

Finance and Performance Committee

27 March 2025

Minutes

Attendance

Melanie Barnes (Interim Director of Finance), Davie Campbell (Chair - Non-Executive Director) Debs Crohn (Head of Improvement – minute-taker), Meghan McEwen (Board Chair – Non-Executive Director), Laura Skaife-Knight (CEO), Jean Stevenson (Non-Executive Director), Samantha Thomas (Director of Nursing, Midwifery, Allied Health Professionals and Chief Officer Acute Services), Phil Tydeman (Director of Improvement), Lynda Bradford (Head of Community Services on behalf of Stephen Brown)

Guests: Jarrod O'Brien (Director of People and Culture)

1. Cover page

2. Welcome and Apologies

The Chair (Davie Campbell) opened the meeting at 09.30 am.

Apologies received from Issie Grieve (Non-Executive Director) and Stephen Brown (Chief Officer – Integration Joint Board).

Jarrod O'Brien (Director of People and Culture) attended Committee for item 14 - Workforce Workstream Update March 25

Members agreed the meeting was quorate in accordance with the Boards Code of Corporate Governance.

3. Declarations of Interest (Presenter: Chair)

There were no declarations of interest raised.

4. Minute of the meeting held 30 January 2025 (Presenter: Chair)

The Minutes of the meetings held on 20 January 2025 were accepted as an accurate record of the meeting and approved.

5. Action Log (Presenter: Chair)

The action log was reviewed, no outstanding issues (see action log for details).

6. Matters Arising (Presenters: Chair)

The Board Chair acknowledged that a conversation had taken place regarding the presentation of risks. at the last meeting but this was not recorded in the minute. Committee Chair advised that there were some questions raised in relation to risks, that these will be picked up at the Board Seminar on risk taking place in May 2025.

7. Chairs Assurance Report Finance and Performance Committee held 30 January 2025 (Presenter: Chair)

Committee Chair presented the Chairs Assurance report of the Finance and Performance Committee meeting held on 30 January 2025. The Chief Executive asked for amendments to be made to the Report in relation to assurance on preparedness for the Island Games, noting that the final plan will come to Committee in May 2025 for approval.

Decision/Conclusion

Committee noted the report and discussed items escalated to the committee.

8. Update from National Directors of Finance Meeting FPC2425-110 (Presenter: Interim Director of Finance)

The Interim Director of Finance presented the update from the National Directors of Finance meeting held on the 3 February 2025. Points to note as follows:

- All Boards have now submitted their 3-year-financial plans. These will be discussed at the next Directors of Finance meeting on the 27 March 2025
- The Board was commended for the quality of our 3-year-financial plan, Scottish Government stated that it is the one of the best submissions receive.
- The Board is 1 of 4 Boards who met the 3 Scottish Government expectations set out in the planning guidance.

J Stevenson noted the report mentioned plans to refresh the TURAS platform and asked that progress updates be shared with Committee.

The Board Chair asked if the TURAS re-refresh will incur any additional cost pressures, and asked for clarity on how these are being monitored by Board Directors of Finance.

Interim Director of Finance confirmed this is on the radar for the Directors of Finance Community, regular updates on progress will be provided to Committee.

The Board Chair thanked the Interim Director of Finance for the update, this approach should be used as an exemplar for all national meeting updates at Board Committees.

Decision/Conclusion

Members noted the update.

9. Corporate Risks aligned to the Finance and Performance Committee FPC2425-111 (Presenter: Interim Director of Finance)

The Interim Director of Finance presented the Corporate Risks aligned to the Finance and Performance Committee recognising that more work is required.

There is one high-risk on the Corporate Risk Register in relation to the Board being escalated to Level which will result in a section 22 notice.

Due to the significant work undertaken within the Digital Services, the Committee noted the reduction in scoring for the digital maturity risk.

Board Chair raised a concern regarding risk 1211 acknowledging that substantial work has been undertaken to mitigate the risk, however the narrative does not reflect the work undertaken. Risk to be reviewed by the Head of Improvement and Chief Executive.

Board Chair noted that the risk in relation to Delayed Transfers of Care is not currently on the risk register. DoNMAHP advised that the delayed transfers of care risks sit with the Joint Clinical Care Governance Committee (JCCGC) due to the patient journey aspect of the risk.

This was discussed in agenda item 12.8.

Chief Executive reflected that there is a disconnect between what is presented in the risk register and the reality of what is happening.

