

NHS WESTERN ISLES BOARD MEETING

MINUTES OF MEETING
30TH OCTOBER 2025
HELD AT 10:00AM
MICROSOFT TEAMS



Members Present: *alphabetical order by surname*

Jane Bain	Employee Director / Non-Executive Director	Karen France MacLeod	Chair of ACF / Non-Executive Director
Debbie Bozkurt	Director of Finance and Procurement	Gillian McCannon	Board Chair (Meeting Chair)
Colum Durkan	Director of Public Health	Ian McCorquodale	Non-Executive Director
Sara Else	Medical Director	Frances Robertson	Nurse / AHP Director and Chief Operating Officer
Julia Higginbottom	Non-Executive Director	Annetta Smith	Non-Executive Director
Gordon Jamieson	Chief Executive	Sheena Wright	Whistleblowing Champion & Non-Executive Director
Paul MacAskill	Non-Executive Director		

In Attendance:

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

Members apologies

Naomi MacDonald	Non-Executive Director
Paul Steele	Non-Executive Director

3. INTRODUCTION

3.1 Chair's Report

- *NHS Western Isles Annual Review*

Mrs McCannon advised that the non ministerial annual review would be held in public from 2.30pm on Wednesday 19th November 2025 in An Lanntair, Stornoway. She encouraged members to attend either in person or online.

- *Population Planning*

Mrs McCannon advised that she received a letter from Scottish Government on 21st October regarding the approach that they were taking regarding sub national services planning for 2026/2027. To enable this approach Ministers agreed that Boards could put two sub national planning structures in place, one focussed on the East of Scotland and one on the West of Scotland. These committees will look at services being planning across these areas underlining the path set out in the Health and Social Care Service Renewal Framework. She added that there was no more information on this, but this was an important aspect of delivery and would give more information once received. Mr Jamieson noted that the landscape was becoming complicated with national, regional cross regional and local planning.

3.2 Chief Executive's Update

- *MRI Scanner*

Mr Jamieson advised that the contract for the MRI scanner had been awarded and he would expect work to start on the project in the forthcoming weeks.

- *Zoom Calling*

Mr Jamieson advised that the roll out of the Zoom phone system will conclude on 11th November 2025. He added that the roll out had gone exceptionally well considering the amount of work involved. He noted that this will future proof all Board telecoms and gave his thanks to all staff involved in the project.

Decision: Board Members formally noted the verbal updates.

Action: No actions required.

4. **DECLARATION OF INTEREST**

Board Members did not declare any conflict(s) of interest in relation to the content of the agenda, which may require a declaration of interest.

5. **MINUTES**

5.1 **Minute of 28.08.25 - DA**

Board Members approved the Minutes of the meeting held on 28th August 2025 as a correct record of the discussion.

Decision: The Board formally approved the Minute of the meeting of 28th August 2025.

Action: No action required.

5.2 **Matters arising from previous Minutes**

Mrs McCannon noted that item 6.1.1 noted that a development session on population demographic changes was to be scheduled for late October or early November and asked for an update on this. Ms Bozkurt advised that she had presented a report several years previously for the Western Isles as a whole but felt that a report noting the changes in different areas of the Western Isles would be more informative and would have this report to be presented to the Board development session in November.

Decision: The updated was formally noted.

Action: Population demographic changes by area to be presented to the November Board Development Session.

5.3 **Action Points**

The committee discussed the action points as follows:

30.11.22 - 6.1 Finance Performance – *seeking update on the work to appoint to Psychiatry to reduce the financial expenditure on locums.*

Mrs McCannon noted that the responsibility for this action was noted as the former IJB Chief Officer and queried who would be taking this forward. Dr Else noted that she and the Associate Medical Director had been in discussions with colleagues in Glasgow but were still very much in the preliminary stages. She added that a further meeting was scheduled for two weeks' time and would hope to be in a better position to update the members following this meeting. She added that she was exploring other options with other Health Boards and was hoping that colleagues in Orkney and Shetland would join the discussions. She added that she would be happy to take on the executive lead for this action.

