

NHS GREATER GLASGOW AND CLYDE

**Minutes of the Meeting of the
Finance, Planning and Performance
Committee on Tuesday 08 April 2025
at 9.30 am via MS Teams**

PRESENT

Ms Margaret Kerr (in the Chair)

Ms Ann Cameron-Burns	Mr Colin Neil
Mr Martin Cawley	Dr Paul Ryan
Dr Emilia Crighton	Dr Lesley Thomson KC
Mr David Gould	Mr Charles Vincent
Professor Jann Gardner	Ms Michelle Wailes
Ms Lesley McDonald	Professor Angela Wallace
Ms Ketki Miles	

IN ATTENDANCE

Ms Sandra Bustillo	Director of Communications and Public Engagement
Ms Denise Brown	Director of Digital Services
Ms Frances Burns	Head of Strategic Planning and Health Improvement (for item 21)
Ms Beth Culshaw	Chief Officer, West Dunbartonshire HSCP
Dr Scott Davidson	Medical Director
Ms Kim Donald	Corporate Services Manager, Governance
Mr William Edwards	Chief Operating Officer
Ms Ann Forsyth	Head of Primary Care Support (for item 16)
Ms Katrina Heenan	Chief Risk Officer
Mr Gordon Love	Head of Property & Asset Management (item 16)
Ms Ali Marshall	Depute Director of Planning (item 18)
Mr Fraser McJannett	Director of Primary Care and GP OOH (Item 20)
Mr Paul McKenna	Head of Financial Improvement (item 17)
Ms Carron O'Byrne	Interim Chief Officer, Renfrewshire HSCP (item 21)
Mr Derrick Pearce	Chief Officer – East Dunbartonshire HSCP
Mrs Louise Russell	Secretariat Manager (Minutes)
Mr Chris Sanderson	Head of Procurement (for item 14)
Professor Tom Steele	Director of Estates and Facilities
Mr Pat Togher	Chief Officer, Glasgow City HSCP
Ms Ann Traquair Smith	Director of Diagnostics (item 15)
Mr Scott Wilson	Senior Business and Delivery Manager
Ms Elaine Vanhegan	Director of Corporate Services and Governance

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		ACTION BY
27.	Welcome and Apologies	
	<p>The Chair welcomed those present to the April meeting of the Finance, Planning and Performance Committee.</p> <p>There were apologies noted on behalf of Ms Mehvish Ashraf and Councillor Chris Cunningham.</p> <p><u>NOTED</u></p>	
28.	Introductory Remarks	
	<p>The Chair stated several papers were noted as 'to follow' due to the timing of the Corporate Management Team meeting; this issue would be discussed with management to minimise its recurrence at future meetings.</p> <p><u>NOTED</u></p>	
29.	Declaration(s) of Interest(s)	
	<p>The Chair invited members to declare any interests in any of the matters being discussed. There were no declarations of interest.</p> <p><u>NOTED</u></p>	
30.	Minutes of Previous Meeting held on 11 February 2025	
	<p>The Committee considered the minute of the meeting held on 11 February 2025 [Paper No. FPPC(M)25/02] and were content to approve the minute as a complete and accurate record pending the following minor amendment:</p> <p>Apologies to be noted on behalf of Mr David Gould.</p> <p><u>APPROVED</u></p>	Secretary
31.	Matters Arising	
	<p>a) Rolling Action List</p> <p>The Committee considered the Rolling Action List (RAL) [Paper No. 25/15] for approval. There were 6 actions on the RAL, 5 of which were proposed for closure.</p> <p>The Committee was advised of the following update:</p>	