Decision/Conclusion

Committee took assurance on the progress and mitigations presented on the latest Corporate Risk Register

10. PLACE

10.1. Chair's Assurance Report - Sustainability Steering Group FPC2425-112 (Presenter: Head of Facilities and NPD)

No meeting has taken place since the last Committee - next meeting scheduled to take place 27 March 2025.

Decision/Conclusion

Members noted the next meeting is scheduled to take place on the 27 March 2025.

10.2. Business Continuity Plan FPC2425-113 - No paper received (Guests: Resilience Manager)

No paper received.

Committee Chair expressed disappointment that the Business Continuity Plan Update was not received, this was shared by the Chief Executive.

The Chief Executive. raised concerns regarding capacity within the Boards Resilience team and advised that the paper will be brought to Senior Leadership Team 22 April 2025, Finance and Performance Committee 22 May 2025 and escalated to the Board as an area of concern.

Board Chair raised concerns regarding lack of visibility of the BC audit and the live planning scenario which is scheduled considering the Island Games. DoNMAHP advised that a live planning scenario is planned for April 2025.

The Chief Executive committed to reviewing Executive Leadership for the resilience portfolio going forward and will pick up the concerns raised at Committee.

Decision/conclusion

Committee noted no paper was received; Chief Executive will take away the actions listed above.

10.3. Island Games 2025 Final Plan (including Communication Plan, Medical Plan and Delivery Plan) FPC2425-114

The Director of Nursing. Midwifery, Allied Health Professionals and Chief Officer Acute Services (DoNMAHP) presented the Island games 2025 final plan.

DoNMAHP advised that whilst the plan is 80% complete, we are still not in a position to approve the Island Games 2025 final plan due to outstanding actions not being finalised by the Island Games Committee. The Island Games Committee Chair attended Senior Leadership in March 2025 to provide assurance.

Chair raised concerns regarding the risks associated with the Island Games and the pressure this will place on our services. DoNMAHP advised that the Board has confirmed there is orthopedic and Emergency Department (ED) staff available throughout the duration of the Island Games, and a business continuity exercise will be undertaken in April 2025.

Board Chair asked for clarity on who could declare a major incident and what the process would be if a critical or major incident was declared and if additional on-call resources would be available in the event of a major incident for Orkney residents.

DoNMAHP advised that middle grade cover will be available throughout the Island Games. The process for accessing healthcare during the Island Games has been shared with all Countries participating. Additional support is available via Sutherland's Pharmacy. In the event of a major incident the Board process would be invoked. Emergency links will be in place with the Island Games Operations Group based at the Town Hall.

Chief Executive asked if any additional costs have been calculated in relation to the Island Games. Interim Director of Finance advised that this work is underway and will be brought to Committee once the work is finalised.

Board Chair raised concerns regarding additional costs to the Board and asked if there is a risk that this may result in additional cost pressure to the Board which are not re-reimbursed by the Island Games Committee. Interim Director of Finance advised that whilst there may be additional costs they should be minimal.

J Stevenson asked for confirmation that staff are aware that no additional annual leave will be authorised during the Island Games. DONMAHP advised that this has been communicated via People and Culture and in staff communication, staff briefing sessions to be scheduled over the next 3 months.

J Stevenson asked if there had been any decisions made regarding cruise ships not attending during the Island games. DoNMAHP advised that there will be 2 cruise ships with approve 1,000 patients visiting Orkney during the Island Games. Final number will be confirmed ahead of the event.

Decision/conclusion

Members reviewed and scrutinised the Island Games 2025 plan, the final plan following the business continuity exercise will be discussed by the Senior Leadership Team and brought to Committee for approval and assurance 22 May 2025.

11. PATIENT SAFETY, QUALITY AND EXPERIENCE

Chair raised a concern regarding no patient safety, quality and experience papers being presented to Committee.

DoNMAHP advised that Quality Impact Assessments (QIA's) are brought to Committee, however no QIA Panels have taken place since the last meeting.

Decision/conclusion

Chief Executive to review.

12. PERFORMANCE

12.1. Finance and Performance Committee Annual Report and committee evaluation outcomes FPC2425-130 (Presenters: Chair)

The Committee Chair presented the Finance and Performance Committee Annual Report 2024/25 and Committee self-evaluation outcomes.

Board Chair asked that the poor response rate from Committee members (2 members) be noted in the annual report and asked that work be undertaken to identify how the process could be approved for the next round of annual reports.

Chief Executive asked for the following amendments to the annual report.

