



PUBLIC BOARD MEETING

**27 May 2026
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	<p>The purpose of the 2030 Strategy Portfolio Board update is to</p> <ul style="list-style-type: none"> • 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. <p>Overall good progress continues to be made our portfolio of work however there are currently 3 projects in Amber status and 1 project in Red status for delivery.</p> <p>Table 1 – High Level Summary of Project Status</p> <table border="1"> <thead> <tr> <th>Portfolio</th> <th>Green</th> <th>Amber</th> <th>Red</th> <th>Other</th> </tr> </thead> <tbody> <tr> <td>Integrated Planned, Unscheduled & Urgent Care</td> <td>3</td> <td>1</td> <td>1</td> <td></td> </tr> <tr> <td>Data, Digital, Innovation & Research</td> <td>2</td> <td>1</td> <td></td> <td></td> </tr> <tr> <td>Communities & Place</td> <td>7</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Preventative & Proactive Care</td> <td>7</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Workforce & Wellbeing</td> <td>2</td> <td>1</td> <td></td> <td></td> </tr> <tr> <td>Totals</td> <td>21</td> <td>3</td> <td>1</td> <td>0</td> </tr> </tbody> </table> <p>There are no issues or risks that require escalation to the Board.</p>	Portfolio	Green	Amber	Red	Other	Integrated Planned, Unscheduled & Urgent Care	3	1	1		Data, Digital, Innovation & Research	2	1			Communities & Place	7				Preventative & Proactive Care	7				Workforce & Wellbeing	2	1			Totals	21	3	1	0
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Timing	This paper is being presented to the May 2026 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 <ul style="list-style-type: none"> • 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	<ul style="list-style-type: none"> • 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.



SCOTTISH AMBULANCE SERVICE BOARD

2030 STRATEGY DELIVERY UPDATE

KAREN BROGAN, DIRECTOR OF STRATEGY PLANNING & PROGRAMMES

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

Overall good progress continues to be made our portfolio of work **however there are currently 3 projects in Amber status and 1 project in Red status for delivery.**

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Table 1 – High-Level Summary of Project Status

Portfolio	Green	Amber	Red	Other
Integrated Planned, Unscheduled & Urgent Care	3	1	1	
Data, Digital, Innovation & Research	2	1		
Communities & Place	7			
Preventative & Proactive Care	7			
Workforce & Wellbeing	2	1		
Totals	21	3	1	0

4.2 Projects in Other Status

The 'other' category relates to projects in planning or scoping stages or projects that have been closed.

There are no projects in the Other Status for Delivery.

4.3 Projects in the Amber Status

4.3.1 Reduced Working Week

Implementation of the reduced working week to 36 hours is expected to be delivered by April 1st, 2026.

Roster design discussions were paused with staff throughout December following issues raised by the trade unions. This resulted in an agreement to prioritise the reduced working week roster changes ahead of any demand and capacity changes.

As advised at the March Board meeting, there had also been a delay in reaching consensus with partnership colleagues on policy interpretation and a number of key processes in relation to how the RWW DL is applied to roster redesign to achieve the reduction to 36 hours. These issues were resolved in February.

The roster design approach was subsequently changed to expedite the process by providing a more agile method for reaching roster consensus amongst staff. As a result, significant progress has now been made in relation to agreement of rosters.

Since the last update to the Board and following the earlier delays due to the complexity of creating around 4000 rosters, enhanced governance, daily operational support and training for additional eRostering resources were put in place to support Go Live. Circa 60% of rosters went live on 30 March 26 which includes 812 rosters for Support Staff and all relief staff. Following approval from the Programme Board, local teams and eRostering worked at pace to ensure the remaining rosters were built and approved to go live by 04 May 26. 3 rosters remained outstanding and all subsequently went live by 18 May 26. All rosters are now live.

4.3.2 GRS Cloud Migration

The GRS Cloud Migration project will migrate from the current on-premise solution to a secure, reliable, and future-proofed cloud-based platform. This migration is mandatory as end of support for the existing system ends in March 2026. The objective is to maintain effective resource management, improve scheduling, and set the path for future

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integration with other core systems, while enhancing system resilience, security, and functionality to support operational efficiency and staff wellbeing.