Action: Dr Else to take on the responsibility for this action.

28.06.23 - 3.2 Cancer Service Update – *Review the Boards position in relation to the service level agreements with single handed consultants and contingencies.*

Ms Robertson advised that she was awaiting an update on the recruitment to the Staff Co-ordinator post. She noted that the approaching winter could have knock on effects with ferry services being less dependable due to weather conditions and was waiting to hear if Loganair would be reinstating their early morning flight.

Ms Robertson noted that recently published data for September the 62-day targets was sitting at 83.8% but the 31-day target was sitting at 100%. Mrs McCannon commended all involved for the improvement made on these targets noting the amount of work done.

UPDATE Amber

21.03.24 – 7.2 Western Isles Performance Report – *Dementia Plan will be presented in due course.*

Ms Robertson advised that a draft dementia plan was progressing and would expect to be able to present this to the Board at the next meeting. She added that the Dementia Frailty Nurse post was out to advert for the fourth time, with relocation expenses included in this advertisement. She added that there had been interest but if not successful this time, she would have to review the post. Mrs Jamieson advised that the last round of advertisement via social media for this post reached over three thousand people and the Board should consider extending the catchment area. Mrs McCannon queried if there was funding available for any additional costs for further advertising and Mrs D Macdonald advised that there was a central budget for advertising for recruitment.

UPDATE RED

Decision: The Board formally noted the updates.

6. FINANCIAL PERFORMANCE

6.1 NHS Western Isles Annual Report and Accounts for 2024/2025

Ms Bozkurt advised that the 2024/2025 Annual Report and Accounts were laid before Parliament on 18th September 2025 and they had subsequently been uploaded to the Boards website.

Decision: The Board formally noted the Annual Report and Accounts for 2024/2025.

Action: No action required.

6.2 Financial Performance Monitoring Report Month 6

6.2.1 Month 6 Financial Performance Monitoring Report

Issue: *The Board was asked to note the report presented by Ms Debbie Bozkurt, Director of Finance and Procurement.*

Discussion: Ms Bozkurt advised that the Board was in a better position than in Month 6 last year with a small underspend and a year end break even position. There were several risks identified with delayed discharges being at the highest level for the last four years. Other risks include off island treatment with a high number of placements built into projections, but further placements could cause pressures. Assumptions have been made on the level of reserves that can be released and that funding for pay uplifts would be received. Internal Audit reviews of both 2C practices have taken place and will be presented to the next Audit and Risk Committee, the Board should expect an improving position on both practices previous years overspend. There is uncertainty regarding the acute and community pharmaceutical spend despite the large amount of work done by the Chief Pharmacist. It is expected that there will be savings on wastage, but this could be offset by increased chemotherapy treatments. Vacancies make up 65% of the total savings target however if the Board cannot recruit to these vacancies, then there is a possibility that workloads may not necessarily be completed.

Mr Macaskill thanked Ms Bozkurt and her team noting the challenges in keeping financial control, noting that the population demographics were worrying and the difficulties in recruiting to the workforce going forward and looks forward to the report being presented to the November meeting. Mr MacAskill queried the current position for delayed discharges. Ms Robertson noted that there were currently twenty three delayed discharges, twenty one in the Western Isles Hospital and two in Uist and Barra Hospital. "She added that the increase in Hospital at Home beds, admission avoidance measures, and frailty beds in Bremner Court has helped keep delayed discharges down. However, these numbers are unlikely to fall significantly until additional care beds or more home care workers become available."

Mrs McCannon noted the increased agency costs in item 10.4 of the full report and queried if this was due to agency locums covering Radiology. Ms Bozkurt noted that there were several factors that contributed to the increase, but a review of these costs will be undertaken.

Mrs McCannon queried who will be taking on the responsibilities of the IJB Chief Officer and Ms Bozkurt advised that clinical responsibilities sit with Ms Robertson with Dr Else having responsibility for certain areas.

