NOT PROTECTIVELY MARKED

PUBLIC BOARD MEETING	**28 May 2025** **Item 07**
THIS PAPER IS FOR DISCUSSION **DELIVERING OUR 2030 STRATEGY UPDATE**	

Lead Director **Author**	Michael Dickson, Chief Executive Portfolio Executive Directors Karen Brogan, Director of Strategy, Planning & Programmes
Action required	The Board is asked to **note and discuss** progress in relation to delivery of the 2030 Strategy portfolios.
Key points	The purpose of the 2030 Strategy Portfolio Board update is to

• Provide a high-level summary of progress around delivery of the 2030 Strategy Portfolios and demonstrate the impact on delivery of our strategic aims.
• Provide assurance to the Board that mitigating actions are in place for projects that are not within timeline.
• Highlight any issues or risks that require escalation to the Board.

Overall good progress continues to be made across all portfolios of work with path to green plans in place for projects in Amber or Red status. It is important to highlight that we are transitioning into the 25/26 annual delivery plan and whilst the majority of programmes and projects have continued into this year from previous years, there are projects that are ending, some that are transitioning to business as usual and other that are in planning stages for being stood up.

Table 1 – High Level Summary of Project Status

Portfolio	Green	Amber	Red	Other
Integrated Planned, Unscheduled & Urgent Care	8	1	1	1
Data, Digital, Innovation & Research	6	2		
Communities & Place	7			1
Preventative & Proactive Care	4			1
Workforce & Wellbeing	3		1	4
Totals	**28**	**3**	**2**	**7**

There are no issues or risks that require escalation to the Board. |

	The Board is asked to note projects that are in the pipeline to be established within the next 3 months
Timing	This paper is being presented to the May 2025 Board and is a standing item on the Board agenda.
Associated Corporate Risk Identification	4636 – Health & Wellbeing of Staff 5602 – Service's defence against a Cyber Attack 4638 – Hospital Handover Delays 5062 – Failure to achieve Financial Targets 5519 – Statutory & Mandatory training
Link to Corporate Ambitions	We will • Work collaboratively with citizens and our partners to create healthier and safer communities • Innovate to continuously improve our care and enhance the resilience and sustainability of our services • Improve population health and tackle the impact of inequalities • Deliver our net zero climate targets • Provide the people of Scotland with compassionate, safe and effective care when and where they need it • Be a great place to work, focusing on staff experience, health and wellbeing
Link to NHS Scotland's quality ambitions	• Safe • Effective • Person Centred
Benefit to Patients	Patients are provided with the right care, in the right place at the right time, enabling improved outcomes for patients.
Equality and Diversity	No equality and diversity points to note. EQIA will be undertaken, if necessary, on commencement of the work.

NOT PROTECTIVELY MARKED

SCOTTISH AMBULANCE SERVICE BOARD

2030 STRATEGY DELIVERY UPDATE

KAREN BROGAN, DIRECTOR OF STRATEGY PLANNING & PROGRAMMES

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SECTION 1:   PURPOSE

The purpose of the 2030 Strategy Portfolio Board update is to

- Provide a high-level summary of progress around delivering the 2030 Strategy Delivery Plans and demonstrate the impact on delivering our strategic aims.
- Provide assurance to the Board that mitigating actions are in place for projects not within the timeline.
- Highlight any issues or risks that require escalation to the Board.

SECTION 2:   RECOMMENDATIONS

The Board is asked to note and discuss progress in relation to the delivery of the 2030 Strategy portfolios.

SECTION 3:   BACKGROUND

The 2030 Strategy was developed and launched in September 2022. In November 2022, the Board subsequently established a supporting governance structure consisting of 5 Portfolio Boards and a 2030 Steering Group to ensure effective monitoring and delivery of the strategy. The portfolio boards are chaired by an executive lead and report directly to the 2030 Steering Group, chaired by the Chief Executive. The portfolio boards are supported by a 2030 portfolio manager and a strategy administrator to develop and ensure high-quality, standardised reporting across projects, programmes, and portfolios.

SECTION 4:   DISCUSSION

4.1 Summary of Progress

Progress continues to be positive across all work areas with 28 projects currently in Green status and 5 projects currently in Amber or Red status for delivery.

Table 1 – High-Level Summary of Project Status

Portfolio	Green	Amber	Red	Other
Integrated Planned, Unscheduled & Urgent Care	8	1	1	1
Data, Digital, Innovation & Research	6	2		
Communities & Place	7			1
Preventative & Proactive Care	4			1
Workforce & Wellbeing	3		1	4
Totals	**28**	**3**	**2**	**7**

4.2 Projects in Other Status

The 'other' category relates to projects in planning or scoping stages or projects that have come to an end. There are 7 Projects across the portfolios that are in the other category, 3 that are transitioning to business as usual and 4 that are in planning stages.

4.2.1 End of Life Care

The End of Life project was closed by the Steering Group on 8th April. Funding discussions continue with Scottish Government and in the interim period the team are considering how to continue within existing resources.

4.2.2 Community Planning Development

The community planning project is about ensuring that the Scottish Ambulance Service supports the improvement of local health outcomes and equity in community services through strategic participation in Community Planning Partnerships (CPPs).

An analysis of service representation in CPPS throughout Scotland found that 23 out of the 32 CPPs have service representation (72%). Representation varies by region: East (92%), West (62%), and the North (57%).

To improve our current arrangements with CPPs, we are developing a plan to enhance local health outcomes and equity in community services by standardising our strategic participation in CPPs. These measures are expected to improve our collaboration with CPPs, ensuring that our participation is effective and beneficial to local communities.

The Strategic Planning Team will lead on this work, working closely with local Heads of Service. This work is also linked to the stakeholder engagement action agreed by the Board in response to the Blueprint for Governance self-assessment.

An initial stakeholder mapping exercise has been carried out and shared at a meeting with directors and a non-executive board member in March 2025. This discussion highlighted the complexities of the system and volume of local and national stakeholders. A follow-up workshop session is planned to review our engagement approach, to identify and prioritise who we should be engaging with and to better understand what role we want to play in influencing our stakeholders to reduce inequalities in health, create safer communities and improve population health. This work forms the basis of the action plan supporting our Board agreed Blueprint for Governance implementation plan.

Working with Charities Together and linked to the successful Young Minds Saves Lives Programme, we have secured funding for a small community action team. This resource will be key in helping us target pilot areas to shape how we take this forward.

We are planning to hold discussions with PHS to consider how we connect data across the system and how we use it to better effect to identify opportunities for improvement.

A paper outlining the workplan has been submitted to the 2030 Steering Group in May for information and a workshop is being planned with wider key stakeholders in early June.

4.2.3 Community Hubs / South Station Delivery

The Community Hub/South Station development project was established to identify options and develop and Outline Business Case (OBC) for the replacement of Glasgow South Station.

As previously highlighted to the Board, the development of the OBC has been delayed due to national pause in capital funding. Despite this, the Scottish Government has continued to support the project's advancement, to ensure the Service can potentially progress this rapidly if funding were to become available. Our engagement with local community members through YMSL paramedics remains ongoing as we continue to gather insights into local needs for the community hub concept.

We continue to work closely with Healthcare Improvement Scotland to meet the engagement requirements set out within the 'Planning with People – Community engagement and participation guidance' (Planning with People) which represents a national approach to engagement on appraising different locations for the station. This appraisal will consider both the current location and any newly identified alternative sites. To maintain momentum these meetings are now every six weeks.

Additionally, an analysis of population health data is underway to help inform suitable locations and services for a community hub.

The South Station project has been approved at the Initial Agreement (IA) stage. As part of the whole system capital planning process for Boards, the next steps involve the set up a formal project board in preparation for a potential release of capital investment in the 2027/28 period.