The project is currently at Amber status because the Service cannot provide the supplier with a copy of the live database until the Data Processing Agreement (DPA) is signed off. This means the pre-production environment build cannot start and has a knock-on effect to subsequent planned milestones meaning our supplier go live slot will move from September 2026 to October 2026. The route to green is dependent on timely sign-off of the DPA by the supplier. The supplier has committed to maintaining the current GRS provision until the cloud migration is complete so there is currently no known risk to continued SAS use of GRS due to the delays in this project.

4.3.3 Workforce Planning & Performance monitoring

In recognition of a projected surplus in Paramedics from August 2026, we have been working closely with Scottish Government and our partners to consider how Paramedics could be utilised more widely in the Healthcare system to support the delivery of multi-disciplinary teams within urgent and primary care.

Workforce projection scenarios have been developed to assist the Scottish Government in planning and determining future university intake requirements for paramedics over the next 3 to 10 years.

A workforce dashboard has also been developed to provide insight into current and historical workforce headcount, whole time equivalents, turnover, and recruitment with the capability to drill down into workforce demographics and levels within the organisation.

Since the last update to the Board, significant progress has been made on development of the 3-year Workforce Plan. The Workforce Plan for 2026-2029 was submitted as a working draft to Staff Governance Committee (SGC) in March and further efforts are now underway to refine and finalise the plan.

Discussion have been taking place, and remain ongoing, with key internal stakeholders around current and future workforce projections, design, and composition of our future workforce.

Following the last update to the Board, progress continues to be made on the refinement and finalising of the 3-year Workforce Plan. A revised draft of the Workforce Plan will be submitted to the SGC on 04 June 26 for further review and a final version of the plan for approval drafted thereafter.

4.4 Projects in the Red Status

4.4.1 Air Ambulance Implementation

Following the update at the last Board meeting, notification has been received from the supplier noting that the delayed fixed wing (King Air) aircraft 2 and 3 will be delivered in September and October respectively. The supplier will provide a paper outlining the impact and implications to SAS but to mitigate any operational issues, the supplier has confirmed that all fixed wing aircraft will remain in service beyond the new contract start date (July 26) until such times all new aircraft are delivered into service. Fixed wing aircraft 1 has arrived in the UK and is undergoing internal fit.

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The internal fit for rotary (H145) aircrafts 1 and 2 has commenced.

The plan will be re-baselined on confirmation of the new delivery dates.

4.5 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.

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**Scottish
Ambulance
Service**

Working in Partnership with Universities



Service Board Portfolio Summary Pack

May 2026

Reporting as at 20 April 2026





Portfolio Summary

Reduced Working Week – Reduction of the Working Week remains a key priority. Following earlier delays due to the complexity of creating around 4,000 rosters, intensive governance, daily operational support and additional training were put in place to support Go Live. Most rosters went live on 4 May 2026, with only three remaining, which are expected to go live by 18 May 2026. The programme will then move to complete final administrative tasks and to capture lessons learned before closure.

Scheduled Care Improvement – The Scheduled Care Improvement Programme continues to advance in several key areas, including recruitment, pathway design, and technology. Ambulance Care Assistant (ACA) training is currently in progress, and a nationally standardised Timed Admissions pathway has been refined, with implementation materials now being developed. Technology solutions are being reviewed and finalised. The Transport Hub project is also performing well, with several regional hubs now operational. Key performance indicators are being met, the reliance on private ambulances has been consistently reduced and funding has been secured for the 2026/27 period on one of the hospital sites. Further progress is being made on planning for future fleet requirements, developing the renal transport pathway and reviewing scheduled care training as well as the role of the ACA.

Air Ambulance Implementation - The Air Ambulance programme is advancing, with King Air and H145 aircraft moving through preparation and fit-out phases, albeit with manufacturer-related delays impacting later aircraft deliveries. Estates works is progressing at key bases. To mitigate the delay in 2 of the 3 fixed wing aircraft, the supplier has agreed that the existing fleet of fixed wing aircraft will remain in service until such times, all new fixed wings aircraft have been received. The Patient Loading System design mock-up has been tested. This has been viewed by SAS staff onsite on 10th March 2026 and accepted by operational and Health & Safety representatives as being fit for purpose as presented. Five PLS are being manufactured. This will provide spares in the event of any damage to parts.