Decision: **The Board formally noted the report.**

Action: **No actions required.**

7. PERFORMANCE

7.1 Corporate Risk Register – August 2025

7.1.1 Appendix A – CRR Detailed Report

Issue: *The Board was asked to note for assurance the report presented by Ms Frances Robertson, Nurse / AHP Director and Chief Operating Officer.*

Discussion: Ms Robertson advised that as requested all risks were updated monthly. She added that a full review of Risk 004 waiting times is underway.

Mrs McCannon noted that following a discussion at the Finance, Performance and Resource committee, the Head of IT and Digital had advised that he would be submitting a cyber security risk to the Corporate Management Team for inclusion in the Corporate Risk Register in line with guidance from the Scottish Government. Mrs McCannon noted that she would discuss this further with the Head of IT and Digital Health if there were no objections. There were no objections raised.

Decision: **The Board formally noted the report.**

Action: **Mrs McCannon to discuss the cyber security risk for the Corporate Risk Register with the Head of IT and Digital Health.**

7.2 Information Governance Assurance Report

7.2.1 Appendix 1 – Narrative Report

Issue: *The Board was asked to note for awareness purposes the report presented by Mr Colum Durkan, Director of Public Health.*

Discussion: Mr Durkan advised that the report relates to the period January to June 2025. There were one hundred and ten subject access requests received and based on the current monthly average he was projecting an approximate two hundred and twenty SARs by the end of the year.

Mr MacAskill queried if the number of SARs over their respective timescales were due to staffing issues. Mr Durkan advised that there were several varied factors including staff leave however often it is the accessibility of the records, many being papers records which take time to retrieve. Ms Robertson noted that she was aware that the medical records staff were at time under pressure with the volume of requests being received but that the Associate Medical Director was collaborating closely with the Patient Services Manager to support the staff. Dr Else highlighted the current process not just locally but nationally was extremely time consuming with all information having to be reviewed and then reviewed again at Director level. She added that the only way forward was patient accessible digital records.

Mrs McCannon thanked Mr Durkan and his team for a highly informative report and noted significant improvement in the information provided.

Decision: The Board formally noted the report.

Action: No actions required.

7.3 Standards and Hospital Performance Report

7.3.1 Appendix 1 – Narrative Report

Issue: *The Board was asked to note for assurance the report presented by Mr Durkan.*

Discussion: Mr Durkan advised that this was a long report noting the key trends and comparisons to the same quarter last year. He noted that A&E attendance and Hospital at Home admissions were down slightly and admissions were also down but the length of stay in hospital had increased. Dr Else advised that the work of the Hospital at Home admission avoidance was starting to show in the figures but delayed discharges keep the length of stay in hospital numbers high.

Mrs McCannon thanked Mr Durkan and his team again for a helpful, well presented report and appreciated the statement on the delay of information. She asked if it were possible if the diagnostic tests wait that exceeds six weeks could be broken down by the appropriate test. Dr Else agreed that it would be good to have this comparison to know what is out with the Board's remit.

Decision: The Board formally noted the report.

Action: No actions required.

8. CORPORATE GOVERNANCE

8.1 Corporate Values and Objectives 2025-2027

8.1.1 Appendix 1 – Narrative Report

Issue: *The Board was asked to approve the Corporate Values and Objectives for 2025 to 2027, presented by Mr Gordon Jamieson, Chief Executive.*

Discussion: Mr Jamieson advised that these had been presented to the Board in August and several amendments had been requested and were reflected in the report presented for approval.

Mrs Smith queried if the first sentence under excellence should read “ensure that the care provided is based on the best evidence for optimal outcome” to reduce the number of times “best” is used in the sentence. She noted that CO5 was a long sentence and wondered if it should be changed to read “Provide and support people to live long and healthier lives improving health equitability, reducing discrimination and environmental impact of climate change”.

Mr Jamieson noted that he would make these amendments and bring the report back to the December meeting for final approval.