A new project proposal was presented to the Engine Room on the 12th of February and approved by the 2030 Steering Group on the 18th of March.

Recruitment is underway to appoint a project manager to formally get this project up and running within the next 3 months. Work has also commenced with an updated property trawl of potential site options. This will be reviewed in detail at the first meeting of the new Project Board.

4.2.4 Review of EPDD Training & Education

The review of the EPDD Training & Education will now commence in the 2025 Financial Year as part of a wider review of Training & Development across the Service. This was also identified as a key programme within the Best Value plan. Key milestones for this will be developed by August 2025.

4.2.5 Workforce Planning & Performance monitoring

There have been delays in agreeing key milestones for this due to absence within the HR Team. The CEO has requested a meeting be set up with Interim Director of Workforce, Director of Strategy, Planning & Programmes, Head of Workforce Planning & Chair of Staff Governance committee to agree actions that can be taken forward in the short term and to agree a workplan and milestones for delivery for 2025/26 and in the medium term.

4.2.6 Organisation Leadership & development

The leadership and management training and development work is progressing well, and work is underway to renew accreditation. This will now move to business as usual, and progress will be reported through PPSG. Ongoing leadership development will also be linked to the wider culture review.

4.2.7 Equality, Diversity & Inclusion

Work is ongoing in all areas of Equality Diversity and Inclusion work. Mainstreaming, Equality Outcomes, Gender Pay Gap reports and Equal Pay Statement for 2025 were approved at Staff Governance Committee/NPF in March. The reports were published at the end of April on our external website, following Board approval in March.

The Sexual Safety Programme of work also continues to make progress.

This work will also move to business as usual, and progress will be reported to the Equality and Diversity Steering Group. In addition, this work will be linked to wider culture review.

4.3 Projects in the Amber Status

At the March Board meeting it was highlighted that there were 2 projects in the Amber Status for delivery, Resource Planning structure review and the Healthcare online booking project.

The Resource Planning structure review has been re-baselined and is expected to be complete by the end of June for presentation to the July Executive Team.

The Healthcare professional online booking has now moved from Amber to Red with further detail provided later in this report.

There are now 3 new projects in Amber status for delivery with actions in place to resolve.

4.3.1 Air Ambulance Contract Implementation

A new project has been established this year to progress implementation of the new Air Ambulance Contract. As advised in March, the project was in red status for delivery due to the supplier notifying SAS of expected productions delays for the fixed wing aircraft due to industrial action and there being no estimated delivery dates known at that stage.

Since the last update to the Board, the industrial dispute has been resolved, however as expected, there has been an impact on the production slot. The slot changes have resulted in delays to the delivery of the manufactured aircraft to the supplier.

4.3.2 National E-Rostering System

SAS had initially anticipated establishing a project to migrate all staff to the new national e-rostering system however, following over a year of working with the supplier on build work and testing, it was identified that the system does not meet the specific requirements for ambulance service front line operations, including national operations.

This National E-Rostering project was then established to manage the deployment of the new NHS Scotland eRostering System for 4 early adopter units, 118 staff within corporate departments, to meet national contractual requirements.

The project is in Amber status due to ongoing delays since February with the supplier's ability to set up single sign on to enable SAS staff to log in using their Microsoft login.

This was resolved on 16th May and a new go live has been agreed for 28th May, pending set up of user accounts and successful testing.

It should be noted however that reporting is only available via the front end of the system without purchasing an additional product (data hub), resulting in manual work to obtain absence data.

4.3.2 Artificial Intelligence in the Ambulance Control Centre

The Artificial Intelligence in ACC project is a collaboration with an external partner to develop and conduct proof of concept testing of an Artificial Intelligence and Machine Learning solution for identifying deteriorating patients and auditing calls. It is important to note that this is development and testing only over a 4-month period and not procurement and delivery of a solution at this stage.

The project is in amber status due to delays in procuring additional telephony licences in time for the scheduled go-live date of 31st March. These licences are required to enable the service to share 4 months of ACC calls.

Although this was previously delayed subject to the licences being in place by this time, this has now been resolved. The end date of the project has therefore been extended by one month to 31st July 2026.

4.4   Projects in the Red Status

4.4.1 Health Care Professional (HCP) Online Booking

SAS current receives around 3000 calls per week from HCPs. Implementation of an online booking process for HCPs will reduce the need for voice calls between healthcare professionals and SAS by automating the process straight to dispatch, reducing call volume and talk time for both HCPs and SAS.

The HCP online booking pilot went live on 18th June with Lanarkshire and Greater Glasgow & Clyde. As of 18th April, 3,734 online bookings have been made.

NHS Lothian's Flow Navigation Centre was expected to go-live during January. However, the sign-off of NHS Lothian's DPIA and the C3 System Security Policy remain pending, due to some concerns around the use of shared user accounts.

The overall BRAG status of the project is red because of the uncertainty in relation to when and if Boards will sign-off on their governance process to approve the test of change to begin. Discussions continue to take place to explore other options.

The route to green is dependent on reaching a joint agreement with territorial boards regarding the identity management strategy and how to gather the data necessary to create accounts. There is also a need to establish a process and understand the resources required for the ongoing management of joiners, movers and leavers.

4.4.1 Rest Periods

Since the onset of the Rest Break work there have been changes made to the Rest Break Standard Operating Procedure to improve rest period compliance for staff, and this has resulted in a sustained improvement in compliance since 2023. The work of the group was due to complete in 2024 and return to ongoing monitoring by existing groups, however ongoing pressures have continued to impact rest periods and in February 2025, staff-side colleagues suggested further changes. This has resulted in further discussions with partnership colleagues, management and Scottish Government. The project will remain in red status until agreement has been reached on a way forward. In the interim close monitoring of rest break compliance will remain on place.

4.7   Annual Delivery Plan 2025/26 and Medium Term Plan

The 2025/26 Annual Delivery Plan and a refresh of the rolling 3-year Medium Term Plan was approved by the SAS Board and submitted to Scottish Government in March and at this stage we are still awaiting final feedback which is due by the end of May.

It is worth noting however that Scottish Government have indicated they will not be in a position to support Technician to Paramedic this year, as identified in our annual delivery

plan. Discussions will however continue to take place to explore opportunities and alternative avenues to progress in the future to minimise any risk around sustainability for remote and rural communities.

The following work in the pipeline will also come into the portfolios for delivery within the next 3 months.

4.7.1 Improving Attendance Management

A formal project is being established this year to build on the early improvements and to ensure the necessary foundations are in place to deliver longer term improvements, including the release of real time and historical data dashboards for managers. This will have formal PMO support in place to ensure pace around delivery of the plan. The project proposal was approved at the May engine room group and being presented at the 2030 steering group for approval.

Key areas of focus for 25/26

- Ensuring there is necessary support in place for our workforce when they are unwell, providing early intervention and access to support services that meets their needs. This includes a review of the sickness reporting process and structures for monitoring and managing absence.

- Ensuring that our leaders and managers are fully trained on how to support staff and that they fully understand the absence policy.

- Developing more robust monitoring arrangements to ensure consistent application of policy.

- Developing and providing access to historical and real-time data on all aspects of absence for their teams to help better understand absence reasons, trends to improve support and identify opportunities and target wellbeing activity to prevent absence in a more upstream way.

Governance for this will be managed through the Workforce and Wellbeing Portfolio with additional oversight from the Best Value steering group.

4.7.2 Improving NQP Recruitment Plan

The recruitment of newly qualified paramedics direct from university is still developing, and we have identified that there is a need to strengthen communication and collaboration with universities and students to improve the learning experience of student paramedics during placements. There is also a need to better support students throughout their course to ensure readiness for employment as well as improvements to how we recruit and onboard students as newly qualified paramedics.

