NOT PROTECTIVELY MARKED

PUBLIC BOARD MEETING	24 September 2025
	Item 06
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. **Table 1 – High Level Summary of Project Status**

Portfolio	Green	Amber	Red	Other
Integrated Planned, Unscheduled & Urgent Care	9			2
Data, Digital, Innovation & Research	7			
Communities & Place	6			2
Preventative & Proactive Care	5			
Workforce & Wellbeing	2	1		2
Totals	**29**	**1**	**0**	**6**

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

The Board is asked to note that a Board Development Session is planned in October to
1. Provide an update on delivery of our 2030 Strategy to date
2. Consider our priorities for delivery in the short and medium term in alignment with the Scottish Government Service Renewal Framework, Operational Improvement Plan, Population Health Framework and Public Service Reform agenda.

Timing	This paper is being presented to the September 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.

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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 29 projects currently in Green status and 1 project in the Amber status for delivery.

Table 1 – High-Level Summary of Project Status

Portfolio	Green	Amber	Red	Other
Integrated Planned, Unscheduled & Urgent Care	9			2
Data, Digital, Innovation & Research	7			
Communities & Place	6			2
Preventative & Proactive Care	5			
Workforce & Wellbeing	2	1		2
Totals	29	1	0	6

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 6 projects across the portfolios that are in the other category. This includes projects in planning stages or projects that have been closed. Details of these are included below.
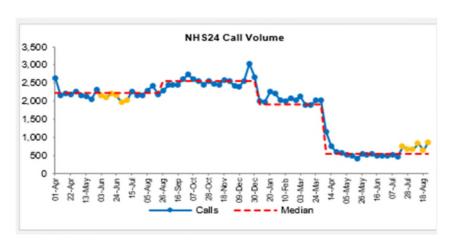
4.2.1   Digital Patient Handover

The NHS24 to SAS digital patient handover was successfully implemented for timed admissions on 3rd December last year and for Non ILT emergencies on 10th April 2025, reducing the requirement for voice calls between services by enabling NHS24 to transfer calls direct to SAS dispatch.

As of 18th August, 4,608 timed admissions and 30,014 non-ILT emergencies had been digitally transferred from NHS24 to SAS.

The average volume of NHS24 calls during the first 4 full months of go live is around 68% less than the average of the first 3 months of the year.

Weekly Call Volume from NHS24

Monthly Call Volume from NHS24

	January	February	March	April	May	June	July	August	Total
All A&E Calls Offered	74009	79982	88261	82086	84316	84507	87566	90392	671119
Other Calls	26764	29166	31531	26499	25293	26446	28324	30144	224167
NHS24 Calls	7462	8265	9181	4503	2258	2275	2542	3535	40021
NHS24 as % of Other	27.88%	28.34%	29.12%	16.99%	8.93%	8.60%	8.97%	11.73%	17.85%

This project has been successfully delivered and approved for closure by the Project Board.

4.2.2 HCP Online Booking

SAS has historically received around 3000 calls per week from Health Care Professionals (HCPs). Implementation of an online booking process for HCPs was expected to reduce the need for voice calls between other healthcare professionals and SAS by automating the process straight to dispatch.

The HCP online booking pilot successfully went live on 18th June last year with Lanarkshire and Greater Glasgow & Clyde. As of 17th August 2025, 5,275 online bookings have made received digitally.

The pilot was expected to be rolled out more widely, however the barrier to delivery is that our current system does not have single sign on capability resulting in the need to implement a labour intensive process creating and maintaining logins for all users across each Board, outweighing the benefits of implementation. The project board has therefor made the decision to close the project.

Discussions with our supplier will continue in the background to determine if and when single sign on will be available in the future.

4.2.3 South Station Delivery & Community Hubs

A formal project Team has now been established to secure the South Station business case agreement, develop a full implementation plan and develop the concept of SAS community hubs.

The team have met to review the project's history, discuss board roles, project objectives, and plan next steps. Key discussions included the importance of a Community Hub, stakeholder engagement, and learning from related projects. The next meeting is scheduled to focus on stakeholder analysis at the end of September 2025.

4.2.4 Anchor Strategic Plan

The Anchor Strategic Plan project was established to develop the anchor plan, supporting metrics and monitoring arrangements for delivery. The plan and metrics have been agreed, and ongoing updates are being submitted to the Executive Team, Board and Scottish Government. It has been agreed that the project for this can be closed, however it is important to note that monitoring will continue on a business as usual basis with regular updates to the Executive Team and Board. In addition to this and given that delivery of our

anchor plan spans across all of our portfolios and business as usual improvement, further work is being undertaken to assess how we streamline reporting.

4.2.5 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. Key milestones for this were due to be developed by the end of August 2025 but are running behind track. Milestones for this are now expected to be drafted by the end of October 2025.

4.2.6 Workforce Planning & Performance monitoring

There have been delays in agreeing key milestones for this due to absence within the HR Team.

A meeting was held with Interim Director of Workforce, Director of Strategy, Planning & Programmes, Head of Workforce Planning & Chair of Staff Governance committee to discuss the progress to date and actions that can be taken forward in the short term to provide additional assurance.

In the absence of the Head of Workforce Planning, a lead has been appointed to take forward development of the workforce plan in alignment with the 2026/27 Annual Delivery Plan, 3 Year Medium Term Plan and Financial Plan timelines for delivery.

4.3 Projects in the Amber Status

At the July Board meeting it was highlighted that there were 3 projects in the Amber Status for delivery, Air Ambulance Contract Implementation, Reduced Working Week and GRS Timecard. As reported to the Board in July, all 3 projects had plans and were expected to be back to Green. As of this reporting period, these 3 projects are now back on track.

The Turas Learn & Development project is however now in Amber status.

