

ANNUAL STATEMENT OF ASSURANCE FOR THE PUBLIC HEALTH & WELLBEING COMMITTEE 2025/26

1. Purpose

- 1.1 To provide the Board with assurance that NHS Fife is fully engaged in supporting wider population health and wellbeing for the local population, including overseeing the implementation of the population health and wellbeing actions defined in the Board's strategic plans and ensuring effective contribution to population health and wellbeing related activities.

2. Membership

- 2.1 During the financial year to 31 March 2026, membership of the Public Health & Wellbeing Committee comprised: -

John Kemp	Committee Chair / Non-Executive Member
Jo Bennett	Non-Executive Member
Arlene Wood	Non-Executive Member
Lynne Parsons	Employee Director
Prof Christopher McKenna	Medical Director
Janette Keenan	Director of Nursing (to June 2025)
Gillian McAuley	Executive Nurse Director (from July 2025)
Nicola Robertson	Chair of the Area Clinical Forum
Carol Potter	Chief Executive
Dr Joy Tomlinson	Director of Public Health

- 2.2 The Committee may invite individuals to attend the Committee meetings for particular agenda items, but the Director of Communications & Engagement, Director of Health & Social Care, Director of Pharmacy & Medicines, Director of Property & Asset Management, Director of Planning & Transformation, Deputy Director of Planning & Transformation and Board Secretary will normally be in attendance at Committee meetings. Other attendees, deputies and guests are recorded in the individual minutes of each Committee meeting.
- 2.3 The Committee has consciously encouraged attendance and contribution into agenda items from a number of staff, to widen staff insight into the work of the Committee and also to ensure that the Committee is seen to welcome input from a broad range of contributors.

3. Meetings

- 3.1 The Committee met on six occasions during the financial year to 31 March 2026, on the undernoted dates:
- 12 May 2025
 - 7 July 2025
 - 15 September 2025
 - 10 November 2025
 - 12 January 2026
 - 2 March 2026
- 3.2 The attendance schedule is attached at Appendix 1.

4. Business

- 4.1 An extract of the Committee's workplan for the year, illustrating the assurance levels agreed for each of the substantive agenda items, is attached as Appendix 2. A summary of the Committee's business over the year is given below.

Strategy

- 4.2 The Committee has the lead responsibility for review of activity linked to the Board's Population Health & Wellbeing Strategy, approved in March 2023. In July 2025, the Committee considered the Population Health & Wellbeing Strategy Annual Report 2024/25 and concluded that the strategy remained aligned with corporate objectives and national priorities. Members recognised limitations in the availability of national metrics but were assured that mitigating narrative and qualitative evidence were in place. The Committee endorsed the report for Board approval, subject to strengthening outcome-focused narrative, and took a moderate level of assurance that risks associated with the strategy's delivery were being managed.
- 4.3 In September 2025, the Committee discussed progress towards the emerging Plan for Fife and concluded that there was significant opportunity to strengthen the health and wellbeing contribution within future partnership arrangements. While no formal assurance level was taken, the Committee emphasised the importance of continued engagement and future reporting. During the same meeting, the Committee considered the proposal for a static breast screening site at Queen Margaret Hospital and took a moderate level of assurance that the development would improve equity of access and patient experience.
- 4.4 In November 2025, the Committee reviewed a report on Year 1 delivery of the Prevention & Early Intervention Strategy 2024–2027 and the Burden of Disease Assessment for Fife. Members concluded that progress was being made despite recognised delivery risks and barriers, and that strategic priorities were well aligned to population health need. The Committee took a moderate level of assurance from both reports.
- 4.5 In January and March 2026, the Committee considered the Population Health Organisation framework and endorsed the ambition to embed prevention as a core organisational principle, while emphasising the importance of co-production with partners. The Committee also reviewed strategic partnership activity including the Anchors Programme, suicide prevention delivery through Creating Hope for Fife, and the Violence Against Women Partnership. The Committee consistently concluded that partnership working was strong, while recognising capacity and funding risks, and took moderate levels of assurance across these areas. In March 2026, significant assurance was taken in relation to community pharmacy services, reflecting robust provision and demonstrable impact on access and prevention.
- 4.6 The Committee has also scrutinised the Annual Delivery Plan Quarter 4 Report for 2024/25 and concluded that appropriate arrangements were in place to reconcile risks, performance and escalation across governance structures. The Committee endorsed the report for formal approval by NHS Fife Board and submission to the Scottish Government, taking a moderate level of assurance that delivery was being effectively overseen. For the bulk of the reporting year, scrutiny of the Annual Delivery Plan has fallen within the remit of the Finance, Performance & Resources Committee.