Improvement work has already commenced however there is a need to ensure formal oversight of this work through the Workforce and Wellbeing Portfolio.

4.7.3 Culture

There are several pieces of work that are expected to be brought together under one programme to help the service evolve and improve the culture. A number of these have

been referred to previously including leadership development and equality diversity and inclusion.

4.7.4 E-Rostering Migration to the Cloud

A business case has been developed for submission to the Board to seek approval of funding to migrate our current GRS e-rostering system to the cloud. If approved this work will be a complex undertaking that will be managed through the Data, Digital, Innovation & Research Portfolio and will take around 6-9 months to transition.

4.8   Issues and Risks for Escalation

At this stage, no risks across any of the Portfolios require escalation to the Board. All risks are managed through respective portfolio boards or exist on the Corporate Risk Register.

4.9   Next Steps on demonstrating where we are now on our journey to implementation of our 2030 Strategy.

Work is underway within the Strategy Team to collate a detailed roadmap, setting out

- What we said we do in our 2030 Strategy
- What have we delivered against all of our ambitions so far and the impact that we are making and
- What we are planning to do against our ambitions in 2025/26 and in the medium term (2025-2028)

We are also still in the process of reviewing the current format for Board reporting to explore opportunities for refinement and improvement for the 25/26 Financial Year and expect both to be completed for the September Board.

Service Board Portfolio Summary Pack

May 2025

Reporting as of 21 April 2025

Portfolio Summary

The Reduced Working Week (RWW) Programme continues to progress well. Accrued Hours Leave Limits have been published on @SAS based on 37 Hours Per Week, with staff communication updates provided in the Chief Executive bulletin. Reconciliation work progressed by the e-Rostering Team including annual leave entitlements for non-rostered staff. West Region to be completed over the next 2-3 weeks, all other Service areas have been completed.

For Scheduled Care Improvement, The Queen Elizabeth Hospital Transport Hub proposal is in the final stages of approval. Discussions have been supportive of trialling the Transport Hub until March 2026.. The Scheduled Care workshop took place on the 29th April to assess the number of workstreams identified as part of a rescoping exercise and will enable work with key stakeholders to prioritise these workstreams to allow the Programme to be resourced accordingly. Scheduled Care is ongoing.

For HCP Online Booking, as of 18th April, 3,734 online bookings have been made. In terms of pickup target, 90% are 1 hour (urgent), 7% are two hour (planned) and the remaining 3% are 4 hour (routine). The initial rollout stage will prioritise a blend of Flow Navigation Centres, GP Practices and Out of Hours services based on ambulance demand but is dependent on Board's eHealth and Information Governance sign-off before the service can start. No specific rollout order has been confirmed but discussions with some territorial boards are ongoing. The overall BRAG status is red because of the uncertainty to when Boards will sign-off on their governance process to approve the test of change to begin.. The expected date for return to green has yet to be determined because it's not fully within the control of the Service. The Service will also need to allocate resource for account creation and to gather staff details before accounts can be created.

For Digital Patient Handover, As of 21st April, 1,958 Timed Admissions have been digitally transferred from NHS24 to SAS and there have been 2,407 transfers of non-ILT emergencies, with the latter service having operationalised on 10th April. The most recently available data suggests that an average of 25% of all transfers continue to be received by phone and NHS24 is investing the exceptions to identify where there is scope to reduce these. The target is less than 10% transfers by phone to ensure we maximise on this digital initiative.

The Neonatal Transport Service continue to undertake a workforce review in line with the released data modelling, following a revised options appraisal process, the final options have been agreed, and the team is now finalising the business case.

The Air Ambulance Implementation project design workshops between SAS and the supplier took place at end February 2025, with follow-up discussions and decisions on internal fit taking place throughout March and April. An updated detailed project plan will be provided by the supplier. Third party production delays of the fixed wing aircraft is due to industrial action for a month, August 2024. The dispute has been resolved however there are knock on impacts on the production slot. The slot changes have resulted in delays to the delivery of the manufactured aircraft to the supplier, the supplier is working with the third-party provider to reduce the delays. The Service anticipates no impact on operational delivery.

Portfolio Summary (Continued)

The Out of Hospital Cardiac Arrest Project continues to progress well. The Dumfries & Galloway (D&G) pilot zone plans have further progressed since the last reporting period. A SLWG with all the stakeholders and chaired by D&G council has been set up. Work has begun on the actions identified. High performance CPR Engagement has continued with EPDD to support all the CTO cohort with the LiP education package delivery; this will ensure consistency across all regions. The PADMAP website went live on the 25th March. There was extensive communications, and early feedback is overwhelmingly positive. Several UK ambulance services have already expressed interest in joining the site which is excellent news. Early testing in the Falkirk area has demonstrated that if PADS are optimally placed using PADMAP they are two times more likely to be deployed and 66% more shocks have been delivered to patients prior to SAS arrival.

The Major Trauma team now aim to review progress since the launch of The Critical Care Desk (CCD). The group are scheduled to meet in person on Friday 30th May to consider a wide range of topics within scope of the review project. As part of the Scottish Trauma Network (STN) strategy, all the Major Trauma KPIs and minimum requirements are to be reviewed. This project will be completed in collaboration with the Scottish Trauma Netowrk as part of a wider piece of work commissioned by the Scottish Government (SG) to produce a new Service Specification for the Network. Our Major Trauma Project Lead will lead on developing the pre-hospital section of the Service Specification which will include a review of all pre-hospital performance metrics. The SG have asked for this work to be concluded by 31st December 2025 and the milestone deadline in this highlight report has been amended to reflect this.
The Major Trauma pre-hospital Clinical Governance Structure has been reviewed and improved. The new system for logging, investigating and responding to enquiries is in place and working well. Milestone is complete.

For Stroke and Thrombectomy, following external and high-profile scrutiny of the effectiveness of FAST as a stroke screening tool, FAST remains the only approved stroke screening tool to be used across NHS Scotland, including SAS. Internally, there is an ambition to move from 'FAST awareness' messaging to 'Correct Application of FAST,'. Delivery of the National Thrombectomy Service remains challenging across NHS Scotland. The Scottish Government have renewed their commitment to delivering a 24/7 National Thrombectomy Service with an acknowledgment to the challenges faced in achieving this. Work will focus in 2025 on achieving a 7 day, 0800-2000 service across all three regional areas. The TaP study, conducted within the East Region, has now ended with the data being reviewed to understand the impact on on-scene times and to evaluate learning as a driver for the wider pre-hospital stroke pathway improvement.

SAS continues to strengthen its position in NHS Scotland in terms of how it manages urgent care patients. This is supported by our work with a range of stakeholders including health boards, primary care in and out of hours and other health and social care partners. For the month of March 2025 33.0% of all attended incidents were not conveyed and represents an increase of 0.8% compared to March 2024. We are currently reviewing the programme of work for urgent care in conjunction with the Pathways work plan and this will include areas of activity with health board partners including NHS24. This plan will illustrate our key aims for the year and actions that will be progressed to achieve this.