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	<p><u>Minute 19 – Digital Strategy Update</u> The Committee noted the Digital Strategy had been presented to the February Board. The RAL would be updated to note this.</p> <p><u>Minute 103 - Draft Business Continuity & Essential Investment Infrastructure (BCEIIP)</u> This would be progressed when the BCEIIP was agreed, therefore would remain ongoing.</p> <p>The Committee was content to accept the other items as closed and approved the RAL.</p> <p><u>APPROVED</u></p>	Secretary
32.	Urgent Items of Business	
	There were no urgent items of business raised.	
	<u>NOTED</u>	
33.	Financial Monitoring Report	
	<p>The Committee considered the Financial Monitoring Report [Paper 25/16] presented by Mr Colin Neil, Director of Finance for assurance.</p> <p>Mr Neil informed the Committee that at the end of month 11, there was a reported overspend of £4.36m, with £32.7m attributed to unachieved savings and a pay and non-pay underspend of £15.98m. Acute was overspent by £26.58m, while corporate areas were underspent by £39.67m for pay and non-pay. Partnerships had a pay and non-pay underspend of £2.88m following utilisation of reserves. Mr Neil highlighted that year-on-year comparison for agency workforce was strong, with further improvement expected in 2025/26. He noted that increased winter costs were included in the projections.</p> <p>In terms of Sustainability and Value, £54.0m had been achieved on a full-year recurring basis, and £218.6m on an in-year basis. As at month 11 there were forecast pipeline savings, excluding high risk projects, of £218.9m against the £226.9m challenge, with £55.6m identified on a recurring basis against the £128.6m target. Mr Neil reported that the capital expenditure position was progressing well, and all of the total capital allocation had firm orders or incurred spend.</p> <p>Finally, Mr Neil reported that the forecast deficit had been reduced to a break-even position from £48.3m. This was mainly attributed to the release of Agenda for Change non pay reform funding. He noted that the</p>	

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	<p>IJB's were reporting a break-even position, with the exception of East Renfrewshire which required £800,000 support at year end.</p> <p>The Committee noted the strong position of the Board, however recognised that work needed to continue to maintain the reduction in pressures. The Committee noted that the reform work would enable investment in key areas.</p> <p>The Committee were content to note the update.</p> <p><u>NOTED</u></p>	
34.	Financial Plan 2025-26 - Final	
	<p>The Committee considered the Financial Plan 2025-26 [Paper 25/17] presented by Mr Colin Neil, Director of Finance, for endorsement for onward Board approval.</p> <p>Mr Neil provided an overview of the 2025-26 Financial Plan following confirmation on 31st March 2025 that the Scottish Government had approved the NHSGGC 2025-26 Financial Plan. Mr Neil provided an overview of the key changes since the initial draft was submitted to the Scottish Government in January 2025. He highlighted that the position for 2025/26 previously noted a deficit of £47.5m, however, due to confirmation of a non-recurring sustainability payment from Scottish Government, NHSGGC now reported a balanced position. There would be a strong focus on the overall financial challenge for 2025/26 of £217.8m.</p> <p>Mr Neil reported that there were non-recurring pressures which needed to be considered beyond the baseline financial plan and work would be required to mitigate or provide coverage for these during the financial year. The report highlighted assumptions that had been used in the compilation of the plan, this included recurring savings of £93.7m were achieved in 2025/26, £97.9m in 2026/27 and £99.2m in 2027/28 each of the following two years. This equated to 3% of the Revenue Resource Limit (RRL), planned care investment proposals and £20.4m in relation to the Reform bid.</p> <p>In response to a question regarding National Insurance movement to Independent Contractors, Mr Neil advised that this was a risk and a pressure moving forward but there had been no further dialogue at this stage.</p> <p>The Committee noted mechanisms for in-year savings, including sustainability and value process invest to save. These opportunities could be discussed in governance groups.</p>	

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	<p>The Committee recognised the level of savings required was challenging, however, there were areas for consideration through redesign and the reform agenda and all opportunities would be progressed.</p> <p>In response to a question regarding Sustainability and Value, and when savings would be observed, the Committee noted that a piece of work would be carried out in relation to the trajectory of savings, consolidating the key themes</p> <p>The Committee acknowledged that pay allocations were recurring, including the IJB element. Mr Neil highlighted a risk related to suppliers, which was a concern throughout Scotland, and discussions remained ongoing.</p> <p>The Committee noted that all Boards were to allocate 3% for the Agenda for Change pay deal while negotiations continued with the Scottish Government, with a funding agreement expected.</p> <p>The Committee were content to approve the paper.</p> <p>APPROVED</p>		
35.	IJB Financial Plan Summary		
	<p>The Committee considered the paper IJB Financial Plan Summary [Paper 25/18] presented by Mr Colin Neil, Director of Finance, for endorsement for onward Board assurance.</p> <p>The Committee were advised that all the IJB finance plans had been approved by the IJB Boards. Mr Neil reported that East Renfrewshire were forecasting an overspend of circa £0.8m, this was after fully utilising all general reserves. It had been agreed the NHS GGC would provide the required level of support at year end.</p> <p>The overall financial challenge of £86.6m was approximately 3.3% of the total budget excluding set aside funds. The savings plans of £69.8m represented around 2.7% of the total budget excluding set aside funds. The Committee noted that NHS GGC had adhered to a 3% uplift requirement set by the Scottish Government and provided a sustainability payment to fund the remaining 40% of National insurance payroll pressures as Scottish Government provided direct funding for 60% of the costs.</p> <p>The Committee acknowledged the difficulty in consolidating a paper on return of investment. The Committee were assured that the Chief Officers had been asked to join the Directors Group for better insight.</p>		

