



NOT PROTECTIVELY MARKED

MINUTES OF THE 197TH PUBLIC MEETING OF THE SCOTTISH AMBULANCE SERVICE BOARD

1000 HOURS ON WEDNESDAY 27 JULY 2022

MS TEAMS

Present:

Board members: Tom Steele, Chair (Chair)
 Julie Carter, Director of Finance, Logistics & Strategy
 Stuart Currie, Non Executive Director
 Pauline Howie, Chief Executive
 Cecil Meiklejohn, Non Executive Director
 Irene Oldfather, Non Executive Director & Vice Chair
 John Riggins, Employee Director
 Carol Sinclair, Non Executive Director
 Madeline Smith, Non Executive Director
 Dr Francis Tierney, Non Executive Director
 Dr Jim Ward, Medical Director

Regular attendees: Paul Bassett, Chief Operating Officer/Deputy Chief Executive
 Matt Cooper, Director, National Operations
 Frances Dodd, Director of Care Quality & Professional Development
 Kenny Freeburn, Regional Director, East
 Mark Hannan, Head of Corporate Affairs & Engagement
 Avril Keen, Director of Workforce
 Lindsey Ralph, Board Secretary
 David Robertson, Regional Director, West
 Milne Weir, Regional Director, North

In Attendance: Rebecca Board, Risk Manager (Item 6)
 Karen Brogan, Associate Director, Strategy, Planning & Programmes (Item 7)

WELCOME AND INTRODUCTION

The Chair welcomed everyone to the 197th Scottish Ambulance Service Board meeting. Apologies were noted from Liz Humphreys and John McGuigan, Non Executive Directors.

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ITEM 01 PATIENT STORY

The patient story was viewed by Board members in advance of the meeting. Jim Stevenson, a Largs resident shared his experience of the Scottish Ambulance Service Community First Responder who had saved his life after he had a cardiac arrest at a golf club. He was due to meet his friend and Largs Community First Responder, Alister Brown but collapsed shortly after arriving at the golf club. Alister, who has been a Community First Responder since 2007 was trained to deal with incidents, such as cardiac arrests and strokes, and immediately came to his friend's aid to perform early life-saving CPR. A public access defibrillator on the premises was quickly deployed and a 999 call was made. Jim regained consciousness just at the time the crews arrived on scene.

Board members agreed that Jim's story demonstrated the vital and significant link Community First Responders made to positive patient outcomes and expressed how valued they were by the Service. They also recognised that as bystander CPR was administered by someone who is physically close to the situation, it would often mean that the person administering it would know the person and the emotional factors that could be experienced.

Stuart Currie referred to a partnership approach in terms of preventative measures and asked if the Service had undertaken a risk assessment in Scotland's communities where the demographics of an ageing population were higher and could be targeted with public access defibrillators or community first responders at specific geographical areas to reduce the associated risks.

Jim Ward described the Service's work, with partners, to address inequalities in OHCA outcomes and increase survival rates. He referred to the availability of Public Access Defibrillators by using the Service's data to help inform communities where best to place the devices, encouraging 24/7 accessibility and promoting registration of devices to enable the Ambulance Control Centre to quickly direct bystanders.

Board members were delighted to hear that Jim had recovered well at home and the Chair passed on the Board's thanks to Jim and Alister for sharing their experience.

ITEM 02 DECLARATION OF INTERESTS

The following declarations were noted: -

- Irene Oldfather - Director of Scotland's Health and Social Care Alliance and Member, Flu Vaccination and Covid-19 Vaccination Programme Board (FCVC)
- Madeline Smith – Board member, Digital Health and Care Innovation Centre
- Carol Sinclair – Chief Officer, Public Health Scotland and Trustee, Scotland's Charity Air Ambulance
- Stuart Currie- Non Executive Director, State Hospital
- Paul Bassett – Trustee, Scotland's Charity Air Ambulance

ITEM 03 MINUTES OF MEETING HELD ON 25 MAY 2022

Board members approved the minutes.

