



CÙRAM IS SLÀINTE NAN EILEAN SIAR

INTEGRATION JOINT BOARD

Item: 4.1
IJB: 26 March 2026

**MINUTE OF MEETING HELD IN
THE COUNCIL CHAMBER,
COUNCIL OFFICES, SANDWICK
ROAD, STORNOWAY AND
THROUGH MICROSOFT TEAMS
ON WEDNESDAY 25 FEBRUARY
2026 AT 2.00PM.**

Voting Members Present:

Prof. Annetta Smith
Naomi MacDonald
Ian McCorquodale
Calum Maclean
George Murray
Kenneth Macleod

Non-Executive Director, NHSWI (Chair)
Non-Executive Director, NHSWI
Non-Executive Director, NHSWI
CnES Councillor (Vice Chair)
CnES Councillor
CnES Councillor (Depute)

Non-Voting Members Present:

Morag Munro
Clare Carolan
Dena Macleod
Eoin MacNeil

WI Community Care Forum
Associate Medical Director, NHSWI
Hebridean Housing Partnership
Scottish Ambulance Service

In Attendance:

Emma MacSween
Debbie Bozkurt
Tim Langley
Donald E Macleod
Lorraine Graham
Angela Smith
Shona Hadwen
Fiona MacIver

Interim Chief Officer, IJB
Chief Finance Officer, IJB
CnES Chief Officer Law & Governance
CnES Senior Accountant
CnES Housing Services Manager
CnES Housing Strategy Manager
CnES Principal Administrator, Governance and Elections
CnES Administrator, Governance and Elections



1. WELCOME

The Chair welcomed all members to the meeting.

2. APOLOGIES

Susan Thomson	CnES Councillor
Karen France Macleod	NHSWI, Non-Executive Director
Iain A MacNeil	CnES Councillor
Michelle McPhail	NHSWI Corporate Business Manager
Frances Robertson	NHSWI Nursing Director
Gillian McCannon	NHSWI Chair

3. DECLARATION OF INTEREST

There were no declarations of interest.

4. MINUTES

4.1 IJB Minute of 20 November 2025

The Board considered the minutes of the meeting of 20 November 2025.

Decision: The minute of the meeting of 20 November 2025 was approved.

Action: No further action.

4.2 Matters Arising

There were no matters arising.

4.3 Action Points as at 19 February 2026

The Chief Officer provided updates on the following items on the revised Action Points Tracker:

- Strategic Planning Groups – following a meeting held with locality planning group Chairs, different data sets are being looked at on the back of the health needs assessment presentation. An update will be provided once more information is available.
- Strategic Commissioning Plan – an update will be brought to the March meeting of the Board with a full review of the documentation will take place in June 2026.
- Integration Scheme – item on the Agenda at item 6.
- IJB Business Cycle – item on the Agenda at item 7.
- Audit & Risk Terms of Reference – to be brought to the March 26 meeting.



- Risk Register – good progress made at the last meeting of Audit & Risk Committee, in particular the Risk Management Strategy which is being reviewed and will be presented to a future meeting of the Board, once it has gone through the Audit & Risk Committee.

Decision: It was agreed to note the update.

Action: No action required.

4.4 IJB Audit & Risk Committee 5 November 2025

The minutes of the meeting of the Audit and Risk Committee on 5 November 2025, which was approved at the Audit and Risk Committee meeting on 10 February 2025, was presented to the Board for noting.

Decision: It was agreed to note the minutes of the meeting of the IJB Audit & Risk Committee of 5 November 2025.

Action: No action required.

5. CHIEF OFFICER REPORT

5.1 Chief Officer Update

The Chief Officer submitted a Report which provided members of the Board with an update on key matters relating to system performance, strategic planning and public sector reform.

Three appendices were attached to the Report and a summary of each was provided within the Report.

1. Sub National Planning - Appendix 1 to the Report provided information on the two sub-national structures, East and West, for alignment of NHS Boards to facilitate collaboration in terms of service planning and provision. NHS Western Isles is included in the West structure. The governance includes two Sub National Planning and Delivery Committees (SPDCs) accountable to Scottish Ministers. Health Boards were expected to work with SPDCs to ensure appropriate alignment of planning resources and expertise in support of these new sub-national structures.
2. Community Health & Social Care Performance 2025 – Appendix 2 to the Report was prepared by Audit Scotland and provided an overview of the landscape of performance reporting across Partnerships. The Report concluded that more needs to be done to support Partnerships to have the relevant information to plan, make effective decisions and share understanding on performance.
3. Delayed Discharges – A symptom of the challenges facing health & social care – Appendix 3 - the Report highlighted the detrimental impact this complex issue has on patients, their families and the health and social care system. Included in the finding was the commitment to have better analysis and transparency on the various impacts and also the improvement actions that are being shared in terms of best practice. There was also an acknowledgement in the recommendations that there needed to be a review of the current indicators for measuring performance.