Performance

- 4.7 Throughout the year, the Committee maintained oversight of population health performance through review of its section of the Integrated Performance & Quality Report. In May 2025, the Committee noted stable screening performance, continued challenges in childhood immunisation uptake and strong performance within Child and Adolescent Mental Health Services. The Committee concluded that improvement actions were appropriate and took a moderate level of assurance. Across July and September 2025, the Committee continued to

scrutinise smoking cessation, immunisation and psychological therapies performance. While improvement trajectories were noted, the Committee recognised fragility in delivery and took moderate assurance overall, with specific concerns highlighted where national standards were not being met.

- 4.8 In November 2025 and January 2026, the Committee undertook deeper scrutiny of psychological therapies and immunisation performance. Where national standards continued not to be met, the Committee took limited levels of assurance, reflecting ongoing workforce, capacity and system pressures. By March 2026, the Committee noted improved performance across a number of indicators including unscheduled care, breastfeeding and smoking cessation. Ongoing challenges in vaccination uptake remained, and the Committee took a moderate level of assurance overall from the IPQR, with limited assurance taken specifically for the Winter Vaccination Programme.

Governance

- 4.9 Throughout the year, the Committee regularly reviewed delivery of its Annual Workplan and reflected on its own effectiveness, identifying opportunities to reduce duplication and strengthen coordination across Board and Health & Social Care Partnership committees. Moderate levels of assurance were taken in respect of workplan delivery.
- 4.10 Governance assurance was a consistent theme throughout the year. In May 2025, the Committee took significant assurance that governance arrangements for the Independent Learning Review supported independence, transparency and accountability. In September 2025, the Committee scrutinised governance oversight of the Facilities Staff Changing and Toilets Review and related Equality Impact Assessment, concluding that arrangements were appropriate and supported by clear ownership and engagement mechanisms, while recognising that full assurance would be dependent on completion of the programme of work by March 2026. Significant assurance could be taken, however, that the establishment of the Learning Review Assurance Group, to oversee delivery of the recommendations of the Independent Learning Review, mitigated organisational and compliance risks.
- 4.11 In January 2026, the Committee considered the findings of the Population Health Internal Audit report. The Audit opinion provided reasonable assurance that governance arrangements were generally sound. The Executive Summary noted the significant and increasing expectations of public health work to support delivery of sustainable health services. The Committee took a moderate level of assurance from management actions agreed in response to audit findings.
- 4.12 Minutes of Committee meetings have been approved by the Committee and presented to Fife NHS Board. The Board also receives an Assurance Report at each meeting from the Chair, highlighting any key issues discussed by the Committee at its preceding meeting. The Committee maintains a rolling action log to record and manage actions agreed from each meeting, and reviews progress against deadline dates at subsequent meetings. The format of the action log has been enhanced, to provide greater clarity on priority actions and their due dates. A rolling update on the workplan is presented to each meeting, for members to gain assurance that reports are being delivered on a timely basis and according to the overall schedule. A final version of the workplan for 2026/27 was approved at the Committee's March 2026 meeting.

Risk

- 4.13 Risk oversight remained a core component of the Committee's work throughout 2025/26. The Committee reviewed corporate risks aligned to its remit at each meeting, including substance-related morbidity and mortality, oral health, primary care, pandemic preparedness and climate emergency. The Committee consistently concluded that risk descriptions were appropriate and that mitigating actions were credible, while recognising that many drivers were outwith NHS control. Moderate levels of assurance were taken throughout the year. By

March 2026, all risks aligned to the Committee were within or below risk appetite, and the Committee took a moderate level of assurance that arrangements for identifying and managing emerging risks remained effective. Also in March 2026, significant assurance was provided on NHS Fife's mitigation of local patient safety risks arising from a national immunisation incident, with system and process risks noted.