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ITEM 04 MATTERS ARISING

Board members approved the removal of matters arising 193/7/8, 194/6/5ii, 194/8/9i, 194/8/9ii, 194/8/9iv, 195/5/5, 195/6/6, 195/6/6ii and 195/6/10.

ITEM 05 BOARD QUALITY INDICATORS AND PERFORMANCE REPORT

Pauline Howie reported on performance and improvements across a range of measures to 30 June 2022. She highlighted that while NHS Scotland's emergency footing arrangements had ended on 30 April 2022 and the Service's escalation levels had reduced from its highest level of escalation in the reporting period, performance reflected the wave of COVID-19 that had peaked in mid-June. Board members noted that although COVID-19 absence related levels had gradually started to improve, the reporting period coincided with peak annual leave season and wider health and social care workforce abstractions which had impacted on pressures across the whole system.

Board members were pleased to note the Service's performance for 30 day survival rates, ROSC and trauma and that the Service continued to save more lives and manage more patients in community settings through its hear, see and treat referral pathways.

Board members noted progress with the Service's Demand and Capacity programme which remained on track and the Programme Board meeting in July had discussed the benefits realisation plans related to this. The additional 162 staff that were in Phase 3 of the Service's original business case had been recruited and were in training and 92 station rosters were now live, with new shifts that aligned more closely to demand patterns.

Board members noted that the Service had started to decommission the mobile testing units and would maintain surge capacity in 5 mobile testing units to end September 2022. Pauline Howie confirmed for those staff who wanted to continue to work in health and social care beyond September, the Service was working closely with its partners to consider potential career opportunities both within the Service and the wider health and social care system.

Pauline Howie brought to Board members' attention the welcomed improvement in scheduled care cancellations which had reduced, and as a result of the prevention of infection control arrangements continuing to develop, there was more capacity on vehicles to support patients to attend their elective treatments.

Board members' discussion then focussed on increased hospital turnaround times which remained a significant risk to the Service. Pauline Howie advised that the Service continued to engage with those hospital sites experiencing the greatest challenges and there were a range of measures that those health boards were taking as part of the Integrated Urgent and Unscheduled Care Collaborative to support with flow, discharges and other improvements that could make a positive difference.

The Chair expressed his thanks to the Executive Team for their continued efforts to identify and introduce different ways of working to reduce hospital turnaround times given the significant impact this had on patient and staff experience. He referred to the ongoing impact on the Service's ability to respond and on other performance measures related to patient and staff safety. He remained concerned that hospital turnaround times continued to increase despite a range of interventions being put in place over a sustained period of time.

Pauline Howie described similar pressures being experienced across the UK and globally. Referring to the work being progressed through NHS Scotland's Integrated Urgent and

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Unscheduled Care Collaborative she reported that 8 high impact changes had been identified through modelling that should significantly improve flow across the system. As a National Board, the Service was sharing examples of good practice to reduce the patient safety risks for patients who were waiting for an ambulance in community settings as well as those waiting in ambulances before handover to the clinical care of colleagues in emergency departments. She assured Board members that this remained a top priority for the Service and the Board would be kept informed through the Board weekly updates.

In response to a question from Francis Tierney about the options that would be considered for ICCS provision following the June implementation date being missed, Paul Bassett described the actions taken by the Service and the timescale set of 19 August 2022 for the issues to be resolved. Board members noted that a further update would be provided to the Board at its meeting in September 2022.

Following a question raised by Francis Tierney about the Ambulance Control Centre work to safety net patients with an unknown stroke symptom onset time but last seen well time, Jim Ward described the interventions the Service was looking at to gain further information to ensure these patients were triaged in the appropriate response category. It was noted that further detail related to this would be shared with the Clinical Governance Committee.

Madeline Smith referred to the challenges being experienced with increased hospital turnaround times on staff experience and asked for an update on the actions the Service was taking to reduce excessive shift overruns and relieve crews where this was not possible. Pauline Howie and Paul Bassett described the escalation processes in place and the improvement actions which included frequent monitoring of shift overruns and the introduction of swapping crews over. Board members noted that while there continued to be significant challenges in some areas, with the improvement actions, there had been a reduction in shift overruns over the last 2 months. The Service continued to work closely with its staff partners on this issue.

