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Public Board Meeting	25 March 2026 Item No 12
THIS PAPER IS FOR DISCUSSION	
STAFF EXPERIENCE AND PERFORMANCE REPORT	

Lead Director	Graeme Ferguson, Acting Director of Workforce
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Action required	The Board is asked to discuss the Staff Experience and Performance report.
Key points	<p>Key points to note:</p> <ul style="list-style-type: none"> • Our new Staying Well Service was launched on 1 December that will be staffed by our Wellbeing Team. We have had 99 referrals since launch to 28 February 2026. The majority of referrals are in relation to mental health. • Development and progression of bids to support staff health & wellbeing through our Endowment Funds. • As of 2 March, our SAS TURAS appraisal completion rate is 21.69%. There are currently 1748 in-progress appraisals, and should these be completed alongside the 330 partially completed we would see our completed appraisals within SAS reach 52.4%. • We are utilising a bank Occupational Health (OH) nurse to clear a backlog of 100 outstanding OH referrals. 50 of the 100 outstanding referrals have now been cleared with an estimated date of end March 2026 to clear the remaining 50 referrals.
Timing	This report seeks to present a cohesive and consolidated update on our overall staff experience, cultural transformation and workforce

	performance within SAS. It incorporates the previous separate reports on health, safety and wellbeing and introduces some new workforce performance metrics. We will continue to refine the report based on the feedback received.
Associated Corporate Risk Identification	Risk ID 4636 Risk ID 5651 Risk ID 5652 Risk ID 5653
Link to Corporate Ambitions	This paper relates to the following Corporate Ambition: <ul style="list-style-type: none"> We will be a great place to work, focusing on staff experience, health and wellbeing.
Link to NHS Scotland's Quality Ambitions	This paper relates to 'Safe', 'Effective' and 'Person Centred' NHS Scotland's Quality Ambitions.
Benefit to Patients	The steps we are taking via our organisation wide staff experience commitments to support, nurture, retain, develop & enable our people to thrive at work which will in turn have a direct impact on improving the quality of care we provide to patients.
Climate Change Impact Identification	This paper has identified no impacts on climate change.
Equality and Diversity	An Equality Impact Assessment was completed on 8 July 2024 for our Health & Wellbeing Strategy 2024-27 and filed with the Service EDI Lead for publication on @SAS.



**Scottish
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SCOTTISH AMBULANCE SERVICE BOARD

STAFF EXPERIENCE AND PERFORMANCE REPORT

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SECTION 1: PURPOSE

This paper provides an update on Staff experience and Workforce performance over the last reporting period to **February** 2026.

SECTION 2: RECOMMENDATIONS

The Board is asked to **discuss** the Staff Experience and Performance report.

SECTION 3: DISCUSSION

This paper provides the Board with oversight and assurance on the progress of maintaining a positive staff experience within SAS by measuring this against key workforce performance metrics during this reporting period.

The Workforce Directorate has its own Annual Operating Plan (AOP) which is aligned to the Staff Governance Action Plan (SGAP) and the Service's Annual Delivery Plan (ADP). Our AOP is currently being re-prioritised in line with the SGAP for 2025/26. Progress on this will be reported to Board and Staff Governance Committee over the course of 2025/26.

We are currently in the process of developing the next three-year workforce plan. The Finance, Strategy (Planning) and Workforce strategic leads are working to closely to ensure all three strands are aligned with the SAS 2030 Strategy".

Our Health & Wellbeing Strategy 2024-27 builds upon the approach of its predecessor and is grounded in a solid and growing evidence base highlighting the importance of prioritising the health and wellbeing of our workforce. Six ambitions have been developed for 2025/26, the

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second year of our Health & Wellbeing Strategy (2024-27) that underpin our SAS 2030 Strategy and take steps to address our iMatter results and the Improving Workplace Staff Experience & Wellbeing Pulse Survey (2024). These ambitions are incorporated into this new style report under the Health & Wellbeing, Learning, Innovation and Culture & Leadership sections.

2025-26 Annual Delivery Plan (ADP) Strategic aim:

“We will be a great place to work, focusing on staff experience, health and wellbeing”.

3.1 Staff Experience

3.1.1 Health and Wellbeing

Ambition 1 - To create an awareness and understanding at local level of the range of health & wellbeing support available to our workforce and how to access it.

