

# NHS WESTERN ISLES

## BOARD MEETING

**MINUTES OF MEETING**  
**24<sup>TH</sup> APRIL 2025**  
**HELD AT 10.00AM**  
**VIA MICROSOFT TEAMS**



### **Members Present:**

Debbie Bozkurt	Director of Finance & Procurement
Colum Durkan	Director of Public Health
Julia Higginbottom	Non Executive Director
Gordon Jamieson	Chief Executive
Paul MacAskill	Non Executive Director
Naomi MacDonald	Non Executive Director
Karen France MacLeod	Chair of ACF / Non Executive Director
Gillian McCannon	NHSWI Chair (Meeting Chair)
Frances Robertson	Associate Nurse / AHP Director & Chief Operating Officer
Annetta Smith	Non Executive Director
Paul Steele	Non Executive Director
Sheena Wright	Whistleblowing Champion / Non Executive Director

### **In Attendance:**

Nick Fayers	Chief Officer, Integration Joint Board
Maggie Jamieson	Head of Communications, Claims and Patient Information
Diane MacDonald	Director of Human Resources and Workforce Development
Cheryl Martin	Secretariat

### **1. WELCOME**

Mrs McCannon took the Chair and welcomed everyone to the meeting reminding members of the Teams Etiquette.

## **2. APOLOGIES AND ACKNOWLEDGEMENTS**

Apologies noted:

Jane Bain

Employee Director / Non Executive Director

## **3. INTRODUCTION**

### **3.1 Chair's Report**

#### **3.1.1 NHS Scotland Operational Improvement Plan**

Mrs McCannon advised that the First Minister set out the Scottish Government's ambition for renewing the NHS in Scotland. To deliver against that ambition and ensure a more accessible, more person centred NHS, the immediate pressures across the NHS must be reduced, shift the balance of care from acute to community services and use digital and technological innovation to improve access to care.

In setting out the 2<sup>nd</sup> phase of renewal and reform, three detailed documents have been compiled, the Operational Improvement Plan, a Population Health Framework and a Health and Social Care Service Renewal Framework, due to be published in June 2025.

The Operational Improvement Plan builds on the Board's Annual Delivery Plan for 2025/2026 and describes several commitments and actions needed to improve the patient experience. The plan focuses on four critical areas that the Scottish Government is committed to delivering:

1. Improving access to treatment
2. Shifting the balance of care
3. Improving access to health and social care services through digital and technological innovation
4. Prevention – working with the public to prevent illness and proactively meet their needs.

The Operational Improvement Plan has been developed to improve delivery in several specific areas, detailed in the plan, which are key to wider delivery across Scotland. The Scottish Government will be closely tracking and managing progress together with the Scottish Boards.

The NHS Recovery Plan published in August 2021, sets out the Scottish Government's actions to increase NHS capacity by at least 10% to address the backlog of care and sets out the £1 billion targeted investment need to deliver these improvements in the five year term of the Scottish Government. The reporting on the Operational Improvement Plan will align with the final reporting for the NHS Recover plan.

Mrs Smith queried if the Board's Annual Delivery Plan would have to be reviewed following the introduction of this plan. Mrs McCannon advised that the Annual Delivery Plan already covered the areas noted. Mr Jamieson advised that one area that the Board was ahead of other Boards was that of digital innovations. He added that the digital contribution will become a significant part of the way services are managed. Mr Jamieson noted that one positive thing from all this is that of direct engagement meetings with the Scottish Government officials, Chief Executives now have unprecedented regular meeting with the First Minister and the Cabinet Secretary where they gain a personal understanding of the challenges that Boards are facing in the current climate.

Mrs France MacLeod noted that the digital front door was a fantastic innovation, and the Board had the infrastructure and resources ready for its implementation, her plea was that all such innovation had the correct resourcing in place before implementation, so staff were not overwhelmed. Mrs Higginbottom agreed that it was important to have the correct infrastructure to support staff. She added that she would be interested to see further details on this and how it would impact on the Board's governance structure. Mr Jamieson agreed that Information Technology and Information Governance were significant issues for the Board and another area that was quickly becoming more significant was that of the role that Artificial Intelligence will play in services in the future. Mrs Higginbottom noted that Artificial Intelligence was not mentioned in the plan and the biggest issue with Artificial Intelligence is that of Information Governance, how personal data is to be used. Mr Steele noted his concerns with the increased use of digital technologies, that the correct infrastructure must be in place, he was aware of areas of the Western Isles where the Wi-Fi connectivity was limited.