Clarification was sought on the recommendation being made for improvement to the current performance indicators on delayed discharge and if this was going to be taken forward or if it was just a recommendation to look at this. The Chief Officer confirmed that this was being taken forward nationally



as there was recognition that delayed discharge is just one measure of several complex factors and there needed to be a better way of measuring performance across the whole spectrum of services.

An update was provided on on-going Public Sector Reform developments. It was noted that the Comhairle and NHSWI had submitted separate proposals to Scottish Government. At a political meeting in January, an overview of all submissions from the participating island partners was undertaken. The outcome was a commitment from Scottish Government to consider the details and provide feedback at a meeting to be convened by Government. The role of the IJB is to review any joint submission once available, and further guidance from the Scottish Government would determine next steps of the IJB.

Decision: It was agreed to note the Chief Officer Update and associated appendices.

Action: No action required.

6. STRATEGIC GOVERNANCE

6.1 Integration Scheme Review

The Chief Officer submitted the final draft of the revised Integration Scheme for consideration prior to it going out to public consultation with the outcome to come back to the June meeting of the Board. The revised Integration Scheme at Appendix 1 has been subject to an internal review assisted by Legal Services in the Comhairle. The draft has also been through Integrated Corporate Management Team which is the route to the IJB.

The summary Report noted that it is a legal requirement for Health and Social Care Partnerships to have an Integration Scheme in accordance with the legal duties associated with Public Bodies (Joint Working) (Scotland) Act 2014 and to review it every five years. The current version of the Scheme was at Appendix 2, and was approved by Scottish Ministers in 2016. Appendix 3 to the Report provided details on the delegated services to supplement the Scheme.

The Report also provided information on proposed changes to the voting structure within Integration Joint Boards. At the time of the Report submission, Scottish Government were progressing regulations to extend voting rights to lived experience member of Integration Joint Boards (service users, unpaid carers and third sector representatives). A copy of the letter submitted from the IJB Chairs and Vice Chairs network to the Health, Social Care and Sport Committee was detailed at Appendix 4. It was acknowledged that debate was ongoing regarding the proposal and at the time of the meeting COSLA leaders have refrained from participating in the National Short Life Working Group pending a discussion at the forthcoming Leaders' meeting.

A key change in the Integration Scheme is the inclusion of timeframes around "dispute resolution" which should assist in the future should such disputes occur.

The Chief Officer highlighted that since the writing of the Report a decision had been made regarding voting rights of lived experience members of the Board. From September 2026, lived experience members will have the right to vote on matters at IJB meeting. A Short Life Working Group has been established nationally to work through the guidance on this.

Discussion was held in relation to costs associated with the changes being brought in for new voting members and what this referred to. It was highlighted that this could refer to preparing and supporting



new voting members into the IJB, some members would already have experience of working with public bodies, others would have less or no experience of this. Proxy voters was another area that was highlighted and it was noted that the Short Life Working Group would review these points and determine the way forward.

Discussion was also held on the key requirements of the IJB in relation to being able to deliver services. The IJB must have a Strategic Plan, it must deliver a balanced budget, it must set directions to both parent bodies for the delivery of services and, it must ensure the workforce plans are in place to be able to deliver the associated services.

Further discussion was held around the budget, deficit and future plans which would be presented to the Board to enable them to make a decision on the strategic direction of service development.

Decision: It was agreed to approve the draft of the revised Integration Scheme for onward public consultation.

Action: Interim Chief Officer to proceed with consultation process and the bring findings/final scheme back to Board in June 2026.

7. CORPORATE GOVERNANCE

7.1 IJB Voting Membership

The updated Report was presented for awareness. It showed Julia Higginbottom NHSWI leaving the Board and Ian McCorquodale, NHSWI moving from a deputy member to a substantive voting member on both the Board and the Audit & Risk Committee.