This ambition aligns with our strategic inputs by:

- Increasing awareness and visibility of health and wellbeing pathways.
- Empowering individuals to take ownership of their own wellbeing.
- Growing and raising the profile of our wellbeing networks to build local communities of support.
- Ensuring new colleagues feel welcome and supported from the beginning of their journey.
- Creating a supportive environment where wellbeing conversations are normalised.

Whilst there is a good awareness and knowledge of health and wellbeing support available to our workforce in some areas of the service, this is not consistent throughout our organisation. We are taking the following ongoing steps throughout the year to increase awareness and understanding of support available:

- Increasing the number of wellbeing visits we are conducting to have direct contact with staff.
- Reviewing our communication and methods of communication to ensure messaging reaches a wider audience.
- Promoting key activity through the Live Well Work Well newsletter.
- Expanding the wellbeing content in our internal leadership development programmes.

This reporting period has seen:

- The February edition of Live Well Work Well promoted LGBT+ History Month and featured a staff story from a member of our LGBT+ Network. The Wellbeing calendar highlighted national campaigns and raised awareness of events from National Heart Month and promoting physical exercise to Eating Disorders Awareness Week, Time to Talk day and Sexual Abuse & Sexual Violence Awareness Week.
- Our new Wellbeing Calendar on @SAS is highlighting campaigns with information signposted throughout the year.
- We are continuing joint wellbeing meetings between NHS24 and SAS on a two-monthly basis to explore and progress any areas of collaboration and joint work regarding the wellbeing agenda.

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Ambition 2 - To expand the range of wellbeing help & support available to our workforce, recognising one size doesn't fit all.

This ambition aligns with our strategic inputs by:

- Expanding the range of health and wellbeing support available, recognising individual needs and preferences.
- Encouraging a proactive and preventative approach to health and wellbeing.
- Creating accessible pathways to rehabilitative and specialist support.
- Supporting leaders and managers to recognise early warning signs and signpost to appropriate help.
- Reducing barriers to access by identifying and targeting support where it is needed most.

Work is progressing to develop our range of help and support available to staff and trial new initiatives.

3.1.2 Staying Well Service

We launched a new service in SAS that is managed by the Wellbeing Team on 1 December 2025 to take a more proactive approach to supporting our workforce's health & wellbeing. This service is for advice and support or for staff who may be struggling at work and can be via self-referral or via a manager or colleague. Referrals are either addressed by members of the Wellbeing Team, signposted to additional help or support or onward referral to more specialist services.

We have had **99 referrals in the first 3 months since launch on 1 December 2025 to end February 2026.**

3.1.3 Trauma Risk Management (TRiM)

TRiM continues to provide support to our staff that have been exposed to traumatic events. Referral figures have now reached **684** since the launch of the scheme at the end of June 2023. **Of these referrals 268 have been from the West Region, 262 from the East Region, 115 from the North Region, 39 from National Operations.**

There has been a total of 117 onward referrals to Occupational Health.

3.1.4 Employee Development - Appraisal

Our ambition is for every member of staff in SAS to have an appraisal. Historically our appraisal rate has been consistently below 10%, however we are beginning to see slight incremental increases month on month. **As of 2 March, our SAS TURAS appraisal completion rate is 21.69%.** There are currently **1748** in-progress appraisals, and should these be completed alongside the **330** partially completed we would see our completed appraisals within SAS reach **52.4%.**

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3.1.5 Employee Relations

National Employee Relations Activity

Recording of Employee Relations activity re Grievances, Bullying and Harassment and Conduct as well as Capability and Attendance is monitored via an online recording sheet which is intended to provide timeous recording of ongoing cases along with additional data which facilitates tracking of timescales and risk status.

The number of ER cases across the service has shown a downward trend since September. The total number of cases was 165 in September 2025 and has fallen to 141 cases in February 2026.

There has been a decrease in the number of staff suspended from 7 in November to 6 in February. This is a marked reduction from 14 suspensions in June 2024. The length of time individuals has been suspended is below:

- Between 1 – 6 months: 3
- Between 6 – 12 months: 2
- Between 12 – 18 months: 1

Table 4 summaries the broad key themes of current conduct cases.

Number of Conduct Cases by Theme	
Clinical Care	4
Driving	1
Falsification of records / Plagiarism	5
Inappropriate or unprofessional behaviour	16
Non-adherence to policy	3
Sexual Safety / misconduct	5
Substance Misuse	3
Other	5

We have seen a reduction in Employment Tribunal claims filed from 16 claims filed in 2023 to 8 claims filed at end of October 2025. There are currently 6 live Employment tribunal cases ongoing.