Ms Robertson advised that shifting the balance of care was an important part of the Annual Delivery plan going forward and the Board has been working over the past two years bringing the front door teams under one line manager with close collaboration with the urgent care team in Uist and Barra. She added that the Board successfully bid in the HIS frailty care programme and were collaborating with Primary Care colleagues. Hospital at Home now has additional capacity and the shifting the balance of care was progressing well.

Mrs D MacDonald noted that in relation to the Human Resources aspects of the document were included in the workforce plan. She added that there had been discussions in the HRD network on the use of Artificial Intelligence where it was noted that AI will not replace staff but enhance the work life balance.

**Decision: Board Members formally noted the verbal update.**

**Action: No action required.**

### 3.2 Chief Executive's Update

#### 3.2.1 Health Board Collaboration and Leadership Executive Group Update

##### 3.2.1.1 Health Board Collaboration and Leadership Executive Group Full Update

Mr Jamieson advised that the First Minister's statement on improving public services and NHS renewal on 27<sup>th</sup> January 2025 emphasised the need for NHS Boards to work collaboratively to achieve the principles and aims to improve access to services, shifting the balance of care to the community and focus on innovation to improve access to and delivery of care.

Mr Jamieson noted that the NHS Scotland Executive Group will be collectively accountable and although there will be no change to the Board's governance arrangements there will be a different focus in certain areas. NHS Boards are working to advance examples of building a more cohesive approach to the design and delivery of services. He added that the National Planned Care Framework seeks to create a balanced planned care system ensuring that patients in Scotland have equal and timely access to care. It aims to maintain or improve care standards whilst balancing short and long term actions on waiting lists.

Mr Jamieson advised that cooperation and collaboration was not a new concept for the island boards but that the Board may find itself in the position that patients from mainland boards may be travelling to the island for treatment. The board's role will be to maintain its good position in relation to the Treatment Time Guarantee while collaborating to benefit patients across Scotland.

There was a lengthy discussion on the issues and costs of patient's travelling to and from the islands.

**Decision: Board Members formally noted the verbal update.**

**Action: No action required.**

### 4. DECLARATION OF INTERESTS

Board members did not declare any conflicts of interest in relation to the content of the agenda.

### 5. MINUTES

#### 5.1 Minutes of 27<sup>th</sup> February 2025

Mrs Wright advised that the eighth action point regarding the Whistleblowing Report and the Speak up Week Visit were two separate reports and asked that the minutes be amended to reflect this.

**Decision: With the noted amendments, the minutes of the meeting of the 27<sup>th</sup> February 2025 were approved as an accurate record.**

**Action: No action required.**

5.2 Matters Arising

There were no matters arising from the minutes of the meeting of 27<sup>th</sup> February 2025.

5.3 Action Points

30.11.22 – Financial Impact on Psychiatry – Mr Fayers advised that his intention was to meet with colleagues in Glasgow to focus on what is needed in terms of clinical support and the relationship in terms of pathways. He added that a date for this meeting was yet to be confirmed.

**Rag Status – upgraded to red**

**Action: Remain on action points.**

28.06.23 – Cancer Services Update – Ms Robertson advised that despite the National situation the Board continues to deliver high quality timely cancer related care. She added that there does remain challenges for the delivery of chemo drugs which are brought to the island via the freight ferry although contingences are in place for when the ferry does not sail. Mrs McCannon queried if the late delivery of chemo drugs had any impact on patients and Ms Robertson advised that Uist and Barra patients were given priority to enable them to return home the same day and staff were willing to stay longer to complete delivery.

**Rag Status – remain as amber.**

**Action: Remain on action points.**

28.06.23 – Cancer Services Training – Ms Robertson advised that the team were in the process of completing a training needs analysis. The expectation being that all ambulatory care staff receive the necessary training to be able to administer chemo drugs. She added that NHS Highland had recently appointed a new SACT nurse consultant, and she would be reestablishing monthly SACT meetings.

**Rag Status – remain as amber.**

**Action: Remain on action points.**

21.03.24 – Local Dementia Care Plan – Ms Robertson advised that the remit of the dementia nurse had been expanded to include frailty and is due to go out to advert. She added that they were looking to develop a dementia plan which aligns with Scottish Government guidance.

