



PUBLIC BOARD MEETING

27 May 2026

Item No 25

THIS PAPER IS FOR NOTING

BOARD DEVELOPMENT SESSION REPORT

Lead Director Author	Tom Steele, Chair Pippa Hamilton, Board Secretary
Action required	The Board is asked to note the report.
Key points	This paper provides information on the most recent Board Development session held on 29 April 2026.
Timing	Board Development sessions are held bi-monthly and a report is provided to the next public Board meeting on the main items discussed.



NOT PROTECTIVELY MARKED

SCOTTISH AMBULANCE SERVICE BOARD

REPORT FROM BOARD DEVELOPMENT SESSION

TOM STEELE, CHAIR

SECTION 1: PURPOSE

Board Development sessions are held bi-monthly and provide opportunity for Board members to consider issues in detail and improve members' understanding and knowledge of what are often complex subjects. The format of the sessions usually consists of a presentation or briefing from Executive Directors and managers leading the area of work, or staff involved in the work, followed by discussion and questions from members or a workshop focused on areas for board development.

SECTION 2: BACKGROUND

Board Development sessions are not decision-making meetings. The Board's Code of Corporate Governance sets out the decision-making process which is observed. The sessions do however assist the decision-making process through in-depth exploration and analysis of an issue which may be the subject of a formal board decision. They also provide an opportunity for updates on ongoing strategic matters.

SECTION 3: DISCUSSION

The Board Development Session held on 29 April 2026 took place in person.

Culture Programme

The Board received an update on progress to develop a programme of cultural improvement following completion of the initial exploration and diagnostic phase. Members noted that the proposed Culture Programme builds on existing activity within the Workforce and Wellbeing Portfolio and is structured to include three new and three established workstreams, supported by three enabling work packages.

The Board considered the proposed approach, endorsed the overall direction of travel, and agreed that a comprehensive programme proposal would be presented to the May Board meeting for formal approval.

ScotSTAR Paediatric Retrieval Service

The Board received a presentation outlining the strategic case for redesigning the ScotSTAR Paediatric Retrieval Service. The presentation described the original service

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model, the factors contributing to a growing mismatch between demand and capacity, and the associated risks to sustainable service delivery.

Members noted the key issues underpinning this position, including changes in the paediatric population, increased demand linked to networked models of care, and the impact of advisory activity not fully reflected in existing planning assumptions. Workforce constraints were also highlighted as a significant factor limiting operational resilience and flexibility.

The Board was further advised of the review and governance activity undertaken to date, alongside the principal clinical and workforce findings identified through this process. Immediate actions and next steps were outlined, with a focus on strengthening service resilience, clarifying the future operating model, and supporting longer-term service redesign.

Island Dispatch Cross Reference (DCR), Purple Code Changes and Rest Breaks Procedure

The Board received an update on the operational review and the early impact of changes to dispatch coding and rest break processes. This included a particular focus on Islands DCR, the reclassification of certain incidents, and the introduction of revised Standard Operating Procedures (SOPs).

Members noted the rationale for these changes, which was supported by data illustrating the scale of current system pressures, including significant hours lost due to hospital turnaround delays and internal unavailability. It was recognised that these pressures have adversely impacted response capacity, crew availability, and the Service's ability to prioritise patients with the highest clinical need.

The presentation outlined the work carried out to date, summarised key findings from recent monitoring activity, and positioned the changes as part of a wider programme to strengthen clinical prioritisation while maintaining operational resilience.

The Board also considered early evidence from implementation, including trends in incident volumes, patient outcomes, conveyance rates, and the impact of revised special break arrangements. The Board noted initial indicators suggest that the revised approach is improving the Service's ability to respond to high acuity demand. However, a number of areas remain under active review, including consistency of application, dispatcher interpretation, and workforce experience.

Members further noted that the work to date has sought to balance operational changes with wider performance considerations, alongside staff and stakeholder feedback. The next phase of the work will include continued governance oversight, stress testing, targeted engagement, and progression towards formal sign off.

The Board discussed the update and took assurance that the changes are being closely monitored and are informed by operational evidence and continuous evaluation.