Rest Break Project - The principle of no one working more than 6 hours has been established. The Special Break has been re-introduced and amended. The Rest Break Working Group has reviewed shift codes and rationalised them. A new process to manage codes has been introduced. Further reviews of areas with a high level of missed rest breaks has not shown a meaningful correlation with any one factor and is due to a large range of challenges. A staff survey has been sent out to staff and results reviewed. The Test of Change (ToC) SOP has been agreed and the ToC started on April 14th.

Maternity & Neonatal Project - Progress on the national rollout of The Best Start remains unchanged, with ongoing engagement between ScotSTAR, SSD, SAS regions, and the Scottish Government through the Task and Finish Group—whose next meeting is postponed to 28th May. The Neonatal Transport Service has completed a workforce review, selected preferred service models, and is finalising its business case.



Integrated Planned Urgent and Unscheduled Care Portfolio Report – 2030 SSG



Portfolio Lead:

Paul Bassett

Period covered:

21 Mar to 20 Apr

Portfolio RAG

Portfolio Timeline

Project / Activity	Start Date	End Date	Project Health		2025/26									26/27			27/28			
					2025/26			2026/27			2026/27			26/27	27/28					
					Q4	Q1	Q2	Q3	Q4	Q1										
RAG & Trend	Key Controls	Jan-26	Feb-26	Mar-26	Apr-26	May-26	Jun-26	Jul-26	Aug-26	Sep-26	Oct-26	Nov-26	Dec-26	Q4	Q1					
Reduced Working Week	10/07/24	30/09/26	▲	Milestones		<p>Q4 Nov25 Dec25 Jan26 - Working party 2 Feb 26 - RWW Communication Group Mar 26 - Acc Hrs Taken - 25/26 Mar26 - Imp all Sys Updates for 36 HPW Apr26 - Rosters built Apr26 - Rosters Live Apr26 - Handover to BAU & Close</p>														
				Risks (VH&H)	3															
				Issues (H)	1															
				Finance																
Air Ambulance Implementation	01/11/24	30/10/26	▼	Milestones		<p>12/25 02/26 - Aircraft medical interior design 09/04 - Estate changes complete 06/26 - Build & interior fit complete (Rotary) 06/26 09/26 06/26 - Training complete 07/26 - Aircraft in Service (Rotary) 09/26 - Build and interior fit complete (Fixed Wing) 10/26 09/26 - Aircraft in Service (fixed Wing) 11/26 10/26 - Project Close</p>														
				Risks (VH&H)	1															
				Issues (H)	1															
				Finance																
Scheduled Care Improvement	12/06/24	31/03/27	→	Milestones		<p>(WS2) 03/26 TBC - Timed Admissions (WS6) 04/26 - Future Fleet Requirements (WS1) 04/26 - Recruitment (WS7) 03/26 07/26 - Renal Transportation (WS3) 07/26 - Demand led support for Sched Care (WS5) 03/26 07/26 - QEUH Transport Hub (WS8) 01/27 - Sched Care Trg Prog 03/27 - Project Close</p>														
				Risks (VH&H)	0															
				Issues (H)	0															
				Finance	N/A															
Maternity & Neonatal	24/07/20	31/08/26	→	Milestones		<p>06/26 - Business Case Developed 08/26 - Project Close</p>														
				Risks (VH&H)	0															
				Issues (H)	0															
				Finance	N/A															
Rest Break	28/09/22	31/07/26	→	Milestones		<p>10/25 01/26 03/26 04/26 - Trial of change starts 04/26 05/26 - Trail ends 06/26 - SOP updated 07/26 - Group closed</p>														
				Risks (VH&H)	0															
				Issues (H)	0															
				Finance	N/A															



Portfolio Summary

Volunteer Enhancement project – Good progress continues in strengthening SAS volunteering and community resilience with Wildcat Cardiac Responders fully integrated and a dual responder model adopted nationally. The Volunteer Enhancement Project is progressing, including completion of the MIS Responder App pilot and approval for a phased rollout from summer 2026. Volunteer activity has risen sharply, with significant increases in call attendance and expanded roles such as blood glucose monitoring and support for non-injury falls. Volunteers are providing valuable early care and clinical information, while engagement and governance continue to develop through forums, collaborations, and staff outreach.