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	<p>In response to a question regarding variations in HSCP approaches and the Board's role, the Committee were advised that further consideration would be given to the key themes.</p> <p>The Committee were content to note the paper.</p> <p><u>NOTED</u></p>	
36.	Capital Plan 2025/26 – Final	
	<p>The Committee considered the Capital Plan 2025/26 – Final [Paper 25/19] presented by Mr Colin Neil, Director of Finance, for endorsement for onward Board approval.</p> <p>Mr Neil provided an overview of the paper which detailed the estimated available capital resources for 2025/26 - 2027/28 and advised on progress with allocation of capital in the initial 3-year plan. Mr Neil noted that the replacement of the fire doors at Queen Elizabeth University Hospital had not been included, as it was still pending approval. He advised that the Larkfield Unit within the IRH campus had reached the end of its contract term in October 2025 and it had been agreed that the unit would transfer to NHSGGC possession. Mr Neil informed the Committee that the Scottish Government had funded the transfer from the 2024/25 capital funding at a value of £6.8m as there was a binding obligation to purchase whilst the actual transfer would happen in October 2025. This would be included in the month 12 report. Mr Neil outlined the upcoming disposals, noting that specific details would be added when available, as these were expected to contribute to land receipts in this phase of the capital plan.</p> <p>Mr Neil provided an overview of proposed funding allocation for 2025/26 and noted that discussions were ongoing with the Scottish Government regarding a bid for funding to support system reform within the Board. He reported that £2m of capital investment had been set aside whilst dialogue continued.</p> <p>In response to a question regarding the Netherton Clinic, the Committee noted that although it would be unlikely to breach the limits stipulated within the Scheme of Delegation, an update would be provided to the Committee in due course.</p> <p>In response to a question regarding reduced ligature, the Committee were advised that a detailed paper with timelines would be submitted detailing the progress with sites aligning with the mental health changes.</p>	<p>Mr Neil</p> <p>Mr Neil/Prof Steele</p>

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	The Committee were content to endorse the paper for onward Board approval.	
	<u>NOTED</u>	
37.	QEUH Fire Door Replacement Business Case	
	<p>The Committee considered the QEUH Fire Door Replacement Business Case [Paper 25/20] presented by Professor Tom Steele, Director of Estates and Facilities, for approval.</p> <p>Professor Steele presented a detailed summary of the QEUH/RHC Fire Door Replacement Project and requested endorsement for its submission to the Scottish Government.</p> <p>The Business Case requested £15.7m from the Scottish Government for Phase 1 of the fire door replacement works (550 door sets). These works were being conducted on a risk-based approach, informed by the condition of the doors and the Single Building Fire Risk Assessment. The work would take place during financial years 2025/26 and 2026/27, and any future phases would require a new Business Case. Professor Steele highlighted that work was supported by expert advice.</p> <p>The Committee received assurance that estates teams were repairing the doors currently to prevent further deterioration. If approved, work would commence in September 2025, with completion of phase 1 expected by December 2027.</p> <p>The Committee discussed the level of risk and Professor Steele provided assurance that Risk Registers had been developed and were regularly reviewed, and meetings continued with the Scottish Fire & Rescue Services.</p> <p>In response to a question in relation to the ongoing legal case with Multiplex, the Committee noted that this was forming part of the litigation. The Committee noted that the fire doors were required to be accredited to TRADA. Professor Steele reported that there had been ongoing challenges in relation to certification from Mulitplex. Expert opinion had been sought from an external contractor regarding the components that were failing.</p> <p>The Committee were assured that public safety was paramount.</p> <p>In response to a question regarding the sprinkler system, the Committee noted that the system was subject to maintenance by an external contractor and an internal team. This included inspections of</p>	