Integrated Planned Urgent and Unscheduled Care Portfolio Report – 2030 SSG

Scottish Ambulance Service — Working in Partnership with Universities

NHS SCOTLAND

Portfolio Lead:	Paul Bassett	Period covered:	22 Mar to 21 Apr	Portfolio RAG	(Green)

Portfolio Timeline

Project / Activity	Start Date	End Date	RAG & Trend	Key Controls	
Reduced Working Week	10/07/24	30/09/27	→ (Green)	Milestones	(Green)
				Risks (VH&H)	3
				Issues (H)	0
				Finance	(Green)
Air Ambulance Implementation	01/11/24	30/11/26	↗ (Amber)	Milestones	(Amber)
				Risks (VH&H)	0
				Issues (H)	1
				Finance	(Green)
Resource Planning Review	01/09/22	31/07/25	→ (Green)	Milestones	(Green)
				Risks (VH&H)	0
				Issues (H)	0
				Finance	N/A
Scheduled Care Improvement	12/06/24	30/03/26	→ (Green)	Milestones	(Green)
				Risks (VH&H)	0
				Issues (H)	0
				Finance	TBA
OHCA	01/04/22	31/03/26	→ (Green)	Milestones	(Green)
				Risks (VH&H)	0
				Issues (H)	1
				Finance	N/A

Timeline details

Timeline headers: FY 24/25 (Q4: Jan-25, Feb-25, Mar-25) | FY 25/26 (Q1: Apr-25, May-25, Jun-25; Q2: Jul-25, Aug-25, Sep-25; Q3: Oct-25, Nov-25, Dec-25; Q4) | 26/27 (Q1, Q2, Q3, Q4)

Reduced Working Week:
- 03/25- RWW accrued hours taken 24/25
- Q1- options
- Q1- Roster analysis
- Q1- Roster keys appr
- Q1- Plan for WP's
- Q1- Roster S/W procured
- Q1- Working party 2
- Q3- Roster voting
- Q4- Rosters built on GRS
- Q4- Acc Hrs Taken - 25/26
- Q1- RostersLive
- Q2- Handover to BAU & Close
- 02/25 - RWW accrued hours leave limits 2025/26 developed
- Q4 24/25 - Roster keys developed
- Q1 -
- Q1 - Working party 0
- Q1 - Recruitment plans dev & app
- Q1 - Working party 1
- Q1 - Del resource appr & recruit
- Q1 - Working party 3
- Q2 - Working party 4
- Q3 - Roster sign off
- Q4 - New Staff Recruited
- Q1 - Imp protected learning requirements

Air Ambulance Implementation:
- 12/25 - Aircraft medical interior design complete
- 06/26 09/26 - Training complete
- 06/26 - Build & interior fit complete (Rotary)
- 10/26 - Aircraft in Service (fixed Wing)
- 04/26 - Estate changes complete
- 09/26 - Build and interior fit complete (Fixed Wing)
- 11/26 - Project Close
- 07/26 - Aircraft in Service (Rotary)

Resource Planning Review:
- 10/24 11/24 01/25 - Implementation of OT messaging approach
- 06/24 07/24 08/24 10/24 12/24 01/25 04/24 06/25 - Resource Planning Structure Options paper
- 03/25 05/25 07/25 - Project close

Scheduled Care Improvement:
- 03/25 - WS 5- Assess Taxi Usage
- 01/25 03/25 04/25 - WS 6-Sched Care Strategy
- 06/25 - WS 7 - QE Transport Hub Trial Implemented
- 03/25 - WS 7 - QE Transport Hub Trial Completion
- 04/26 - WS 2- Recruitment
- 03/25 - WS 3- Timed Admissions (Card 46)
- 09/24 04/25- WS 4- Dynamic and demand led support for Timed Admissions
- 06/25 - Project Close
- Plan being re-baselined following a redevelopment of the scope

OHCA:
- 03/25 GoodSAM partnership engagement
- 06/25 Develop CAReZone Framework
- 03/26 - Plan and implement Community Cardiac Responders schemes in D&G aligned to CAReZone work
- 03/25 30/05 Thematic analysis of 12 months data on approp of resus attempt
- 06/25 Project Close

Portfolio Timeline (Continued)

Project / Activity	Start Date	End Date	Project Health			FY 24 / 25			FY 25 / 26									26 / 27				
			RAG & Trend	Key Controls		Q4			Q1			Q2			Q3			Q4	Q1	Q2	Q3	Q4
						Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25					
Major Trauma	01/04/22	31/03/26	→	Milestones				31/10 04/24 03/25 - 4. Further develop patient outcome / feedback processes for ambulance clinicians							10/25 - 8. Review the STN Major Trauma Tools	03/25 11/25 - 1. CCD	03/25 12/25 - 2. Work with STN and STAG					
				Risks (VH&H)	1																	
				Issues (H)	0	07/24 11/24 03/25 - 3. Review and update multi agency MT pre-hspital CG structure			03/25 05/25 - 7. Plan for peer review of amb service/ pre hosp & maj trauma		06/25 -5. Develop a sustainable process for patient outcome/feedback process in the East Region						03/25 12/25 - 6. Engage with SAS green tier					
				Finance																		
Stroke & Thrombectomy	01/04/22	31/08/25	→	Milestones			02/25 Stroke Enh Video Triage Ph3	01/24 03/24 03/25 On-scene diagnosis of stroke					08/25 East Scotland Stroke Improvement Project (Reg Dir Commission)										
				Risks (VH&H)	0																	
				Issues (H)	0																	
				Finance	N/A	In partnership, work with TAG to progress thrombectomy delivery																
Urgent Care	01/04/22	31/03/26		Milestones		09/23 11/23 02/24 09/24 03/25 - "Call Before Convey" active across all health boards pre winter 2023 with the ability to access senior decision support through FNC's or			06/23 11/23 02/24 09/24 03/25 - Digital Workstream		25 / 26 Plan in development											
				Risks (VH&H)																		
				Issues (H)																		
				Finance			06/23 10/23 09/24 03/25 FNC / Pathways Joint Governance Framework															
HCP Online Booking	01/08/22	TBC	↘	Milestones			27/03 23/04 07/24 10/24 12/24 01/25 03/25 First Board - Go Live		10/06 14/08 09/24 12/24 TBC - Last Board- Go Live													
				Risks (VH&H)	3																	
				Issues (H)	2			03/25 - Measure ongoing HCP call handler requirements														
				Finance																		
Digital Patient Handover	01/05/23	30/06/25	→	Milestones			01/24 02/24 06/24 07/24 08/24 09/24 02/25 03/25 - Ambulance Req Go Live - A&E		11/24 03/25 04/25 - Measure HCP Call Handler requirement													
				Risks (VH&H)	0																	
				Issues (H)	0						11/24 04/25 05/25 - Project Close (Ambulance ReqOnly)											
				Finance																		
Best Start - Maternity & Neonatal Care	01/05/24	31/07/25	→	Milestones		30/11 31/12 01/25 Assess Team coverage required			30/09 31/10 31/12 01/03 31/03 01/06 - Business Case developed													
				Risks (VH&H)	0																	
				Issues (H)	0	01/25 - Select options	01/09 30/09 31/12 01/02 Final service model chosen				05/25 07/25 - Project close											
				Finance	TBA																	

Communities and Place Portfolio Report – 2030 SSG

Portfolio Lead:	Dr Jim Ward	Period covered:	22 Mar to 21 Apr	Portfolio RAG	

Portfolio Summary

For volunteer enhancement, several small-scale test of change pilots have been completed. Scoping continues with relevant key stakeholders to consider further opportunities, but progress is limited due to overall organisational capacity and the lack of organisational enablers in place to support further pilot activity. However, additional support has been secured from the PMO and a Project Board & Project Team are being established to drive forward the volunteer enhancement project, which will focus on the delivery of test and evaluate the MIS Responder app for dispatch of CFRs, the extension of the CFR scope of practice to include blood sugar monitoring and establishing a limited pilot project to evaluate CFR attendance at non-injury falls.