4.3.1 Turas Learn/Statutory & Mandatory Training Development (Phase 2)

Phase 2 of the Turas Learn & Development project was established to develop and agree course content for Statutory & Mandatory Training.

Manual Handling and Violence Prevention and Reduction courses have been running from 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 and available on the system.

The project was in amber status due to a delay in the development of the role specific content for statutory and mandatory training, however, this has now been finalised, and a paper was presented to the Executive Team on the 2nd of September.

4.4 Projects in the Red Status

During the last reporting period to the Board, the rest period improvement project and HCP online booking were both in red status for delivery.

4.4.1 HCP Online Booking

As highlighted earlier in this report, the HCP online booking pilot project cannot be progressed further at this stage due to the system not having single sign on capability and is therefore being closed.

4.4.2 Rest Period Improvement

There has been progress made in relation to agreement on the next stages of the rest period improvement work.

Since the last update to the Board, a new Rest Break working group has been formed, and will report into the existing Rest Break Oversight Group. The group will focus on working together to explore further opportunities to improve rest period compliance.

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.

4.6 Scottish Government Publications

In light of the publication of Operational Improvement Plan in March and Service Renewal Framework, Population Health Framework and Public Sector Reform, work has been underway to review alignment with our 2030 Strategy and delivery plans and to assess any action that SAS will need to take to support and enable delivery with our partners.

Details of these will be worked through at a Board development session in October.

Service Board Portfolio Summary Pack

September 2025

Reporting as at 18 August 2025

Integrated Planned Urgent and Unscheduled Care Portfolio Report – 2030 SSG

| Portfolio Lead: | Paul Bassett | Period covered: | 22 Jul to 18 Aug | Portfolio RAG | |

Portfolio Summary

The Reduced Working Week (RWW) Programme continues to progress well and has returned to green. 60,216 RWW Accrued Hours booked to date for 2025/26, an increase of 4,274 from the end of July. Rostering software procurement is complete with a contract signed and PO raised. Training will commence week commencing 22 September to enable Working Parties to commence from WC 29 September. Vacancy requests have been approved to enable recruitment of an HR Admin, eRostering Admin and Rostering Software Users Team (x9) to support delivery of the programme. The Operational Lead VAF is on hold. In relation to the Rostering Software Users, staff are being identified within the Regions and functions from the pool of staff on alternative duties. Good engagement continues to be made with Regions and functions validating the Roster Keys.

In relation to the Resource Planning Review and Redesign, it has been formally agreed that the Resource Planning Structure Options Paper will be delivered outside the scope of this project. Ownership has transferred to the Senior Responsible Owner to deliver as part of Business as Usual. Project closure has been approved by all relevant stakeholders, and the End of Project Report has been drafted.

For Scheduled Care Improvement, the refreshed New Project Proposal has been submitted to the PMO SLT for review before submission to the next Engine Room Meeting for sign off. A meeting was convened to assess access to the Cleric Online system and evaluate its current functionality. A follow-up workshop has been scheduled for 10th September with the East Region HALO Team to explore further development opportunities. A workshop was also held on 19th August to examine current taxi usage and identify potential areas for operational improvement.

The Healthcare online booking project cannot be progressed further at this stage without single sign on. Our system does not currently have single sign on capability resulting in the need to implement a labour-intensive process for creating and maintaining logins for all users across each Board, outweighing the benefits of implementation. A decision has therefor been reached to close the project.

The Digital Patient Handover has been successfully delivered and approved for closure by the Project Board. As of 18th August, 4,608 Timed Admissions have been digitally transferred from NHS24 to SAS and there have been 30,014 transfers of non-ILT emergencies. The data for the last 30 days shows that 6% of non-ILT emergencies and Timed Admissions are still being received by phone, as exceptions. This is within acceptable tolerance levels.

The Neonatal Transport Service has conducted a workforce review using an options appraisal process to evaluate feasible service delivery models. Final options have now been selected, and the team is in the process of finalising the business case.

The Air Ambulance Implementation Project Board has approved that the new contract will be able to start end of July as agreed in the contract award. The timeline for the project has been updated, and this brings the project back on track. A design review workshop is planned for 28th August to confirm the design of the rotary aircraft (H145) interior.

The Out of Hospital Cardiac Arrest (OHCA) Project continues to progress well. The Dumfries & Galloway (D&G) pilot zone plans have further progressed since the last reporting period. A Short Life Working Group (SLWG) that will be chaired by D&G council has been set up with all stakeholders with ongoing work on delivering the actions. Final acceptance testing for the software upgrades to the Corpuls defibrillator have been completed and a plan for the roll-out has been agreed. Planning has now commenced prior to the implementation of the updated Termination of Resuscitation and Verification of Death (Confirmation of Death in Scotland) JRCALC guidelines. This represents a significant change in ambulance practice which has associated requirements for updates to internal processes and education planning. A SLWG has been agreed, and the first meeting will progress during the next reporting phase. Review of ETI InPhase and letters has been passed to the OHCA team to complete, and work has begun on this. The updated 3RU governance has been completed, and the Chair of National Clinical Operational Governance Group (NCOGG) agreed to present these as part of the package's overall governance. Planning has also commenced on the review of the Clinical specification for the defibrillator ahead of the next potential defib tender.

For the Major Trauma team, our review of the Critical Care Desk (CCD) aims to improve Identification, Care and Triage (ICT) of major trauma patients, and three working groups have been established. A new MS teams CCD review channel is in place to facilitate communication and document sharing across the groups. Monthly meetings have been scheduled to maintain momentum, oversight and focus on this important project. A draft of the pre-hospital section of the Scottish Trauma Network (STN) Service Specification has been shared with the STN. The draft Service Spec will now be reviewed and refined in line with other regional documents to form part of the final STN Service Specification. A Major Trauma patient outcomes process is in place in the South-East of Scotland Trauma Region which allows staff to receive feedback on the outcomes for their patient's following conveyance to hospital. The next step is to trial this in the East of Scotland Trauma Region.