Madeline Smith referred to the de-escalation from REAP level 4 and noted the reintroduction of leadership learning and development within the Service and asked what other elements of training were being restarted. Frances Dodd referred to Statutory and Mandatory training and Learning in Practice and confirmed that arrangements and timescales for this was being progressed through the Executive Team with a paper being presented at its next meeting on 2 August for discussion.

Board members **noted** the report.

ITEM 06 CORPORATE RISK REGISTER (PUBLIC)

Rebecca Board joined the meeting for this item. Julie Carter referred to the paper and highlighted the change in the risk rating of the financial risk and provided assurance to the Board of the monitoring arrangements of the action plans to mitigate against this risk.

The Chair thanked Julie Carter and Rebecca Board for the continued improvements in the format and presentation of the Corporate Risk Register and the work to align the Board and Committee papers to the corporate risks which provided a further level of assurance to the Board to support its decision making. Board members welcomed the dynamic nature of the risk register to support its discussion and decision making at meetings.

In support of a point raised by Madeline Smith regarding the Board's risk tolerance levels, given the dynamic nature of the risk register, the Chair requested that the Board reviewed its risk

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appetite on a more frequent basis than annually to ensure it reflected the current situation. It was agreed for the 2022/2023 year this review would be progressed through the October Board Development session in advance of winter and reported to the Board meeting in November 2022.

In response to a question raised by Carol Sinclair about how the Board could be assured that the controls and completion of the mitigation actions would achieve the tolerance levels agreed by the Board, Julie Carter confirmed that given the current system pressures within which the Service was operating, it would be timely to test this out again with the action owners and provide an update to the Board.

Board members **approved** the Corporate Risk Register.

Action:

1. **Board Secretary and Director of Finance, Logistics & Strategy** – to include a review of the Board's risk tolerance levels on the October Board Development session agenda.

ITEM 07 DRAFT 2030 STRATEGY

Karen Brogan joined the meeting for this item. Pauline Howie expressed her thanks to Karen Brogan and her team for their work to progress the Strategy to this stage. Given the pandemic and the changing situation and context within which the Service had been operating, the development of the Strategy had been an iterative process and she thanked Board members for their feedback received to date which had been considered and reflected in the final document being presented at this meeting for approval.

Board members noted the strategy had taken cognisance of the wider reform plans that were being developed at a national government level to ensure it was aligned as best as possible to these. The strategy would be supplemented by a 3 Year Delivery Plan that would be presented to the Board for approval in January 2023, in line with Scottish Government guidance.

Karen Brogan provided a summary of the key points and referred to the consultation process with citizens, staff, partner organisations, volunteers, local and national government, educational institutions, community groups, charities and voluntary organisations.

Board members thanked the team for their work to develop the strategy. It was noted that following approval by the Board, the supporting governance arrangements and portfolios of work were being developed through the Service's 2030 Strategy Programme Board and it noted that that these would be shared with the Board at its meeting in September 2022.

Board members **approved** the strategy subject to consideration of further refinements suggested by Board members below

- Further consideration about how the growing diversity of Scotland could be better reflected
- The vignettes would be reviewed to ensure that these were both aspirational and realistic.

Board members noted that the approved strategy would be presented in a user friendly format, and it was anticipated that it would be launched in August 2022.

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ITEM 08 FINANCIAL PERFORMANCE

Julie Carter provided a summary of the key points from the paper and Board members noted the financial position which showed a deficit of £4 million against a trajectory deficit of £1.4 million, the efficiency savings position and the financial impact of COVID-19 expenditure and funding.

Board members noted the Service continued to forecast a breakeven position for financial year 2022/23 although the risk rating to achieve this had been increased given the full impact of COVID-19 funding and the rising cost of fuel.

Board members discussed the achievement of efficiency savings which continued to be a significant risk and the work that was being progressed to implement the agreed plans at pace.

Board members received assurance from Julie Carter that the full financial impact of system pressures and COVID-19 continued to be closely monitored and given the tight financial position across the public sector, monthly detailed reporting to Scottish Government would be put in place for all Health Boards and updates would be shared with Board members for information.