Mental Health - Progress on the mental health strategy remains robust, with milestones reviewed and updated to support ongoing delivery through to March 2027. Annual work plans are aligned to broader SAS and government delivery strategies, ensuring sustained refinement. Partnerships are vital, with regular governance meetings and collaborative efforts to ensure full national coverage for professional support pathways. Quality and culture improvements continue, including trauma-informed approaches and evaluation of mental health response cars. Patient insights are gathered in collaboration with lived-experience organisations, informing action plans at Executive level. Leadership development and national initiatives support sustainability, highlighted by new frameworks and pilot pathways for enhanced mental health support.

Dementia Delivery - Delivery of the National Dementia Strategy and SAS 2030 Strategy is advancing, with approval of the SAS Dementia Delivery Plan for 2026/27. The plan lays the groundwork for infrastructure, priorities, and future medium-term planning. Key initiatives include the Herbert Protocol pilot, enhanced data, workforce education, and national awareness campaigns. Governance and partnerships are strengthening through representation on national groups and collaboration with UK-wide and Tri-Service partners. Dementia education is being embedded for Ambulance Care Assistants, with ongoing engagement of lived-experience organisations. Early data analysis and tests of change aim to improve understanding and service delivery for people living with dementia.

South Station - The project team have established the project objectives, and the project brief has been approved. PID was approved 27th February 2026. Estates and Engagement work packages have been compiled and approved. Modelling for alternative sites has been completed and reviewed for suitability and a subsequent land trawl commission has been reviewed and evaluated. Approaches to community and staff engagement are being reviewed and implemented. Stakeholder analysis has been completed and will continue to be updated as the project evolves.



Portfolio Summary (Cont'd)

Young Minds Saves Lives - The Young Minds Save Lives (YMSL) programme in Glasgow is progressing, with delivery expanding to three more secondary schools, aiming to reach about 1,100 students by June. Increased staff involvement is being trialled for sustainability. Community engagement is strong and a community engagement framework is in development to guide regional activity. Career pathway efforts remain impactful, including a successful King's Trust employability programme and new national funding for NHS career pathways. Expansion continues in Dundee and Angus, where new mental health resources are nearly ready and the first out-of-Glasgow delivery has been well received. Staff involvement is rising, particularly through frontline A&E staff supporting delivery. Funding applications are underway to support further expansion, including in Dundee and Angus.

Sustainability / Net Zero - The 2026/27 Decarbonisation Bid, aiming to fund the Livingston Renewable Energy Pilot Project, has been paused following a temporary rejection of the initial proposal. The Scottish Government welcomes the project's ambition but believes the scope should be broader, incorporating further building efficiency measures such as window replacement and insulation. They are considering what support they can offer SAS to help develop a more comprehensive plan.



Communities and Place Portfolio Report – 2030 SSG



Portfolio Lead:

Emma Stirling

Period covered:

21 Mar to 20 Apr

Portfolio RAG

Portfolio Timeline

Project / Activity	Start Date	End Date	Project Health		2025/26									2026/27			26/27	27/28								
					Q4			Q1			Q2			Q3			Q4	Q1								
					Jan-26	Feb-26	Mar-26	Apr-26	May-26	Jun-26	Jul-26	Aug-26	Sep-26	Oct-26	Nov-26	Dec-26										
Volunteer Enhancement	01/03/25	31/03/27	→	Milestones											07/25 10/25 03/26 09/26 - Explore opportunities to use new technology to support the enhanced deployment of volunteers			03/27 - Implement preferred option from the Strategic Review								
				Risks (VH&H)	0										07/25 10/25 03/26 09/26 - Explore further opportunities to extend the role of CFR's			03/27 - Engage partner orgs to scope potential collaborative opportunities for a broader rollout of Cardiac Responders								
				Issues (H)	2																					
				Finance	N/A																					
Mental Health Strategy Implementation	01/11/22	31/03/27	→	Milestones											03/26/7 - Work with our partners to better understand our populations needs / funding solutions.			12/25 03/26 - Develop a plan to educate our staff			03/27 - Continue prof to prof support on scene					
				Risks (VH&H)	0										03/27 - Dev comprehensive plan - educate our staff in MH											
				Issues (H)	0										03/27 - Utilise findings and recommendations in VOX Scotland report			03/27 - Deliver trg - access to pathway's distress brief intervention								
				Finance	N/A										03/27 - Completion of MH Dashboard			03/27 - Eval MH Para Response Units			03/27 - Continue close work with NHS24, PS, PHS					
Dementia Delivery	01/11/22	31/03/27	→	Milestones											03/27 - Scoping of SAS dementia data, improve understanding of demand experiences of people and families living with dementia			03/27 - Develop dementia awareness inc SAS Staff Network			03/27 - Progress infrastructure to deliver the plan					
				Risks (VH&H)	0																					
				Issues (H)	0																					
				Finance	N/A																03/27 - Develop cross org collaborative working opportunities			03/27 - Project Close		
Sustainability Strategy Development	01/09/22	31/03/27	→	Milestones											03/26 - Deliver 25/26 Sustainability and Net Zero action plan			03/26 - Decarbonisation Project Plan approved by SG								
				Risks (VH&H)	0										02/26 - LED Lighting Project Commence			02/26 - LED Lighting Project Complete			04/26 - Decarbonisation Project commence					
				Issues (H)	0																					
				Finance	N/A																03/27 - Decarbonisation Project complete					
High Intensity Use Service	01/04/26	31/03/27	→	Milestones											06/26 - 3a. Complete recruitment and training of HIU team			03/27 - 3. Improve system efficiency			03/27 - 1a. Grampian Test of Change			03/27 - 1. Enhance Patient Outcomes		
				Risks (VH&H)	0										06/26 - 4a. Stage 1 letter to identified HIU patients not supported			03/27 - 3b. Support the HIU PDG			03/27 - 4. Promote community health			03/27 - 2. Optimise Resource Utilisation		
				Issues (H)	0																					
				Finance	N/A																03/27 - 2a. Work with ACC to apply HIU specific warnings			03/27 - Project Close		