3.1.6 Rest Breaks

Rest Breaks have remained a significant issue, particularly for Unscheduled Care teams for a number of years, with intensive focus since 2023 and a period of staff side involvement which has led to the trade unions and SAS conducting a series of meetings to provide a resolution to the issues faced.

In response to feedback from partnership colleagues, SAS and the trade unions collectively agreed to simplify the **previously** agreed Additional Rest Break Protection options to the benefit of both frontline crews and Dispatch colleagues. This streamlined process has been in place since 06:00hrs on Friday 23rd May 2025. This process, **currently in place**, ensures SAS has a

range of options to support the wellbeing of frontline crews and ensure a timely rest break can be facilitated.

Following further consultation, a set of newly revised procedures, developed from the 2025 process, strike a further balance between patient safety and clinical risk with a number of new measures tested and ready to be introduced and the facility to ensure that, where possible, front line crews are rested within an agreed set of variables.

In recognition of the system pressures and periods of increased demand, should a crew reach the end of their first rest break window and feel they require additional protection to facilitate this rest break, this can be achieved by requesting to be made unavailable for a “Special Break”.

This continued partnership approach has led to the development of a new Rest Break and End of Shift procedure which has now been ratified through the Rest Break Oversight group and is currently with trade union partners for full membership consultation. The Service anticipates that following full agreement the new procedures should be in a position to be activated during April 2026.

3.2 WORKFORCE METRICS

Significant work is underway to develop the next 3-year workforce plan for 2025-28. Although no definitive timescale has been confirmed yet by Scottish Government (SG), an abridged version of this plan was sent to SG in mid-March 2025. This had a particular focus on “difficult to recruit areas and roles” and more general workforce challenges. Our intention is to align our next 3-year SAS workforce plan with the Annual Delivery Plan and Financial plan. The draft of the Workforce Plan was presented to Staff Governance Committee in March 2026 and will be presented to the Board in April 2026 for final approval.

The workforce information contained in the Vector of Measures outline varied performance across the different metrics. Key points for noting and discussion are outlined below in our new workforce dashboard report which has been developed by our Finance colleagues.

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3.2.1 Newly Qualified Paramedics

Active engagement with each of our 5 partner Universities has proved to be very successful and a more positive candidate experience was had this year. **Planning for next (2026/27) year's intake is currently under way and numbers required will be confirmed shortly.**

3.2.2 Sickness absence levels

Total sickness absence during the last reporting period **has increased from 9.3% in November to 10.8% in December.** Patterns of absence indicate that there has historically been an increase in sickness levels observed across the winter months and this continues to be monitored given the current elevated levels of staff absence. An Executive oversight group has been recently established to identify the key factors driving sickness absence and develop actions required to reduce both long- and short-term absences. The key driver for this group is to ensure that all available support is in place to support staff with challenging health issues and that our internal processes are applied consistently.

Considerable data analysis has now been undertaken which gives the Service far more workforce data than ever before to analyse underlying causes of sickness absence, including down to station and individual level, as well as highlighting wider abstraction reasons with this data now in place, there can be much more credence given to the available information which in turn will prompt more person centred and supportive management actions to address high level of sickness absence. A new attendance dashboard is currently being trialled within SAS and this will provide access to significantly more attendance-related data than ever before. **As part of this programme, we are seeking the views of staff about the attendance management process itself with particular emphasis on those who have been directly involved in the process.**

The top reason for sickness absence remains anxiety/stress and depression and much focused work is progressing to enable the Service to interact more proactively with staff with mental health issues to feel more positively supported. Signposting to other sources of help remains available such as The Ambulance

Staff Charity (TASC), Employee Assistance Service (EAS), Occupational Health Service (OHS), Keil Centre and our own mental health team.

3.2.3 Occupational Health Activity

There remains considerable scrutiny of our various occupational health providers and significant disquiet with the baseline service itself. Whilst we are continually seeking to rectify any Service related problems as quickly as possible, urgent internal discussions are ongoing around possible options to replace the current expired service level agreement. Regular meetings have taken place with NSS with whom we had the previous SLA to consider innovative and realistic options for providing a sustainable and effective OH service to SAS. This is also being discussed nationally at the HRD group to consider what other options might be feasible from a national NHS Scotland perspective.