**Rag Status – remain as red.**

**Action: Remain on action points.**

28.08.24 – NHS Western Isles Anchor Strategy Update – On agenda for discussion.

**Rag Status – Blue**

**Action: Remove from action points.**

30.10.24 – Medicine Wastage Report – Mr Jamieson advised that the Chief Pharmacist was working on procedures for procurement of stock with a meeting with the 2C practices to ensure that the right system for procurement is in place. Mr Steele advised that he had been contacted by several constituents regarding the availability of access to prescriptions from the 2C practices during Public Holidays and requested that this was included in the forthcoming meeting.

**Rag Status – upgrade to red.**

**Action: Remain on action points.**

30.10.24 – Whole System Flow Intelligence Report – Mrs McCannon advised that this had been superseded by the Health Needs Assessment and can be removed.

**Rag Status – Blue**

**Action: Remove from action points.**

30.10.24 – Health & Care Safe Staffing – On agenda for discussion.

**Rag Status – Blue**

**Action: Remove from action points.**

30.10.24 – IJB Approved Minutes – On agenda for awareness purposes.

**Rag Status – Blue**

**Action: Remove from action points.**

27.11.24 – Layout of Action Point Template – Mrs McCannon advised that the template had been updated, and this action can be removed.

**Rag Status – Blue**

**Action: Remove from action points.**

27.02.25 – Delivering together for a stronger nursing and midwifery workforce – Mrs McCannon advised that update reports will be presented on a regular basis. This action can be removed.

**Rag Status – Blue**

**Action: Remove from action points.**

27.02.25 – HiTrans Report – On agenda for discussion.

**Rag Status – Blue**

**Action: Remove from action points.**

## **6. FINANCIAL GOVERNANCE**

### **6.1 Financial Performance Monitoring Report**

#### **6.1.1 Financial Monitoring M11 2024/2025**

**Issue:** *The committee was asked to discuss the Financial Monitoring M11 Report presented by Ms Debbie Bozkurt, Director of Finance and Procurement.*

**Discussion:** Ms Bozkurt was pleased to announce that the Board was showing a breakeven position for the year ended 31<sup>st</sup> March 2025. She added that there were four main cost pressures:

1. Delayed Discharges – high bank hours covering the contingency beds being used by delayed discharge patients. With reduced care home places and vacancies within homecare staffing, the overspend is likely to continue.
2. 2C Practices – a full review is taking place to ascertain whether having substantive post holders will significantly reduce the overspend in this area.
3. Mental Health – increase in the number of mental health patients being treated in specialist units and facility costs significantly increased in the private sector have contributed to the overspend in this area.
4. Prescribing – significant work is underway to reduce the overspend but high inflationary costs on drugs, the aging population makes any efficiencies difficult to achieve.

Mr MacAskill thanked Ms Bozkurt and the wider team for getting the Board to this breakeven position despite significant challenges and continued pressures. He asked if there was an update on the overcharging of MRI scans in NHS Highland. Ms Bozkurt was pleased to announce that charges going back two full years have been corrected and a credit note issued. She added that they remain the most expensive Board conducting MRI Scans and was looking forward to the Board's MRI scanner being up and running. Mr MacAskill noted his concerns regarding delayed discharges and the risk going forward with the closure of the Blar Buidhe nursing home. Ms Robertson advised that the current delayed discharge situation is twenty delayed discharges in the Western Isles Hospital and four in Uist and Barra Hospital. She added that the Board saw its highest levels two weeks prior with thirty one delayed discharges, the highest number prior to the Pandemic. There are operational challenges with the cancelation of inpatient joint surgeries.

**Decision:** **The members formally noted the verbal update.**

**Action:** **No action required.**



## **6.2 2025/2026 Financial Budget**

### **6.2.1 Financial Budget 2025/2026**

**Issue:** *The committee was asked to homologate the approval of the 2025/2026 Financial Budget presented by Ms Bozkurt.*

**Discussion:** Ms Bozkurt advised that the financial budget had been discussed in detail at the recent Board development session and was presented for homologation of the Board's approval at this session.