- It be made clearer that the Chief Financial Officer (CFO is the CFO for the Integration Joint Board (IJB) be made clearer.
- Medical Director be removed from the list of attendees and the Director of Improvement be added.

Committee Chair agreed that additional narrative should be included the Chairs Conclusion outlining the significant improvements in the Digital Services in 2024/25.

Decision/conclusion

Committee approved the annual report for submission to the Audit and Risk Committee 6 May 2025, following the amendments listed above being added to the report.

12.2. Month 11 Financial Results FPC2425-115 (Presenter: Interim Director of Finance)

The Interim Director of Finance presented the Month 11 Financial Results.

The Board is now progressing with the work on Service Level Agreements to insure this is cognisant of cost increases.

Board Efficiency Scheme remains on track to deliver the predicted £4 million in year savings.

Capital programme remains on track for delivery this financial year.

Decision/conclusion

Committee received the Month 11 report and took assurance on progress against the financial plan, noting the increase in costs in some areas.

12.3. Financial Year End Forecast FPC2425-116 (Presenter: Interim Director of Finance)

The Interim Director of Finance presented the Financial Year End Forecast noting the risks which exists for prescribing costs in January and February, and Service Level Agreements financial data.

Agenda for Change finance is still to be confirmed, noting that number of Band 5 to Band 6 submission remains at 4.

Committee Chair raised concerns regarding the number of business cases raised despite clear communications to staff of our financial escalation status as this remains a key risk to our financial sustainability.

Chief Executive was clear that the reduction in headcount is not an NHS Orkney decision it is an essential mandate from Scottish Government to bring the Board back to balance as set out in our 3-year-financial plan. Director of People and Culture and Chief Executive continue One to One conversation with Executive Directors in relation to reducing headcount are underway and regular communications are issued to staff to ensure clear and consistent messages are shared.

Board Chair reminded Committee that the external culture, governance and senior leadership review raised concerns regarding the perception that staff are busy and asked if the workforce bench marking data had been produced. Interim Director of Finance advised that this work is underway.

Director of Improvement confirmed that bench marking is available for Band 6 and below roles, this will be analysed as part of the improving together workforce workstream.

Chief Executive expressed disappointment that the Agenda for Change (AfC) paper was not brought to Committee and asked that a deep dive on the implications for the Board on AfC be brought to Committee 22 May 2025.

Board Chair raised concerns regarding the presentation of the agency and locum costs presented as there appeared a disconnect. Interim Director of Finance advised that the costs pressures in medical and nursing departments are due to the substantial number of locums. The DoNMAHP advised that whilst costs are still high, compared to this time last year there has been a 42% reduction, there are very few agency staff being used in nursing service. All requests for locums and agency staff are subject to approval via the vacancy control panel, a recruitment campaign for medical staffing commenced at the end of March 2025 for 6.3 WTE.

Director of Improvement advised that substantial work has been undertaken to reduce the number of agency staff in nursing thanks to the leadership of the DoNMAHP, this continues to be monitored through the Improving Together Programme Board and Vacancy Control Panel (VCP).

J Stevenson asked for clarity on when and how posts will be reduced for clinical and administration staff. DoNMAHP confirmed that the Band 6 review will look at options -

and was discussed in more detail in item 174 on the agenda, The DoNMAHP advised that we have 4 international recruited joining the Board over the next 2 months which will remove the need for agency staff.

J Stevenson asked if there was an opportunity for clinical staff who are in administrative roles to move back into a clinical role. DoNMAHP advised that this may be an opportunity and will be considered as part of the workforce workstream.

The Board Chair raised concerns regarding workforce savings and asked the language be considered when referring to the Integration Joint Board (IJB). Interim Director of Finance advised that a deep dive is underway to ascertain the current position with IJB funding, this will be brought back to Committee 22 May 2025.

Decision/conclusion

Committee received the Financial Year End Forecast and took assurance on progress against the financial plan.

12.4. Scottish Government Quarter 3 Finance Meeting FPC2425-117 (Presenter: Interim Director of Finance)

The Interim Director of Finance presented the Scottish Government Quarter 3 Finance Meeting report. Scottish Government were content with the Boards Quarter 3 position, however, continue to challenge the Board to do more to reduce the deficit position. Chief Executive confirmed that the meeting was positive, and the Board need to continue focusing on the asks of Scottish Government for support.

Decision/conclusion

Committee noted the Scottish Government Quarter 3 Finance Meeting update.

