

LOTHIAN NHS BOARD

Minutes of the meeting of Lothian NHS Board held at 0900hrs on Wednesday 13 August 2025 in the Carrington Room, Inverleith Building, Western General Hospital, Edinburgh EH4 2LF.

Present:

Non-Executive Board Members: Prof. J. Connaghan (Board Chair); Mr A. Fleming (Vice Chair); Cllr S. Akhtar; Mr P. Allenby; Mr E. Balfour; Mr J. Blazeby; Dr P. Cantley; Mr A. Cogan; Mr M. Connor; Mr G. Gordon; Prof J. Innes; Mrs K. Kasper; Prof A. Khan; Mr P. Knight; Prof. L. Marson and Ms V. de Souza.

Executive Board Members: Prof. C. Hiscox (Chief Executive); Miss T. Gillies (Executive Medical Director); Mr C. Marriott (Director of Finance); Ms A. MacDonald (Executive Nurse Director) and Mrs S. Webb (Director of Public Health and Health Policy).

In Attendance: Mr J. Crombie (Deputy Chief Executive); Mr T. Power (Director of People & Culture); Ms M. Carr (Chief Officer, Acute Services); Mr C. Briggs (Director of Strategic Planning); Dr J. Long (Director of Innovation and Transformation); Ms T. McKigen (Director of Primary Care); Ms J. Mackay (Director of Communications & Public Engagement); Ms M. Barrow (Chief Officer, Midlothian IJB)(from 9.50am); Ms A. White (Chief Officer, West Lothian IJB); Ms F. Wilson (Chief Officer, East Lothian IJB)(until 11.58am); Ms M. Black (HSCDU Area Manager) and Mr R. Aitken (Associate Director of Operations – Facilities)(for Item 35); Mr D. Thompson (Board Secretary) and Mr. C Graham (Corporate Governance Team, minutes).

Apologies for Absence: Ms T. A. Miller, (Non-Executive Board Member); Cllr D. Milligan, (Non-Executive Board Member); Ms E. Gordon, (Non-Executive Board Member); Cllr H. Cartmill, (Non-Executive Board Member); Mr R. Roberts, (Non-Executive Board Member); Ms H. Campbell, (Non-Executive Board Member); Ms C. Lavery (Chief Officer, Edinburgh IJB) and Ms M. Campbell (Director of Estates & Facilities).

32. Welcome & Declaration of Interests

- 32.1 The Chair welcomed members, colleagues, and observers to the Board meeting.
- 32.2 The Chair asked members to declare any financial and non-financial interests they had in the items of business for consideration, identifying the relevant agenda item and the nature of their interest. No declarations of interest were made.

ITEMS FOR APPROVAL OR NOTING

33. Items proposed for Approval or Noting without further discussion

- 33.1 The Chair reminded those present that the Board agenda was made up of two separate sections. The first was the section for approval commonly referred to as “the consent agenda.” The Chair reminded members that they had the opportunity to advise in advance if they wished any matter to be moved out of this section, for discussion. The Board noted that no such requests had been made.
- 33.2 Minutes of Previous Board Meeting held on 25 June 2025 – Minutes were approved.
- 33.3 Healthcare Governance Committee Minutes – 20 May 2025 – Minutes were noted.
- 33.4 Staff Governance Committee Minutes – 27 May 2025 – Minutes were noted.

- 33.5 Midlothian Integration Joint Board Minutes – 24 April 2025 – Minutes were noted.
- 33.6 Edinburgh Integration Joint Board Minutes – 13 May 2025 – Minutes were noted.
- 33.7 West Lothian Integration Joint Board Minutes – 01 May 2025 – Minutes were noted.
- 33.8 East Lothian Integration Joint Board Minutes – 22 May 2025– Minutes were noted.
- 33.9 Health and Care (Staffing) (Scotland) Act 2019, Quarterly Board Compliance Report Quarter 1, 1 April – 30 June 2025 – Report was noted.
- 33.10 Quarter 1 2025/26 - National Whistleblowing Standards Performance Report – Report was noted.
- 33.11 Board Appointments – The Board approved the following appointments:
- Appointment of Ralph Roberts as an additional, sixth Non-Executive Member of the Finance & Resources Committee from 13 August 2025, and as the Non-Executive Chair of the Committee from 1 January 2026.
 - Appointment of Heather Campbell as a Voting Member of the Midlothian IJB, from 13 August 2025.
 - Reappointment of Martin Connor as a co-Chair of the Pharmacy Practices Committee, from 1 September to 31 December 2025.
 - Reappointment of Mike Ash as a Lay Member of the Pharmacy Practices Committee, from 13 August 2025 (for a final three-year term).

