Approved Minutes

Finance and Performance Committee
Thursday 14 May 2026, 2pm
MS Teams Meeting

Members

Stephen McAllister	Non-Executive Director *(Chair)*
Callum Blackburn	Non-Executive Director
David McClelland	Non-Executive Director
Lindsay Macdonald	Non-Executive Director
Rebecca Maxwell	Non-Executive Director
Steve Plummer	Non-Executive Director
Stuart Burnside	Employee 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

Susan Douglas-Scott	Board Chair
Nicki Hamer	Head of Corporate Governance and Board Secretary
Kevin McMahon	Head of Risk and Clinical Governance (Item 6.1)
Catherine Sinclair	Head of Research (Item 4.4)
Zaid Tariq	Deputy Director of Quality, Performance, Planning and Programmes (Item 5.1)

Apologies

Mark MacGregor	Executive Medical Director

Minutes

Jennie McLaughlin	Senior Corporate Administrator

1 Opening Remarks

1.1 Wellbeing Pause and Chair's Introductory Remarks

The Chair opened the meeting by leading a short moment of reflection following the recent passing of Morag Brown, recognising Morag's long-standing contribution to governance within NHS Golden Jubilee.

All participated in a Wellbeing Pause.

1.2 Apologies

Apologies were noted as above.

1.3 Declarations of Interest

There were no declarations of interest to note.

2. Content Agenda Items – Approval Only

2.1 Finance and Performance Committee Terms of Reference 2026/2027

Finance and Performance Committee approved the Terms of Reference 2026/2027.

3 Updates from last meeting 12 February 2026

3.1 Unapproved Minutes

Minutes from the meeting held on 12 February 2026 were approved as an accurate record.

3.2 Action Log

The Committee noted there were no open actions on the Action Log.

3.3 Matters Arising

There were no matters arising.

4. Operational/Financial Performance Review

4.1 Operational Performance

The Committee received the Operational Performance Report from Lynne Ayton.

The Committee noted that overall operational performance for the year had been strong, with a number of services delivering ahead of plan despite ongoing challenges. Cardiac and Thoracic Surgery, Radiology, Ophthalmology, and General Surgery all performed well, with some areas significantly exceeding planned activity.

Lynne Ayton highlighted that waiting times remained a key area of pressure, including a shortfall against the 12-week outpatient target and ongoing challenges in relation to long waiters, particularly within Electrophysiology.

Lynne Ayton advised there had been capacity and workforce pressures, including recruitment challenges and the impact of unplanned activity impacting areas such as Orthopaedics and Theatre utilisation. Notwithstanding these pressures, the Committee noted several positive achievements, including strong diagnostic performance, improvement in cancer targets, and a record number of heart transplants.

Finance and Performance Committee approved the Operational Performance.

4.2 Financial Summary Report

The Committee and update on the Financial Summary Report by Jonny Gamble.

Jonny Gamble confirmed that the organisation had achieved its breakeven duty, delivering a £315k underspend. This had been driven by delivery of £9.1m of efficiencies.

The Committee noted that while overall financial performance remained strong, there had been pressures within non-pay expenditure, partly associated with increased activity and strategic investment decisions.

The Committee received assurance that there were no significant underlying financial concerns, and that the financial position had been managed effectively throughout the year.

Finance and Performance Committee approved the Financial Summary Report.

4.3 Capital Update

The Committee received the Capital Update from Jonny Gamble and noted that the organisation had successfully delivered the full capital programme of £19.9m. The Committee noted that a significant proportion of expenditure had been incurred in the final quarter although the revised targets were ultimately achieved.

Jonny Gamble advised on the continued investment across key areas including estates, medical equipment, and Phase 2 developments, as well as actions taken to mitigate risks associated with limited capital funding, including a Government agreed transfer from revenue to capital.

The Committee noted the learning arising from the year, particularly longer term planning and a more balanced profile of expenditure across the year, and received assurance that improvements were being implemented for the next financial year.

Finance and Performance Committee approved the Capital Plan.

4.4 Golden Jubilee Research Institute Annual Report

The Committee welcomed Catherine Sinclair to the meeting to provide an update on the Golden Jubilee Research Institute Annual Report and noted that income had significantly exceeded target (£2.09m against £1.5m), driven by increased commercial research activity and additional funding.

Catherine Sinclaire advised that while study approvals and recruitment levels had been lower than planned, this reflected a shift towards fewer, higher-value and more complex studies, contributing to financial over performance.