The Stroke and Thrombectomy project continues to work towards improving pre-hospital stroke recognition and care allowing for earlier access to time-critical, in-hospital treatments. Most objectives required to achieve this goal are progressed and developed in partnerships with Health Boards, Scottish Government and Charity Sector partners. Where there are extended target dates noted against objectives, these can be attributed to delays in receiving confirmation of planning assumptions and modelling from Scottish Government, stalling our ability to seek appropriate resource and funding requirements for 25/26. Similarly, a revised target date has been recorded for work delivered in Partnership with Chest Heart and Stroke Scotland's (CHSS), this is due to longer than anticipated lead in times to this work going live. Much of the wider stroke improvement work is delivered through partnerships and collaborations with wider NHS Scotland input utilising funding for 25/26. While it is highly anticipated that all efforts will continue beyond April 2026, funding for many of the individual programmes are only funded on a yearly basis and so it must be assumed at this stage that programmes of work must be completed within the funding period. The North Region Stroke Improvement Plan, to reflect the success of the East Region Stroke Improvement Plan, is a 10-month programme which following successful recruitment to the S&T team, hope to commence in September/October. This target date may be pushed back depending on the speed and success of the recruitment of a Clinical Effectiveness Lead (CEL) to the team.

The outline deliverables for the Urgent Care work – supported by our Pathways and End of Life Care programmes have been reviewed for 2025-26 in line with the Annual Delivery Plan. We will continue to focus on improving access to pathways and senior decision support as well as patient experience and outcomes and frontline engagement. "Call Before You Convey"- completed an assessment of what we have access to across NHS Scotland across a range of factors. This continues to show variation in terms of the configuration of Flow Navigation Centres (FNCs) including workforce and onward referral pathways which likely influences the data across the country in terms of non-conveyance rates. We continue to work with partners and SG to reduce the variation that exists. Digital Workstream – The plan for 25-26 is to focus on the key enablers for our urgent care priorities including video, clinical portal and Adastra usage, JRCALC for Pathways and MS teams for Confirmation of Death process. Patient Experience – A detailed insight infographic is in development to support the increased capture of patient experience in 2025-26 including other clinical workstreams and how to most effectively utilise the feedback that is received. A sample of this work was included in the NHS Scotland event and generated good discussion with attendees. Consideration is being given to how we can most effectively share this feedback with frontline clinicians.

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 Jul to 18 Aug	Portfolio RAG	

Portfolio Timeline

Project / Activity	Start Date	End Date	Project Health RAG & Trend	Project Health Key Controls		FY 25 / 26												26 / 27			
						Q1			Q2			Q3			Q4			Q1	Q2	Q3	Q4
						Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	Jan-26	Feb-26	Mar-26				
Reduced Working Week	10/07/24	30/09/27	→	Milestones																	
				Risks (VH&H)	2																
				Issues (H)	2																
				Finance																	
Air Ambulance Implementation	01/11/24	30/10/26	→	Milestones																	
				Risks (VH&H)	0																
				Issues (H)	0																
				Finance																	
Resource Planning Review	01/09/22	31/09/2025	→	Milestones																	
				Risks (VH&H)	0																
				Issues (H)	0																
				Finance																	
Scheduled Care Improvement	12/06/24	31/03/27	→	Milestones																	
				Risks (VH&H)	0																
				Issues (H)	0																
				Finance																	
OHCA	01/04/22	31/03/26	→	Milestones																	
				Risks (VH&H)	0																
				Issues (H)	1																
				Finance	N/A																

Reduced Working Week milestones:
- Q1 - Roster analysis options
- Q4 Sep25 - Plan for WP's
- Q3 - Roster keys appr (A&E)
- Q4 Nov25 - Working party 2
- Q3 Feb26 - Roster voting
- Q4 - Rosters built on GRS
- Q1 - RostersLive
- Q4 Q2 - Roster S/W procured
- Q4 Sep25 - Roster keys appr (Non A&E)
- Q1 - Imp protected learning requirements
- Q2 - Handover to BAU & Close
- Q1 - Working party 0
- Q4 Sep25 - Del resource appr
- Q4 Q2 - Working party 1
- Q4 Q2 Dec25 - Working party 3
- Q2 Jan26 - Working party 4
- Q4 - New Staff Recruited
- Q4 Oct25 - Del resource recruited
- Q4 Q2 Q3 - Recruitment plans dev & appr
- Q3 Feb26 - Roster sign off
- Q4 - Acc Hrs Taken - 25/26

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

Resource Planning Review milestones:
- 06/24 07/24 08/24 10/24 12/24 01/25 04/24 06/25 07/25 - Resource Planning Structure Options paper
- 03/25 05/25 07/25 08/25 09/25 - Project close

Scheduled Care Improvement milestones:
- (WS7) 10/25 - Renal Transportation
- (WS6) 04/26 - Future Fleet Requirements
- (WS8) 01/27 - Sched Care Trg Prog
- (WS2) 03/26 - Timed Admissions
- (WS4) 10/25 - Technology
- (WS5) 03/26 - QEUH Transport Hub
- (WS1) 04/26 - Recruitment
- (WS3) 07/26 - Demand led support for Sched Care
- 03/27 - Project Close

OHCA milestones:
- 06/25 Develop CAReZone Framework
- 11/25 - 2024/25 OHCA Annual Report
- 03/26 - Plan and implement Community Cardiac Responders schemes in D&G aligned to CAReZone work
- 06/25 3RU High Performance CPR Training & Governance
- 03/25 30/05 Thematic analysis of 12 months data on approp of resus attempt
- 03/26 - Project Close