12.5. Financial Sustainability – Scottish Government offer to NHS Orkney. (Presenter: Chief Executive)

The Chief Executive presented the draft financial sustainability offer to NHS Orkney from Scottish Government.

The proposal has been made by Scottish Government because of the level of detail submitted in our 3-year financial plan and the assurance this provided. Scottish Government have assurance in the Boards Leadership Team however recognise the need for the Board to reduce headcount, improve productivity and efficiency, deliver transformational change and our financial plans if the Board is to achieve financial balance by 2028/29.

The Chief Executive advised that the letter shared with Committee is a draft, final letter from Scottish Government will come forward to Board in April 2025 for discussion.

Committee Chair asked for clarity on how the additional non-recurring funding will be used to deliver the biggest impact and how will it be monitored. The Interim Director of Finance confirmed the governance route is via the Financial Escalation Board, Finance and Performance Committee for onward assurance to the Board.

Board Chair acknowledged that the proposal from Scottish Government whilst a success story, also presents a cultural risk and an opportunity particularly transforming collaborative shared services across the North of Scotland and Orkney.

Chief Executive raised concerns regarding the removal of external support with Scottish Government, this will be reviewed and confirmed in the final letter from Scottish Government.

Decision/conclusion

Committee discussed and recommended the funding proposal from Scottish Government be approved by the Board.

12.6. Planned Care Programme Board - Chair's Assurance Report FPC2425-118 (Presenter: Director of Improvement)

The Director of Improvement presented the Planned Care Programme Board Chair's Assurance Report and advised that escalations raised have been addressed.

Board Chair thanked the Director of Improvement for the work undertaken and asked for clarity of the position with the pain service. Conversations have taken place regarding transition of the service back to NHS Grampian, this is one of the areas the Clinical Services Review is looking at.

Chief Executive reminded Committee of the requirement the Board has around Planning with People and how important it is that this must be factored into any service re-design. Director of Improvement advised that engagement is being picked up by the Clinical Services Review Oversight Group.

Director of Improvement confirmed that NHS Orkney is one of the first Board to undertake an audit of patients waiting over 40 weeks by the National Elective Co-Ordination Unit (NECU), outcomes are being monitored by the Planned Care Programme Board.

Decision/conclusion

Committee noted the report and discussed items escalated to the committee.

12.7. Improving Together Programme update. FPC2425-123 (Presenter: Director of Improvement)

The Director of Improvement presented the Improving Together Programme Update, advising the Board is in a much better position than this time last year. The Improving Together Plan for 2025/26 will be brought to Board 24 April 2025, to ensure alignment with the Clinical Services Review.

Board Chair thanked the Director of Improvement for their support over the past 12 months acknowledging the significant impact they have made on the Boards efficiency programme.

Decision/conclusion

Committee discussed and noted the update.

12.8. Integrated Performance Report - Finance and Performance Chapters (Presenter: Interim Director of Finance)

The Interim Director of Finance presented the Finance, Operational Standards and Community Chapters of the Integrated Performance Report (IPR) ahead of it going onward to the Senior Leadership Team and Public Board Meetings in April 2025.

Board Chair welcomed the performance data but raised concerns regarding the level of assurance that could be taken based on the data being presented.

Committee Chair raised concerns regarding the lack of information and narrative presented as it does not provide the assurance required by the Committee.

J Stevenson asked for clarity on when additional resources would be required to support endoscopy and cardiology. Director of Improvement advised that the first Cytosponge diagnostic clinic has taken place, 8 patients have been seen. DoNMAHP advised that the echo-cardiologist vacancy was not filled and is being covered by agency staff to ensure continuity of service for our patients on Island.

DoNMAHP advised that system pressures continue to impact our Delayed Transfers of Care (DToCs), Head of Community Services advised that the closure of St Rognvalds Care Home continues to impact on our DToCs performance. Chief Executive advised that a deep dive on DTOC's is now required, an agenda item has been requested at the next IJB, this will be brought to Board for further discussion. Board Chair asked for confirmation on why the ophthalmology waiting times data was not included in the IPR.

Chief Executive confirmed that the full chapters of the IPR are presented to Committees for visibility and recognised that the quality of narrative requires additional work, this will be discussed by the Corporate Leadership Team.

Decision/conclusion

Committee took limited assurance on the operational data presented.