Assurances from Sub-Groups

- 4.14 The Public Health Assurance Committee has provided positive assurance for 2025/26 that adequate and effective governance arrangements were in place across all areas within its remit and no significant control weaknesses or governance issues were identified at year-end that would require disclosure. The Committee has provided substantial assurance in relation to Public Health risk oversight and management, with systematic review and scrutiny of all risks on the Public Health Risk Register, including eleven Public Health risks and three Corporate Risks aligned to Public Health. Assurance is strengthened by demonstrable risk movement, including: closure of risks relating to missed newborn blood spot screening and misuse of suspicion of malignancy functionality, following implementation of strengthened procedures, system changes and updated guidance; reduction in risk associated with surge capacity for infectious disease outbreaks, reflecting establishment of agreed staffing levels within the East Region Health Protection Service; and appropriate escalation and monitoring of emerging risks, with assurance taken where risks were not progressed due to established oversight arrangements. Public Health elements of the Annual Delivery Plan were subject to ongoing monitoring throughout the year. These elements were embedded within every meeting cycle, with workstreams examined where delivery pressures emerged. Assurance has also been taken from key Public Health sub-groups and partnership structures through receipt and scrutiny of Annual Assurance Statements from the Public Health Screening Programmes, the Area Immunisation Steering Group and the Pandemic Framework Group. The Committee notes that these statements demonstrate the breadth and maturity of work undertaken, providing confidence in system-wide Public Health governance and delivery. The Committee further strengthened assurance through formal consideration of multiple annual reports, including Immunisation, Screening Programmes, Screening Inequalities and Oral Health, enabling triangulation between performance reporting, risk oversight and assurance statements. Taken as a whole, the Committee can be provided with clear, evidence-based assurance that Public Health risks were effectively identified, managed and reduced where possible; that delivery against agreed plans was appropriately overseen; and that governance arrangements were robust, with no material weaknesses requiring disclosure at year-end.
- 4.15 The annual Assurance Statement from the Equality & Human Rights Steering Group provides the Public Health & Wellbeing Committee with assurance that NHS Fife continued to meet its Equality and Human Rights responsibilities during 2025/26, despite the Group being reviewed and partially paused. This was primarily achieved through the commissioning and delivery of an Independent Learning Review following a high-profile employment relations case and concerns raised by the Equality & Human Rights Commission in relation to practice around Equality Impact Assessments (EQIAs). The Independent Learning Review, commissioned in April 2025, examined governance, decision-making and compliance with equality duties and produced 38 recommendations. All recommendations were accepted by NHS Fife and delivered through an Improvement Plan structured around five Key Result Areas. Oversight was provided by the Learning Review Assurance Group, chaired by the Board Vice Chair and reporting directly to the NHS Fife Board. The majority of actions were completed by 31 March 2026, with residual elements transferred into business-as-usual arrangements. During the year, the Equality & Human Rights Steering Group met on a limited basis while its role, remit and governance alignment were reviewed. A refreshed Steering Group, with revised membership and terms of reference, has been established from April 2026. Its future focus will include oversight of Equality Impact Assessments, assurance of progress against the Anti-Racism Plan, delivery of statutory equality duties, monitoring equality data, and supporting staff networks.

- 4.16 Overall, the Equality & Human Rights Steering Group can provide assurance that, during 2025/26, NHS Fife responded robustly to the findings of the Independent Learning Review and used this as a catalyst for significant organisational change. Whilst equality and human rights risks remain high, this is recognised as appropriate at this stage of transition and improvement. There is no evidence of significant control failures beyond the issues that prompted the establishment of the Independent Learning Review, and the refreshed governance arrangements, strengthened leadership, revised EQIA process and enhanced oversight structures provide a sound foundation for continued improvement and assurance in 2026/27.

5. Self-Assessment

- 5.1 The Committee has undertaken a self-assessment of its own effectiveness, utilising a revised questionnaire considered and approved by the Committee Chair. Attendees were also invited to participate in this exercise, which was carried out via an easily accessible online portal. A report summarising the findings of the survey was considered and approved by the Committee at its March 2026 meeting, and action points are being taken forward at both Committee and Board level in the year ahead.