Portfolio Lead:

Julie Carter

Period covered:

21 Mar to 20 Apr

Portfolio RAG

Portfolio Summary

GRS Timecard – The project team is meeting weekly to manage delivery and identify improvements, while the e-rostering team remains heavily engaged in supporting RWW including supporting regional administrators and payroll file production. Supplementary exception reporting with self-service access has been implemented, and the project plan has been re-baselined with a revised go-live date of 1 August 2026 for ACC, PTS and NRRD staff. Agreement on Bank Staff terms and conditions has enabled earlier onboarding, with resources and timelines confirmed to support onboarding from 1 June.

Artificial Intelligence in the Ambulance Control Centre – The AI in ACC project has completed its delivery phase following formal governance and information governance approvals. Data transfer activities commenced in April 2025 and concluded in September 2025, with sufficient data matching achieved to enable model training despite initial challenges. The project has since been re-baselined to allow for benefits analysis, and a final evaluation paper, co-written with the supplier, was submitted for senior review in March 2026 with next steps being agreed through follow-up discussions with the clinical team.

GRS Cloud Migration – The GRS Cloud Migration project is currently Amber due to delays in signing off the updated Data Processing Agreement, which is required before a copy of the live GRS database can be provided to the supplier. This delay resulted in the service missing its original September slot, with the target go-live now October 2026. Planning assumptions are that testing will commence in early June, subject to DPA sign-off and data provision. The route to green is dependent on timely agreement of the DPA and improved engagement from the supplier to support test planning and delivery. The supplier has committed to maintaining current GRS provision until the cloud migration is complete so there is currently no known risk to continued SAS use of GRS.

The DDIR portfolio has several 'pipeline' projects coming through including SAS Data Improvement and the SAS Emergency Service Network (ESN) Programme, these will be covered in future reports as and when they come 'on-stream'.



Digital Data Innovation and Research Portfolio Report – 2030 SSG



Portfolio Lead:

Julie Carter

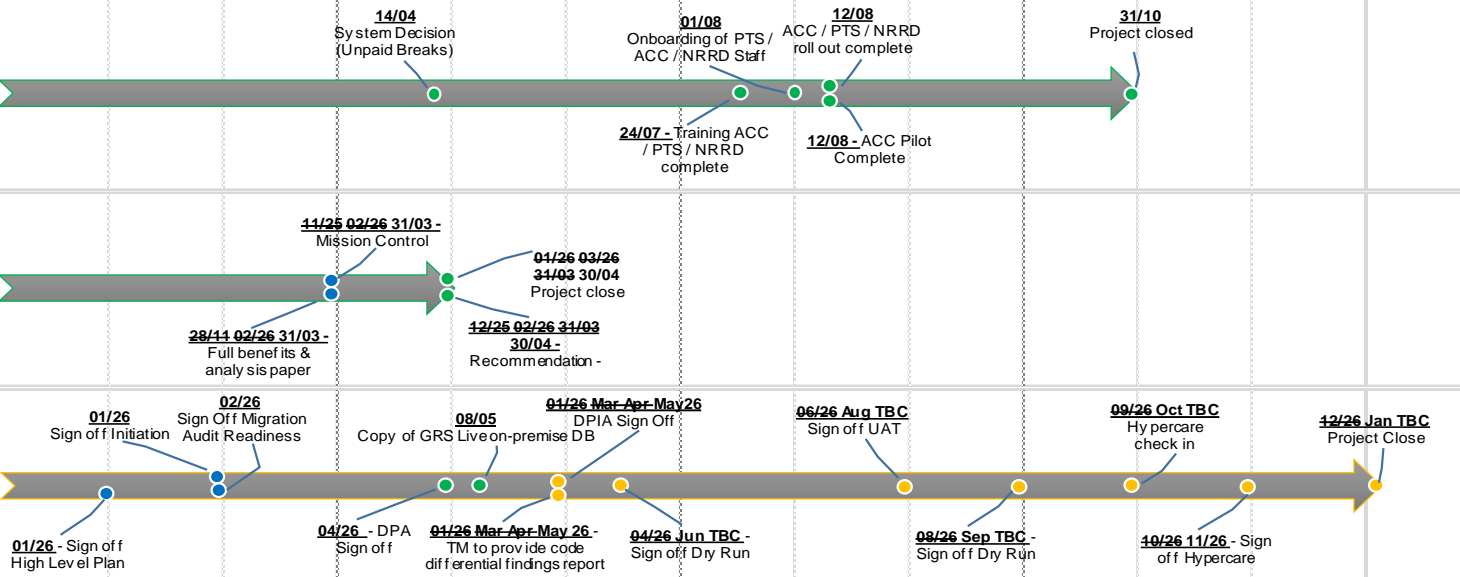
Period covered:

21 Mar to 20 Apr

Portfolio RAG

Portfolio Timeline

Project / Activity	Start Date	End Date	Project Health		2025/26									26/27	27/28			
					Q4			Q1			Q2			Q3			Q4	Q1
					Jan-26	Feb-26	Mar-26	Apr-26	May-26	Jun-26	Jul-26	Aug-26	Sep-26	Oct-26	Nov-26	Dec-26		
GRS Timecard and App	09/09/22	31/10/26	→	Milestones														
				Risks (VH&H)														
				Issues (H)	2													
				Finance	N/A													
AI in the ACC	31/10/24	30/04/26	→	Milestones														
				Risks (VH&H)	0													
				Issues (H)	0													
				Finance														
GRS Cloud	01/11/25	31/01/27	→	Milestones														
				Risks (VH&H)	3													
				Issues (H)	2													
				Finance														





Portfolio Summary

Population Health –Scotland’s Population Health Framework was published in June 2025. This is a 10-year plan that links with the NHS Scotland Operational Improvement Plan, and Scotland’s Health and Social Care Renewal Framework. Each of these have synergies with SAS 2030 Strategy. The relationships and interdependence between these have been presented and discussed at the SAS Clinical Governance Committee, and SAS Engine Room.

Stakeholder engagement priorities are to establish links with public health teams in each territorial health board, in addition to Health and Social Care Partnerships, primary care and community planning teams.

Collaborative opportunities have been established within NHS Forth Valley, NHS Fife and West Dunbartonshire HSCP. The intention is to demonstrate and evidence with these partners how ambulance data can be used to inform system design, community planning and tackle healthcare inequalities. This can then be shared with other boards for similar collaborations. Other collaborative opportunities are being identified with third sectors organisations who have a focus on prevention of harm from a range wider determinants. Additionally, reaching out to other UK ambulance trusts is planned in order to understand UK developments.

Staff engagement and development in relation to public health, health inequalities, and proactive and preventative practice has commenced through face-to-face CPD sessions and signposting to Public Health Scotland online learning.

Out of Hospital Cardiac Arrest – The OHCA programme has secured national recognition and funding to scale CARE Zones and public access defibrillation, alongside continued development of GoodSAM, high-performance CPR, ECPR and bystander aftercare.