Following points raised by Cecil Meiklejohn about the continued pressures on public sector finance and the increasing challenges in achieving a break even position at year end given the context the Service was working in, Julie Carter confirmed that all boards and public sector organisations would need to make difficult decisions to achieve financial balance and with the approval of the Service's 2030 Strategy and Financial Plan, the Service would be focused on areas that there was potential to drive forward improvements and efficiencies aligned to its strategy.

Following a point made by Carol Sinclair, Board members agreed and welcomed the open and transparent nature of the reporting and updates from the Finance Director to the Board and Audit Committee, that supported the Board in its understanding of the scale of these challenges, and in its role of scrutiny and decision making.

The Chair thanked Julie Carter for her detailed report which highlighted the significance of the challenging context the Service was operating in, and the continual efforts being progressed by the Service to forecast a break even position in this context.

Board members **noted** the report.

ITEM 09 PERSON CENTRED CARE UPDATE

Frances Dodd provided a summary of the main points from the paper and Board members were pleased to note the improvements in complaints compliance reported for Stage 1 and Stage 2 complaints. She thanked Non Executive Directors, Carol Sinclair and Irene Oldfather for their support in developing a new reporting format for the paper to support the Board's scrutiny and decision making.

Board members welcomed the review of the complaints theme related to attitude and behaviour which had increased during the reporting period and noted that the outcome from this review would be reported to the Service's Clinical Governance Committee when complete.

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Madeline Smith referred to the complaints themes and it was agreed that Frances Dodd would provide further information about the increase in the complaints related to triage/referral to NHS 24.

Irene Oldfather referred to the SPSO cases and considered that it was important that the Board received assurance of timely completion of the recommendations and that the Service continued to reflect learning from adverse events. Frances Dodd provided assurance to the Board that the recommendations related to SPSO cases that were outstanding required more complex work and this was being completed.

Stuart Currie commended the Service for the work being progressed with Save a Life Scotland to launch the CPR for Disabled People programme, which was supported by Scottish Government and the Resuscitation Council UK.

Board members **noted** the update.

ITEM 10 PATIENT AND STAFF SAFETY – HAI UPDATE

Frances Dodd provided a summary of the main points from the paper and Board members noted the Service's Infection Prevention and Control Programme for 2022/2024 had been approved by the Infection Control Committee and Clinical Governance Committee.

Board members noted performance against the targets and were pleased to note the Service had maintained its targets of 90% against the National Cleaning Services Specification and overall compliance with the use of the PVC insertion care bundle had been consistently sustained above the quality indicator aim of 95%.

ITEM 11 HEALTH AND WELLBEING UPDATE

Avril Keen provided a summary of the main points from the paper providing an update on activity and progress of the delivery of the Health and Wellbeing roadmap from May to July 2022.

Board members welcomed the report and Carol Sinclair asked for further information about whether the slippage in the delivery of four actions in the first quarter would impact on other action timelines of delivery. Avril Keen advised that this was being closely monitored. She referred specifically to the Lifelines training and confirmed that there had been challenges during the reporting period with staff abstractions which impacted on the Service's ability to release staff. The Service was considering alternative options for providing this training given the rapidly changing environment within which the Service was operating and the anticipated challenges going into the winter period.

Board members **noted** the report.

ITEM 12 CHAIR'S VERBAL REPORT

The Chair reported on recent staff engagement visits to stations in Grampian, Glasgow East and the training education facility in Hamilton.

The Chair provided an update on recent meetings and events attended including the College of Paramedics 20 years celebration, the NHS Scotland Annual Conference and the Cabinet Secretary for Health and Social Care's visit to the Service's ScotSTAR base on 21 June.

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The Chair provided an update to the Board on his involvement in the national work related to innovation and advised members he would keep them updated on developments.

Board members noted that John Riggins, Employee Director's term of appointment had been extended from 1 December 2022 to 31 March 2023 following approval by the Cabinet Secretary for Health and Social Care.