**Decision:** **The members homologated the approval of the 2025/2026 Financial Budget.**

**Action:** **No action required.**

## **7. PERFORMANCE**

### **7.1 Corporate Risk Register April 2025**

#### **7.1.1 Revised Register**

**Issue:** *The committee was asked to note for assurance purposes the Corporate Risk Register presented by Mrs Frances Robertson, Nurse Director.*

**Discussion:** Ms Robertson advised that there was little change to the register from the last meeting. She noted that following discussion at the Corporate Management Team meeting on 15<sup>th</sup> April 2025, Risk 042 IT Digital Health GP IT Managed Services to GP Practices and Risk 043 IT Risk of Exposure to Cyber Risk had been archived from the Corporate Risk Register however a refreshed cyber security risk assessment will be completed for discussion at the Operational Service Delivery Team meeting.

Mr Steele requested an update on St Brendan's Hospital and Mr Jamieson advised that he was in the process of writing back to Cllr Maclean on this subject and noted that Guth Bharraidh recently had a letter from Alasdair Allan to John Swinney requesting commentary on St Brendan's replacement. He added that the Board's position after the NHS Assure survey noting the same risks highlighted previously, is that the Board has had confirmation that the Scottish Government to replace the heating and boiler system in St Brendan's which is good news as the Cabinet Secretary in January 2025 was clear that there was no capital resource available to fund the hub. Mr Jamieson advised that the Board would make infrastructure improvements where we can, but the building needs to be replaced. He added that infrastructure improvements would mean decanting the hospital and care home and there is no where suitable to do this.



Mrs McCannon was pleased to see the financial risk being reduced and the positive reporting in terms of the risks around waiting times although was disappointed to note that NHS Highland did not provide a visiting service in February or March for urology. Ms Robertson advised that she was meeting with NHS Highland in May and would report back to the next meeting.

Mrs McCannon asked who would be updated the Medical Director's risks and Mr Jamieson advised that the new Medical Director takes up the post at the beginning of June. Mrs McCannon noted that review dates were inconsistent, and Mr Jamieson noted that it had been agreed that all risks would be updated for all reports. Ms Robertson apologised for this error and will ensure updates are given for all risks for the next meeting. Mrs McCannon noted that she would be happy to meet with Ms Robertson to discuss the Corporate Risk Register and a meeting is to be organised.

**Decision:** The Corporate Risk Register was formally noted.

**Action:** A meeting with Mrs McCannon and Ms Robertson to be organised to discuss the Corporate Risk Register.

## **8. CORPORATE GOVERNANCE**

### **8.1 NHS Anchors Update**

*Issue:* The committee was asked to note for assurance purposes the NHS Anchors Update presented by Mr Colum Durkan, Director of Public Health.

*Discussion:* Mr Durkan advised that as part of the NHS Scotland Delivery Plan the Board was asked to develop an Anchors Strategic Plan. This sets out governance and partnership arrangements to progress anchor activity, current and planned anchor activity and a clear baseline. There were five areas identified in which NHS organisations act an anchor institution. These are:

1. Employment
2. Procurement and Commissioning
3. Capital and Estates
4. Service Design and Delivery
5. Working in Partnership

Mr Durkan advised that updates on all five areas were noted in appendix 1 of the report.

Mrs McCannon thanked Mr Durkan for a very thorough update.

**Decision:** The NHS Anchors Update was formally noted.

**Action:** No action required.

## 8.2 Healthcare Staffing Act Annual Report 2024/2025

### 8.2.1 Healthcare Staffing Act Annual Report

*Issue: The committee was asked to note for assurance purposes the Healthcare Staffing Act Annual Report for 2024/2025 presented by Mrs Frances Robertson.*

*Discussion:* Ms Robertson apologised that the report was not the most user friendly but was a national recognised document. She added that this was the first annual report and showed a significant amount of work that had been carried out.

Ms Robertson advised that there ten sections in the summary and six of these gave reasonable assurance and four had substantial assurance. She added that throughout 2024/2025, in line with internal governance structures and to comply with duty 12IF, quarterly reports outlining current activities to support the implementation of the Act, and compliance with the Act have been submitted to the Corporate Management Team. This has provided a level of strategic oversight and assurance of the systems and processes in place, and any ongoing risks or challenges, and critical interdependencies.

The use of a whole systems approach to real-time staffing, professional judgement and clear escalation processes has supported effective decision making to prioritise staff support to areas in greatest need. We can use SafeCare to prioritise staff deployment across the whole system, to make sure the ward areas had appropriate levels of nursing staff. Communications and discussions at the hospital safety huddles help with the overall awareness, and impacting on the organisational culture, with better understanding and compassion, being supportive of colleagues across disciplines and department boundaries, and considering shared solutions.

