Scottish Ambulance Service
Working in Partnership with Universities

NHS SCOTLAND

PUBLIC BOARD MEETING **29 July 2026**
Item 17

THIS PAPER IS FOR NOTING

STAFF GOVERNANCE COMMITTEE MINUTES OF 04 MARCH 2026 AND AGENDA OF MEETING HELD ON 04 JUNE 2026

Lead Director **Author**	Mike McCormick, Chair of Staff Governance Committee Julie Kerr, Governance Officer
Action required	The Board is asked to note the minutes and agenda.
Key points	In compliance with the Service's Standing Orders, the approved Committee minutes are submitted to the Board for information and consideration of any recommendations that have been made by the Committee. The minutes of the Staff Governance Committee held 04 March 2026 were approved by the Committee on 04 June 2026. The agenda from the meeting held on 04 June 2026 is also attached for the Boards information.
Timing	Minutes are presented following approval by the Committee. The Board are also provided with the agenda of the most recent Committee meeting for information.
Corporate Risk Identification	_
Link to Corporate Ambitions	This paper related to our goal of ensuring staff have a voice and people are at the heart of everything we do.
Link to NHS Scotland's Quality Ambitions	All work of the Staff Governance Committee and the Staff Governance Action Plan is aligned to safe, effective and person centred care.
Benefits to Patients	The Staff Governance Committee has responsibility, on behalf of the Board, to ensure that the NHS Staff Governance Standards are implemented in the Service and that an effective structure is in place to support and monitor implementation within the Service, including health, safety & wellbeing, as well as remuneration. Effective staff governance assists in creating a workplace where staff feel valued, and are appropriately located, skilled and developed to deliver safe, effective, patient centred and quality care.
Climate Change Impact Identification	This paper has identified no impacts on climate change.

Equality and Diversity	Workforce equality monitoring information, equality outcomes and associated reports, are monitored through the Staff Governance Committee. Equality impact assessments are carried out for individual workstreams, including policy development and review. Relevant equality impact information is reported to the Staff Governance Committee.

Scottish Ambulance Service
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NHS SCOTLAND

MINUTES OF STAFF GOVERNANCE COMMITTEE
10:00 AM ON WEDNESDAY 4 MARCH 2026
VIA MICROSOFT TEAMS

Present:
Madeline Smith, Non-Executive Director (Chair)
Liz Humphreys, Non-Executive Director/Whistleblowing Champion (Vice Chair)
Stevie Gilroy, Employee Director
Thane Lawrie, Non-Executive Director
Mike McCormick, Non-Executive Director
Maggie Watts, Non-Executive Director
Kevin Stewart, Staff Side Convenor, Unison (joint role (ex-Officio)
Gavin Thorburn Staffside Convenor, Unite (ex-Officio)
Henry Trodden, GMB Convenor (ex-Officio)

In Attendance:
Coralie Colburn, Employee Relations and Equalities Manager
Michael Dickson, Chief Executive
Alison Ferahi, Head of Organisational Development and Wellbeing
Graeme Ferguson, Acting Director of Workforce
Kenny Freeburn, Regional Director, East Region
Elise Gallagher, People and Culture Consultant
Cheryl Harvey, Associate Director of Education and Professional Development
Julie Kerr, Governance Officer (Minute Secretary)
Maria McFeat, Deputy Director of Finance (from 11:15 am)
Wendy Quinn, Deputy Director, National Operations
Tom Steele, Board Chair, Non-Executive Director
Sarah Stevenson, Risk Manager
Emma Stirling, Director of Care Quality & Professional Development
Clair Wright, Area Service Manager, East Region (Agenda Item 7.1)

Apologies:
Willie Anderson, Staff Side Convenor, Unite (ex-Officio)
Dougie Brownlie, Royal College of Nursing Representative
Claire Higgs, Communications and Engagement Manager
Aileen McLaren, Staff Side Convenor, Unison (joint role) (ex-officio)
Fay McNicol, Head of Health and Safety
Robert Pollock, GMB Convenor (ex Officio)
David Robertson, Regional Director, West Region
Jim Ward, Medical Director
Milne Weir, Regional Director, North Region

ITEM 1 WELCOME AND INTRODUCTIONS

Madeline Smith welcomed everyone to the meeting and apologies for absence were recorded as above.

