Approved Minutes

Meeting: NHS Golden Jubilee Public Board Meeting
Date: Thursday 26 February 2026, 10:00
Venue: Level 5 East Boardroom/MS Teams

Members

Susan Douglas-Scott CBE	Board Chair
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
Jonny Gamble	Executive Director of Finance
Laura Smith	Deputy Chief Executive/Executive Director of People and Culture
Linda Semple	Non-Executive Director (via MS Teams)
Lindsay Macdonald	Non-Executive Director
Lynne Ayton	Executive Director of Operations
Mark MacGregor	Executive Medical Director
Rebecca Maxwell	Non-Executive Director (from 10:40 via MS Teams)
Rob Moore	Non-Executive Director
Stephen McAllister	Non-Executive Director (Vice Chair)
Steve Plummer	Non-Executive Director
Stuart Burnside	Employee Director/Non-Executive Director

In Attendance

Elaine Kettings	Assistant Director of Nursing
Nicki Hamer	Head of Corporate Governance and Board Secretary
Sandie Scott	Director of Strategic Communications and Stakeholder Engagement (via MS Teams)

Apologies

Anne Marie Cavanagh	Executive Director of Nursing

Minutes

Christine Nelson	Deputy Head of Corporate Governance

1 Opening Remarks

1.1 Chair's Introductory Remarks

Susan Douglas-Scott welcomed everyone to the meeting, specifically Elaine Kettings who was in attendance on behalf of Anne Marie Cavanagh.

Susan Douglas-Scott informed the Board that an extension to her contract as Chair, until 31 December 2026, had been confirmed by Public Appointments.

The Board acknowledged the sad news of the death of Jeane Freeman OBE, previous Chair of NHS GJ Board, by engaging in a minute silence in recognition of her exceptional contribution to NHS Scotland and Scottish Government throughout her career.

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

- NHS GJ Chairs met with the Cabinet Secretary on 3 December 2025
- Attended Board Chairs Meetings on 15 December 2025, 26 January 2026 and 23 February 2026.
- Sub National Scotland Strategic Planning and Delivery Committee (SPDC) meetings for East and West were now meeting regularly which both she and Carolynne O'Connor were attending.
- Attended a Post-Budget Briefing with Scottish Government on 13 January 2026.

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) Meetings, Elective Care Transformation Framework meetings, BCE Planned Care Meetings regarding reducing long waits, the Improving Flow Board and Sub Planning Delivery Committee (SPDC) for East and West and provided a brief summary of discussions within these meetings.
- The Independent External Peer Review Report for Scottish Adult Congenital Cardiac Service had been received and would be discussed further within the Board private session.

Within NHS GJ, the following highlights were shared:

- The Quarterly Sponsorship meeting had been held with exceptional feedback received and confirmation that all Key Performance Indicators had been met.

- A Partnership Agreement had been signed with West College Scotland. Ways to work collaboratively were being considered.
- As part of the staff wellbeing programme, the Christmas Market, held in the Hotel had been well supported with positive feedback received. Reinstatement of the corridor stalls was being considered. Soup had been provided free of charge to staff during the winter months.
- The new Pharmacy Department had been opened. The Team were delighted with the new space.
- Centre for Sustainable Delivery (CfSD) were hosting the official launch of Green Healthcare Scotland.
- Events had been arranged to recognise Cyber Scotland Week. This would be followed up with a presentation during a future All Staff Session.
- Some winners of the People Awards had been selected to attend the Royal Garden Party.
- NHS GJ had been recognised as a finalist in the Scottish Veterans Awards Employer of the Year category with additional recognition of staff within the Volunteer and Cadet Leader categories.
- The Hotel had hosted their staff awards in December 2025 that included Team member, Young Leader and Unsung Hero of the year.
- As part of the Community Benefits programme, the Hotel hosted 345 children from local Nursery Schools for a Christmas party, free of charge.

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 by the relevant Governance Committees.

