptation, plans were in place and a risk assessment had been carried out. Plans were in place to work with Scottish Environment Protection Agency (SEPA) regarding flood, heat and cold.

Within Part Five: Procurement, Carole Anderson highlighted work underway to ensure better purchasing choices were being made.

Fergal McCauley had been working closely with NHS Greater Glasgow and Clyde to support validation and declaration requirements through support and peer scrutiny.

Carole Anderson advised that Part 7: Recommended Reporting – Reporting on Wider influence was not a mandatory requirement but allowed the organisation to work with wider areas.

Lindsay Macdonald queried whether statistics and Key Performance Indicators (KPIs) were being calibrated with the level of output to monitor improvements in efficiency. Carole Anderson advised that more sub-metering was being carried out to understand usage but this work was in early stages and was person dependent. Energy management systems varied throughout the organisation but ways to centralise this were being considered.

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

## **3.5 Strategic Portfolio Governance**

### **3.5.1 Strategic Portfolio Governance Committee Update**

Rebecca Maxwell provided an overview of the Strategic Portfolio Governance Committee meeting held in November 2025 which had been a positive meeting with updates on programmes provided.

The Committee noted progress of the Digital Improvement Plan, particularly commending the completion of the Digital Dermatology Project.

The Committee noted the amount of work being carried out by NHS Scotland Academy (NHSSA), noting the ability to remain agile and respond to service needs.

The Committee noted the transition from plan to delivery of the Board Strategy and the interplay between Committees from Audit and Risk Committee, looking at benefits realisation and ways to improve monitoring.

The Board noted the Strategic Portfolio Governance Committee Update.

### **3.5.2 Centre for Sustainable Delivery – Core Programme Updates and Assurance Statement**

Katie Cuthbertson provided an overview of the work of Centre for Sustainable Delivery (CfSD), which was working on over 11 programmes of work with over 70 workstreams.

Katie Cuthbertson highlighted key areas of work which included working with Health Boards on planned care to support the 52 week wait deadline and pathway redesign. The National Elective Coordination Unit (NECU) had been supporting Health Boards with waiting list validation, targeting longest waits,

The Digital Dermatology and Haematology programmes had received positive press coverage.

Green Healthcare Scotland had received official funding agreement for renal and endoscopy work.

Katie Cuthbertson advised that the two areas highlighted as red were progressing and it was expected that these would be downgraded prior to the next report.

Positive discussions had taken place with Scottish Government regarding baselining the budget for CfSD.

Stephen McAllister noted the positive input CfSD had provided to NHS Forth Valley and the impact of the service was evident. Linda Semple concurred with this view, stating that the value of CfSD intervention was being recognised within Health Boards.

Linda Semple commended the Digital Dermatology programme and asked if General Practitioners (GPs) were utilising the service. Katie Cuthbertson advised that Strategic Delivery Groups were working to embed the programme and technology to encourage GPs to utilise the service more, which would include promotion of the toolkit.

The Board approved the Centre for Sustainability Core Programme Update and Assurance Statement.

### **3.5.3 NHS Scotland Academy Update**

Susan Douglas-Scott welcomed Kevin Kelman to the meeting to present the NHS Scotland Academy (NHSSA) Update.

Kevin Kelman provided an overview of the recent highlights for NHSSA which included the funding being baselined recurring from 2025/26, a forecast underspend of £274,925 and a review of programmes which could be brought forward as a result of the underspend identified.

The National Ultrasound Training Programme (NUTP) was awarded the Radiology Team of the year award at the recent Staff Awards and discussions were taking place with NHS Wales regarding the NUTP programme.

Susan Douglas-Scott thanked Kevin Kelman for the NHSSA update, noting the amount of work being progressed and the level of success achieved in many areas.

Callum Blackburn asked if the work regarding breathing disorders was related to sleep apnoea. Kevin Kelman advised that this was more linked to emergent conditions, for example Covid.

The Board noted the NHS Scotland Academy Update.

Kevin Kelman left the meeting.

## **3.6 Corporate Governance**

### **3.6.1 Strategic Risk Register**

Mark MacGregor presented the Strategic Risk Register, highlighting there had been one new risk added, relating to capital allocation and advised that five risks had been de-escalated to the divisional risk register.

The Executive Leadership Team were meeting regularly to review and monitor risks.

Lindsay Macdonald welcomed the report and highlighted the planned next step for more in depth discussion around strategic risks.

The Board approved the Strategic Risk Register.

### **3.6.2 Annual Review Update**

Carolynne O'Connor provided an update on the Annual Review which took place on 3 November 2025 and had been attended by Neil Gray, Cabinet Secretary for Health and Social Care and Christine McLaughlin, Chief Operating Officer and Deputy Chief Executive, NHS Scotland.

Carolynne O'Connor provided an overview of the itinerary of the day, including the meetings held and topics discussed or presented.

Carolynne O'Connor outlined the actions from the formal letter which had been received the previous day.

Stephen McAllister highlighted it had been positive that patient feedback had been taken into consideration and that NHS GJ had been recognised as a national service.

Rebecca Maxwell referred to the patient query regarding the prompt receipt of test results and asked if NHS GJ had a process in place which varied from other Health Boards. Mark MacGregor advised that the incidence referred to was not common practice but acknowledged the positive impact on patients receiving results timeously.

The Board noted the Annual Review Update.

## **4 Consent Agenda Items – For Awareness Only**

The Committee noted the following Consent Agenda Items:

- 4.1 People Update (Mid-Year Report)
- 4.2 Core Decarbonisation Capital Funding

## **5 Consent Agenda Items – For Approval- No Further Discussion**

### **5.1 Minutes for Approval from Quarter Two – August 2025**

The Committee approved the following Consent Agenda Items:

- 5.1.1 Clinical Governance Committee Approved Minutes 14 August 2025
- 5.1.2 Staff Governance and Person-Centred Committee Approved Minutes 12 August 2025
- 5.1.3 Finance and Performance Committee Approved Minutes 13 August 2025
- 5.1.4 Audit and Risk Committee Approved Minutes 19 August 2025
- 5.1.5 Strategic Portfolio Governance Committee Approved Minutes 1 May 2025

## **6 Any Other Competent Business**

There was no further business raised.

## **7 Date and Time of Next Meeting**

The next meeting of NHS GJ Board had been scheduled for Thursday 26 February 2026.

As per Section 5.22 of the Board's Standing Orders, the Board met in Private Session following the meeting to consider certain items of business.