Integrated Planned Urgent and Unscheduled Care Portfolio Report – 2030 SSG

Portfolio Lead:	Paul Bassett	Period covered:	22 Jul to 18 Aug	Portfolio RAG	

Scottish Ambulance Service — Working in Partnership with Universities

NHS SCOTLAND

Portfolio Timeline (Continued)

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

Major Trauma
- Start Date: 01/04/22
- End Date: 31/03/26
- RAG & Trend: Green →
- Milestones: (green)
- Risks (VH&H): 1 (red)
- Issues (H): 0 (green)
- Finance: (green)

Timeline notes:
- 03/25 05/25 - 7. Plan for peer review of amb service / pre hosp
- 10/25 - 8. Review the STN Major Trauma Tools
- 03/25 11/25 - 1. CCD
- 06/25 12/25 - 5. Develop a sustainable process for patient outcome/feedback process in the East Region
- 03/25 12/25 Work with STN and STAG
- 2. 12/25 Peer review of pre-hosp MT Services
- 03/25 12/25 - 6. Engage with SAS green tier
- 03/26 - Project Close

Stroke & Thrombectomy
- Start Date: 01/04/22
- End Date: 30/09/26
- RAG & Trend: Green →
- Milestones: (green)
- Risks (VH&H): 0 (green)
- Issues (H): 0 (green)
- Finance: TBA (grey)

Timeline notes:
- 08/25 SAS internal stroke Annual Report
- 06/25 09/25 S&Th BC Submission
- 08/25 10/25 SAS internal stroke annual report
- 04/26 - FAST application improvement programme
- 04/26 - SG/SAS SLWG Redesign pre-hospital stroke pathway
- 07/25 - NHS24-SAS Stroke Call Transfer Review (Ph1)
- 08/25 East Region Stroke Improvement Project report submitted
- 09/25 10/25 SAS/CHSS National FAST Campaign
- 04/26 - Partnership working with TAG to deliver Nat Thrombectomy Service
- 09/26 North Region Stroke Improvement Programme

Urgent Care
- Start Date: 01/04/22
- End Date: 31/03/26
- RAG & Trend: Green →
- Milestones: (green)
- Risks (VH&H): 0 (green)
- Issues (H): 0 (green)
- Finance: TBA (grey)

Timeline notes:
- 09/25 - Evaluate the availability and use of "Call Before You Convey" across FNC's
- 03/26 - Patient Experience feedback - bi-monthly surveys
- 09/25 - Board engagement on urgent care priorities
- 09/25 - Digital Workstream - identify key priorities and resources required.
- 03/26 - Regional engagement inc frontline clinicians
- 03/26 - Project Close

HCP Online Booking
- Start Date: 01/08/22
- End Date: 30/09/25
- RAG & Trend: Closed (blue)
- Milestones: (blue)
- Risks (VH&H): (blue)
- Issues (H): (blue)
- Finance: (blue)

Timeline notes:
- 27/03 23/04 07/24 10/24 12/24 01/25 03/25 TBC First Board - Go Live
- 19/06 14/08 09/24 12/24 TBC - Last Board - Go Live
- 03/25 TBC - Measure ongoing HCP call handler requirements

Digital Patient Handover
- Start Date: 01/05/23
- End Date: 31/07/25
- RAG & Trend: Closed (blue)
- Milestones: (blue)
- Risks (VH&H): (blue)
- Issues (H): (blue)
- Finance: (blue)

Timeline notes:
- 11/24 03/25 04/25 TBC - Measure HCP Call Handler
- 11/24 04/25 05/25 - Project Close (Ambulance Req Only)

Best Start - Maternity & Neonatal Care
- Start Date: 01/05/24
- End Date: 31/12/25
- RAG & Trend: Green →
- Milestones: (green)
- Risks (VH&H): 0 (green)
- Issues (H): 0 (green)
- Finance: N/A (grey)

Timeline notes:
- 30/09 31/10 31/12 01/03 31/03 01/06 01/08 31/10 Business Case developed
- 05/25 07/25 01/09 31/12 - Project close

Communities and Place Portfolio Report – 2030 SSG

| Portfolio Lead: | Emma Stirling | Period covered: | 22 Jul to 18 Aug | Portfolio RAG | |

Portfolio Summary

For Volunteer Enhancement, the Community Resilience Team continue to support and engage with our existing cohort of CFR volunteers. During July 2025, CFRs attended 499 calls, with an average time spent on scene of 40.32mins. Deployment levels were 16% higher than the previous month and whilst a welcome increase, is indicative of the continued lack of consistency and unwarranted variance in the levels of dispatch, which continues to cause angst and frustration for our volunteer cohort and this continues to be raised with ACC colleagues via the Joint Improvement Team which has been established.

The Mental Health team continue to progress their aims and whilst it is stated end dates for December 25 for most of these milestones, this work will continue to be optimised and over the coming years with work plans developed for the service on an annual basis, in line with the SAS Annual and Medium-Term Delivery Plans. Engagement continues with other organisations. We continue to monitor call demand attendance and conveyance for code 25 calls. Clinical effectiveness leads work with local teams to address variation and improve local performance. A second Portfolio lead has completed the Scottish Trauma Informed Leaders Training (STILT) and we are working on a paper on how we want to progress this work. We 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. We have engaged with a lived experience organisation to better understand the experience of our service delivery; VOX work has now been received and is being reviewed. There have been some challenges in relation to the mental health assessment unit in Glasgow and their relationship with the VOX paramedic response unit that will require sensitive handling, meetings have taken with service leads and Scot Gov is aware. The team continue to work together through the leadership programme; we now have a strengths profile for the team and can make connections with our communication styles. Recurring Mental Health funding has now been confirmed by Scottish Government.

The Dementia Lead is now in post and is progressing discussions around dementia delivery plan. A Presentation and discussion took place at the Engine Room meeting in July. The outcome of this was agreement to focus on proceeding to develop initial 12-month SAS dementia delivery plan rather than SAS dementia strategy. The first draft of the timeline for development of 12-month delivery plan including governance routes is now complete. There have been ongoing discussion with the PMO regarding resource. A new Project Proposal (NPP) will be drafted and presented to the Engine Room for discussion and decision.