2.1 Whistleblowing Quarter Three Report
2.2 Health and Safety Quarter Three Report
2.3 Health and Care Staffing Programme Quarter Three Report
2.4 Health and Care (Staffing) (Act) 2019 NHSGJ annual Report 2025
2.5 Feedback Quarter Three Report
2.6 Corporate Governance Quarter Three Report
2.7 Board Performance Report

With regard to the Board Performance Report, Lindsay Macdonald highlighted areas categorised in red within Section 2.7 and asked whether the Board should have an action to ensure an understanding of the position.

Carolynne O'Connor advised that Committees had focussed Action Plans ensuring delivery improvements in key areas, with associated timelines and regular updates were provided to Committees and acknowledged that it may be beneficial for more detailed updates to be provided.

Carole Anderson confirmed that each Governance Committee had Key Performance Indicators (KPIs) and suggested the Committee update reports to the Board included any discussion that had taken place regarding KPIs and

whether the Committee felt assured or detail of any action requested to be undertaken.

Lindsay Macdonald asked whether Board members had a responsibility to put traction on red metrics. Stephen McAllister suggested a separate focus on areas outwith and within the Board's control limits.

Mark MacGregor provided assurance that NHS GJ had been more effective than most NHS Health Boards but acknowledged there were some concerns, some of which were outwith the Board's control and that perhaps some targets set were over-ambitious. Mark MacGregor agreed that Lindsay Macdonald's challenge was reasonable and suggested the Board looked at the cases where action was within the gift of the Board.

David McClelland shared the opinion that there was a requirement for both categories to be discussed.

Carole Anderson advised that all KPIs were under active review, which would include looking at unachievable stretch targets, along with data in the public domain and other areas. Colleagues within Governance Committees would be included in agreeing KPIs for the year ahead. Work towards national targets would be continued and data to demonstrate the difference in sustainable performance would be shared.

Carolynne O'Connor acknowledged that the Executive Leadership Team (ELT) had some work to do to ensure realistic stretch targets based on capacity, but confirmed that some targets had been set at a national standard.

Carolynne O'Connor agreed it was appropriate for the Board to ask Governance Committees to include the detail discussed within the Committee Updates to the Board.

3.0 Governance

3.1 Board

3.1.1 Unapproved Minutes from 27 November 2025 Board Meeting

The Board approved the minutes of the meeting held on 27 November 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 Eight

Mark MacGregor introduced the Clinical Governance Performance Report for Month 8 and invited Elaine Kettings to provide an overview.

Elaine Kettings outlined the KPIs, reporting that Complaints were within control limits and quality of responses had improved, which had been confirmed by the Scottish Public Services Ombudsman. Timeframes of complaint responses required ongoing improvement.

The Board approved the Clinical Governance Performance Report Update.

3.2.2 Healthcare Associated Infection Report

Elaine Kettings provided a summary of the Health Care Associated Infection report.

Elaine Kettings advised of the Directors Letter (DL) received regarding Winter Infection Prevention and Control in Healthcare settings as a reminder of the importance of Infection Control and detailed the adherence of NHS GJ.

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 February 2026, advising the Committee had noted the requirement for continued improvement in the reduction of open actions relating to Significant Adverse Events (SAEs)

The Committee noted the very positive patient story relating to colorectal surgery.

The Committee discussed the improvement of processes in place regarding Complaints. Multi-factoral elements had been taken into account and the associated improvement plan was deemed to be robust.

Susan Douglas-Scott acknowledged that complainants required to feel heard and that complaints were taken seriously and dealt with timeously and urged the Committee to continue to scrutinise in this area.

The Board noted the Clinical Governance Committee Update.

3.3 Staff Governance

3.3.1 Staff Governance Performance Report as at Month Eight

Laura Smith presented the Staff Governance Performance Report for Month 8.

NHS GJ Board noted the sickness absence rate of 7.3%, 0.1% higher than the previous month. The rolling 12 month sickness absence rate remained at 6.4%. Absence due to anxiety/stress/depression or other psychiatric illness had decreased by 2.1% to 27.5%.

Turnover was reported at 0.5%, a decrease by 0.3% with the rolling turnover dropping to 7.5%.

Laura Smith highlighted the additional Mandatory Training Modules being introduced from 2 March 2026. Compliance with the target of 80% for all staff across all Mandatory Training, remained challenging.

Agenda for Change appraisal was reported at 57.1% and 131 doctors out of 134 (99.2%) had a completed appraisal. 96.7% of Job Plans had been completed.