The Mental Health team continue to progress their aims. Progress has been made with Forth Valley and the team are due to pilot a direct prof to prof support with their mental health assessment unit commencing 28th April 25. Communications continue with NHS24, Police Scotland and Scottish Government. The team are currently working on the evaluation of year 2 and 3 of the mental health response cars to identify if there is a preferred model of delivery. The team have engaged with a lived experience organisation to better understand the experience of our service delivery; an external company's work has now been received and is being reviewed. Over the past 18 months, the mental health team has dedicated time and effort to securing delivering essential education to Robert Gordon University paramedicine pre-registration students. Following this the team have now successfully delivered the first education session to RGU 1st-year paramedicine students on the 15th of April. Many staff attended the official launch of the Suicide Prevention Scotland Website on 16th April. In relation to Young Minds Saves Lives, the first mental health lesson was delivered to St Margaret Mary's secondary school in Castlemilk on the 31st March. Over 3 lessons, 54 S3 students participated in the lesson.

The new Dementia lead was appointed and will take up post on 1st May 2025. The gap analysis for the national dementia strategy and delivery plan and SAS existing strategies have been complete and is ready with recommendations. Generative discussion have taken place as planned on 8th April, recommendations around future education opportunities are included in recommendations. The Mental Health Lead has met with the Scottish Government Dementia Team on 8th April to update on progress, funding letter should be issued soon.

Community Planning Development remains in development; this work is aligned to the blueprint for good governance action plan. Key actions have been developed, and a positioning paper will go to the 2030 Steering Group in May.

The South Station project proposal was approved at the March 2030 Steering Group. Recruitment is underway to appoint a project manager to formally get this project up and running within the next 3-4 months.

The Young Minds Saves Lives (YMSL) Project Team have seen a considerable amount of work ongoing within this reporting period. New lessons have been designed and developed with lesson delivery taking place in two schools. Evaluation has been designed for the Additional Support Needs (ASN) school with new banners designed (for MH lesson and ASN school). A new escape room has now been designed and the team have started scoping potential bid opportunity for YMSL remote and rural focusing on mental health.

Work has been ongoing within the team High Intensity Use (HIU) Team. HIU case leads have moved on, with limited capacity within the team. New job descriptions are being written and will require approval before going to advert. The HIU process is to be re-aligned.

The Anchor Strategic Plan has established a steering group with key representatives. The steering group continues to meet monthly. Project objectives have been established And Project Brief and PID approved by Communities and Place Portfolio Board. Updated metrics were submitted to Scottish Government on 26th March 2025, this was later than requested (17th March) but extension granted.

Communities and Place Portfolio Report – 2030 SSG

Scottish Ambulance Service — Working in Partnership with Universities

NHS SCOTLAND

Portfolio Lead:	Dr Jim Ward	Period covered:	22 Mar to 21 Apr	Portfolio RAG	

Portfolio Timeline

Project / Activity	Start Date	End Date	Project Health — RAG & Trend	Key Controls		FY 24/25 ... FY 25/26 ... 26/27

Volunteer Enhancement — Start 01/03/25, End 31/07/25
- Milestones (green)
- Risks (VH&H): (green)
- Issues (H): 2 (red)
- Finance: N/A
- 07/25 - Explore opportunities to use new technology to support the enhanced deployment of volunteers
- 07/25 - Explore further opportunities t extend the role of CFR's
- In Planning -
  - Implement preferred option from the Strategic Review
  - Engage partner orgs to scope potential collaborative opportunities for a broader rollout of Cardiac

Mental Health Strategy — Start 01/11/22, End 31/12/25
- Milestones (green)
- Risks (VH&H): 0
- Issues (H): 0
- Finance (green)
- 12/25 - Work with our partners to better understand our populations needs / funding solutions.
- 12/25 - Promote the MH Paramedic role
- 12/25 - Reduce unwarranted variation in care and inc No of patients managed on scene
- 12/25 - Collaborate with PS, dev safe efficient processes and protocols
- 12/25 - Align the NES Transforming Psychological Trauma Framework to our org, develop delivery plan to achieve the levels of framework
- 12/25 - Continue prof to prof support on scene
- 12/25 - Develop a plan to educate our staff
- 12/25 - Continue close work with NHS24, PS, PHS

Dementia Strategy — Start 01/11/22, End 31/12/25
- Milestones (green)
- Risks (VH&H): 0
- Issues (H): 0
- Finance: TBA
- 04/25 - Recruit a Dementia Lead post
- 12/25 - Develop a Dementia strategy / delivery plan

High Intensity Use & Vulnerable Groups — Start 31/07/22, End 01/04/26
- Milestones (green)
- Risks (VH&H): 0
- Issues (H): 0
- Finance (green)
- 31/08 15/10 01/25 / 01/04 - QI principles to develop plan for
- 01/11 01/04 - Update HIU guidance for submission to PPAG
- 03/26 - Project close

Young Minds Saves Lives — Start 20/06/23, End 31/07/25
- Milestones (green)
- Risks (VH&H): 1 (red)
- Issues (H): 0
- Finance (green)
- 14/02 - Co-design for addtl schools complete
- Q3 28/03 06/25 - Strat direction agreed with SAS Exec
- Q1 25 - Handover & Lessons Learned
- 11/07 Final eval report of addtl schools produced
- 31/07 - Project Close
- 20/06 - Delivery in addtl schools complete
- Q4 24 - SAS work experience options defined
- Q4 24 Q1 25/26 - Funding confirmed to expand YMSL
- 25/07 - End of Project Report

Timeline columns: FY 24/25 Q4 (Jan-25, Feb-25, Mar-25); FY 25/26 Q1 (Apr-25, May-25, Jun-25), Q2 (Jul-25, Aug-25, Sep-25), Q3 (Oct-25, Nov-25, Dec-25), Q4; 26/27 Q1, Q2, Q3, Q4

Scottish Ambulance Service — Working in Partnership with Universities

NHS SCOTLAND

Portfolio Timeline (continued)

Project / Activity	Start Date	End Date	Project Health RAG & Trend	Project Health Key Controls		FY 24 / 25 Q4			FY 25 / 26 Q1			Q2			Q3			Q4	26 / 27 Q1	Q2	Q3	Q4
						Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25					
Sustainability Strategy Development	01/09/22	31/03/26	→	Milestones												**03/26** - Deliver 25/26 Sustainability and Net Zero action plan						
				Risks (VH&H)	0																	
				Issues (H)	0																	
				Finance	N/A																	
Anchor Institution Development	01/10/24	31/07/25	→	Milestones				**03/25** - Assess current state AP deliverables		**06/25** - Complete Self Assessment		**31/07** Project Close										
				Risks (VH&H)	1																	
				Issues (H)	0			**03/25** - Dev and re-submission of updated metrics		**06/25** - Embed in BAU	**06/25** - Establish key partner arrangements											
				Finance	N/A																	
Community Hubs and South Station Delivery	TBA	TBA	Approved	Milestones	TBA																	
				Risks (VH&H)	TBA	New Project Proposal for South Station approved at ER. Awaiting resources to be scheduled																
				Issues (H)	TBA																	
				Finance	TBA																	

Portfolio Summary

Overall good progress continues to be made across all projects within the portfolio with work ongoing to re-align the projects to the new timeline of 2025/26.

Digital Strategy work is progressing well with information for The Digital Network, The Digital Maturity Assessment (DMA) and The Digital Front Door. The Digital Delivery Plan work-streams are progressing while new milestones are being agreed for 25/26.

For Data Strategy Delivery, The Senior BI Team have now met again to discuss detailing the data workplan and implementation for 2025/26 and beyond. The BI Team have met regularly and are in the process of developing the workplan for the coming years. This will be reported in future update reports.

For GRS Timecard, The first months over time claims submission has concluded in selected pilot stations across all regions, SORT bases and selected ACC staff. Participation rates were good across the piece, and accuracy rates were also above expected levels. Comparison work has been done on mismatches allowing the Project Team to identify any system issues or training needs. Weekly check ins have been ongoing to ensure participation rates are high and issues are resolved timeously. Continuous dialogue with supplier to advance outstanding tickets for system fixes required.