12.9. Update on Corporate Governance refresh of Standing Financial Instructions and Scheme of Delegation (Phase 1) FPC2425-121 (Presenter: Interim Director of Finance)

The Interim Director of Finance provided an update on Phase 1 of refreshing the Standing Financial Instructions and Scheme of Delegation. 6 Chapters are to be reviewed. A new chapter has been added on the responsibilities of the Board, Chair and Non-Executive Directors, Director of Finance.
Minor changes to the Accountable Officer section.

Significant changes to the procurement process, budget holder responsibilities, and scheme of delegation.

Board Chair welcomed the methodology used and the ease of reading.

Board Chair asked that the section on Non-Executive Directors and remuneration committee be reviewed.

Decision/conclusion

Committee welcomed the changes, discussed the update and approved the next steps.

12.10. NHS Orkney Procurement Annual Report 2023/24 FPC2425-122 (Guests: Procurement Manager)

Committee noted the timing of the NHS Orkney Procurement Annual Report. Committee Chair asked that appropriate assurance be put in place to ensure the brought is brought to Committee earlier going forward.

Board Chair asked for clarity around the launch of the Community Benefits portal and what benefits have been delivered through the portal. Interim Director of Finance was asked to provide an update on benefits delivered,

Interim Director of Finance advised that a contracts register is now in place, and this will be presented at all Finance and Performance Committee.

Chief Executive asked that this works aligns with the Anchor Strategy and the Boards Procurement Strategy.

Decision/conclusion

Committee noted the NHS Orkney Procurement Annual report 2023/24.

13. PEOPLE

14. Workforce Workstream Update March 25 FPC2425-124 (Presenter: Director of People and Culutre)

The Director of People and Culture presented an update on the Workforce Workstream of the Improving Together Programme and the work currently underway in the following areas.

- **Vacancy Control Panel** - A review of the Vacancy Control Panel which will be complete by the end of March 2025.
- **Excess hours and bank** - A review is underway in areas where we are using excess and bank hours. Detailed analysis will be undertaken to look at how we reduce the need for excess hours, starting with high-use areas.
- **Review of agenda for Change Band 7 and above and Band 6 and below roles** - all roles are being reviewed by Executive Directors to identify if roles become vacant, would they be replaced like-for-like in terms of band and hours.
- **Reviewing current vacancies** – Executive Directors were reviewing opportunities to remove current vacancies recognising the need to remove around 40 Whole Time Equivalents (WTE) posts from the organisation.
- **Appraisals, statutory and mandatory training, sickness management** - dedicated leads have been identified to support the following areas where performance improvements are required, these being: IP1 (including HDU), IP2 (including MacMillan), ED, Domestic, Community Mental Health and Community Nursing
- **Workforce investments** - this includes looking at the £5.6 million requests for additional resources through the recent business cases process and identifying what was requested for new posts.

The work listed above constitutes a substantial amount of our efficiency programme for 2025/26 (around 28%).

DoNMAPH thanked the People and Culture team for their support and advised that the work that is missing from the report is the Agenda for Change implications and actions. Director of People and Culture advised that this will be included within the Improving Together Programme Workstream.

Chief Executive recognised the areas where progress is being achieved and requested that a deep dive on Agenda for Change be brought to Committee 22 May 2025.

Committee Chair asked for assurance that the conversations have moved from discussions to actions. Director of People and Culture confirmed there will be outcomes from the conversations with Executive Directors.

Chief Executive asked for clarity on what has been stopped to enable the people and culture team to support the required improvements. Director of People and Culture to confirm.

Decision/conclusion

Committee received and noted the workforce re-design plan.

15. Finance Improvement Implementation plan (Response to Viridian Report) FPC2425-125 (Presenter: Interim Director of Finance)

The Interim Director of Finance presented the Finance Improvement Implementation plan (Response to Viridian Report) update and the key recommendations from several reviews. The improvement plan is a live document, as areas of improvement are identified, they will be added to the improvement plan.

There are 3 overdue actions from external audit, work is underway to close the actions within the next month,
Zero budgeting action has been removed from the Viridian improvement plan.

Committee Chair thanked the approach taken to bringing several reports together.

Board Chair asked for clarity on the term 'Star Chamber' and its governance. The Interim Director of Finance advised the Star Chamber was set up last year for confirm and challenge, outputs of the Star Chamber were taken to the Senior Leadership Team.

Decision/conclusion

Committee received the update and took assurance on the plan.