David McClelland commented that the turnover rate appeared low. Laura Smith confirmed it was better than average but there was not an exact comparator available and acknowledged that some movement of staff was deemed positive, as this demonstrated staff development and progression.

The Board approved the Staff Governance Performance Report for Month 8.

3.3.2 Staff Governance and Person-Centred Committee Update

Rob Moore presented the Staff Governance and Person Centred Committee (SGPCC) Update from the February 2026 meeting, highlighting the update on the Kindness Matters programme, including plans for the next phase and detail of lessons learned.

Rob Moore agreed that more focus on the Performance Report would be a positive approach.

Susan Douglas-Scott urged all Governance Committees to remain focussed on KPIs and continue to seek assurance.

Carolynne O'Connor acknowledged that improvement of sickness absence rates and staff wellbeing was a key area of focus for SGPCC.

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

3.4 Finance and Performance

3.4.1 Operational Performance – Month Eight

Lynne Ayton presented the Operational Update, highlighting that Heart and Lung Division (HLD) were 2% behind plan and National Elective Services (NES) were on plan.

HLD activity had been impacted by unplanned Catheterisation Laboratory (Cath Lab) downtime but the mobile Cath Lab currently on site had supported improvement.

NES activity included a refreshed recruitment strategy for Orthopaedics and Radiology was reported at 11.8% ahead of target.

With regard to Treatment Time Guarantee (TTG) and Outpatient Waiting Times, 92% of Outpatients waited less than 12 weeks, against a target of 90%. Two patients within Scottish Advanced Congenital Cardiac Service (SACCS) and 131 Electrophysiology (EP) patients had been waiting over 52 weeks. EP patients waiting had reduced to 61 as at 26 February 2026 with a zero return anticipated as at 31 March 2026.

Lynne Ayton provided an overview of the operational data within the Board Performance Report, highlighting the zero targets, outlined the red areas and provided additional narrative on these.

Lynne Ayton reported Service highlights which included 34 transplants being carried out as at 26 February 2026, meaning NHS GJ had carried out the highest number of transplants per capita in the United Kingdom.

Work continued to reduce the Cardiac Magnetic Resonance Imaging (MRI) waiting list before year end and additional Endoscopy cases were being supported to help reduce the National Waiting List.

A 10% increase in Post-Operative Day zero mobilisations, to 62%, had been achieved.

Lindsay Macdonald commended the achievements and asked if the issue with SOLUS was likely to impact. Lynne Ayton acknowledged this was a risk but a national solution was being explored.

Callum Blackburn suggested that future reports included differentiation between national targets and those which were within control of NHS GJ.

The Board approved the Operational Performance Report for Month Eight.

3.4.2 Financial Summary Report – Month Eight

Jonny Gamble presented the Financial Summary Report for Month 8, 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 £1.836m and Capital Expenditure of £3.5m. Income to date was £183.627m, a positive variance of £0.731m. Expenditure to date was £181.792m, a favourable variance of £1.105m.

Achieving the Balance position continued to demonstrate an overachievement in year to date performance with a forecast breakeven position against target.

An overview of income and expenditure risks was provided.

The Board approved the Financial Summary Report for Month 8.

3.4.3 Capital Position 2025/26

Jonny Gamble presented the Capital year to date position for 2025/26 for Month 8, highlighting the Revenue to Capital transfer which had strengthened the position.

The Board approved the 2025/26 Capital Position Report for Month 8.

3.4.4 Finance and Performance Committee Update

Stephen McAllister provided an update from the Finance and Performance Committee meeting in February 2026, highlighting the Committee had an in-depth discussion on performance and targets, agreeing that more work was required to understand detail, but noted assurance of the year to date position.

The Committee had received the first of regular updates from the Digital Steering Group and there had been wide discussion on digital innovation and Artificial Intelligence.

The Committee approved the Terms of Reference for 2026/27.

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 meeting in February 2026,

The Committee approved the Terms of Reference for 2026/27, noted the changes to mandatory training module requirements from 1 April 2026 and welcomed the Quarter Three Tender Waiver Report, which demonstrated a reduction in the number and value of waivers from the previous year. The Committee commended procurement and finance colleagues for this improvement.