ITEMS FOR DISCUSSION

34. Board Chair's Report – August 2025

- 34.1 The Chair highlighted that with the addition of two new non-executive board members, he intended to hold discussions with other non-executive members about current and future appointments to the Board's governance committees, to ensure that the capacity and experience available was best utilised.
- 34.2 The Chair reported that a planned visit by the Cabinet Secretary for Health and Social Care to the Royal Infirmary of Edinburgh would take place on 14 August. The intention was to provide a demonstration of the new 'Infix: Schedule' theatre scheduling system which improves the efficiency of surgical operating theatres, optimises the patient pathway and helps address patient waiting list backlogs.

35. Chief Executive's Report – August 2025

- 35.1 There was discussion on the report, areas highlighted included:
- **NHS Scotland Board Chief Executives / Executive Group Update** - The Board noted that national work was ongoing around the public sector reform landscape. NHS Lothian's unscheduled care work was also now being cited as having the potential to influence the urgent and unscheduled care model for Scotland. The Chief Executive thanked the Deputy Chief Executive and Chief Officers for their commitment in developing this work.
 - **Mental Health Services** - The Board noted the continued escalated position in relation to CAMHS performance and that this would be discussed elsewhere on the agenda, with further details to be reported to the Strategy, Planning & Performance Committee in September.

- **Equality Diversity and Inclusion Conference** - The Board noted that the Conference had taken place on 26 June. The Conference was part of the advancing equalities action plan taken to each Staff Governance Committee meeting. The Director of People & Culture agreed to share the slides from the event with Board Members.
- **Board Development Session, 2 October 2025** - The Board noted the proposal for a Board Development Session in early October. This would support members' discussion and shaping of the steps needed in reforming and transforming the health and care system as a strategic response to recent frameworks and plans published by the Scottish Government.

The Board also recognised useful connections for transformation work at the national level, with the Chair now chairing Board Chairs and the Chief Executive chairing Board Chief Executives. The appointment of Prof. Innes to the Innovation Design Authority was also noted.

- **Hospital Sterilisation and Decontamination Unit** - The Deputy Chief Executive reminded the Board of the critical nature of the HSDU and the challenges created by ongoing resilience risks around this service. The Board heard from staff colleagues attending about recent local service outages that had occurred in July due to engineering issues, where recovery had been further challenged due to the lack of resilience at a national level. Despite this challenge, local recovery efforts had been aided by prior contingency planning, good collaboration and communication, and the effective use of data and forecasting.

The Board recognised the significant efforts demonstrated by staff in dealing with and responding to the ongoing levels of fragility in the HSDU service. However, members expressed a level of frustration that these service vulnerabilities remained unaddressed. The Chief Executive recognised the frustrations raised, highlighting that challenges remained due to a lack of capital funding and that resilience in this area needed to be considered at a national level. This had been recognised and there was now work in hand via the Board Chief Executives' Group to consider this key infrastructure risk collectively, significantly driven by NHS Lothian's experience. The outputs of this national work would inform NHS Lothian's risk mitigation plan, which would continue to be reported via the Board's Finance & Resources Committee.

36. Opportunity for committee chairs or IJB leads to highlight material items for awareness

- 36.1 **Staff Governance Committee** – The Committee had acknowledged and discussed significant ongoing risks and complexity relating to the implementation of Agenda for Change reform measures, which included the further planned reduction in the working week, the review of Band 5/6 nursing roles, and protected learning time. The Committee had asked the Corporate Management Team to consider whether this needed to be escalated to the Corporate Risk Register and to make an appropriate recommendation to the Board.

It was also reported that the Committee had recently agreed to stand down the Workforce Efficiencies Programme Board, as its work had concluded. The Committee continued to receive standing updates on actions being considered in response to a recent ruling of the UK Supreme Court [2025] UKSC 16 and information was available to be shared with other board members, as required.