The Committee noted that no critical risks had been identified, although dependencies remained in relation to workforce capacity, participant recruitment, and sustaining the commercial research portfolio.

The Committee noted that the Institute remained in a strong financial position, supporting reinvestment and future growth.

Finance and Performance Committee approved the Golden Jubilee Research Institute Annual Report.

4.5 Digital Steering Group Update

The Committee received a Digital Steering Group Update from Carole Anderson, and noted that the Group had met and was continuing to strengthen effective governance and oversight of key digital programmes

Carole Anderson noted key discussions included challenges with the National Endoscopy System. The Group agreed to restrict further use of the shared U drive and progress towards more secure and modern data storage arrangements.

Carole Anderson reported that a new prioritisation process for digital requests had been introduced to support alignment with strategic priorities, alongside the establishment of subgroups focusing on corporate systems, clinical systems, and data management.

Carole Anderson provided an update on the rollout of a new service desk system, intended to improve user experience and support, providing a more user-friendly and modern platform for managing digital support requests. It was noted that the new system would provide a more modern platform for logged, tracked, and resolved digital support requests, with improved alignment to organisational requirements.

The Committee noted that rollout was progressing, with a formal launch to be supported by organisational communications to promote staff awareness and adoption of the new system.

Finance and Performance Committee noted the Digital Steering Group Update.

5 Strategic Planning Update

5.1 Annual Delivery Plan 2025/2026 Template Quarter 4 Update

The Committee received an update on the Annual Delivery Plan 2025/2026 Template Quarter 4 Update from Carole Anderson.

Carole Anderson noted that the majority of deliverables had been rated green, with a small number rated amber and one rated red. The red deliverable related to CT3 planned care activity, which remained below profile due to external dependencies and capacity challenges.

Amber-rated areas included waiting times, Radiology performance, and workforce planning, reflecting ongoing pressures.

The Committee noted that overall performance remained strong, with improvement across a number of areas during the quarter, and that the update would be submitted to the Board for approval.

Finance and Performance Committee noted the Annual Delivery Plan 2025/2026 Template Quarter 4 Update.

6. Corporate Governance

6.1 Strategic Risk Register

The Chair welcomed Kevin McMahon to the meeting to present the Strategic Risk Register.

Kevin McMahon advised that the Risk Register had been reviewed in detail by the Executive Risk Group, with minor updates made to existing mitigations.

Kevin McMahon confirmed that no new risks were identified during the reporting period, although the financial risk for 2025/2026 had been updated, and risks relating to the 2026/2027 Financial Plan remained under review.

Finance and Performance Committee approved the Strategic Risk Register**.**

6.2 FPC Annual Governance Report 2025/2026

The Committee received the Finance and Performance Committee Annual Governance Report for 2025/2026, outlining the Committee's work over the year and providing assurance that it had discharged its responsibilities in line with its Terms of Reference.

The report summarised the Committee's meetings, key agenda items and areas of focus, demonstrating oversight of financial performance, operational delivery, and governance matters.

It was noted that the report would provide assurance to the Board, and the Committee approved it for submission.

Finance and Performance Committee approved the Annual Governance Report 2025/2026.

7 Consent Agenda Items – For Awareness Only

There were no Consent Agenda Items presented for awareness.

8 Update to the Board

The Committee approved the Terms of Reference for 2026/2027.

The Committee approved the Operational Performance Report for Month 12 and commended the outstanding annual activity, including the highest number of heart transplants, while noting ongoing pressures in some areas including EP capacity and waiting time performance.

The Committee approved the Financial Summary Report and commended delivery of the breakeven position with a year-end underspend.

The Committee received the Capital Plan Update and noted successful delivery of the revised capital programme, alongside working towards to improving the phasing of expenditure during 2026/27.

The Committee approved the Golden Jubilee Research Institute Annual Report and noted strong financial performance, with high value research projects and increasing complexity across the portfolio.

The Committee received the Digital Steering Group Update and noted the ongoing work in this area.

The Committee approved the Annual Operating Plan for Quarter 4.

The Committee approved the Strategic Risk Register and identified the need to build risk deep dives into the 2026/27 work plan, with cyber risk highlighted as an area for particular assurance.

The Committee approved the Annual Governance Report for 2025/26 and agreed that future annual reports should demonstrate how assurance has been sought in relation to Committee owned strategic risks.

9. Any Other Competent Business

None.

10. Date and Time of Next Meeting

Thursday 13 August, 2pm, MS Teams.