The Committee noted good progress on the Internal Audit Actions and discussed the Estates Procurement and Financial Systems audits.

The Internal Audit Plan for 2026/27 was endorsed.

The Committee noted ongoing consolidation of the Risk Register was required but noted positive progress had been made.

The Board noted the Audit and Risk Committee update.

3.4.6 Annual Delivery Plan Quarter Three Update

Carole Anderson presented the Annual Delivery Plan (ADP) 2025/26 and the Operational Improvement Plan (OIP) Assurance Report for Quarter Three, outlining changes made from Quarter Two.

There were no expected changes from the current ADP Quarter Three position expected within Quarter Four.

Carole Anderson outlined two projected improvements for Quarter Four within the OIP in relation to reduction of waiting times and the Radiology backlog.

Rebecca Maxwell sought further information on the eRostering issues being experienced for medical staff. Carole Anderson advised that this was a national issue and that work was ongoing to solve the matter. Mark MacGregor provided some examples of the issues being experienced.

Laura Smith highlighted that some existing systems were due to expire in the next two years and hoped that lessons learned from eRostering implementation would be taken into account with future implementation of new systems.

Rebecca Maxwell queried if this should be recorded on the Risk Register. Mark MacGregor advised that eRostering issues were included on the eRostering Programme Board Risk Register and had been logged nationally.

The Board approved the Annual Delivery Plan Quarter Three update.

3.5 Strategic Portfolio Governance

3.5.1 Centre for Sustainable Delivery – Core Programme Updates and Assurance Statement

Katie Cuthbertson provided an overview of the work of Centre for Sustainable Delivery (CfSD), highlighting positive progress across all programmes.

Key messages included the support to Scottish Government with developing 2026/27 National Planning Guidance for Planned and Unscheduled Care. Work was ongoing with SPDCs, 2026/27 Operational Improvement Plan developments and the issue being experienced with the National Elective Co-ordination Unit telephone system.

The Board noted the Centre for Sustainability Core Programme Update.

3.6 Corporate Governance

3.6.1 Strategic Risk Register

Jonny Gamble presented the Strategic Risk Register, highlighting that month 10 had been circulated in error instead of Month 8 and confirmed that the correct version would be presented to the next Board meeting.

Jonny Gamble advised that Month 8 had been approved by ELT and ARC. There were 15 risks included on the Risk Register. Section 2.2 of the paper detailed the changes made since the previous update, highlighting there was one new risk relating to capital allocation and 5 risks closed or de-escalated to the Divisional Risk Register.

No risks had been increased and the risk relating to the overall financial position for 2025/26 had been reduced.

The Board approved the Strategic Risk Register.

3.6.2 NHS GJ Ministerial Annual Review Update 2025

Carolynne O'Connor provided an update on the NHS GJ Ministerial Annual Review 2025 Minister's letter, which had been received on 26 November 2025 summarising the Ministerial review on 3 November 2025.

Carolynne O'Connor advised of the areas of future focus to support the Reform Agenda including the Operational Improvement Plan, Service Review Framework and Population Health Framework, with a view to align to these SG priorities.

Susan Douglas-Scott advised that the challenge for NHS GJ was to identify how best to support territorial NHS Health Boards within the remit of SPDCs.

Linda Semple acknowledged the importance of SPDCs to take into account the collaborative work of NHS GJ and commended Carolynne O'Connor, Susan Douglas-Scott and ELT on their efforts to inform this work.

Susan Douglas-Scott highlighted the involvement of CfSD within this area.

The Board noted that there had been no Medical or Nurse Director input confirmed within the SPDC work. Stephen McAllister agreed that this was the case and that Partnership involvement also required to be confirmed.

The Board noted the Annual Review Update.

4 Consent Agenda Items – For Awareness Only

There were no Consent Agenda Items presented for awareness.

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 11 November 2025
5.1.2 Staff Governance and Person-Centred Committee Approved Minutes 6 November 2025
5.1.3 Finance and Performance Committee Approved Minutes 13 November 2025
5.1.4 Audit and Risk Committee Approved Minutes 18 November 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 28 May 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.