Data for Q3 (2025/26) received from NSS:

Occupational Health Management Referrals (not including Trims or Keil)

- There have been 1582 referrals submitted this fiscal year, The main initial triage categories remain the same: anxiety/stress/depression and other psychiatric illness being the highest

We have been advised that due to demand for occupational health services, all NHS Boards are currently working to approximately 8 to 24 weeks wait time from receipt of referral to appointment. We are utilising our bank OH nurse consultant to help clear the backlog list (approx. 100 people). Appointments commenced end of January, and they will continue working on the list, triaging based on clinical need, and if the person is in a process e.g. stages 3,2,1 of the attendance policy. To date the backlog list has now halved with the others now booked in for appointments that should see the backlog clear by the end of March/Early April.

3.3.1 Learning and Development

Statutory and Mandatory Training Compliance

The TURAS Learn platform was launched in March 2024 and staff are currently working towards completion of the twelve SAS statutory and mandatory training modules. Table15 shows progress in the levels of completion since the launch of the TURAS Learn platform to December 2025 by Sub-Division level. The RAG status shown is the KPI's agreed by the staff governance committee.

We will also be developing mandatory wellbeing training as part of TURAS Phase 2. The SLWG for suicide pre and postvention have reviewed training modules for suicide awareness and will be recommending this be adopted. The guidance for postvention was published in December 2025.

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Completion of all 13 modules remains a challenge, but the trajectory is positive and we will continue to monitor this to achieve 100% completion rate for all prescribed modules, which is the goal. The Staff Governance Committee agreed a stepped approach to compliance, with 80% being the target set for now and this will be reviewed in Q1 2026. **It is extremely important to encourage staff to complete all Statutory/Mandatory courses listed below. 8 of the courses below along with the new Fraud course will begin to be reported against to Scottish Government from April 2026.**

Table 7 below highlights the current compliance levels, now adjusted to 80%.

% Compliance at date of report	ACC	ScotStar	East Central	NHQ/SAC	NRRD	North	South East	South West	West Central	Date of last data
Basic Life Support	63	64	72	58	81	70	74	72	50	02/02/2026
Fire Safety Awareness Training	63	67	70	61	79	67	73	71	50	30/01/2026
Health and Safety Awareness	70	75	69	62	87	69	74	73	52	30/01/2026
Infection prevention and control (foundation)	60	69	59	51	75	66	63	67	42	15/12/2025
Initial Operational Response	49	56	53	46	86	58	60	64	36	02/02/2026
Introduction to equality, diversity and human rights	57	62	61	55	78	59	64	65	42	02/02/2026
Moving and handling (Module A)	66	69	68	60	86	69	72	71	69	30/01/2026
Office Ergonomics - Display Screen Equipment (DSE) / Preventing Aches and Pains	67	71	66	61	85	67	72	71	48	30/01/2026
PREVENT Duty Awareness	53	54	55	48	79	58	62	63	38	02/02/2026
Public Protection - child protection and adult support and protection for SAS staff	57	58	60	51	76	61	65	65	42	02/02/2026
Safe information handling	66	56	58	59	82	56	57	61	39	02/02/2026
Staying safe online: top tips for staff	42	54	50	49	64	45	37	53	28	02/02/2026
Violence Prevention Reduction: Conflict Management	64	67	65	56	83	66	69	70	47	30/01/2026
Completion Status	Under 50% Compliance			50-79% Compliance			Over 80% Compliance			
	Non Compliant			Partially Compliant			Compliant			
Total	Aug	Sept	Oct	Dec	Jan					
	23	21	22	21	16					
	89	91	90	90	94					
	5	5	5	6	7					
	117	117	117	117	117					

Note: module completion rates can alter as the expiry dates vary dependent on when staff members completed the course initially.

Ambition 3 – To further develop our workforce’s knowledge and skills to help support one another, build resilience and signpost to further help as required.

This ambition aligns with our strategic inputs by:

- Taking a proactive and preventative approach to health and wellbeing.
- Decreasing stigma and reducing barriers to accessing mental health support.
- Creating a supportive environment where wellbeing conversations become normal practice.
- Empowering individuals to take ownership of their own health & wellbeing and confidence support one another and intervene early.
- Cultivating resilience to help colleagues cope with the effects of trauma and stress.
- Supporting leaders and managers to recognise early warning signs and signpost to appropriate help.

This reporting period has seen progress in the following areas:

- The Suicide Prevention & Postvention Group has met every couple of weeks throughout October and November to progress resources and interventions to raise awareness of suicide prevention and establish guidance for managers in the aftermath of a staff suicide and pathways for survivors of suicide. Postvention guidance for managers and the initial completed work of the Group has been published on @SAS and the Group will continue its work from February 2026. **This work was highlighted in the Staff Story at the March Staff Governance Committee.**

3.3.2 Innovation

People Services Hub

The **People Services Hub** has been in place since 3rd February 2025 and is currently completing its test of change phase. The objective of the People Services Hub is to provide a professional HR service to the organisation in relation to providing a fast and consistent response to enquiries, as well as dedicated HR professional support for employee relations cases.