The Committee had welcomed recent presentations on work undertaken by departments in relation to staff wellbeing and a slide was shared to help illustrate the impacts of this work for other board members. The Committee Chair also reported her attendance at the recent NHS Lothian Equality, Diversity & Inclusion Conference, which had been an important showcase of the Board's work in this area.

- 36.2 Healthcare Governance Committee - The Board noted the work of the Public Health Team and staff in the delivery of adult & child vaccination programmes across Lothian, bowel cancer screening programmes and diabetic eye screening programmes. The Committee wished to highlight to the Board these examples of positive work taking place around the prevention agenda and the moderate assurance taken in respect of all the above programmes was noted.

37. NHS Lothian Board Performance Report

- 37.1 The Deputy Chief Executive presented the Board Performance report, outlining the Board's performance across the agreed metrics.
- 37.2 There was discussion on indicators within planned care, Scottish Government proposals to have no patients waiting over 52 weeks for outpatients and treatment time guarantee by the end of March 2026, the availability of funding to deliver this and the impact on trajectories, due to a reduced level of funding and receipt of non-recurring funding.
- 37.3 The Deputy Chief Executive gave further information on the 'Infix:Schedule' theatre scheduling system and how this would be used to maximise and optimise use of funding, with NHS Lothian taking forward testing of the new scheduling system ahead of an NHS Scotland directive for all Boards to implement use of 'Infix:Schedule' later this year. The Board noted that in other services such as radiology and endoscopy, there was a focus on maximising the use of non-recurring funding
- 37.4 The Board also received an update on the ongoing Unscheduled Care programme work and the sustained improvement within this whole system approach. This work had been presented to the First Minister and there had been a request to share this work and the processes involved with other Boards.
- 37.5 There was discussion on the Annual Delivery Plan trajectories and members expressed a desire to see trajectories relating to the removal of waits over 52 weeks, covering the full financial year and beyond, to understand when this was likely to be achieved for each specialty. It was also suggested that the level of ambition against targets should be reviewed regularly, increasing when appropriate. There was also discussion on the NHS Scotland operational improvement plan, the alignment of reporting, understanding waiting list reductions through use of data and the mental health performance position.
- 37.6 The Board noted both the implications of the performance matters described and NHS Lothian's current levels of compliance against national performance standards and KPIs.

38. Child and Adolescent Mental Health Services (CAMHS) Performance Update

- 38.1 The Board received a briefing on the current service position, recognising that this was unsatisfactory and that there was a desire to deliver meaningful performance improvements by December 2025. However, the significant challenges arising due to increased demand, reduced workforce availability and previous funding reductions within the Mental Health Outcomes Framework were also acknowledged. As such, any meaningful recovery of the position was likely to require additional resource allocation and may take longer.

- 38.2 The purpose of the report was to update the Board on progress in relation to improving performance against the CAMHS LDP Access Standard and associated initiatives to raise the standardisation and effectiveness of services. The report provided an overview of activities and actions already undertaken and detailed the necessary actions required to achieve the LDP Standard.
- 38.3 The Board discussed the challenges faced within CAMHS and whether CAMHS could be expected to meet the LDP standard by December 2025. There was acknowledgement that successful project delivery of the LDP Standard would likely require increased workforce capacity and additional time to implement plans effectively. The Board noted that relevant senior staff would continue to work together with Scottish Government officials to reduce waiting lists and would report on the actions and outcomes of the recovery plan as reflected within the Board's 2025/26 Annual Delivery Plan.
- 38.4 Board members noted the specific impact on NHS Lothian's reported performance due to how national waiting times guidance was applied in relation to initial appointments and the commencement of treatment. Lothian's approach was considered to be in line with national guidance and this differed from most other Boards, where an initial assessment appointment might be recorded as the commencement of treatment. NHS Lothian was consulting closely with clinicians to understand the circumstances in which an initial appointment could genuinely be considered as the commencement of treatment and recorded as such. Consultation was also underway with children and young people and their families to understand the potential impacts of revised recording methodologies.
- 38.5 The Board also acknowledged ongoing work on reviewing neuro-developmental pathways for children and adults and what was needed around this, the increase in referral rates and the national challenge around recruitment of child and adolescent psychiatrists.
- 38.6 The Board noted that there would be further detail around expected December 2025 trajectories brought to a Strategy, Planning & Performance Committee meeting.