Research and Innovation is going well. In terms of research, the team are continuing to have further discussions with external partners about the potential use of drones in a broader sense and exploring available funding opportunities. For the Design pilot of stroke video assessment, the Stroke Research group has been set up and The Stroke project write up is in progress for Scottish Government. The team are hosting three undergraduate RGU students – focussing on stroke on scene times. For Drug Research the CRASH4 TXA drug trial is still to be approved. Three other clinical trials are being discussed. The draft Research & Innovation (R&I) Delivery Plan for 2025/26 developed. For Innovation, collaboration is ongoing with the CAELUS2 Drone Consortium partners to design the next phase of drone delivery work across NHS Scotland. Collaboration work is also ongoing with partners to design the next phase of drone delivery work across Uk Emergency Services. The team are also in progress of an Artificial Intelligence' readiness' exercise to map SAS's ability to deliver AI projects. Awaiting further information.

For InPhase, The project team has been monitoring the dedicated mailbox and a Post Go Live Issues log has been created which has been worked through alongside an InPhase consultant. These have included some permission and migration issues which have affected a small number of users and records. Overall, the system has now bedded in successfully. The team have been going through the End of Project process, documenting lessons learned and benefits using the PMO documentation allowing a handover to BAU in the coming weeks.

Go Live has been achieved for 'AI in the Ambulance Control Centres Project'. Re-planning activity has been ongoing in preparation of the new go-live date as well as a review of Corti project plan.

For eRostering, Project initiation is complete with the project brief, PID, DPIA and SSP review/approval complete. Weekly progress meetings with the supplier and fortnightly NHS Scotland tripartite meetings are still being held. The supplier project initiation requirements are complete and have moved into readiness then deployment stage. Early adopter group engagement has been set up and regular communications and updates in place. Data Gathering and checking is complete, deployment training has been completed by all line managers and administration and BAU training has been completed. The Go-live is currently delayed, awaiting MS Single Sign-On security feature.

Scottish Ambulance Service
Working in Partnership with Universities

Digital Data Innovation and Research Portfolio Report – 2030 SSG
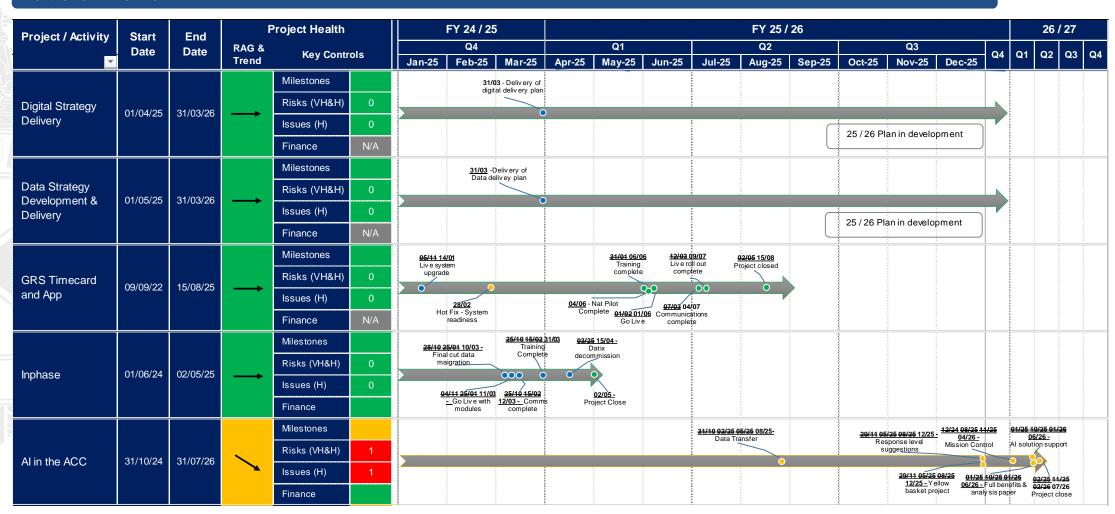
Portfolio Lead:	Julie Carter	Period covered:	22 Mar to 21 Apr	Portfolio RAG	

NHS SCOTLAND

Portfolio Timeline

Project / Activity	Start Date	End Date	RAG & Trend	Key Controls		FY 24 / 25 Q4			FY 25 / 26 Q1			Q2			Q3			Q4	26 / 27 Q1	Q2	Q3	Q4
						Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25					
Digital Strategy Delivery	01/04/25	31/03/26	→	Milestones				31/03 - Delivery of digital delivery plan								25 / 26 Plan in development						
				Risks (VH&H)	0																	
				Issues (H)	0																	
				Finance	N/A																	
Data Strategy Development & Delivery	01/05/25	31/03/26	→	Milestones				31/03 - Delivery of Data delivery plan								25 / 26 Plan in development						
				Risks (VH&H)	0																	
				Issues (H)	0																	
				Finance	N/A																	
GRS Timecard and App	09/09/22	15/08/25	→	Milestones		05/11 14/01 Live system upgrade	28/02 Hot Fix - System readiness			31/01 06/06 Training complete / 04/06 - Nat Pilot Complete / 01/02 01/06 Go Live		12/03 09/07 Live roll out complete / 07/03 04/07 Communications complete	02/05 15/08 Project closed										
				Risks (VH&H)	0																	
				Issues (H)	0																	
				Finance	N/A																	
Inphase	01/06/24	02/05/25	→	Milestones		28/10 25/01 10/03 - Final cut data maigration / 04/11 25/01 11/03 - Go Live with modules	25/10 15/02 31/03 Training Complete / 25/10 15/02 12/03 - Comms complete		03/25 15/04 - Datix decommission / 02/05 - Project Close													
				Risks (VH&H)	0																	
				Issues (H)	0																	
				Finance																		
AI in the ACC	31/10/24	31/07/26	↘	Milestones							31/10 02/25 05/25 08/25- 04/25 Data Transfer			29/11 05/25 08/25 12/25 - Response level suggestions / 29/11 05/25 08/25 12/25 - Yellow basket project	12/24 08/25 11/25 06/26 - Mission Control / 01/25 10/25 01/26 06/26 - Full benefits & analysis paper	01/25 10/25 01/26 06/26 - AI solution support / 02/25 11/25 02/26 07/26 Project close					
				Risks (VH&H)	1																	
				Issues (H)	1																	
				Finance																		

Portfolio Timeline (continued)

Project / Activity	Start Date	End Date	Project Health RAG & Trend	Key Controls		FY 24 / 25 Q4 Jan-25	Feb-25	Mar-25	FY 25 / 26 Q1 Apr-25	May-25	Jun-25	Q2 Jul-25	Aug-25	Sep-25	Q3 Oct-25	Nov-25	Dec-25	Q4	26 / 27 Q1	Q2	Q3	Q4
eRostering	01/12/24	30/07/25	↘	Milestones																			
				Risks (VH&H)	2																		
				Issues (H)	3																		
				Finance																			
Research	01/04/22	31/12/25	→	Milestones																			
				Risks (VH&H)	3																		
				Issues (H)	0																		
				Finance																			
Innovation	01/04/22	31/12/25	→	Milestones																			
				Risks (VH&H)	4																		
				Issues (H)	0																		
				Finance	N/A																		

Timeline annotations:

eRostering:
- 01/25 - Project Initiation
- 01/25 - Readiness
- 02/25 03/25 04/25 01/05 - Deployment
- 03/25 04/25 01/05 - SAS Training
- 03/25 05/25 06/06 - Adoption
- 04/25 05/25 06/25 - Timesheets Pilot
- 05/25 06/25 - Reporting Pilot
- 05/25 06/25 07/25 - Project Close

Research:
- 08/25 - Data analysis and insights to support decision making and improve service delivery planning
- 12/25 - Pursue funding activities
- 12/25 - Focus R&I - Improve care pathways & outcomes for critical conditions

Innovation:
- 08/25 - Exploring the use of pilotless airframes to provide critical life-saving equipment to patients in remote and hard-to-reach locations
- 12/25 - Strengthen partnerships with other blue light public services to combine resources and expertise
- 12/25 - Continue testing and implementing artificial intelligence and machine learning technologies to enhance clinical decision-making
- 12/25 - Enhance digital tools and data systems to monitor patients remotely.

