

Date: 24 June 2025
Our ref: K: FOI/Ref: 2025-000148
Email: NSS.DevServicesFOI@nhs.scot

Freedom of Information Reference: FOI-2025-000148 – Vascular Task and Finish Group.

I refer to your freedom of information request that we received on 27 May 2025.

Please provide the following in relation to the vascular task and finish group.

- 1. Meeting minutes, agendas, briefings, and papers for meetings from October 2024 to present.**
- 2. The group's most recent terms of reference.**

I originally requested this information from the Scottish government, but they said the information was held by the National Services Division of NHS National Services Scotland.

We have now completed the search of our records and can provide you with the following information:

- 1. Meeting minutes, agendas, briefings, and papers for meetings from October 2024 to present.**

Please find attached Appendices 1 – 23, which is all meeting papers and supporting documents from October 2024 to present date for the Vascular Task and Finish group.

Some of the documentation includes personal data of third parties, specifically, names and email addresses of individuals which have not been released into the public domain. Where this is the case, these details have been redacted in line with exception Section 38 ((1)(b)) of the Freedom of Information Scotland Act, 2002 (FOISA). Under the same exemption, Section 38 ((1)(b)) of FOISA, we have withheld some information where the number of patients falls below 10 to protect their identity in line with the Caldicott Principles.

Under section 15(1) of FOISA we have included Appendix 23 – 2025-05-29 Min_Redacted. This is from a meeting which took place after we received this request for information.

We have included Appendix 18 (DRAFT PDB Feb 2025 Paper 1.2 Feasibility Rpt V0.3. Please note that, this is the draft version of this report and as such, some of the information is inaccurate/not validated.

Under section 15(1) of FOISA we have included a list of the data from the draft version detailing what specific information is inaccurate/not validated. Please see Appendix 25 - Sections not yet validated.



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Chief Executive Mary Morgan

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Within the appendices, please note, Appendix 19 – 2025-05-29 Vascular Report SOM TOM Feasibility V1.2 is the final version of that report. This details the most up to date/accurate information. It is important to note that even though, this is the most up to date/accurate information there are some limitations as per detail below, taken from the report:

The accuracy of vascular surgical procedure data from NHS Scotland, the National Vascular Registry (NVR) and the service providers varies from quite good to poor and there are some known limitations which are detailed below.

1. Data Collection and Reporting:

The NVR and NHS Scotland dashboards rely on accurate data entry from hospitals and healthcare providers. Variations in data collection practices and reporting standards can lead to inconsistencies and under reporting of procedures. To overcome known areas of poor compliance each centre was asked to supply validated data. This was then sense checked by IMS, with issues queried with the service providers. Where relevant other sources of data were reviewed by IMS to sense check the data.

2. Impact of the COVID-19 Pandemic:

The COVID-19 pandemic disrupted healthcare services, including elective surgeries. This led to a temporary reduction in the number of procedures performed and reported, which may affect trend analysis.

3. Surveillance and Inclusion Criteria:

Certain procedures, such as planned major vascular surgeries, are included in mandatory surveillance programs. However, there may be delays in achieving robust data collection across all NHS boards.

4. Surgical Site Infection (SSI) Surveillance:

The Scottish Surgical Site Infection (SSI) surveillance program includes vascular procedures, but there may be gaps in data for specific procedures until comprehensive data collection is established.

5. Regional Variations:

Differences in healthcare access and service provision across regions can lead to variations in the number of procedures performed and reported.

Overall, while the data provides valuable insights, it's important to consider these factors when interpreting the data. The **service oversight group** will require to factor this in as part of implementation and ensure robust plans are in place for future data collation. The task and finish group recommends mandatory input to the vascular registry and that Boards are held to account for compliance.



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These gaps have been factored in during interpretation and analysis of the data and have been updated following the task and finish group meetings. Data accuracy is now likely to be reasonably accurate and the best available information at this point in planning.

2. The group's most recent terms of reference.

Please find attached Appendix 24 - Sustainability Vas ToR Draft_Redacted, which is the groups most recent terms of reference. This document includes personal data of third parties, specifically, names and email addresses of individuals which have not been released into the public domain. Where this is the case, these details have been redacted in line with exception Section 38 ((1)(b)) of FOISA.

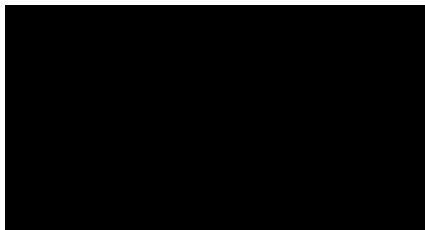
I trust you will find the information of assistance and if you require any further information, please do not hesitate to contact me.

If you are unhappy with any aspect of how we have dealt with your request, you can make representations to us asking us to review the handling of your request. Please write to the Associate Director Governance and Board Services (Board Secretary) at the email address nss.foi@nhs.scot within 40 working days of the date of this correspondence.

If after a review you are still unhappy, you also have the right to apply to the Scottish Information Commissioner, who can be contacted at Kinburn Castle, St Andrews, Fife, KY16 9DS, or via their [online application form](#).

If you have any queries about this letter, please contact me at the above address.

Yours sincerely,



Chair
Chief Executive

Keith Redpath
Mary Morgan

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