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	<p>the activation heads, and the Committee received assurance on the systems effective operation.</p> <p>In response to a question regarding the risk capital position, the Committee noted that Scottish Government approval was awaited.</p> <p>It was agreed that the wording in the Business Case would be reviewed to highlight the patient and staff safety aspect. The Committee received assurance that there had been transparency throughout the process.</p> <p>The Committee noted that as the Business Case was under the £20m threshold, it didn't require to be submitted for Board approval, however, this would be included in the Capital Plan and Board awareness was expected in the future. The Committee were content to approve the paper.</p> <p><u>APPROVED</u></p>		Prof Steele
38.	RAH Maternity Brickwork Business Case		
	<p>The Committee considered the RAH Maternity Brickwork Business Case [Paper 25/21] presented by Professor Tom Steele, Director of Estates and Facilities, for approval.</p> <p>Professor Steele outlined the safety issues affecting the external brickwork façade of the Royal Alexandra Hospital Maternity Building and the remedial works to address the safety and structural issues.</p> <p>The Committee discussed the options presented and noted that option 2 would offer minimal gas savings and mainly enhance thermal comfort. The wording included in the Business Case would be strengthened in relation to this prior to submission to the Scottish Government</p> <p>In response to a question regarding remediation, the Committee received assurance that the main structure was sound.</p> <p>The Committee were content to approve the paper.</p> <p><u>APPROVED</u></p>		Prof Steele
39.	Performance Report		
	<p>The Committee considered the Performance Report [Paper 25/22] presented by Mr Colin Neil, Director of Finance, for assurance.</p>		

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	<p>Mr Neil provided an overview on performance against some of the key indicators as outlined in the Performance Assurance Framework for the period up to and including February 2025. He noted that CAMHS performance continued to exceed the 2024-25 ADP and national target with current performance sitting at 98.5%.</p> <p>Mr. Neil provided a report on key areas that required improvement. He noted that the performance of Psychological Therapies was at 83.5%, which was below the national target of 90%. The MSK Physiotherapy waiting times continued to pose challenges; however, there was an improvement in February 2025, with performance at 41%. Nonetheless, the number of weeks patients had to wait remained consistent with the previous month. Mr. Neil further reported that while Acute and Mental Health Delayed Discharges were still problematic, there had been a slight reduction compared to the preceding month's figures.</p> <p>In response to a question regarding addressing the challenges within dentistry, the Committee noted that the test of change to develop more effective use of Dental Support Worker resources was ongoing. The Committee acknowledged that addressing the backlog would require time, however assurance would be provided regarding the actions in place.</p> <p>The Committee were content to note the performance report.</p> <p><u>NOTED</u></p>		Mr Neil
40.	Procurement Strategy 2025-28		
	<p>The Committee considered the Procurement Strategy [Paper 25/23] presented by Mr Colin Neil, Director of Finance and Mr Chris Sanderson, Head of Procurement.</p> <p>The Committee noted the updated Procurement Strategy for the period April 2025 – March 2028 in line with the legal obligation under the Procurement Reform (Scotland) Act.. The updated Procurement Strategy set out how NHSGGC intended to approach procurement activity over the next 3 financial years.</p> <p>In response to a question regarding procurement waivers, the Committee noted that there were SFI waivers in the system and regulations allowed for this. The Committee were assured that certain waivers would go through the Audit and Risk Committee depending on the monetary value.</p> <p>The Committee were advised that the paper would be updated in consideration of monitoring the global space, as well as being more ambitious regarding the electronic invoices target. Additionally, a sense</p>		Mr Sanderson

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	check would be carried out regarding an annual report being submitted to the Committee.	
	The Committee were content to endorse the paper for onward Board approval.	
	<u>ENDORSED</u>	
41.	Labs Managed Service Contract	
	<p>The Committee considered the Labs Managed Service Contract [Paper 25/24] presented by Ms Ann Traquair Smith, Director of Diagnostics, for awareness.</p> <p>The paper summarised the extensive evaluation process that had been undertaken since October 2023 following the receipt of tender bids to ensure as far as is possible, that a robust procurement process had been conducted.</p> <p>Ms Traquair Smith reported that a dedicated Procurement Team had been formed, and engagement had been taking place with Morton Fraser MacRoberts (MFMac) Solicitors who had been providing legal advice throughout the tender process.</p> <p>At October 2024, two tender bids had been received from Abbott and Roche. The paper included a summary of the evaluation process which had been carried out. The Committee noted that the tender was progressing, and evaluation was almost complete. It was likely that by the end of April 2025, a preferred bidder would have been identified and be ready to go to standstill.</p> <p>In response to a question regarding confidence with the procurement process, the Committee received assurance that the right procedures and processes were being followed, and due diligence would take place.</p> <p>In response to a question regarding involvement of the Central Legal Office (CLO), it was noted that due to the level of demand that the CLO were experiencing, they would have been unable to offer dedicated support with the case.</p> <p>The Committee were content to note the update, and further consideration would be given to assurances and timing.</p> <p><u>NOTED</u></p>	
42.	West Glasgow ACH	

