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MINUTE of the FINANCE, RESOURCES AND PEFORMANCE COMMITTEE TEAMS

HIGHLAND NHS BOARD

6 June 2025 at 2.00pm

Present Alexander Anderson, Chair

Graham Bell, Non-Executive Director Louise Bussell, Board Nurse Director Heledd Cooper, Director of Finance Garret Corner, Non-Executive Director

Fiona Davies, Chief Executive

Gerard O'Brien, Non-Executive Director David Park, Deputy Chief Executive Dr Boyd Peters, Board Medical Director

In Attendance Rhiannon Boydell, District Manager (Community)

Kristin Gillies, Interim Head of Strategy and Transformation Brian Johnstone (Facilities, Estates and Capital Planning)

Brian Mitchell, Committee Administrator Katherine Sutton, Chief Officer (Acute) Elaine Ward, Deputy Director of Finance

Nathan Ware, Governance/Corporate Records Manager (from 2.20pm)

Dr Neil Wright, Non-Executive Director

1 STANDING ITEMS

1.1 Welcome and Apologies

Apologies for absence were received from Committee members R MacDonald and S Walsh. Apologies were received from non-Committee members E Beswick, S Compton-Bishop and P Stott.

1.2 Declarations of Interest

There were no formal Declarations of Interest.

1.3 Minutes of Previous Meetings held on Friday 9 May 2025, Associated Rolling Action Plan and Committee Work Plan 2025/26

The draft Minute of the Meeting held on 9 May 2025 was **Approved.** The Committee further **Noted** the Rolling Action Plan, subject to the closure of Actions 19 and 20 and **Noted** the Committee Work Plan 2025/26.

It was confirmed Action 15 would remain on the Action Plan at this time.

2 FINANCE

2.1 NHS Highland Budget 2025/26 Update

H Cooper spoke to the circulated report outlining the current position in relation to the process for agreement of the NHS Highland budget for 2025/26; the Scottish Government response to the initial finance plan submitted and assessment of the potential actions required to meet relevant asks. Detail of the key points of the outlined draft response to Scottish Government were provided along with an indication of the wider background activity already in place and underway, including in relation to value and efficiency, and strategic transformation. The report proposed the Committee take **Moderate** assurance, recognising the remaining risk relating to delivery of the required 3% cost reductions and a balanced Adult Social Care and Integrated Joint Board position.

There was discussion of the following:

- Funding Support for a Public Health Centred Approach. Advised associated specific spend
 to save proposals had been encouraged by Scottish Government, in the context of wider
 national Public Health and Service Renewal Frameworks considerations. The position in
 relation to potential financial assistance for bids was unclear. There remained discussion
 ongoing at national level in relation to a number of associated investment and funding
 aspects across a number of areas. Population health was not solely an NHS matter.
- New Craigs (RAAC) Position. Confirmed funding for future work was unaffected.
- Impact of Annual Leave Accrual and Future Years. Advised related to annual leave outstanding at end of financial year. Appropriate guidance had been provided to managers and staff in relation to ensuring allocations were fully utilised in-year, subject to exceptional circumstance arrangements.

After discussion, the Committee:

- **Examined** and **Considered** the content of the circulated report.
- **Agreed** to **Endorse** the revised NHS Highland Financial Plan 2025/26 and onward submission to Scottish Government.
- Agreed to take Moderate assurance.

2.2 Update on 2024/25 Financial Position and Audit Process

H Cooper advised the relevant audit process remained on track, and the external audit opinion having been the subject of ongoing discussion between relevant parties. A clearance meeting had been held with Audit Scotland the previous day, with no adjusted or unadjusted errors having been raised in relation to the Annual Accounts. Updates were also provided in relation to aspects including risk and associated material statement. There had been no formal Matters to Report. Matters relating to controls (Payroll and Care First Income systems), had been highlighted, actions in relation to which were being taken forward as part of the routine Internal Audit process. Overall progress in relation to the Annual Accounts audit process was positive.

After further discussion, the Committee Noted the reported position.

3 ANNUAL DELIVERY PLAN 2024/25 – Q4 UPDATE

K Gillies spoke to the circulated report, providing an update on submission of the Quarter 4 update of the 2024/25 NHSH Annual Delivery Plan (ADP) to Scottish Government. The submission was part of the evolution of the national planning process, was in line with expectations and continued to be monitored through programme management performance monitoring and assurance reporting processes. The ADP tracker detail had been circulated,

with further detailed updates provided in relation to process matters; transformation activity progress and outstanding deliverables; and associated risks and challenges. The report proposed the Committee take **Moderate** assurance.

The following was discussed:

- Outstanding Deliverables. Questioned how many were related to national transformational
 activity and how best to ensure movement in those specific areas. Aspects relating to
 governance were also raised. Advised strong system processes in place within NHSH to
 drive activity forward, recognising the wider national challenges being presented. The
 importance of integrated practice and wider partnership approaches was recognised.
- Progress Actions Status Definition. Suggested greater focus on the levels of progress being made would be welcome. Further consideration would be given to this aspect.