16. POTENTIAL

16.1. Chair's Assurance Report January and February 2025 - Digital and Information Operational Group (DIOG) FPC2425-126 (Presenter: Head of Improvement)

Head of Improvement presented the Chair's Assurance Reports from the Digital Information Operational Group meetings in January and February 2025

There was one item escalated to the Committee in relation to the national GP IT re-provisioning programme which is currently RAG rated Red. This is a national programme, and the Board have no control over delivery of the programme. A National Incident Management Team has been stood up by National Services Scotland to bring the programme back on track. No change in the current situation – all migrations were placed on hold and subject to individual Boards. There is no immediate risk for NHS Orkney currently. Finance and Performance Committee will be kept informed of progress.

Positive assurance provided to Committee in the following areas.

- Work is well underway on implementing MORSE in the Mental Health team, focus has been on processes and Standard Operating Procedures and looking at delivery of the system in collaboration with NHS Grampian

- Risk C-2024-02 (Digital Maturity) likelihood score has been reduced from 3 to 2 (overall risk score of 10)

Decision/conclusion

Committee noted the report and discussed items escalated to the committee, taking assurance of the positive work underway to accelerate digital transformation across the Organisation.

16.2. Digital and Information Operational Delivery plan 2024/25 update and priorities 2025/26 FPC2425-127 (Presenter: Head of Improvement)

The Head of Improvement provided an update on the Digital and Information Operational Delivery Plan 2024/25 and the priorities for 2025/26.

The proposed focus for Digital Services in 2025/26 is as follows.

- Accelerating digital transformation through our year 2 digital priorities outlined in Table 1
- Increasing the uptake of Near Me reducing the need for people to travel for appointments where clinically safe to do so
- Patient Focused booking including text message reminder service.
- Agreeing a model of service delivery for our Digital Services
- Further strengthening clinical leadership in this space
- Theatre scheduling tool will be rolled out in December 2025 as the Board are reliant on NHS Grampian

Decision/conclusion

Committee received, noted, and agreed that the digital priorities for 2025/26 align with our Corporate Strategy 2024-28 Year 2 priorities.

16.3. Laboratory Information Management System -mitigation plan FPC2425-128 (Presenter: Executive Director Nursing, Midwifery, Allied Health Professionals and Chief Officer Acute Services)

The DoNMAHP presented the Laboratory Information Management System (LIMs) mitigation plan as requested by Committee at its meeting on the 30 January 2025.

The paper was presented to the DOG on the 24 March 2025, who supported the recommendation to develop a Business Case for an additional Band 6 post and the risk to patient care if additional resources are not brought in to support the clinical service delivery.

The Board Chair thanked the report authors but acknowledged that no mitigation was provided in the paper.

Chief Executive asked where the risk is being managed and where the requests for new posts are made, it was agreed that the DoNMAHP bring a business case to Senior Leadership Team for consideration.

Decision/Conclusion

Committee received and noted the report.

16.4. Chair's Assurance Report - Improving Together Programme Board FPC2425-129 (Presenter: CEO)

The Chief Executive Officer presented the Chair's Assurance Report from the Improving Together Programme Board.

Decision/conclusion

Committee discussed the items escalated to the Committee.

17. Items approved at Board.

- Committee Annual Report 2024/25 approved for onward submission to the Audit and Risk Committee.
- Refresh of Standing Financial Instructions and Scheme of Delegation (Phase 1) approved.

18. Agree Items for Chairs Assurance Report to Board (Presenter: Chair)

- Business Continuity Plan update not received.
- Island Games 2025 plan
- Month 11 report
- Funding proposal from Scottish Government be approved by the Board noting the risks associated with the conditions outlined in the proposal.
- Limited assurance on the operational data presented in the March 2025 Integrated Performance Plan.
- Agenda for Change
- GP IT re-provisioning programme

19. AOCB (Presenter: Chair)

Board Chair thanked the Director of Improvement for their support and wished them all the best.

20. KEY ITEMS FOR NOTING

20.1. Key Documentation for noting

The committee noted the following key documentation.

- Level 1 Annual Health Board Climate and Sustainability Report 2023/24
- Planned Care Submission 31 January 2025
- Golden Jubilee core funding letter - February 2025
- Board Chief Executives Meeting- 2025-03-11 Finance Update March 2025
- NHS Scotland 15 Box Grid Financial Improvement Expectations Letter
- NHS Orkney - realignment of £30m underspend - March 2025
- NHS Orkney Allocation Letter 2025/26

20.2. Finance and Performance Committee Timetable for Papers 2025/26

Committee noted the Finance and Performance Committee Timetable for Papers 2025/26.

20.3. Record of Attendance 2024/25

Committee noted the Record of Attendance 2024/25.