Decision: The Board formally noted the report.

Action: Mr Jamieson to ask that the noted amendments are made and present to the December Board meeting for final approval.

8.2 Board Meeting Schedule 2026

Issue: The Board was asked to approve the Board meeting schedule for 2026 presented by Mrs Gillian McCannon, Chair NHS Western Isles.

Discussion: Ms Bozkurt noted that it was not always possible to have the most up to date financial information for presentation at CMT but would be available for the Board meeting at the end of the month and asked that a caveat be agreed that this would be allowed out of the governance process. Mr Jamieson noted that he did not have an issue with the order being slightly out, so it does not negatively impact on reports going to the Board.

Mrs Jamieson queried if a decision had been made on face-to-face meetings and Mrs McCannon advised that 50% of all committee meetings in 2026 would be held face to face.

Mrs Wright noted that the clinical governance meetings had a gap of four months between the May and September meeting and thought it had been agreed that all meetings would be three months apart.

Mrs McCannon noted that the Endowment Funds Committee and the Remuneration Committees were normally held following a Board meeting, but she had requested that these are taken separately and the secretaries of each meeting will be tasked to note new dates. Mrs Smith requested that all IJB and IJB Audit dates are included in the schedule.

Mrs McCannon suggested that the schedule be amended to reflect the amendments and inclusions noted and would take to the Chairs forum to discuss further.

Decision: The Board formally noted the schedule.

Action: Mrs McCannon to ask that the amendments and inclusions noted are included in the schedule and present to the Chairs forum for further discussion.

9. STAFF GOVERNANCE

9.1 Human Resources Workforce Report July 25

9.1.1 Appendix 1 – Narrative Report

Issue: *The Board was asked to note for assurance the report presented by Mrs Diane Macdonald, Director of Human Resources and Workforce Development.*

Discussion: Mrs D Macdonald advised that the workforce is ageing with the median age of the workforce being forty seven compared to the NHS Scotland median age of forty four. The Board is maintaining entry routes for particularly young people with apprenticeships and a highly successful summer student campaign this year. Ms Bozkurt noted that the finance summer student was excellent and she would have recruited her without hesitation. She felt that this was a great opportunity for young people to see what job prospects are available to them on the island. Mrs France MacLeod agreed with Ms Bozkurt that the summer students were a great asset, she noted that she had two past summer students who were now on the payroll. Mrs McCannon queried if there was a post experience questionnaire for summer students. Mrs D Macdonald thanked Mrs McCannon for her suggestion and would look to doing this next year.

Mrs D Macdonald advised that options for retire and return have expanded in the last three years to include partial retirement and retire and return. There have been forty six accepted applications for retire and return and twelve partial retirements since the introduction of the policies in 2022 and 2023. There were no significant fluctuations in the use of agency staff and strict controls in place with agency sign off through the Chief Executive.

Mrs D Macdonald noted that there was a significant rise in long term sickness absence between March and July with no specific trends noted. She assured the members that the attendance management process is being applied consistently, and the appropriate support is in place for staff who have met triggers.

Mrs D Macdonald informed the members that there had been several recruitments to posts following successful social media advertisements.

Decision: **The Board formally noted the report.**

Action: **Mrs D Macdonald to compile a summer student post experience questionnaire for use next year.**

9.2 Organisational Development and Learning Report April to July 2025

9.2.1 Appendix 1 – Narrative Report

Issue: *The Board was asked to note for awareness purposes the report presented by Mrs D Macdonald.*

Discussion: Mrs D Macdonald advised that the Organisational Development and Learning team compile a quarterly report outlining key activities and achievements which highlights efforts undertaken to enhance organisational development and support strategic goals. The report presented is for the period April to June 2025 and key initiatives highlighted in the report include enhancements to Turas Learn, iMatters 2025 campaign and employability initiatives.