The South Station project has been established with an initial planning meeting held in August. A further meeting is planned in September.

The Young Minds Saves Lives (YMSL) Project, following funding confirmation, will transition into its next phase. The end-of-project report has been completed and will be formally approved at the next Project Board meeting, scheduled for early September after the Endowment Committee meeting. This will mark the official closure of the current phase. The only remaining key activity is the finalisation of the evaluation report and toolkit update from the University of Glasgow. This is also targeted for completion by the end of August and does not impact the project closure timeline.

The High Intensity Use (HIU) Team are making steady progress toward our overall aim. While key milestones are currently set for completion by December 2025, this work will continue to evolve and be optimised in the years ahead. Annual work plans will be developed in alignment with the Scottish Ambulance Service (SAS) Annual and Medium-Term Delivery Plan, and in collaboration with key partners such as the Scottish Government, Police Scotland, and NHS 24. The HIU team is utilising staff on alternate duties, this will ensure the continued delivery of services to individuals who meet the HIU criteria.

The Anchor Strategic Plan has now been closed and moved to business as usual (BAU).

Communities and Place Portfolio Report – 2030 SSG

Scottish Ambulance Service — Working in Partnership with Universities

NHS SCOTLAND

Portfolio Lead:	Emma Stirling	Period covered:	22 Jul to 18 Aug	Portfolio RAG	

Portfolio Timeline

Project / Activity	Start Date	End Date	RAG & Trend	Key Controls		FY 25 / 26												26 / 27			
						Q1			Q2			Q3			Q4			Q1	Q2	Q3	Q4
						Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	Jan-26	Feb-26	Mar-26				
Volunteer Enhancement	01/03/25	31/03/26	→	Milestones																	
				Risks (VH&H)	3																
				Issues (H)	2																
				Finance	N/A																
Mental Health Strategy	01/11/22	31/12/25	→	Milestones																	
				Risks (VH&H)	0																
				Issues (H)	0																
				Finance																	
Dementia Strategy	01/11/22	31/12/25	→	Milestones																	
				Risks (VH&H)	0																
				Issues (H)	0																
				Finance	TBA																
High Intensity Use & Vulnerable Groups	31/07/22	01/04/26	→	Milestones																	
				Risks (VH&H)	0																
				Issues (H)	0																
				Finance																	
Young Minds Saves Lives	20/06/23	30/09/25	→	Milestones																	
				Risks (VH&H)	1																
				Issues (H)	0																
				Finance																	

Volunteer Enhancement milestones:
- 07/25 - Explore opportunities to use new technology to support the enhanced deployment of
- 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 Responders

Mental Health Strategy milestones:
- 12/25 - Work with our partners to better understand our populations needs / funding solutions.
- 12/25 - Collaborate with PS, dev safe efficient processes and protocols
- 12/25 - Continue prof to prof support on scene
- 12/25 - Develop a plan to educate our staff
- 12/25 - Promote the MH Paramedic role
- 12/25 - Reduce unwarranted variation in care and inc No of patients managed on scene
- 12/25 - Align the NES Transforming Psychological Trauma Framework to our org, develop delivery plan to achieve the levels of framework
- 12/25 - Continue close work with NHS24, PS, PHS

Dementia Strategy milestones:
- 04/25 - Recruit a Dementia Lead post
- 12/25 - Develop a Dementia strategy /delivery plan

High Intensity Use & Vulnerable Groups milestones:
- 10/25 - 4a. Early intervention letter sent to HIU patients
- 10/25 - 1a. FVRH Test of Change
- 12/25 - 1. Enhance Patient Outcomes
- 12/25 - 2. Optimise Resource Utilisation
- 08/25 - 2a. Update SAS HIU Guidance
- 10/25 - 3a. Complete Job Re-eval and commence HIU team recuitment
- 12/25 - 3. Improve System Efficiency
- 12/25 - 4. Promote Community Health
- 04/26 - Project close

Young Minds Saves Lives milestones:
- Q1 25 - Handover & Lessons Learned
- Q3 28/03 06/25 07/25 - Strat direction agreed with SAS Exec
- 11/07 31/08 Final eval report of addtl schools produced
- 20/06 - Delivery in addtl schools complete
- Q4 24 Q1 25/26 - SAS work experience options
- 25/07 - End of Project Report
- Q4 24 Q1 25/26 07/25 - Funding confirmed to expand YMSL
- 31/07 30/09 Project Close

Communities and Place Portfolio Report – 2030 SSG

Portfolio Lead:	Emma Stirling	Period covered:	22 Jul to 18 Aug	Portfolio RAG	

Portfolio Timeline (continued)

Project / Activity	Start Date	End Date	Project Health			FY 25 / 26													26 / 27			
			RAG & Trend	Key Controls		Q1			Q2			Q3			Q4				Q1	Q2	Q3	Q4
						Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	Jan-26	Feb-26	Mar-26					
Sustainability Strategy Development	01/09/22	31/03/26	→	Milestones																		
				Risks (VH&H)	0																	
				Issues (H)	0																	
				Finance	N/A																	
Anchor Institution Development	01/10/24	31/07/25	Closed	Milestones																		
				Risks (VH&H)																		
				Issues (H)																		
				Finance																		
Community Hubs and South Station Delivery	12/06/25	TBA	Approved	Milestones	TBA																	
				Risks (VH&H)	TBA																	
				Issues (H)	TBA																	
				Finance	TBA																	

Sustainability Strategy Development:
03/26 - Deliver 25/26 Sustainability and Net Zero action plan

Project reporting under review - will re-commence in November 25

Anchor Institution Development:
06/25 - Review the Self Assessment
06/25 - Embed in
06/25 - Establish key partner arrangements
31/07 Project Close

Community Hubs and South Station Delivery:
New Project Proposal for South Station approved at ER. Reporting will commence in October 25

Portfolio Summary

Digital Strategy work is progressing well, the initial results from the SG Health & Care Digital Maturity Assessment (DMA) 2025 Assessment have been received, and results have been approved by the Executive Team for submission. The SG Health & Care DMA Lead verbally indicated there will be another assessment focussing on Innovation and AI later this year. The Digital Delivery Plan work-streams have continued throughout 2025/26. The Digital Workplace Project 3 (DWP3) has been closed with remaining actions from the DWP3 end of project report now forming part of the M365 In-life Team's BAU workload.