Stroke and Thrombectomy –The project is achieving ongoing improvements in pre-hospital stroke recognition and access to urgent treatments through strong multi-agency collaboration. Key objectives are progressing well, despite some delays caused by delays in receiving national planning information. Video triage has improved early stroke identification, with future models under review. Mobile CPD modules for hyper-acute stroke are on schedule. Local pilot projects, such as the ED bypass at University Hospital Crosshouse and pre-alert improvements with NHS Lothian, are underway. The project also participates in national pathway reviews and explores new referral and technology-driven initiatives, while remaining focused on practical, clinically valuable enhancements to stroke care in Scotland.



Portfolio Summary (Cont'd)

Palliative and End of Life Care - Progress in the Just in Case (JIC) medication workstream remains strong, with a proposal to expand paramedic pouches set for review. If approved, this would ensure comprehensive JIC medication coverage on all ambulances, enhancing community palliative care. Analysis of the new PEoLC screen has revealed growing clinician confidence in using JIC medication and referral pathways, while conveyance rates are reducing. On-scene time shows increasingly complex care for end-of-life patients, emphasising the value of community-based support. The Technician Car Pilot in Ayrshire, extended after early success, has reduced ambulance attendances through effective triage and alternative pathways. Staff confidence in PEoLC is being bolstered via ongoing education and CPD sessions. Efforts to improve patient experience are underway, including plans for sensitive telephone-based feedback. The business case to secure recurring funding is due to be submitted to Scottish Government by the end of May 2026.

Drug Harm Reduction – The Drug Harm Reduction Team has established strong multi-agency partnerships, including the Scottish Government, NHS boards, and Police Scotland. National roll-out of Take Home Naloxone (THN) is underway with all stations holding stock and training offered to all clinicians. The near-fatal overdose pathway connects at-risk individuals to statutory services within 72 hours. There are now more partners available for preventative referrals, supported by the SAS Pathways Team. Implementation of Injecting Equipment Provision (IEP) has started across regions. The TRUST educational campaign launched in Fife schools, and the Drugs Early Warning (DrEW) system has been developed.

Major Trauma – The Critical Care Desk Review project is focused on enhancing ICT for major trauma patients by improving clinical advice and care, with efforts underway to refine clinician rosters, tasking, documentation, service structure, and call audits. The project will conclude in June 2026 with a comprehensive report. The SAS central major trauma team continues to work on the STN Service Specification, incorporating feedback from peer reviews and aligning recommendations. Patient outcome feedback processes established in the South-East are being trialled in the East, with input awaited from trauma networks. Green Tier Engagement involves ongoing CPD sessions for staff to boost knowledge and gather support needs. A recent Peer Review at ScotSTAR base yielded positive feedback and constructive improvement suggestions, which will inform future service specifications and local plans. The Major Trauma Triage Tool (MTTT) is scheduled for review by a focus group after peer review findings, extending the work into 2026/27. These initiatives collectively aim to advance major trauma care and service development in Scotland.



Preventative and Proactive Care Portfolio Report – 2030 SSG



Portfolio Lead:

Dr Jim Ward

Period covered:

21 Mar to 20 Apr

Portfolio RAG

Portfolio Timeline (Cont'd)

Project / Activity	Start Date	End Date	Project Health		2025/26									2026/27					
					Q4			Q1			Q2			Q3			26/27	27/28	
					Jan-26	Feb-26	Mar-26	Apr-26	May-26	Jun-26	Jul-26	Aug-26	Sep-26	Oct-26	Nov-26	Dec-26	Q4	Q1	
Drug Harm Reduction	01/04/26	31/03/27	→	Milestones											03/27 - Deliver a coordinated national prog to reduce drug related harm			03/27 - Contribute to a whole system, PH approach	
				Risks (VH&H)	0	03/27 - Plan prog delivery based on anticipated SG funding for 26/27													
				Issues (H)	0	03/27 - Ensure work is directly aligned to SAS strategic role in reducing health inequalities													
				Finance	N/A														
Major Trauma	01/04/25	31/03/26	→	Milestones		03/26 - Work with STN and STAG to review STN pre hosp KPIs									03/25-11/25 03/26				
				Risks (VH&H)	0	03/26 - Complete peer review of pre hosp Major Trauma Services									06/26 - CCD 2yr review				
				Issues (H)	0	03/26 - Engage with SAS green tier to establish need and required support to develop Major Trauma clinical care.													
				Finance	N/A														