The People Services Hub offers two distinct services to SAS staff, staff partners and managers:

1. The Enquiry Management system, and
2. The ER Case Support Management system.

As of 28th February 2026, the People Services Hub have dealt with 2266 enquiries and received 379 requests for HR support for ER cases.

Development of a Workforce “Chatbot” is underway with the initial build phase in progress with the developers.

Ambition 4 - To become more evidence and data driven in our approach to creating a healthy workplace.

This ambition aligns with our strategic priorities by:

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- Strengthening our use of evidence and insight to improve staff experience, support early intervention, and foster a culture of continuous improvement.
- Developing an evidence-based understanding of the underlying causes of absence.
- Creating a culture where early intervention is normalised and supported.
- Embedding continuous improvement through regular feedback and movement towards a just culture.

In the last reporting period:

- OD counterparts in NHS24 have shared their culture & wellbeing dashboard with our OD Team. We are exploring the potential of opportunity to introduce elements of their approach within SAS.
- Meetings have been held to progress work packages in the Absence Management programme of work with the PMO – specifically looking at preventative approaches to sickness absence, support during long term sickness absences and on return to work.
- Work has commenced collating all the OH data from all the different areas where it is currently stored to feed into a dashboard (NSS, IPRS, Optima, Keil, MSK Specialist and the SAS Staying well service).

SECTION 3.4 CULTURE AND LEADERSHIP

Ambition 5: To enable staff to feel valued at work by embedding supportive behaviours within our organisation.

This ambition aligns with our strategic inputs by:

- Leaders treating everyone with dignity and respect and consistently role model positive behaviours and healthy working practices.
- SAS being an inclusive organisation that values diversity and creates an environment where employees feel safe to speak up with ideas, questions, concerns or mistakes.
- SAS owning a reputation for having a positive work culture where employees thrive and feel valued for the work they do.
- Ensuring our values and behavioural expectations are embedded and demonstrated throughout the employee journey.
- Ensuring our people are actively developed and supported through mentoring and lived experience.

Deliverables to support this ambition include focused support to the proposed outcomes of Equality and Diversity Mainstreaming Report (2025-29), raising appraisal completion rates, facilitating a culture of role modelling values-driven behaviour and calling out inappropriate workplace behaviours.

In this reporting period the following work has progressed:

- The reverse mentoring initiative has been launched enabling individuals from underrepresented groups to mentor senior leaders with the first cohort focusing on racial equality, sharing lived experience to influence organisational culture and decision making. Matching has been completed. The mentors have had some initial training **and the first sessions commenced on 3 February 2026**. Two of the mentors shared their

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hopes for the programme in a staff story to the Staff Governance Committee on 11 December 2025. **This initial programme will be complete in April 2026 with plans for a second cohort commencing in the Autumn.**

- Our second 'Improving Wellbeing and Working Cultures' Pulse Survey launched on 17 November 2025. Response rates fell sharply compared to 2024, with 331 submissions versus 601 previously, likely due to the inability to email all SAS users directly. Promotion relied on corporate channels, requiring staff to actively access the survey link. Key findings reveal some significant concerns, with 'Dissatisfied' and 'Extremely Dissatisfied' frequently reported across the dimensions of: Leadership, Workplace Culture, Staff Experience, and Safe to Speak Up. While positive responses exist, they are less common, indicating supportive environments are not the norm. However, we should be cognisant of the low response rate compounding the effect of negative reporting bias within these dimensions. Overall, the data underscores a need for targeted interventions to strengthen leadership visibility, enhance workplace culture, and develop psychological safety. **The pulse survey data has been analysed and the report with recommendations for progression is now available.**
- **The Culture & Staff Engagement Internal Audit commenced in February with meetings arranged with KPMG throughout the month to interview and gather data for the audit.**
- Appointment of a dedicated "People and Culture Consultant" to work with, and within, the Workforce Directorate to draw together all the differing strands of cultural transformation work already under way and build this into an effective, cohesive and consistent strategic programme for SAS. **Initial findings have been shared with the Executive Team and Staff Governance Committee.**

Ambition 6: To further develop our leadership and enable leaders to become more connected at all levels of the organisation.