In relation to GRS Timecard, the national pilot has now been concluded with all participating sites using the GRS Timecard system to process July claims successfully in August. Elgin, Forres, Keith, Inverurie, Greenock, Kirkcaldy, and all SORT bases are now live. A decision was made by the Project Board in August to progress with go live for the remainder of A&E in September.

Research and Innovation is progressing well. In terms of research, the team have approached a joint proposal (Northern Ireland Ambulance, SAS and Queens University, Belfast) to look at Palliative Care. A Minimum Unit Price for alcohol in Scotland research collaboration application has been successful and funding has now been approved for Alcohol Project support. The Drug Harm Research Group are observing early data and trial activity to inform future direction. A design pilot has started for stroke video assessment. Stroke projects write up are in progress for Scottish Government (SG). The team are supporting the Exec/Non-Exec and other organisations – Public Health Scotland, National Services Scotland, Research Data Scotland. Work continues for external ethical approvals and project approvals.

For Innovation, for Pilotless Airframes, a bid feedback analysis report and SBAR was taken to the Innovation Board to support future bids and continued boarder work on Drones and Future Aerospace Technology. SAS Accelerated National Innovation Adoption (ANIA) proposal meetings continue to take place on Pre ANIA proposals with other NHS boards. The team are preparing for closure of engagement with one of our medical AI organisations and have begun the write up for this. The initial Mental Health RCG Work Meeting took place and the group have agreed to explore strategic level data sets and proposal to ring fence resource.

For the AI in ACC Project. The data transfer ended on the 22nd August 2025 with next steps updated. Regular check ins will take place with the supplier for an update on the benefits analysis.

The eRostering end of project report was shared at the Portfolio Board meeting and was approved for closure.

Digital Data Innovation and Research Portfolio Report – 2030 SSG

Scottish Ambulance Service — Working in Partnership with Universities

NHS SCOTLAND

| Portfolio Lead: | Julie Carter | Period covered: | 22 Jul to 18 Aug | Portfolio RAG | (Green) |

Portfolio Timeline

Project / Activity	Start Date	End Date	Project Health — RAG & Trend	Key Controls		FY 25/26 / 26/27 Timeline
Digital Strategy Delivery	01/04/25	31/03/26	→ (Green)	Milestones (Green); Risks (VH&H) 0; Issues (H) 0; Finance N/A		**31/05** - Draft digital delivery plan for 25/26 • **31/07** - Annual digital maturity assessment • **01/07** - Digital delivery plan for 25/26 agreed • **31/03** - Delivery of 25/26 delivery plan • **31/03** - Project closed
Data Strategy Development & Delivery	01/05/25	31/03/26	→ (Green)	Milestones (Green); Risks (VH&H) 0; Issues (H) 0; Finance N/A		25/26 Plan in development
GRS Timecard and App	09/09/22	30/01/26	→ (Green)	Milestones (Green); Risks (VH&H) 1 (Red); Issues (H) 0; Finance N/A		**15/08** - Nat Pilot Complete • **31/01 06/06 30/09** Training complete • **12/03 09/07 14/10** Live roll out complete • **02/05 15/08 01/26** Project closed • **01/09** National Go Live (A&E Only) • **07/03 04/07 10/10** Communications complete • **TBC** Onboarding of PTS / ACC Staff
AI in the ACC	31/10/24	31/07/26	→ (Green)	Milestones (Green); Risks (VH&H) 1 (Red); Issues (H) 0; Finance (Green)		**31/10 02/25 05/25 08/25** - 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 04/26** - 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 model • **02/25 11/25 02/26 07/26** Project close
eRostering	01/12/24	31/08/25	→ (Green)	Milestones (Green); Risks (VH&H) 0; Issues (H) 0; Finance (Green)		**02/25 03/25 04/25 01/05 -** Deployment • **04/25 05/25 06/25 27/07 -** Timesheets Pilot • **03/25 04/25 01/05 -** SAS Training • **03/25 05/25 06/06 27/06 -** Adoption • **05/25 06/25 27/07 -** Reporting Pilot • **05/25 06/25 07/25 08/25 -** Project Close

Portfolio Lead:	Julie Carter	Period covered:	22 Jul to 18 Aug	Portfolio RAG	

Portfolio Timeline (continued)

Project / Activity	Start Date	End Date	Project Health — RAG & Trend	Key Controls		FY 25 / 26												26 / 27			
						Q1			Q2			Q3			Q4			Q1	Q2	Q3	Q4
						Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25	Oct-25	Nov-25	Dec-25	Jan-26	Feb-26	Mar-26				
Research	01/04/22	31/03/26	→	Milestones	(green)																
				Risks (VH&H)	4																
				Issues (H)	0																
				Finance	(green)																
Innovation	01/04/22	31/03/26	→	Milestones	(green)																
				Risks (VH&H)	5																
				Issues (H)	0																
				Finance	N/A																

Research timeline notes:
- 08/25 - Data analysis and insights to support decision making and improve service delivery planning
- 12/25 - Focus R&I - Improve care pathways & outcomes for critical conditions
- 12/25 03/26 - Pursue funding activities

Innovation timeline notes:
- 08/25 12/25 - Exploring the use of pilotless airframes to provide critical life-saving equipment to patients in remote and hard-to-reach locations
- 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.
- 10/25 03/26 - Strengthen partnerships with other blue light public services to combine resources and expertise

Portfolio Summary

Progress continues across each of the Preventative and Proactive workstreams working with a wide range of stakeholders across health, social care and third sector.