6. Conclusion

- 6.1 Over the course of 2025/26, the Public Health & Wellbeing Committee provided sustained and effective oversight of strategy, performance, governance and risk within its remit. The Committee demonstrated constructive challenge, supported improvement activity and provided proportionate assurance to NHS Fife Board. Overall, the Committee provided significant assurance across key areas within its remit during 2025/26, with moderate assurance appropriately applied where programmes of work were ongoing. The Committee demonstrated effective scrutiny of complex and sensitive issues, maintaining a strong focus on governance, equality, patient safety and organisational learning.
- 6.2 As Chair of the Public Health & Wellbeing Committee, I am satisfied that the integrated approach, the frequency of meetings, the breadth of the business undertaken and the range of attendees at meetings of the Committee has allowed us to fulfil our remit as detailed in the Code of Corporate Governance. As a result of the work undertaken during the meetings held through this year, I can confirm that adequate and effective governance arrangements were in place throughout NHS Fife during the year.
- 6.3 I can confirm that there was one significant control weakness / issue at the year-end which the Committee considers should be disclosed in the Governance Statement, as may have impacted financially or otherwise in the year or thereafter. As detailed within the Equality & Human Rights Steering Group annual assurance report, this was within the area of compliance with Regulation 5 of the Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012. These regulations require public bodies to assess the impact of policies and practices on people with protected characteristics. Linked to a high-profile employment tribunal concerning a staff complaint on access to single-sex facilities, in February 2025 NHS Fife received correspondence from the external regulator, the Equality & Human Rights Commission (EHRC), regarding the organisation's lack of compliance. Following engagement with the EHRC, NHS Fife agreed to undertake a comprehensive review of relevant staff toilet and changing facilities and committed to completing and publishing an Equality Impact Assessment (EQIA) in relation to policies related thereto. Governance of this work was provided through Executive-level coordination to track activity, a short-life working group reviewing audit findings and a separate Learning Review Assurance Group reporting directly to NHS Fife Board. The Committee discussed and provided input to establishment of the necessary additional governance for this work to progress at pace. The initial EQIA was

published by 30 September 2025, in line with the Commission's direction. In December 2025, the EHRC confirmed that, having reviewed the documentation, it was satisfied that NHS Fife had now met the requirements of Regulation 5. NHS Fife subsequently undertook a refreshed and more detailed EQIA, published in March 2026, supported by targeted staff engagement and consultation. Assurance has now been provided to the Board that NHS Fife's current practice is compliant with existing legislation and completion of the EQIA process in the reporting year demonstrates that equality considerations are informing our approach in this policy area. Improvements have also been made to the operation of the Equality & Human Rights Steering Group, as detailed further in Section 4 above.

- 6.4 I would pay tribute to the dedication and commitment of fellow members of the Committee and to all attendees. I would thank all those members of staff who have prepared reports and attended meetings of the Committee.

Signed: 

Date: 28 April 2026

John Kemp, Chair

On behalf of the Public Health & Wellbeing Committee

Appendix 1 - Attendance Schedule

Appendix 2 - Levels of Assurance mapped to Committee's Annual Workplan

**Public Health & Wellbeing Committee Attendance Record
1 April 2025 to 31 March 2026**

	12.05.25	07.07.25	15.09.25	10.11.25	12.01.26	02.03.26
Members						
J Kemp , Non-Executive Member (Chair)	✓	✓	✓	✓	✓	✓
J Bennett , Non-Executive Member	x	✓	x	✓	✓	✓
A Wood , Non-Executive Member	x	✓	✓	x	✓	✓
N Robertson , Chair of the Area Clinical Forum	✓	✓	✓	✓	x	✓
G McAuley , Executive Nursing Director		✓	✓	x	✓	✓
Prof C McKenna , Medical Director	✓	x	✓	✓	✓	✓
J Keenan , Director of Nursing	✓					
L Parsons , Employee Director	✓	✓	✓	✓	x	✓
C Potter , Chief Executive	✓	✓	✓	✓	✓	x
Dr J Tomlinson , Director of Public Health (Exec Lead)	✓	✓	✓	✓	✓	✓
In Attendance						
E Butters , Fife Alcohol & Drug Partnership Service Manager			✓ Items 1 – 5.1		✓ Item 8.5	
C Conroy , Head of Service, HSPC					✓ Item 5.2	
L Cooper , Head of Primary & Preventative Care Services				✓ Items 7.2 & 9.2	✓	
L Denvir , Consultant in Public Health				✓ Item 8.4		
F Forrest , Acting Director of Pharmacy & Medicines	✓	✓	x	✓	✓	✓
S Fraser , Deputy Director of Planning & Transformation	✓	✓	✓	✓	✓	✓
L Garvey , Director of Health & Social Care	✓	✓	✓	✓	✓	✓
Linda Reid-Fowler , Policy Co-ordinator		✓ Item 9.1				
B Hannan , Director of Planning & Transformation	✓			✓		
A Massey , Director of Psychology Services				✓ Item 8.2		
K MacGregor , Director of Communications & Engagement	✓	✓	✓	✓	✓	✓