There is greater oversight of risks, particularly those that may have previously been associated with mitigations put in place to address the staffing gaps. For example, the continued step down of audit activity has created a different risk that can be better quantified and understood, leading to more creative solutions to address this risk.

The Strategic Workforce Group provides regular communication to staff to maintain awareness of the Act and the structures and processes / SOPs in place to support them in their roles.

The Board has introduced a quarterly MS Forms audit report to capture feedback and learning and risks identified from different part of the organisations and professions, to identify themes, prioritise work within the Strategic Workforce group, and ensure effective links between staff in place and future workforce planning.

Mrs France MacLeod was unsure that all SOPS were applicable to all staff and to protect learning time could this area be recorded differently. Ms Robertson noted that for the first year it was important to capture all disciplines but can look to review this going forward.

Mrs McCannon noted the significant amount of information included in the report and suggested that the core achievements should be reported on the executive summary for ease of review.

Ms N MacDonald asked if the report would be presented to the Staff Governance Committee and Mrs McCannon advised that it would be presented to the Clinical Governance Committee. After some discussion it was agreed that a quarterly report should be presented to clinical governance for awareness and discussion with the annual report going to the Board.

**Decision:** The Healthcare Staffing Act Annual Report for 2024/2025 was formally noted.

**Action:** Going forward quarterly reports to be presented to the Clinical Governance Committee with the annual report being presented to the Board.

## **9. STAFF GOVERNANCE**

### **9.1 Human Resources Workforce Report February 2025**

#### **9.1.1 Narrative Report**

*Issue:* The committee was asked to note for assurance purposes the Human Resources Workforce Report presented by Ms Diane MacDonald, Director of Human Resources and Workforce Development.

*Discussion:* Ms D MacDonald advised that for this report concentrated on workforce numbers noting the increase in staff numbers overall, initially due to Covid-19 response in terms of contact tracing and vaccinations and then the transfer of staff from the 2C practices in Uist and Barra.

The job family breakdown sees an increase in nursing and midwifery with the admin services increasing but now reducing back to pre Covid-19 numbers.

The workforce is ageing with 46% of employees aged over 50, slightly down from 2022. The median age of the workforce is forty eight compared to NHS Scotland median age of forty four. There have been forty one accepted application for retire and return since its introduction in 2022.

Overtime remains static and the highest bank usage is in the domestic service due to vacancies and high sickness absence. Sickness absence in February 2025 was 5.99%, national data shows that NHS Western Isles has the 3<sup>rd</sup> lowest rate of absence of all the territorial boards for 1<sup>st</sup> February 2024 to 31<sup>st</sup> January 2025.

Recruitment activity remains steady, fifteen substantive posts were recruited to in December 2024 which is positive but some hard to fill posts remain vacant.

**Decision: The Workforce Report was formally noted by Board Members.**

**Action: No action required.**

## **10. PUBLIC HEALTH**

### **10.1 Health Needs Assessment**

#### **10.1.1 HNA Full Report**

*Issue: The committee was asked to homologate the approval of the Health Needs Assessment presented by Mr Durkan.*

*Discussion: Mr Durkan advised that the Health Needs Assessment had been approved following an in depth discussion at the Board development session and was presented for homologation of the Board's approval at this session.*

**Decision: The members homologated the approval of the Health Need Assessment.**

**Action: No action required.**

### **10.2 Public Health Strategy**

#### **10.2.1 PHS**

*Issue: The committee was asked to homologate the approval of the Public Health Strategy presented by Mr Durkan.*

*Discussion: Mr Durkan advised that the Public Health Strategy had been discussed at the Board development session and was presented for homologation of the Board's approval at this session.*

**Decision: The members homologated the approval of the Public Health Strategy.**

**Action: No action required.**

### **10.3 Director of Public Health Annual Report**

#### **10.3.1 DPH Full Report**

*Issue: The committee was asked to note for assurance purposes the Director of Public Health Annual Report presented by Mr Durkan.*

*Discussion: Mr Durkan advised that the report was a retrospective look at the work carried out by the public health team and thanked Manisha Sharma for the styling and layout of the report. He added that the report will be published on the website following this meeting.*

Mrs McCannon thanked Mr Durkan for presenting a very good, detailed report.