Portfolio Summary

Health and Wellbeing Project – Milestones for 2026-27 are being refined to align with ongoing cultural changes and will feature in the next report. The April edition of Live Well Work Well promoted autism and bowel cancer awareness, World Health Day, and upcoming wellbeing activities, with a call for staff volunteers. Six staff will join the Leading of the Future Senior Leadership Programme in September. Since December 2025, 170 staff have benefited from the Staying Well Service, with mental health referrals making up 76%. The Wellbeing Team now delivers training formerly provided by Lifelines. A joint development workshop for Highlands & Islands Team Leaders was delivered, with three more planned. The Endowment Management Group have approved a number of wellbeing initiatives. Healthy Culture Week is scheduled for June 2026. One OD Lead and two Wellbeing Leads will deliver sessions during National Wellbeing Week, and leadership programme accreditation options are being explored further.

Workforce Planning and Performance Monitoring Project – The outline for the SAS 3-year Workforce Plan for 2026-2029 was submitted to Staff Governance Committee (SGC) in December 2025 and a direction of travel was agreed. The draft 3-year WFP was submitted to Staff Governance Committee in March 2026. SGC were content with the plan and requested a shorter summary version of the final document be developed. Some of the content is based on agreed service models with Regional Leads) and aligned to the final ADP/MTP and SAS 3-year Finance plans.

Attendance Management – The Attendance Management survey was completed, with findings shared and informing future work. An end-to-end review of the Attendance Management process has also concluded, integrating engagement, data, and operational insights. Two wellbeing initiatives—access to services and self-help resources—are finished and await publication on SharePoint, pending communications capacity. Additional work packages, including manager guidance and training, are progressing towards completion by the end of May, with training scheduled for June. Attendance data is being used to support broader Health & Safety and wellbeing research, and discussions have begun on a national sickness absence model. A high-level Attendance Management dashboard has been launched. Risk management and governance have been actively maintained, escalating constraints as needed. Overall, the project remains on track, linking staff feedback and data to planned delivery activities for the next phase.



Workforce and Wellbeing Portfolio Report – 2030 SSG



Portfolio Lead:

Graeme Ferguson

Period covered:

21 Mar to 20 Apr

Portfolio RAG

Portfolio Timeline

Project / Activity	Start Date	End Date	Project Health		2025/26									26/27	27/28	
					2025/26			2026/27			2026/27			26/27	27/28	
					Q4	Q1	Q2	Q3	Q4	Q1						
RAG & Trend	Key Controls	Jan-26	Feb-26	Mar-26	Apr-26	May-26	Jun-26	Jul-26	Aug-26	Sep-26	Oct-26	Nov-26	Dec-26	Q4	Q1	
Health & Wellbeing	01/04/21	31/03/27	→	Milestones		<p>03/26 - Develop our workforce knowledge & skills and signpost further support avail and how to access it.</p> <p>03/26 - Expand the range of wellbeing support</p> <p>03/26 - Develop our leadership, enable leaders to become more evidence and data driven in our approach to creating a healthy workplace.</p> <p>03/26 - Increase the number of staff who feel valued at work.</p> <p>03/26 - create awareness and understanding of the range of health & wellbeing support avail and how to access it.</p> <p>03/26 - Become more evidence and data driven in our approach to creating a healthy workplace.</p>										
				Risks (VH&H)	0											
				Issues (H)	0											
				Finance	N/A											
Workforce Planning and Performance Monitoring	01/03/24	TBA	→	Milestones		<p>03/26 - Draft WF Plan for comment (SGC)</p> <p>TBA - Final WF Plan for comment (SGC)</p> <p>12/25 - WF Plan 26-29 update for SGC</p> <p>06/26 - Draft WFP for comment (NPF, SGC, Board)</p>										
				Risks (VH&H)	0											
				Issues (H)	1											
				Finance												
Attendance Management	02/10/25	TBA	→	Milestones		<p>01/26 - PID approved by Prj Board</p> <p>02/26 - Work packages written and agreed</p> <p>03/26 - National attendance management survey complete</p> <p>03/26 - End to end process review</p> <p>05/26 - Wellbeing toolkit and sharepoint support</p> <p>06/26 - Manager toolkit, sharepoint and training designed</p> <p>03/27 - All workpackages complete and launched</p>										
				Risks (VH&H)	1											
				Issues (H)	0											
				Finance												