This ambition aligns with our strategic inputs by:

- Supporting leaders to actively prioritise their team's health, wellbeing, and development.
- Building leaders' confidence and awareness to recognise early warning signs of deteriorating wellbeing and signpost appropriately.
- Ensuring leaders treat everyone with dignity and respect, while consistently role modelling positive behaviours and healthy working practices.

Planned activity includes expanding our virtual Leadership Academy, introducing wider coaching and mentoring opportunities and facilitating people-centred leadership approaches.

In this reporting period:

- **We are waiting to hear the outcome of our submission of documentation to the Faculty for Medical Leadership & Management regarding re-accreditation of our Foundation Programme. We are also waiting to hear if new submissions for accreditation for our Aspiring Leaders and Intermediate Leadership programmes have been successful.**
- **Leadership programmes have fully recommenced following a pause over the Winter period.**
- **We are currently recruiting to our 6 places on 'Leading for the Future Programme' - a national development programme for senior leaders across health & care**

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SECTION 3.5 EQUALITY, DIVERSITY AND INCLUSION

3.5.1 Sexual Safety Programme Update

The Workforce Equality Monitoring Report 2024/25 referred to the Service being a key partner across AACE, NHSS and other emergency services in implementing the Reducing Misogyny Improving Sexual Safety work. A major focus on the EDI agenda this year has been on reducing misogyny and improving sexual safety in SAS. The latest update is detailed below:

- The Executive Team is currently discussing bespoke cultural interventions in order to embed a more inclusive and person-centred approach to staff engagement and staff relations.
- 150 staff (as of end February 2026) have completed the preventing and responding to sexual harassment Turas module and discussions taking place to include this as part of the statutory and mandatory list of modules for all staff
- Workshops will be included in the new ACA and NQP induction training weeks with EPDD. There is a plan to include this workshop in the next round of LiP ensuring it is built into the programme, will likely begin roll out in 2027. Discussions are ongoing to increase the number of front-line staff attendance on this important workshop.
- Sexual Abuse and Sexual violence awareness week was 3 – 8 February and we included topics in our 'live well, work well' newsletter for to share key messages and content
- A group of managers will be trained to carry out the most serious/complex investigations, including sexual misconduct – to enhance the speed and quality of investigation processes and outcomes limiting harm where possible. This will be in place by end May 2026.
- We have created a guidance document to support the handling of anonymous complaints and encourage consistency and a robust process. This being reviewed with the HR team and WPSG for approval and distribution
- We have developed key metrics /KPIs to assess the impact of these initiatives on staff and our ultimate objective to prevent these types of behaviours in our workplace- these metrics will be gathered and included in an update report biannually
- We are planning to gain Equally Safe at Work accreditation during 2026 and have submitted our request with Close the Gap.
- We continue to engage with student paramedics at the Universities and deliver sessions in conjunction with our OD team. Student website pages are live with more details
- We are in process of creating manager guides to go alongside the sexual safety policy. We are planning manager-specific sessions in conjunction with HCPC during 2026 to raise awareness of sexual misconduct in the workplace and their responsibilities when a member of staff approaches them to make a report.

3.6 COMPLIANCE

3.6.1 Health and safety update

The Service remains committed to achieving and maintaining consistently high standards of health and safety compliance. Monitoring these standards is a fundamental aspect of the H&S work programme which enables the Service to comply with its statutory and mandatory requirements. Auditing health and safety compliance remains a key performance measure, and the new audit window has commenced for this financial year, and we will be using the new

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EVOTIX system which will allow better data analysis. We are continuing to train all managers on how to clear tasks raised on the system and have introduced the escalation process whereby Heads of Service are notified if the actions are not completed in a timeous manner.

There has been no HSE involvement this reporting period.

Accidents

The H&S team continue to work with the Risk Manager to iron out any issues that are highlighted on the In Phase system.

The team continue to review every H&S incident that is reported on In Phase and quality control the information at point of entry to ensure that it is in the correct category, e.g. RTC's are not being reported as vehicles issues when it is clearly an RTC.

RIDDOR

There were:

- 7 December (this includes 4 patient handling, 1 slip/trip/fall from height, 2 struck by or against)
- 13 January (this includes 7 patient handling, 3 other handling, 1 Slip/Trip/Fall same level, 1 Slip/Trip/Fall from height, 1 struck by or against, 1 patient RIDDOR – struck by/or against)
- 7 February (this includes 3 patient handling, 2 other handling, 1 Slip/Trip/Fall from height, 1 Patient RIDDOR – struck by or against)

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