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	<p>The Committee considered the West Glasgow ACH [Paper 25/25] presented by Professor Tom Steele, Director of Estates and Facilities, for endorsement for onward Board approval.</p> <p>Professor Steele provided a summary of the 2015 Board decision to declare the West Glasgow Ambulatory Care Hospital (WGACH) surplus to NHS operational requirements and to outline the next steps for its disposal. This included reaffirming the surplus status of the site following the relocation of services, detailing the disposal strategy, including compliance with NHS Scotland's Property Transactions Handbook and the Scottish Government's Trawl procedure, key considerations such as staff relocation, planning constraints, and stakeholder engagement and setting out the marketing strategy and timeline for the sale, ensuring alignment with policy objectives and planning frameworks. The Committee noted that property advisors had been appointed given the scale.</p> <p>The Committee acknowledged that there had been a change in Board membership since 2015 and detail of the governance, public engagement and decision-making process at that time would be helpful.</p> <p>In response to a question regarding the plans to decant staff, the Committee noted that a high volume of staff moved on 13th February 2025. A smaller number were due to relocate to the Gartnavel campus in April and the bulk of staff would be relocated in May 2025.</p> <p>The Committee noted that patient engagement had been carried out twice and marketing of the disposal would take place in May 2025. The Committee discussed the importance of ongoing public engagement in light of the importance of the site to the city.</p> <p>The Committee were content to endorse the paper for onward Board approval, with requested updates on the 2015 disposal decision and subsequent developments.</p> <p>ENDORSED</p>	Prof Steele
43.	Larkfield Hospital	
	<p>The Committee considered the paper Larkfield Hospital [Paper 25/26] presented by Professor Tom Steele, Director of Estates and Facilities, for approval.</p> <p>Professor Steele provided an overview of the End of Contract process to bring Larkfield Unit fully into NHSGGC's ownership on the expiry of the current Private Finance Initiative (PFI) contract on 31st October 2025, and the financial and technical assurance activities underway as</p>	

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	<p>part of the End of Contract process. The Committee noted that NHSGGC's appointed Legal Advisers, Morton Fraser MacRoberts LLP, reviewed the PFI Contract and associated documents, highlighting the options available to NHSGGC, which were included in the paper.</p> <p>The Committee noted that it would be expected this would be part of the year end audit and that the Scottish Government were supportive of the acquisition. In response to a question regarding maintenance, the Committee were advised that discussions regarding the fabric and condition of the building were ongoing. It was expected that assurance would be provided before September 2025. The Committee noted that there were no risks other than maintenance costs.</p> <p>The Committee were content to note the update and noted that a paper would be resubmitted for final approval in August 2025.</p> <p><u>NOTED</u></p>		
44.	Winter Plan Update		
	<p>The Committee considered the Winter Plan Update [Paper 25/27] presented by Dr Scott Davidson, Medical Director and Ms Ali Marshall, Depute Director of Planning, for assurance.</p> <p>The paper provided a final update on the progress in implementing the actions associated with the 24/25 Whole System Winter Plan and an overview and assessment of performance against the intended impact of the 27 Whole System Actions. Ms Marshall reported that 26 of the 27 actions had been completed and 1 had been delayed in its implementation.</p> <p>Ms Marshall reported that of the 27 actions, 19 had met their intended impact and 8 did not meet their intended impact. The 8 actions that did not fully meet their intended impact would be reviewed as part of the planning for winter 2025/26.</p> <p>Ms Marshall provided an overview of the key impacts, including the vaccination programme and Hospital at Home. Ms Marshall noted that criteria led discharge had seen a slight decline, therefore would be reviewed ahead of 25/26. The Committee were advised that there had been an increase in Independent Prescribers, covering 56% of the population. Other work included maintaining a high discharge rate via the Flow Navigation Centre and positive feedback received from patients.</p> <p>Ms Marshall reported that Emergency Department attendance at all sites was similar to previous years, however, there had been a</p>		