39. NHS Lothian Annual Delivery Plan (ADP) 2025/26

- 39.1 The Director of Strategic Planning presented the ADP for formal Board approval.
- 39.2 The Board noted the length of time it had taken this year to get the plan to this stage and it was recognised that the Scottish Government's new Chief Operating Officer had now written to all health boards confirming the Scottish Government was comfortable with ADPs as submitted.
- 39.3 The Board acknowledged that the ADP detail had now been discussed in various places and the Director of Strategic Planning highlighted the addition of an executive summary and the table mapping plans and planned outcomes against previous First Minister commitments. Some elements remained to be finalised, due to the continued receipt and allocation of additional, non-recurring financial resource in year. Therefore, it was planned to bring addendums to the plan for Unscheduled Care and Mental Health to the next Board meeting.
- 39.4 Members recognised the time slip in relation to the ADP and noted that there would not be a separate reporting system for the delivery of ADP commitments. Reporting would be through the usual mid-year review, annual reports and through LSDF programme boards.
- 39.5 The Chair commented that this year's approach to the ADP had been more fragmented and protracted than in previous years and that, in future, it would be important for Scottish Government to let boards know their position around funding at the start of the financial year and not have money coming late that would impact board ADPs.

- 39.6 The Board agreed the ADP and agreed to receive addendums for Unscheduled Care and Mental Health at the October Board Meeting.

40. NHS Lothian Financial Position – June 2025

- 40.1 The Director of Finance provided an update on the Board's financial position. There was discussion on the Quarter 1 review and forecasts that would be further considered at the August Finance & Resources Committee meeting. The Board discussed the consistent cost pressures around drugs and prescribing, the receipt and allocation of non-recurrent Scottish Government "sustainability funding" to address recurring pressures, work to improve the nurse agency use position especially within the Royal Edinburgh & Associated Services, pressures within estates and the drive to improve performance whilst achieving efficiency targets and reducing the recurrent deficit.
- 40.2 The Board noted the uncertainty of the financial risk associated with the planned further reduction in the working week, which would have a recurring impact. There was also discussion on the dilemma of balancing short-term savings against further service impacts, recognising the same challenge was faced by the Integration Joint Boards.
- 40.3 The Board noted the reported financial position being a £5.6m overspend as at the end of June 2025 and noted the current shortfall on delivery of £3.6m of Financial Recovery Plans for May 2025 recognising there would be Financial Oversight Board (FOB) escalation for Business Units where delivery was not in line with plans or target. The importance of meeting the Board's statutory financial obligations was also acknowledged.

41. Corporate Risk Register

- 41.1 The Executive Medical Director introduced the report highlighting the June 2025 updates provided by the executive leads concerning risk mitigation, as set out in the assurance table within the report appendix.
- 41.2 There was discussion on the potential addition to the Corporate Risk Register of a risk relating to the ongoing implementation of Agenda for Change reforms and the opportunity to use this as an example to separate the operational and strategic risk, establish principles and methodology to be able to work out where other risks would be moving forward. The Board noted the timescale for applying the further reduction in the working week, with an implementation plan to be submitted to Scottish Government by 1 October 2025. Concurrently, a draft corporate risk would be prepared for the Corporate Management Team to consider during August, with subsequent recommendations to be made to the Staff Governance Committee in September and thereafter to the October Board Meeting.
- 41.3 The Board noted a minor change in description for the current Finance risk (3600) to reflect the 2025/26 budget position, noted the overview of the changes in the Corporate Risk Register over the past two calendar years as set out in Table 1, noted the divisional high and very high risks as reviewed by the CMT in July 2025 and noted the planned work to identify and agree strategic risks to strengthen existing risk management arrangements.

42. Any Other Business

- 42.1 None.

43. Reflections on the Meeting

- 43.1 The Chair reminded board members that they could contact colleagues out with the meeting if they wished to discuss any items further.

44. Date of Next Board Meeting

- Wednesday 8 October 2025 at 09:30am

Signed by Chair

08 October 2025

Prof. John Connaghan

Chair – Lothian NHS Board