**Decision: The Director of Public Health Annual Report was formally noted.**

**Action: No action required.**

#### 10.4 Diabetic Eye Screening Service Change

**Issue:** *The committee was asked to note for assurance purposes the Diabetic Eye Screening Service Change document presented by Mr Durkan.*

**Discussion:** Mr Durkan advised that the diabetic screening contract with the current provider ends at the end of April 2025 and are not able to renew. The current provider has been providing the clinical element of the service, the administration are undertaken in house by the diabetes centre. When discussed at the Corporate Management Team in March 2025 it was agreed that the only viable option was to bring the clinical element in house and coordinated by the diabetes centre.

Mr Steele asked if there was a timescale for the service being reinstated in the Uist and Barra Hospital. Mr Durkan noted that once the new equipment had been received dates will be added to the diary. Mrs France MacLeod asked if additional staff were being employed and with clinical space at a premium in the Western Isles Hospital, where these clinics would be held. Mr Durkan advised that there is no requirement for any additional staff and clinics would be carried out in the diabetes centre.

**Decision:** **The members formally noted the update.**

**Action:** **No action required.**

#### 11. REPORTS / APPROVED MINUTES FROM BOARD SUB COMMITTEES FOR AWARENESS

##### 11.1 Finance, Performance & Resource Committee

11.1.1 FPR Minute of 10<sup>th</sup> December 2024

##### 11.2 Integration Joint Board

11.2.1 IJB Minute of 20<sup>th</sup> February 2025

11.2.2 IJB Minute of 4<sup>th</sup> March 2025

##### 11.3 Integration Joint Board Audit Committee

11.3.1 IJB AC Minute of 6<sup>th</sup> November 2024

Mrs McCannon noted that all minutes presented were well presented and informative.

Mrs Smith advised that it had been a relatively busy start of the year for the IJB. Key points were the National Advisory Board taking over from National Care Centre. There were some valid discussions regarding the impact of the Employers National Insurance Contributions uplift for CnES and 3<sup>rd</sup> Sector Partners.

Processes refreshed and approved for the Strategic Planning Group Terms of Reference and the IJB Standing Orders were reviewed and approved. She added that delayed discharges and unmet need reporting was added as a statutory agenda item in February 2025.

**Decision: Board Members formally noted the minutes of all the Governance Groups presented.**

**Action: No action required.**

## **12. FOR INFORMATION**

### **12.1 Western Isles Transport & Health Working Group Findings & Recommendations**

*Issue: The committee was asked to note for information the HITRANS report presented by Ms Bozkurt.*

*Discussion:* Ms Bozkurt advised that the report was commissioned by the Cabinet Secretary for Health and Social Care following a meeting held in Benbecula in August 2024. She added that the Board had written noting their views and some had been included in the report although there were several recommendations that the Board does not agree with including on Page 16 where the specialist services that was not available in the Uists were noted but she was disappointed that they do not detail why they are not available.

Ms Bozkurt advised that a working group was due to meet in May to review the recommendations made by the report.

**Decision: The report was formally noted.**

**Action: No action required.**

## **13. AOCB**

Mrs Jamieson advised that as part of the Gaelic Language Plan there should be a Gaelic section on the public website. Mrs Jamieson was pleased to note that the Board had beyond this request and there was now a Gaelic website that mirrors the English website. Mrs McCannon thanked Mrs Jamieson for her update noting this was a very positive step for the Board.

**14. Evaluation**

	YES	NO	COMMENTS
<b>For Chair only to Complete:</b> Was the draft minute and action plan / log received within the 5 day time frame for you to review? If not state how many days before receipt.			
Were you satisfied that the agenda items presented covered the current significant areas?	✓		
Was there sufficient time to review the papers between receipt and the meeting date?	✓		
Was there sufficient time allocated to all agenda items?	✓		
Were the executive summaries an accurate reflection of the detailed paper?	✓		
Was the information contained within the meeting papers, clear, focused, explicit and enabled members to make informed and effective decisions? If not state what information would have helped.	✓		
Were you able to contribute to the discussions and have your views considered?			
Was there sufficient refreshment breaks?	✓		
Did you consider that the Board discharged its duty in respect of <ul style="list-style-type: none"> <li>• Proper Scrutiny</li> <li>• Relevant Questioning</li> <li>• Constructive Challenging</li> </ul>	✓ ✓ ✓		

**14. DATES, TIMES & VENUE OF NEXT MEETING**

Board Development Session

Date: 29<sup>th</sup> May 2025

Time: 10.00am

Venue: Microsoft Teams

The Chair thanked members for their attendance and involvement in the discussions and ended the meeting at 1.10pm.

**END**