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	12.05.25	07.07.25	15.09.25	10.11.25	12.01.26	02.03.26
G MacIntosh , Associate Director of Corporate Governance & Board Secretary	✓	✓	x	✓	✓	✓
N McCormick , Director of Property & Asset Management	✓	✓	✓	✓	x	x
M Neilson , Consultant in Public Health			✓ Item 9.1			
E O'Keefe , Consultant in Dental Public Health					✓ Item 8.3	
K Oyedeji , Consultant in Public Health	✓ Item 9.2				✓ Item 8.4	
O Robertson , Senior Manager Children's Services	✓ Item 9.3					
A Summers , Interim Director for Fife Psychology Service	✓ Item 8.2			✓ Item 8.2		

APPENDIX 2

PUBLIC HEALTH & WELLBEING GOVERNANCE COMMITTEE LEVELS OF ASSURANCE MAPPED TO ANNUAL WORKPLAN 2025 / 2026

Agreed Level of Assurance	
S	Significant
M	Moderate
L	Limited
N	None

	Lead	12/05/25	01/07/25	15/09/25	10/11/25	12/01/26	02/03/26
Governance Matters							
Annual Committee Assurance Statement (inc. best value report)	Board Secretary	M					
Assurance Statement for Public Health Assurance Committee, Equality & Human Rights Strategy Group and Addressing the Climate Emergency Board	Director of Public Health / Executive Nurse Director	S					
Annual Internal Audit Report	Director of Finance		✓ For noting				
Committee Self-Assessment Report	Board Secretary						M
Corporate Calendar / Committee Dates	Board Secretary			✓			
Internal Controls Evaluation Report 2025/26	Chief Internal Auditor					✓	
Corporate Risks Aligned to PHWC, and Deep Dives	Medical Director / Director of Public Health	M New Risk for Dentistry	M Health Inequalities Climate Emergency	M Pandemic Preparedness	M Update on Primary Care	M Drug Related Deaths	M Primary Care
Scottish and UK COVID 19 Inquiries Update	Director of Public Health			✓ Private Session			
Strategy / Planning							
Anchor Institution Programme Board Update	Director of Public Health		Deferred due to timings				M
Annual Delivery Plan Scottish Government Response 2024/25	Director of Planning & Transformation	Removed from workplan – will be presented at FP&R only					
Annual Delivery Plan Quarterly Performance Report	Director of Planning & Transformation	M Q4	Removed from workplan for 2025/26				

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	Lead	12/05/25	01/07/25	15/09/25	10/11/25	12/01/26	02/03/26
Creating Hope for Fife: Fife's Suicide Prevention Action Plan	Director of Health & Social Care		Deferred due to timings				M
Implementation of the Promise National Update on Delivery in Fife	Director of Health & Social Care				Deferred	M	
Building our Inclusion Health Network	Director of Public Health	M & L					
Mental Health Estates Initial Agreement Update	Medical Director					Removed from workplan – requires a new process/paper	
Mental Health Strategy Implementation	Director of Health & Social Care	Deferred due to timings					Removed – mental health on Board agenda
Prevention & Early Intervention Strategy 2024 – 2027 - Update on Delivery Plan	Director of Health & Social Care			Deferred due to timings	M Year One		Removed – goes to IJB
Population Health & Wellbeing Strategy Metrics	Director of Public Health / Director of Planning & Transformation	Deferred due to timings			M Burden of Disease Assessment for Fife		
Post Diagnostic Support for Dementia	Director of Health & Social Care					M	
Update on Plan4Fife and Shared Ambitions	Director of Public Health		Deferred due to timings	✓			
Quality / Performance							
CAMHS Performance Yearly Update	Director of Health & Social Care					M	
Eating Well & Having a Healthy Weight and Staying Physically Active	Director of Public Health	Removed from workplan – covered in the Director of Public Health Annual Report					
Dental Services & Oral Health Improvement	Director of Public Health					M	
East Region Health Protection Service	Director of Public Health	Scheduled to be presented to the Committee in May 2026					
Healthy Food Environments (replacing Food4Fife Delivery Plan & Good Food Nation & Weight Management)					M		
River Leven / Green Health Partnership Update	Director of Public Health	Verbal update			M		
Integrated Performance & Quality Report	Director of Planning & Transformation	M	M	M	M	M	M