The Drug Harm Reduction workstream continues to focus on the importance of Naloxone distribution for those individuals at risk of overdose. Our role in this space was acknowledged through a ministerial visit to Springburn Ambulance Station earlier this month where the Minister met with a range of staff including frontline ambulance clinicians who shared their insight and experience. This was a very positive visit and allowed us to share details of our wider programme of work including the Near Fatal Overdose Pathway which sees individuals at risk of drug harm connected with services as well as the development of our Trust campaign for young people.

Following confirmation of funding from Scottish Government to maintain our Palliative and End of Life Care workstream we have been recruiting to the team and planning the delivery of our revised objectives which will build on the work completed to date through the MacMillan partnership. There will be a ministerial visit announcing the funding allocation on 17 September 2025.

Within our Pathways workstream we are engaging with frontline clinicians to promote the use of alternatives to ED including front door engagement in the West of Scotland to gather insight and experiences to strengthen this work. Several pathways have gone "live" in this reporting period including those with a holistic focus through third sector providers. The team continue to provide staff feedback in relation to pathway use and this is always well received by frontline clinicians. Our Pathways Hub which is a single point of contact for frontline clinicians to make preventative and proactive referrals e.g. to Falls, DBI, Alcohol and Drug partnerships is an area of focus with our aim to increase the number of referrals that we make each month.   We are also strengthening our approach to gathering patient experience feedback and plan to share the learning from this in future updates.

A key aim of our 2030 strategy is to reduce health inequalities and the Population Health Framework published in June this year provides a further lever for this. The milestones for this workstream remain loosely defined given that this is an emerging workstream and unlikely to demonstrate impact within a short period of time – such as a reporting year. To put this in context the Population Health Framework covers the next ten years. It will require collaborative working with a range of partners and our focus at this time is seeking to understand what meaningful actions we are already taking through our existing workstreams and identify other suitable opportunities. This subject formed a "hot topic" presentation to Clinical Governance Committee in August which provided useful feedback to inform the development of this work.

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 Jul to 18 Aug	
Portfolio RAG	(Green)	

Portfolio Timeline

Project / Activity	Start Date	End Date	RAG & Trend	Key Controls		FY 25 / 26	26 / 27

Project Health columns: RAG & Trend, Key Controls (Milestones, Risks (VH&H), Issues (H), Finance)

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

Drug Harm Reduction
Start Date: 01/04/23 — End Date: 31/03/26 — RAG: Green (→)
- Milestones: Green
- Risks (VH&H): 0
- Issues (H): 0
- Finance: Green

Timeline items:
- 07/25 - Connect people with services - DPIA expansion
- 08/25 - Young people DRNS
- 09/25 - Safe IEP increase avail and coverage via SAS (ph2)
- 08/25 - THN distribution - roll out of intranasal as alternative via SAS drug harm bags (ph1)
- 09/25 - SAS surveillance Early Warning System - scoping complete
- 03/26 - Project close

Partnership Working
Start Date: 01/07/24 — End Date: 31/03/26 — RAG: Green (→)
- Milestones: Green
- Risks (VH&H): 0
- Issues (H): 0
- Finance: N/A

Timeline items:
- 03/25 06/25 - Coordinated governance
- 03/26 - Patient Experience Workplan and Survey
- 03/26 - NHS24/SAS 999 calls SLWG
- 03/26 - Clinical topic focus

Palliative and End of Life Care
Start Date: 01/04/22 — End Date: 31/03/26 — RAG: Green (→)
- Milestones: Green
- Risks (VH&H): 1 (Red)
- Issues (H): 0
- Finance: TBA

Timeline items:
- 06/25 - PELiCaN network occurence
- 10/25 - Recruitment of CEL
- 10/25 - TerraPACE3 Update
- 10/25 - Eval report from Macmillan project
- 03/26 - Increased staff confidence in PELOC
- 03/26 - Improved patient experience
- 03/26 - Transition to sustainable team
- 10/25 03/26 - JIC medications workstream
- 03/26 - Reduced amb attendance
- 03/26 - Reduced ED conveyance
- 03/26 - Reduced ED admissions

Pathway Hub
Start Date: 01/04/23 — End Date: 31/03/26 — RAG: Green (→)
- Milestones: Green
- Risks (VH&H): 0
- Issues (H): 0
- Finance: N/A

Timeline items:
- 06/25 - Falls patient exerience Summary
- 03/25 05/25 07/25 09/25 - Falls Screening Tool Impr Project
- 10/25 - Primary care and prof to prof guidance
- 03/26 - Develop clinical fraility score for ePR
- ONGOING - Call before convey front door
- 03/25 05/25 - North ePR Feedback Summary
- 09/25 - Patient experience reports
- 10/25 - West region ED engagement
- 04/25 05/25 - Breathing difficulties Patient Experience
- 08/25 - Non conveyance quality measurement plan
- 07/25 09/25 - Tayside COPD Improvement Project
- 10/25 - Paedriatric Non Conveyance Guidance
- 10/25 - Patient experience telephone survey
- 03/26 - Project close
- TBC - Develop ePR to pathways hub referral process

Population Health Review
Start Date: 01/02/24 — End Date: 31/03/26 — RAG: Green (→)
- Milestones: Green
- Risks (VH&H): 0
- Issues (H): 0
- Finance: N/A