ITEM 2 DECLARATIONS OF INTEREST

No new declarations of interest noted.

Standing declarations of interest were noted:

- Madeline Smith in her position as Board member of Scottish Fire and Rescue Service.
- Liz Humphreys - Non-Executive Director, Public Health Scotland and member of the Audit and Accountability Committee of the Police Investigations and Review Commission.
- Thane Lawrie is a Board member of the Scottish Legal Complaints Commission.

ITEM 3 MINUTES OF MEETING HELD ON 11 DECEMBER 2025

The minutes of 11 December 2025 were reviewed for accuracy and agreed as a true and accurate reflection of the meeting and subsequently approved by Committee.

ITEM 4 MATTERS ARISING NOT ON THE AGENDA

None to note.

ITEM 5 SPECIAL TOPIC – PEOPLE SERVICES HUB UPDATE

Graeme Ferguson introduced Linda Eckton who provided Committee with a very informative presentation by way of an update on work ongoing in relation to the People Services Hub which has now been in place for one year. The Hub was designed to provide a specific resource to assist the HR Department in managing an increased number of general enquiries and support effective management and accurate recording of Employee Relations (ER) cases. The Hub was introduced as a test of change on the 3rd of February 2025 and provides a centralised professional HR inquiry and employee relations support service, with the model supporting organisational priorities around consistency, efficiency and governance.

The key aims of the Hub are:

- To provide consistency in HR advice across all directorates with an understanding of varying service needs.
- To provide prompt and accurate responses to inquiries with an initial response given within 48 hours, excluding holidays, public holidays and weekends.
- Allocate appropriate HR professional support for employee relations cases and accurately track the progress of each case.
- Provide robust and accurate reporting of employee relations activities and reduce the amount of HR advisor time that's spent dealing with routine enquiries to enable them to focus on more complex work, such as ER cases, portfolio projects and supporting delivery of strategic objectives.

The current operating model remains a temporary staffing arrangement, with a business case in development to support the transition of the People Services Hub to a permanent business as usual service. Over the past 12 months, the Hub has supported 311 Employee Relations cases and managed 2,137 HR enquiries. The establishment of the Hub has enabled improved allocation of work to appropriate HR banding levels, while centralisation has enhanced consistency, governance and the effective use of HR capacity. Work is underway to replace the Alchemy system with a Sharepoint based solution, and development continues on an HR chatbot, funded through the Swan

Innovation Fund. In parallel, ER and enquiry dashboards are being developed to enable more accurate reporting and improved visibility for HR and the wider organisation going forward.

Coralie Colburn commended the work undertaken by Linda and the team to develop the People Services Hub, much of which is not visible. While the system remains a work in progress and is not yet fully implemented, considerable effort has been made to seek internal and external advice and to incorporate best practice from other organisations.

Madeline thanked the team for the overview and overall, members acknowledged the substantial progress made to date and the commitment involved, whilst recognising that further development is required. Members discussed the development of the People Services Hub, including plans to replace the Alchemy system with a Sharepoint based solution. It was confirmed that clear guidance, standardised file structures and templates will be provided to managers to support consistency when uploading files, while Employee Relations (ER) records will continue to be managed separately within the existing ER Sharepoint arrangements.

Members acknowledged the scale and complexity of the change programme and emphasised the importance of effective change management, communication and user engagement. The need to articulate the anticipated benefits, including early resolution, reducing administration burden and consistency of policy application as well as a return on investment as part of the business case was highlighted, including both quantitative efficiencies and qualitative improvements to user experience. An update was provided on the development of the HR chatbot, which is currently in a testing phase. It was noted that while the chatbot is not intended to replace personal HR support or complex ER work, it has the potential to improve access to information, reduce low level queries and create capacity within the HR team.

Overall, members recognised positive progress, supported a blended model of digital and personal HR support, and welcomed the continued development of the business case.

Committee noted the overview and update provided.

ITEM 6 STAFF GOVERNANCE

Item 6.1 Workforce Risk Register

Sarah Stevenson presented the Workforce Risk Register which members were asked to discuss and approve. Members noted that all changes made since last presentation of the Workforce Risk Register were highlighted in red. The report was taken as read and Committee were asked to:

- Consider escalation of any high or very high risks to the CRR via PPSG.
- Review and approve the Risk Register and note the actions in place and the assurance being received that the risks are being controlled effectively.
- Approve all risks contained within the report identifying any that require escalation or further assurance.
- Two new risks were highlighted, one around the relocation of education premises and the potential impact on delivery of training and the second around statutory/mandatory training compliance rates.