The Interim Chief Officer wished to thank the Corporate Business Manager for her support in keeping members up to date with membership changes and acknowledged that a simpler version of the document would be looked at in the future.

Decision: It was agreed to note the update.

Action: Interim Chief Officer to liaise with the Corporate Business Manager to create a simplified version of the update. This would be an ongoing item on the agenda.

7.2 IJB 2026 Workplan/ Business Cycle

The Workplan/Business Cycle was presented in November 2025 but there were a number of Reports with no presentation date. The revised Workplan/Business Cycle was presented for approval but in discussion it was noted that further amendments to timescales of documents were ongoing and that a revised version would come back to Board in June for approval.

Decision: It was agreed to note the revised Workplan/Business Cycle.

Action: Further discussions regarding the Workplan/Business Cycle to take place with the Corporate Business Support Manager.



8. FINANCIAL GOVERNANCE

8.1 Financial Performance – Q3 Monitoring Report

The Chief Finance Officer submitted a Report for noting which provided Members with an update on the financial position at the end of December 2025. The Report reflected the spend to date and explained any recurring cost pressures and non-recurring cost pressure variances which had arisen in the first 9 months of the year and which are likely to have an impact on the year end out-turn.

As of 31 December 2025, the IJB showed an in-year overspend of £2.9m and at year end the Board is showing a projected overspend position of £3.67m, excluding reserves. Financial Flexibilities including anticipated NHS allocations, and Reserves held for both partners mean a reported break-even position for the IJB by year end.

Full details of the main variance of the IJB, including financial risks to the ability to remain at a break-even position, were detailed in the Q3 Monitoring Report at Appendix 1.

The Monitoring Report highlighted the biggest financial and staffing risk to Health and Social Care as being demographics and population. Falling birth rates over the past 50 years as well as high numbers of school leavers choosing to move to the mainland, are affecting recruitment. Increasing numbers of over 65s are placing increased demand on health and social care services.

The Monitoring Report also highlighted the financial risk as a result of delayed discharges, with the figures showing 60% of available core staffed beds for acute admissions being taken up by delayed discharges.

The Chief Finance Officer highlighted other areas of concern as detailed in the appendix.

During discussion members wished to record their thanks to all nurses, doctors, community nurses and community care teams who continue to deliver excellent service to patients in hospital, care homes and in their own homes, in what can be a very challenging landscape. It was noted that whilst staff always get good feedback from patients and service users, it was appreciated to hear it from management, and the thanks would be passed on to the various teams.

Decision: It was agreed to note the update on Financial Monitoring.

Action: No action required.

9. PERFORMANCE

9.1 Performance Report

The Chief Officer submitted a Report summarising the performance of the IJB for the period up to December 2025. The performance report was attached at Appendix 1 and presented data that reflects the sustained challenges being encountered in relation to patient flow.



Delayed Discharge performance has continued to be extremely challenging. Although reasons for delay can be a number of complex factors, the capacity of social care services is consistently the issue. Currently the unmet need is relatively evenly split between the requirement for long term care and care at home.

The Performance Report now offered comparisons to other island authorities and this was welcomed by members, and It was noted that the performance figures for other islands broadly followed the same trajectories.

The Report went on to provide an overview of the immediate and longer-term actions being progressed to address and mitigate risks to the local health and social care service system and the Chief Officer went into detail on the positives of the initiatives, these included:

- Bed escalation plan
- Allied Health Professionals – distance learning undergraduate course
- Integrate Front Door investment
- Moving with Dignity Training
- Attendance Management
- Unscheduled Care

Decision: It was agreed to note the update provided in the Performance Summary Report.

Action: No action required.

10. EVALUATION

	YES	NO	COMMENTS
Were you satisfied with the content of the agenda?	X		
Was there sufficient time to review the papers between receipt and the meeting date?	X		
Were the agenda items placed in the correct order/ prioritization?	X		
Was there sufficient time allocated to all agenda items?	X		
Were the Executive Summaries an accurate reflection of the detailed paper?	X		
Was there sufficient refreshment breaks?	X		
Are there and significant issues which should be escalated to the parent bodies?		X	



Did you consider that the Board/ Committee discharged its duty in respect of: <ul style="list-style-type: none">• Proper Scrutiny• Relevant questioning• Constructive challenging	X		
Do you have any suggestions for improvement or additional comments about this meeting?		X	Comments should be made to Emma MacSween