ITEM 13 CHIEF EXECUTIVE'S UPDATE

Pauline Howie reported on recent visits to staff and volunteers in various locations across the Service and was impressed by the range of ideas for improvement that had been shared with her for consideration. She had also welcomed the opportunity to personally thank staff for their support and commitment in these challenging times.

Board members noted the Chief Executive's feedback from the joint meeting held with NHS 24 and the Scottish Government sponsor team, and as two national organisations critical to urgent and unscheduled care, a number of priority areas were agreed with a particular focus on the winter period. A joint SAS and NHS 24 Board meeting to discuss forward planning would be arranged in October/early November 2022 and the Chair invited Board members to attend this session.

Board members noted the Service had met with National Education for Scotland (NES) as part of the Service's formulation of its 2030 Strategy and delivery plans. NES is establishing a Centre of Excellence related to remote and rural workforce and the Service would work with NES in terms of co-design and learning from experience and to understand the opportunities going forward.

Board members noted that the Service's Senior Leadership Team had met in July to agree the key priorities and delivery of these in the context of the current challenges. The Annual Delivery Plan would be presented to the Board in the private session for approval.

ITEM 14 AUDIT COMMITTEE

Board members noted the minutes of 20 April 2022 approved by the Committee on 16 June 2022. Carol Sinclair, Chair of Audit Committee provided an update of the meeting held on 16 June 2022.

Board members noted the Committee:-

- Approved the Risk Management Annual Report 2021/22
- Received a quarterly update report on Risk Management and welcomed the development of the risk dashboard and noted the addition of a new corporate risk ID 5296.
- Reviewed the Staff Governance Committee and Clinical Governance Committee Annual Reports and Terms of Reference which would be presented to the Board for approval.
- Reviewed Internal Audit Report on Ambulance Control Centre Auto Dispatch and discussed the findings and the areas of good practice identified.
- Received Internal Audit's Annual Report 2021/22
- Noted the External Audit Annual Report and Draft Letter of Representation.

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- Reviewed and noted the Endowment Fund Accounts 2021/22 prior to submission to the Endowment Funds Trustees meeting on 29 June.
- Reviewed the Draft Annual Report and Accounts 2021/22 and recommended these to the Board for approval.
- Received two third party Service Audit Activity letters which formed part of the year end assurance processes and noted the positive reports.
- Approved the Letter of Significant Issues for submission to the Scottish Government.
- Reviewed and approved the proposed changes to the SFIs (sections 5, 12, 16 and 17)
- Noted standing updates on Information Governance, Fraud Prevention, Best Value, Whistleblowing, Resilience Committee and Cyber Security.

ITEM 15 STAFF GOVERNANCE COMMITTEE

Board members noted the minutes of 17 March 2022 approved by the Committee on 20 June 2022. Madeline Smith, Chair of Staff Governance Committee, provided a verbal update of the meeting held on 20 June 2022.

Board members noted the Committee:-

- Received an update and action plan from the Service's Partnership Conference held on 1 April and noted that a roadmap plan would be developed to progress the actions and a further conference would be held in November 2022.
- Discussed and noted progress updates in the Staff Governance Action Plan, along with the first draft of the People Plan, with updates on delivery of these plans being presented to Committee throughout the year.
- Agreed that the September Committee meeting would include the Workforce Risk Register as a hot topic item to allow members to undertake a detailed review of the risk register.
- Reviewed the Health and Wellbeing Roadmap and requested that an action plan for measurement was presented to the September Committee to ensure a framework was in place for the Committee to monitor delivery of the plan.
- Noted a paper on Statutory and Mandatory training which outlined the proposed plans and the requirement for this to be aligned to learning management system to maintain and monitor staff training.
- Received update reports on Health and Safety, Demand and Capacity Programme, Learning from Events Group, Partnership, Recruitment Shared Services and Workforce Communication and Engagement.

ITEM 16 BOARD DEVELOPMENT REPORT – JUNE 2022

Board members noted the report.

ITEM 17 DATE OF NEXT MEETING

10 am on Wednesday 28 September 2022 on MS teams.

The Chair closed the meeting and thanked members for their contributions. He recorded the Board's thanks to regular attendee Matt Cooper, Director, National Operations who would leave the Service at the end of July 2022.

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