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	Lead	12/05/25	01/07/25	15/09/25	10/11/25	12/01/26	02/03/26
Medical Assisted Treatment Standards	Director of Health & Social Care	Removed from workplan – incorporated into the Alcohol & Drugs Partnership Report					
Psychological Therapies Standard Update	Director of Health & Social Care	M			L		
Spring Booster Campaign	Director of Health & Social Care	Removed from workplan – now business as usual					
Inequalities							
Tackling Poverty & Preventing Crisis Action Plan & Annual Report 2024/25	Director of Public Health			L			
Annual Reports / Other Reports							
Adult Support & Protection Annual Report 2023/25	Executive Nurse Director	M Biannual Report					
Alcohol & Drugs Partnership Annual Report 2024/25, including update on Medical Assisted Treatment Standards	Director of Health & Social Care	Deferred to July	M			M	
Annual Climate Emergency and Sustainability Report 2024/25 (to include Greenspace Strategy Update)	Director of Property & Asset Management			M			
Director of Public Health Report 2024/25 (and additional updates, based on agreed priorities)	Director of Public Health	Scheduled to be presented to the Committee in June 2026					
Fife Child Protection Annual Report 2024/25	Executive Nurse Director		M				
Immunisation Annual Report, including Strategy Strategic Framework 2024 – 2027	Director of Public Health			L			
Interim Report on Screening Inequalities of Quality Improvement Work	Director of Public Health	M					
Population Health & Wellbeing Strategy Annual Report 2024/25	Director of Planning & Transformation		M				
Public Health Screening Programmes Annual Report 2024/25	Director of Public Health				M		
Pharmaceutical Care Services Annual Report 2024/25	Director of Pharmacy & Medicines			Deferred		Deferred	S
Primary Care Strategy Year 2 Report 2024/25	Director of Health & Social Care			Deferred	S		
Sexual Health and Blood Borne Virus Framework Annual Report 2024/25	Director of Health & Social Care					Deferred – required to go through	Deferred - service pressures and data

APPENDIX 2

	Lead	12/05/25	01/07/25	15/09/25	10/11/25	12/01/26	02/03/26
						governance routes first	analysis required up to end of year
United Nations Convention on the Rights of the Child (Implementation) (Scotland) Act 2024 Report	Director of Public Health / Director of Health & Social Care	M	✓ Matters Arising			Deferred to May 2026	
Violence Against Women Annual Report 2024/25	Director of Health & Social Care						M
Ad Hoc Items / Additional Items							
Scottish Dental Access Initiative Funding	Director of Health & Social Care	✓ Incorporated into dentistry deep dive					
Scotland's Population Health Framework 2025 – 2035	Director of Public Health	Deferred due to delay in national policy	✓				M (agreed at Jan '26 mtg to bring back for discussion)
RTP: Infrastructure and Change Programme	Director of Property & Asset Management	M	M & L (see SBAR)	Removed – timings amended	M	Removed – timings amended	✓ Not discussed at mtg (no Exec. Lead)
Healthcare Improvement Scotland Report - Safe Delivery of Care Mental Health Inspection	Executive Nurse Director		Removed - presented at CGC				
Independent Learning Review	Director of Planning & Transformation		Private Session – Verbal Update				Removed – reported directly to the Board via LLAG
Fife Breast Screening Static Site - Queen Margaret Hospital	Director of Public Health			M			
Facilities Review 2025/26	Director of People & Culture			M Private Session			

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	Lead	12/05/25	01/07/25	15/09/25	10/11/25	12/01/26	02/03/26
Education is Health – Fife College Partnerships Next Steps <i>(added, following action from ELT on 21/08/25)</i>	Director of Planning & Transformation				✓		
RTP Programmes of Work Updates	Director of Planning & Transformation	Removed – items will be added to the workplan accordingly					
Integrated Joint Board Strategic Plan	Director of Health & Social Care					✓	
Winter Vaccination Programme Uptake 2025/26	Director of Health & Social Care						L
Screening Inequalities Action Plan Implementation Report	Director of Public Health					M	
Childhood Immunisation Scheduling & Recording	Director of Public Health						✓
For Information							
Population Health Internal Audit Report						M	
Internal Controls Evaluation Report 2025/26						✓	
NHS Recovery & Performance Presentation						✓	
Matters Arising							
Update on Actions for Harm Prevention	Director of Health & Social Care			✓			
Waiting Well Initiative Update	Deputy Director of Planning & Transformation			✓			
Interim Report - Overheating Project	Director of Property & Asset Management			✓			
NHS as a Population Health Organisation: Developing a Prevention Focussed System	Director of Public Health					✓	
Frailty Initiatives and Future Planning	Director of Health & Social Care					M	
East Region Health Protection Service Update & Annual Report 2024/25	Director of Public Health						M