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		ACTION BY
	reduction over January and February 2025. Performance against the 4 hour standard was within 2% of the past 2 years.	
	<p>The Committee noted that lessons learned included earlier planning, whole system engagement and involvement and action planning and monitoring impact. The next steps would include preparing for the 25/26 winter pressure and taking learning from the internal audit. Learning and outputs from the Hackathon event would also be used to inform planning for next winter.</p> <p>The Committee were content to note the paper.</p> <p><u>NOTED</u></p>	
45.	Stakeholder Communication and Engagement Strategy	
	<p>The Committee considered the Stakeholder Communication and Engagement Strategy – Annual Update [Paper 25/28] presented by Ms Sandra Bustillo, Director of Communications and Engagement, for assurance.</p> <p>The paper highlighted the key achievements, impact on the organisation and the progress to date.</p> <p>The Committee were content to note the update.</p> <p><u>NOTED</u></p>	
46.	Primary Care Strategy – Annual Update	
	<p>The Committee considered the Primary Care Strategy – Annual Update [Paper 25/29] presented by Mr Fraser McJannett, Director of Primary Care, for assurance.</p> <p>Mr McJannett provided an overview of the Primary Care Strategy and the overall progress to date. He noted that within the first year, a Programme Board had been established, and good progress had been made, however, there had been challenges in relation to capacity to progress the entirety of the Strategy. He assured the Committee that engagement nationally would continue.</p> <p>In response to a question regarding the Audit Scotland report recommendations and how feasible achievement was going forward, the Committee were advised that there was a realistic focus on what could be achieved and the areas of significant impact.</p> <p>The Committee were content to note the update.</p>	

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	<u>NOTED</u>	
47.	Renfrewshire Strategic Plan	
	<p>The Committee considered the Renfrewshire Strategic Plan [Paper 25/30] presented by Ms Carron O'Byrne, Interim Chief Officer, Renfrewshire, for awareness.</p> <p>The Committee noted that the paper had gone through due process and had been considered by the Corporate Management Team.</p> <p>The Committee were content to note the paper.</p> <p><u>NOTED</u></p>	
48.	Corporate Risk Register	
	<p>The Committee considered the Corporate Risk Register [Paper 25/31] presented by Ms Katrina Heenan, Chief Risk Officer, for approval.</p> <p>Ms Heenan reported that there were 12 risks aligned to the Committee and 100% of these had been reviewed each month since the previous meeting. Ms Heenan reported that 3 risks had been transferred from the Acute Services Committee. The Committee noted that 1 new risk had been added in relation to Climate Change and full details were included in the paper. There had been a decrease in the Financial Sustainability Revenue risk (3036) from a score of 25 to 20. Finally, Ms Heenan reported that 7 actions had been completed since the last meeting and any overdue actions continued to be progressed with the Risk Leads.</p> <p>In response to a question regarding the timescale for completion of the Regulatory Body Compliance risk review, the Committee were advised that significant work was underway, and the review was in the final stages. The Committee received assurance that additional mitigating actions were in place and significant detail would be included in the next report.</p> <p>The Committee were content to approve the recommendations set out in the paper.</p> <p><u>APPROVED</u></p>	
49.	Committee Governance	
	a) Terms of Reference	
	b) Annual Report	

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	c) 2025/26 Annual Cycle of Business		
	<p>The Committee considered the Terms of Reference, Annual Report and 2025/26 Annual Cycle of Business [Paper 25/14] presented by Ms Elaine Vanhegan, Director of Corporate Services and Governance, for approval.</p> <p>Ms Vanhegan highlighted the amendments to the Terms of Reference in light of the additions following the discontinuation of the Acute Services Committee, noting the capacity of the Committee will be monitored throughout the year.</p> <p>The Committee agreed to feed back comments to Ms Vanhegan by the end of April.</p> <p>The Committee were content to approve the paper.</p> <p><u>APPROVED</u></p>		All
50.	Closing Remarks and Key Messages for the Board		
	<p>The Chair thanked everyone for attending and contributing to the discussions and closed the meeting.</p> <p><u>NOTED</u></p>		
51.	Date and Time of Next Scheduled Meeting		
	The next meeting would be held on Tuesday 10 June 2025 at 9.30 am via MS Teams.		