Preventative and Proactive Care Portfolio Report – 2030 SSG

Portfolio Lead:	Dr Jim Ward	Period covered:	22 Mar to 21 Apr	Portfolio RAG	

Portfolio Summary

Progress continues across each of the clinical workstreams within this Portfolio with continued collaboration across health and social care partners.

The Drug Harm Reduction (DHR) Team is now established within various stakeholder and partner meetings. Key connections include Scottish Government (SG), Public Health Scotland, NHS boards, Police Scotland, Scottish Prison Service, and third sector organisations. The IEP roll-out has commenced in West and East regions. An agreed plan for data dashboards and reporting is ongoing with Business Intelligence. The TRUST educational campaign launched in Fife schools with national roll out planned for 25/26. The Development of Drugs Early Warning (DrEW) system is ongoing within the service. The drug harm reduction project is now being further diversified, and work is ongoing to develop an enhanced plan and delivery milestones for the year ahead.

Our work in partnership with NHS24 and GP OOH services continues to progress. 1,595 Patient Experience Surveys distributed to code 33 patients, BI dashboards are being reviewed (removing deceased patient contacts, where possible), the team are established and had the first meeting of 999 SLWG.

For End-of-Life Care, the business case submitted to Scottish Government is still under consideration for funding with no update yet received to SAS. The Macmillan Nurse Consultant has now left post following the end of a fixed term contract. This leaves the Programme Lead managing ongoing relationships/work with external and internal colleagues in this space. The Final Strategic Steering Group was held 9th April 2025. There was continued admiration from all regarding the success of the project team and thanks were given to recognise this. There was an ask for an evaluation report to be shared when available and this will be completed and distributed pending the outcome of the Scottish Government business case and approval from SAS Medical Director.

In the last month a number of new pathways have been launched, including access to Dundee Enhanced Care at Home, Forth Valley Early Pregnancy Unit, Highland Smoking Cessation and Shetland Improving Cancer Journeys. The team continue to focus on improving the use of Call Before You Convey, Lanarkshire had the second highest monthly activity since the concept started. 707 incidents were managed by the Pathways Hub in March, this is the highest volume of calls the hub has ever received. In addition, 162 Confirmation of Deaths were reported via the hub. This takes the total incidents managed to 869

SG have published the draft national Population Health Framework in early April 2025 and feedback on behalf of SAS has been provided by the Medical Director. The priorities outlined in the framework will be reflected in our draft report in relation to next steps. In recent weeks there was representation at the latest AACE Health Inequalities session with the Chair providing an update on work underway by SAS work. This session provided useful insights to the approach of other ambulance services across the UK and Ireland with some useful messages which we will build into our plan. A key part of understanding our role in reducing health inequalities will be better understanding our data sets including variation across SIMD areas as well as for specific presenting conditions. In addition, we can also make comparisons across national and regional demand patterns. This will help us to better understand where there are opportunities to work with partners and utilise our data to improve outcomes across different communities.

Preventative and Proactive Care Portfolio Report – 2030 SSG

Scottish Ambulance Service — Working in Partnership with Universities

NHS SCOTLAND

| Portfolio Lead: | Dr Jim Ward | Period covered: | 22 Mar to 21 Apr | Portfolio RAG | |

Portfolio Timeline

Project / Activity	Start Date	End Date	Project Health RAG & Trend	Key Controls	
Drug Harm Reduction	01/04/23	31/03/26	→	Milestones	
				Risks (VH&H)	0
				Issues (H)	0
				Finance	
Partnership Working	01/07/24	31/03/26	→	Milestones	
				Risks (VH&H)	0
				Issues (H)	0
				Finance	N/A
End of Life Care	01/04/22	31/03/25		Milestones	
				Risks (VH&H)	
				Issues (H)	
				Finance	
Pathway Hub	01/04/23	31/03/26	→	Milestones	
				Risks (VH&H)	0
				Issues (H)	0
				Finance	N/A
Population Health Review	01/02/24	31/03/26	→	Milestones	
				Risks (VH&H)	0
				Issues (H)	0
				Finance	TBA

Timeline (FY 24/25 Q4 – FY 25/26 – 26/27)

Drug Harm Reduction: 25 / 26 Plan in development

Partnership Working:
- 08/24 03/25 - Effective patient flow, triage and
- 03/25 - Patient Experience systems set up
- 03/25 06/25 - Coordinated governance approach
- 03/26 - Patient Experience Workplan and Survey
- 03/26 - NHS24/SAS 999 calls SLWG
- 03/26 - Clinical topic focus

End of Life Care:
- 01/25 03/25 - Education / Training
- 03/25 - Project Close
- 01/25 03/25 - Pathway development and
- 03/25 - Stakeholder engagement
- 25 / 26 Plan in development

Pathway Hub:
- 11/24 01/25 - Pathways Education Workplan
- 03/25 - North ePR Feedback Summary
- 04/25 - Moray Falls & Frailty Screening Proposal
- 03/25 05/25 - Non Conveyance Feedback Model
- 07/25 - Pathways Hub Station engagement project
- 08/25 - East ePR Feedback project
- ONGOING - Call before convey front door engagement
- 04/25 - Breathing difficulties Patient Experience summary
- 03/25 05/25 - Non Conveyance Patient Outcomes Project
- 03/25 05/25 - Falls Screening Tool Impr Project
- 07/25 - Tayside COPD Improvement Project
- 10/25 - Paediatric Non Conveyance Guidance
- TBC Develop ePR to pathways hub referral process

Population Health Review:
- 10/24 11/24 TBC - Stakeholder mapping & engagement
- 10/24 TBC - Measurement
- 03/25 - Phase 1 completed
- 09/05 - Progress assessment and 25-26 priorities
- 25 / 26 Plan in development

Workforce and Wellbeing Portfolio Report – 2030 SSG

| Portfolio Lead: | Graeme Ferguson | Period covered: | 22 Mar to 21 Apr | Portfolio RAG | |

Portfolio Summary

The overall direction of the Portfolio Board remains on target and considerable progress is being made across all the individual projects.

While the Health and Wellbeing Project is reporting as green, work is underway to develop the projects milestones for 25/26. 2 milestones commencing from April 2025 as highlighted in the March report are Progression of the suicide prevention & postvention work and development of an interactive Wellbeing Hub as part of the proposal to further develop our wellbeing support and provision.

The leadership and management training and development is progressing well. The Leadership Training Programmes have not experienced any delays in this reporting period. The process of accreditation renewal is ongoing. This project is moving to business as usual, and progress will be reported through PPSG.

For TURAS Learn, Manual Handling and Violence Prevention and Reduction courses beginning April 2025. The Turas Learn booking system and reporting functionality has been developed to monitor the face-to-face delivery of these courses. Supplementary e-learning is also now complete. Classroom content has been completed. A learning matrix of role specific statutory or mandatory content for all staff has now been formulated after a further push for recommendations from departments and content owners. This will be presented to Project Board for review and then final version will be presented to the Executive for approval. This will then be prioritised in terms of Turas development and addition to "role specific" content and the work planned accordingly. All content has been removed from LearnPro and communications sent out to all staff via Chief Executive update to advise.