Committee discussed the statutory and mandatory training risk and the consensus from Committee was that this risk should remain with the Staff Governance Committee until compliance improves sufficiently. Committee members expressed concern that downgrading the risk to medium was premature, noting that while progress has been made, desired compliance levels have not yet been achieved. Views shared that escalation to the Corporate Risk Register may not add value at this

stage, provided adequate scrutiny and focus remains at Staff Governance level. Emphasis was placed on the requirement for clear milestones within the Risk Register and ongoing reporting through the staff experience and performance report.

Action/s: 1. Risk Manager to ensure that clear milestones are included within the Risk Register in relation to the Statutory and Mandatory Training risk.

The focus of the conversation turned to appraisal compliance and it was noted that whilst compliance is improving this has plateaued. Committee agreed that the risk of not completing appraisals has not yet been clearly articulated and it was agreed that this would be brought back to the next Staff Governance Committee meeting for consideration. A suggestion was also made to consider a broader corporate level strategic workforce/culture risk which encompasses statutory and mandatory training, appraisals, staff wellbeing and organisational culture. It was agreed that this would continue to be monitored with a potential future consideration at corporate risk level once further work progresses. A suggestion was also made to consider a broader corporate level strategic workforce/culture risk which encompasses statutory and mandatory training, appraisals, staff wellbeing and organisational which was suggested should report to Integrated Governance Committee.

It was agreed that Sarah Stevenson would meet with Graeme Ferguson and Elise Gallagher and review the risks before presentation to the June Staff Governance Committee.

Action/s: 2. Risk Manager to meet with Acting Director of Workforce and People & Culture Consultant to articulate the risk in relation to completion of appraisals and also review risks for presentation to the June Staff Governance Committee meeting.

Members discussed, noted and approved the updated Risk Register presented.

6.2 Internal Audit Action Update Report

Graeme Ferguson presented a paper to Committee which summarised the progress of implementing agreed actions from Internal Audit Reports as reported by management and validated by internal audit. Staff Governance Committee were asked to:

- Note there is currently one open action with a low rated risk level from the Health & Wellbeing Strategy 2021-24 Internal Audit and 3 medium rated risk level actions from the Statutory and Mandatory Training Audit.
- No new Actions have been added this reporting period.
- No Actions have been closed this reporting period.

Madeline thanked Graeme for the overview and Committee considered the Internal Audit Action Update Report. It was noted that there is one outstanding audit action relating to the Health, Safety and Wellbeing Strategy, with progress underway and milestones being developed to support completion.

An update was also provided in relation to actions arising from the Statutory and Mandatory Training audit. Members acknowledged that whilst progress has been made, a number of actions remain ongoing. The primary challenge identified was ensuring staff have sufficient time and opportunity to complete the training given operational pressures and abstraction constraints. Members reflected on the importance of consistent messaging from senior leadership and managers, alongside better communication of the legal and safety importance of Statutory and Mandatory training, was emphasised.

The Committee acknowledged ongoing improvements, supported a continued proportionate approach to compliance, and agreed that further progress should continue to be closely monitored, with updates provided to future meetings.

Committee noted the Internal Audit Action Update presented and emphasised the importance of timely updates and assurance on Audit Action completion.

ITEM 7 PROVIDED WITH A CONTINUOUSLY IMPROVING AND SAFE WORKING ENVIRONMENT, PROMOTING THE HEALTH AND WELLBEING OF STAFF, PATIENT AND THE WIDER COMMUNITY

Item 7.1 Draft Workforce Plan Proposal

Coralie Colburn presented the Workforce Plan Progress Update paper and Committee were asked to note the progress on the development of the 3-year Workforce Plan 2026-29. Coralie advised that work is underway to develop a Strategic Workforce Plan which will support the refreshed 2030 Strategy. The Plan is now in draft and will be presented to National Partnership Forum (NPF), Staff Governance Committee and the Board with tracked changes as further work is completed until a final version is ready for publication. A Strategic Workforce Planning Group will oversee the work which is produced in this plan including sub-groups carrying out discrete pieces of work such as defining the scope of practice required by staff in 2030 in order to deliver the strategy. Although there is no formal request for the three year workforce plan for submission next year, the SAS Board is committed to publishing an internal workforce plan on an ongoing basis. The Plan is submitted to Committee for information and comment and the full Plan will be published internally following final approval by the Board.