Timeline items:
- 10/24 11/24 TBC - Stakeholder mapping & engagement
- 07/25 09/25 - Programme plan for 25/26
- 10/25 - Stakeholder mapping and engagement
- 12/25 - Collaboration opportunities
- 09/05 - Progress assessment and 25-26 priorities
- 07/25 09/25 - SG Population Health Framework mapped to SAS Plan
- 10/25 - Measurement framework
- 03/26 - Project close

Workforce and Wellbeing Portfolio Report – 2030 SSG

Portfolio Lead: Graeme Ferguson **Period covered:** 22 Jul to 18 Aug **Portfolio RAG**

Portfolio Summary

For the Health and Wellbeing Project, all project deliverables are running according to schedule and the following work has been ongoing - The 2025 iMatter survey cycle has concluded with 70% of action plans completed at the 8-week post survey point. There were 2 papers discussed and approved at the Executive Team on 5 August: Utilisation of the Police Treatment Centre in Auchterarder and recruitment of 4 additional part-time Wellbeing Lead posts.
Sessions have been delivered to Robert Gordon University BSc Paramedic Students to highlight the importance in their contribution to a healthy workplace culture when they join the Service. The sessions also incorporated workplace sexual safety and Civility Saves Lives. The team have also delivered/co-facilitation of face-to-face and online SAS Workplace Sexual Safety sessions across SAS in line with scheduled programme. Several station/location visits have taken place over the reporting period with both OD and Wellbeing support to colleagues. The Lead Green Champion has commenced their first station visits promoting the green agenda and physical activity in outdoor spaces to support health & wellbeing. Endowment funding to support staff health & wellbeing was promoted in Live Well, Work Well with 11 bids received from staff to date.

In relation to the TURAS Learn/Statutory & Mandatory Training project (phase 2), Manual Handling and Violence Prevention and Reduction courses have continued to run from April 2025, and 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 and available on Turas Learn system. The project was in amber status due to a delay in the development of the role specific content for statutory and mandatory training, however, this has now been finalised and a paper was presented to the Executive Team on the 2nd of September.

The New Rest Break Working Group has been formed and is reporting into the Rest Break Oversight Group. The Terms of Reference has been drafted and is pending approval. Work has begun on reviewing shifts and identifying areas where rest breaks are being missed and understanding the reasons.

In the absence of the Head of Workforce Planning, a lead has been appointed to take forward development of the workforce plan in alignment with the 2026/27 Annual Delivery Plan, 3 Year Medium Term Plan and Financial Plan timelines for delivery. A meeting was held with Interim Director of Workforce, Director of Strategy, Planning & Programmes, Head of Workforce Planning & Chair of Staff Governance committee to discuss the progress to date and actions that can be taken forward in the short term to provide additional assurance. Multiple areas now have dashboards in place which will feed into the work that is ongoing in this space.

Organisational Leadership Development and Equality, Diversity and Inclusion Projects have moved to business as usual. Work is ongoing to align the projects to the Board Assurance Framework, and these will be implemented for the next Portfolio Board Meetings.

Workforce and Wellbeing Portfolio Report – 2030 SSG

Scottish Ambulance Service — Working in Partnership with Universities

NHS SCOTLAND

| Portfolio Lead: | Graeme Ferguson | Period covered: | 22 Jul to 18 Aug | Portfolio RAG | |

Portfolio Timeline

Project / Activity	Start Date	End Date	Project Health RAG & Trend	Project Health Key Controls		FY 25 / 26				26 / 27			
						Q1 (Apr-25 / May-25 / Jun-25)	Q2 (Jul-25 / Aug-25 / Sep-25)	Q3 (Oct-25 / Nov-25 / Dec-25)	Q4 (Jan-26 / Feb-26 / Mar-26)	Q1	Q2	Q3	Q4
Health & Wellbeing	01/04/21	31/03/26	→	Milestones									
				Risks (VH&H) 0									
				Issues (H) 0									
				Finance N/A									
Turas Learn & Statutory / Mandatory Training (Phase 2)	01/07/24	30/06/25	↘	Milestones									
				Risks (VH&H) 0									
				Issues (H) 0									
				Finance									
Rest Break	28/09/22	31/07/26	→	Milestones									
				Risks (VH&H) 0									
				Issues (H) 0									
				Finance N/A									
Workforce Planning and Performance Monitoring	01/03/24	TBA	Under Review	Milestones									
				Risks (VH&H)									
				Issues (H)									
				Finance									
Training and Education Model Development (EPDD Transformation)	01/06/24	TBA		Milestones									
				Risks (VH&H)									
				Issues (H)									
				Finance									

Health & Wellbeing milestones:
- 03/26 - create awareness and understanding of the range of health & wellbeing support avail and how to access it.
- 03/26 - Develop our workforce knowledge & skills and signpost further help.
- 03/26 - Expand the range of wellbeing support available.
- 03/26 - Develop our leadership, enable leaders to become more connected.
- 03/26 - Increase the number of staff who feel valued at work.
- 03/26 - Become more evidence and data driven in our approach to creating a healthy workplace.

Turas Learn & Statutory / Mandatory Training (Phase 2):
- 31/03 05/04 Booking & reporting provision complete
- 01/25 10/03 16/05 16/06 - Prioritisation complete
- 25/04 30/05 30/06 - Phase 2 complete
- 01/25 31/03 16/05 16/06 - Workplan
- 31/03 30/05 30/06 - Comms complete
- 30/05 30/06 - Role specific approval process for BAU

Rest Break:
- 08/25 - ToR agreed
- 10/25 - Trial of change starts
- 04/26 - Trail ends
- 06/26 - SOP updated
- 07/26 - Group closed

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

Training and Education Model Development (EPDD Transformation):
- TBA - Business Case completion
- TBA - Project Close
- TBA - Stakeholder comms & engagement
- TBA - Business Case sign off
- This will be picked up under the wider Training Review project