Multiple changes have been made to the Rest Break SOP and this has seen a sustained improvement in rest break compliance since 2023. Other pressures continue to impact on rest break compliance. In February 2025, staff-side colleagues suggested further changes to be made which are now being discussed.

Work is ongoing in all areas of BAU Equality Diversity and Inclusion work. Mainstreaming, Equality Outcomes, Gender Pay Gap reports and Equal Pay Statement for 2025 were approved at Staff Governance Committee/NPF in March. The reports were published at the end of April, following the Board meeting, on our external website. The Sexual Safety Programme of work continues to make progress. This project will move to business as usual, and progress will be reported through the Equality and Diversity Steering Group.
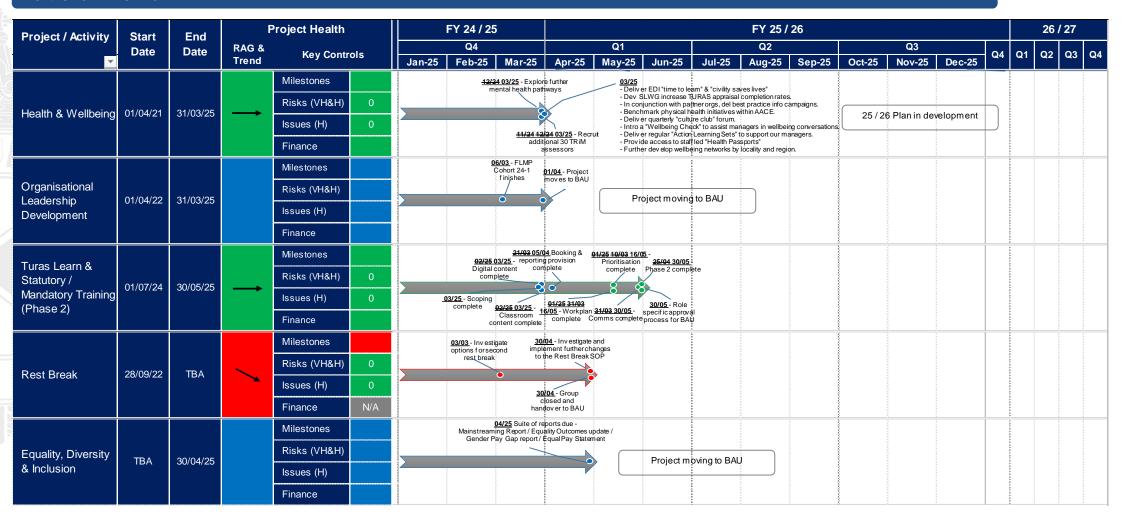
The role of the Practitioner in Health and Care Staffing and Workforce has been extended by a year to reflect the challenges of the move to BAU and the high levels of scrutiny from Healthcare Improvement Scotland (HIS). The milestones have been extended to reflect this.

Portfolio Timeline

Project / Activity	Start Date	End Date	Project Health			FY 24 / 25			FY 25 / 26									26 / 27				
			RAG & Trend	Key Controls		Q4			Q1			Q2			Q3			Q4	Q1	Q2	Q3	Q4
						Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25					
Health & Wellbeing	01/04/21	31/03/25	→ (green)	Milestones	(green)																	
				Risks (VH&H)	0																	
				Issues (H)	0																	
				Finance	(green)																	
Organisational Leadership Development	01/04/22	31/03/25	(blue)	Milestones	(blue)																	
				Risks (VH&H)	(blue)																	
				Issues (H)	(blue)																	
				Finance	(blue)																	
Turas Learn & Statutory / Mandatory Training (Phase 2)	01/07/24	30/05/25	→ (green)	Milestones	(green)																	
				Risks (VH&H)	0																	
				Issues (H)	0																	
				Finance	(green)																	
Rest Break	28/09/22	TBA	↘ (red)	Milestones	(red)																	
				Risks (VH&H)	0																	
				Issues (H)	0																	
				Finance	N/A																	
Equality, Diversity & Inclusion	TBA	30/04/25	(blue)	Milestones	(blue)																	
				Risks (VH&H)	(blue)																	
				Issues (H)	(blue)																	
				Finance	(blue)																	

Health & Wellbeing timeline annotations:
- ~~12/24~~ 03/25 - Explore further mental health pathways
- ~~11/24~~ ~~12/24~~ 03/25 - Recruit additional 30 TRiM assessors
- 03/25
  - Deliver EDI "time to learn" & "civility saves lives"
  - Dev SLWG increase TURAS appraisal completion rates.
  - In conjunction with partner orgs, del best practice info campaigns.
  - Benchmark physical health initiatives within AACE.
  - Deliver quarterly "culture club" forum.
  - Intro a "Wellbeing Check" to assist managers in wellbeing conversations.
  - Deliver regular "Action Learning Sets" to support our managers.
  - Provide access to staff led "Health Passports".
  - Further develop wellbeing networks by locality and region.
- 25 / 26 Plan in development

Organisational Leadership Development annotations:
- 06/03 - FLMP Cohort 24-1 f inishes
- 01/04 - Project moves to BAU
- Project moving to BAU

Turas Learn & Statutory / Mandatory Training (Phase 2) annotations:
- ~~02/25~~ 03/25 Digital content complete
- ~~21/03~~ 05/04 Booking & reporting provision complete
- ~~01/25~~ ~~10/03~~ 16/05 - Prioritisation complete
- ~~25/04~~ 30/05 - Phase 2 complete
- 03/25 - Scoping complete
- ~~02/25~~ 03/25 - Classroom content complete
- ~~01/25~~ ~~31/03~~ 16/05 - Workplan complete
- ~~31/03~~ 30/05 - Comms complete
- 30/05 - Role specific approval process for BAU

Rest Break annotations:
- 03/03 - Investigate options for second rest break
- 30/04 - Investigate and implement further changes to the Rest Break SOP
- 30/04 - Group closed and handover to BAU

Equality, Diversity & Inclusion annotations:
- 04/25 Suite of reports due - Mainstreaming Report / Equality Outcomes update / Gender Pay Gap report / Equal Pay Statement
- Project moving to BAU

Portfolio Lead:	Graeme Ferguson	Period covered:	22 Mar to 21 Apr	Portfolio RAG	

Portfolio Timeline (Continued)

Project / Activity	Start Date	End Date	Project Health — RAG & Trend	Key Controls	
Workforce Planning and Performance Monitoring	01/03/24	TBA	Under Review	Milestones	
				Risks (VH&H)	
				Issues (H)	
				Finance	
Health and Care Staffing Act	01/10/23	01/04/26	(Green, →)	Milestones	(green)
				Risks (VH&H)	0
				Issues (H)	0
				Finance	N/A
Training and Education Model Development (EPDD Transformation)	01/06/24	TBA	Paused	Milestones	
				Risks (VH&H)	0
				Issues (H)	0
				Finance	

Timeline (FY 24/25 – FY 25/26 – 26/27):

Workforce Planning and Performance Monitoring: Review underway to agree how to progress this project.

Health and Care Staffing Act milestones:
- 28/02 - Real Time Staffing Go
- 01/25 28/02 Q3 Report due
- 09/24 12/24 28/02 Clinical input to Business rules and
- 30/04 - Excellence in Care Annual report
- 30/04 31/03 First annual report due
- 31/03 - Q1 Report due
- 01/10 - Q2 Report due
- 01/02 - Q3 Report due
- 01/04 Project transitions to BAU and close
- 01/04 Annual report 2025/26 due

Training and Education Model Development milestones:
- TBA - PID complete
- TBA - Stakeholder comms & engagement complete
- TBA - Business Case completion
- TBA - Business Case sign off
- TBA - Project Close