After further detailed discussion, the Committee:

- **Noted** the circulated report content.
- Agreed to Endorse the Quarter 4 update for onward submission.
- Agreed to take Moderate assurance.

4 INTEGRATED PERFORMANCE AND QUALITY REPORT

K Gillies spoke to the circulated report and gave a brief presentation to members on performance detail, noting discussion was underway in relation to development of the next iteration of future reporting. The Executive Summary provided an outline of relevant performance indicators and continuing challenges were noted in relation to CAMHS, NDAS, Delayed Discharges, 62 Day Cancer target and SACT Access/Benchmarking.

A specific update was provided in relation to Outpatients and Treatment Time Guarantee (TTG) performance, noting national weekly scrutiny in relation to reducing long waits. There was a request to focus on aspects relating to efficiencies. TTG, Delayed Discharge and Emergency Access performance in NHSH was noted as improving. An update was also provided in relation to associated funding elements. Members were further advised as to matters relating to wider access targets and national consideration of potential capacity available across NHS Boards to bring down long waits. The report proposed the Committee take **Limited** assurance.

There was discussion of the following:

- Future Reporting Detail on Outpatients and TTG Performance. View expressed Committee
 required data from a Specialty level in future reports. Advised level of detail requested
 would be available as part of reporting to Scottish Government moving forward, with
 national discussion on the relevant dataset requirements being taken forward. Recent TTG
 performance improvement was acknowledged.
- Delayed Discharges. Update sought on position regarding relevant target and associated internal trajectories. Advised activity being taken forward in relation to medium- and longterm plans in this area including appropriate data capture requirements. Noted a range of activity being taken forward at that time, including in relation to Care at Home and associated frailty pathways etc.
- Potential Service Capacity Utilisation. Questioned if internal progress could be impacted by providing services to external NHS Boards. Advised the focus across individual NHS Boards would be on meeting the 52-week target and considering what they can do to achieve this. Wider process detail remained in development. The potential service change implications and impact on relevant clinical teams and patients having to travel for

appointments was recognised. Aspects relating to prioritisation of clinical need were highlighted in discussion. Future updates would be provided to Committee.

After further detailed discussion, the Committee:

- Noted the circulated report content.
- Agreed to take Limited assurance.

5 STRATEGY AND TRANSFORMATION ASSURANCE GROUP UPDATE

K Gillies spoke to the circulated report providing an update on the strategic transformation model and the associated A and B programmes aligned in that framework and outlining the requirement to further align the STAG priorities to the financial plan. It was reported the ABC change framework had commenced in each level and programme management resource had been assigned to support Senior responsible Officers. The report proposed the Committee take **Limited** assurance.

There was discussion of the following:

 Future Programme Progress Reporting. Questioned level of detail relating to efficiency delivery. Advised as to the development of detail requirement considerations underway in that area. The need for STAG to continue to focus on longer term strategic approach and associated potential service change considerations was emphasised.

After further discussion, the Committee:

- Noted the circulated report content.
- Agreed to take Limited assurance.

6 ENVIRONMENT AND SUSTAINABILITY UPDATE

B Johnstone gave a presentation to members and spoke to the circulated report, advising as to how NHS Highland was proposing to move towards Scottish Government Net Carbon Zero targets and demonstrating the progress made in relation to the NHS Highland Environment and Sustainability agenda at June 2025. Specific detailed updates were provided in relation to carbon emissions; power consumption; utilities finance; waste and resources; current projects, including Capital Plan and EV infrastructure; and wider environment and sustainability activity. The report proposed the Committee take **Moderate** assurance.

The following was discussed:

- Financial Impact of Change of Fuel Usage. Advised as to current wide-ranging considerations, with intended aim of any change being to reduce associated cost. The future availability of a Hydrogen option was under active consideration, further technical detail in relation to which was discussed.
- Achievement of 2030 Targets. Relevant challenges both locally and nationally were acknowledged. Recent discussion with national colleagues was noted as positive.

After further detailed discussion, the Committee:

- Noted the circulated report content.
- Agreed to take Moderate assurance.

7 2025/26 and 2026/27 Meeting Schedules

The committee **Noted** the dates provided as follows:

11 July 2025 2 October 2026 1 August 2025 13 November 2026 12 September 2025 4 December 2026 3 October 2025 8 January 2027 14 November 2025 5 February 2027 12 March 2027 5 December 2025 9 January 2026 6 February 2026 13 March 2026 10 April 2026 8 May 2026

The Committee Noted the meeting schedules for 2025/26 and 2026/27.

8 ANY OTHER COMPETENT BUSINESS

There were no matters raised.

5 June 202610 July 20267 August 202611 September 2026

9 DATE OF NEXT MEETING

The next meeting of this committee was to be held on Friday 11 July 2025.

The meeting closed at 3.35pm