Decision: **The Board formally noted the report.**

Action: **No actions required.**

10. CLINICAL GOVERNANCE

10.1 Healthcare Acquired Infection Report

10.1.1 Appendix 1 – HAIRT June – July 2025

Issue: *The Board was asked to note for assurance the report presented by Ms Robertson.*

Discussion: Ms Robertson noted that during the period June to July there were no Staphylococcus Aureus (SAB) infections reported, there were five Escherichia Coli Bacteraemia (ECB) infections, one hospital acquired, two healthcare associated and two community associated infections. There were two community associated Clostridioides Difficile Infection (CDIF) infections and of the thirty seven operations completed, there was one surgical site infection. An Infection Prevention and Control critical incident review was held and discussed at the Infection Control Committee.

Ms Robertson commended all staff as hand hygiene, cleaning compliance and estate monitoring were all above 95%.

Decision: **The Board formally noted the reports.**

Action: **No actions required.**

11. REPORT / APPROVED MINUTES FROM BOARD SUB COMMITTEES FOR AWARENESS

11.1 Audit & Risk Committee

11.1.1 Finance, Performance and Resource Committee 10/06/2025 – A

11.1.2 Clinical Governance Committee 18/06/2025 – A

11.1.3 Audit & Risk Committee Minute 26/06/2025 – A

The Minutes were presented for information and awareness purposes. There were no questions raised.

Decision: The Board formally noted the sub committee's minutes.

Action: No actions required.

12. OTHER INFORMATION

Mrs Smith asked for clarification on the recent HIS inspection. Mrs Robertson advised that there was an unannounced inspection on 13th and 14th October 2025 in the Western Isles Hospital. Five inspectors were involved reinspection of acute services focussing on last year's requirements and action plan progress and a full maternity inspection which was there first island maternity unit inspection.

Ms Robertson noted that verbal feedback was all positive in terms of the acute services inspection, with staff feeling more content and supported in their roles, easier access to training and education and an improvement in the sharing of learning. A visible improvement in hand hygiene and PPE was noted, and patient feedback was excellent. Inspectors commended the progress with the Paediatric Bay especially noting the recent artwork.

Ms Robertson advised that the inspectors where unsure of how to report on the Maternity Ward as this was a first inspection of this kind for them. They did note that the environment was spotless and the leadership and accessibility of the Head of Midwifery was exemplary and that all staff were fully invested in the care of their patients.

Ms Robertson noted that Stage 2 of the inspection was the submission of evidence for both inspections and she awaits HIS response. She added that the inspectors did imply that they do not require any face to face sessions and a positive point is that there has been no date given for their draft report, which is usually twelve weeks following inspection.

Ms Robertson commended all staff involved in an incredibly positive inspection and will notify the Board if any HIS feedback is given.

Action: Ms Robertson to notify the Borad if any HIS feedback is given from these positive inspections.

Mrs McCannon advised that she had been in direct discussion with members of the public regarding the registration and waiting lists for dentistry and would like assurance from the Director of Dentistry on this. Mr Durkan advised that a report on dental services had been commissioned and would be presented to the Board early in the New Year.

Mr Jamieson noted the report but felt that he would be looking for an update in terms of the current position in terms of waiting times to see your registered dentist and the current situation regarding members of the public who are unable to register with a dentist.

Action: Ms McCannon advised that she would liaise with Mr Durkan on taking this forward.

14. EVALUATION

	YES	NO	COMMENTS
For Chair only to Complete:			
Was the draft minute and action plan / log received within the 5-day time frame for you to review? If note state how many days before receipt.			
Were you satisfied that the agenda items presented covered the current significant areas?	✓		
Was there was 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 were sufficient refreshment breaks?	✓		
Did you consider that the Board discharged its duty in respect of • Proper Scrutiny • Relevant Questioning • Constructive Challenging	✓ ✓ ✓		

14. DATES, TIMES & VENUE OF NEXT MEETING

Board Development Session

Date: 27th November 2025

Time: 10:00am

Venue: Teams

The Chair thanked everyone for their contribution, commitment, and involvement in the Board discussion. The meeting ended at 12:15pm.

END