Committee noted that, although a formal Workforce Plan was not required at this stage, development of the plan was timely and appropriate given its clear alignment with the Annual Operating Plan, financial planning, and three year planning assumptions. The Committee recognised that the draft helped to address existing workforce risks, particularly around current workforce planning, while also beginning to explore longer term workforce considerations, acknowledging that there remain significant uncertainties regarding funding, service models, and future system wide changes.

It was highlighted that the draft remains a high level and evolving document, with further work required to refine longer term workforce projections beyond 2026/27. Members welcomed the inclusion of regional workforce plans and noted that work was underway to verify national figures against local returns, with an expectation that figures for 2026/27 would be confirmed shortly. Workforce projections for subsequent years were recognised as more challenging due to external dependencies and unknowns. The Committee welcomed the depth and breadth of analysis within the paper and commended the comprehensive assessment of drivers for change. However, members advised that the document would benefit from being more focused and streamlined, with clearer emphasis on:

- The current workforce position;
- The key issues requiring action;
- The intended direction of travel and
- How the plan informs future workforce requirements.

It was suggested that some detailed material could be moved to appendices or referenced elsewhere, enabling the core workforce plan to remain concise and accessible. Members also discussed whether the current document might more effectively serve as an evidence base or landscape assessment, underpinning a shorter and more targeted workforce plan. Strong support

was expressed for the establishment of a Strategic Workforce Planning Group, with appropriate operational and regional input.

Overall, the Committee welcomed the draft as a significant and positive step forward and provided constructive feedback to support refinement of the plan, particularly in relation to focus, clarity, and presentation of short and medium term priorities.

Madeline thanked Coralie for the Draft Workforce Plan Proposal which Committee discussed and welcomed.

Item 7.1 Staff Experience and Performance Report

Alison Ferahi introduced the staff story, which was supported with a video presentation from Clair Wright, Area Service Manager, West Lothian, who provided a one year update following her previous presentation on managing deaths in service and their impact on staff and managers.

Clair reflected on the experiences of managing two deaths in Service within West Lothian, highlighting the significant emotional impact on staff and managers, particularly following a suicide in service in 2020. She outlined challenges previously encountered, including the absence of structured guidance, limited awareness of available support mechanisms, and uncertainty around how best to support staff, those directly affected, and managers themselves during and after such incidents. Clair described how lessons learned from those experiences informed the response to a further death in service in December 2024. She highlighted improvements in practice, including early and tailored engagement with the Wellbeing Team, access to trauma and grief counselling, use of TRiM, open communication with staff, provision of quiet reflective spaces, and ongoing support beyond the funeral period. Committee noted that this approach supported staff wellbeing, reduced sickness absence, improved morale, and enabled staff to return to work in a safe and appropriate timescale.

The Committee noted the establishment of a short life working group, involving staffside representatives, operational colleagues and management, which led to the development of a Postvention Toolkit. The toolkit, now live on @SAS, provides practical guidance and checklists for managers responding to a death in Service, covering actions from initial notification through the post funeral period, as well as signposting to wellbeing and external support services. Committee welcomed confirmation that the toolkit will be actively promoted through multiple communication channels, including Chief Executive Bulletins, wellbeing newsletters, regional management team meetings, posters and an enhanced wellbeing site.

The Committee commended Clair for her leadership, compassion and perseverance in driving this work forward, and recognised the vital contribution of lived experience in shaping meaningful and practical support. Members welcomed the availability of a structured and accessible resource to ensure that managers and staff are better supported in the event of future deaths in service.

Madeline thanked Clair for her presentation and Committee welcomed the update and progress in this area.

Graeme Ferguson went on to present the Staff Experience and Performance Report which presents a cohesive and consolidated update on the overall staff experience and workforce performance within the Service and incorporates the previous separate reports on Health, Safety and Wellbeing and Workforce performance metrics. Graeme advised Committee that any changes since the last reporting period are highlighted in red. The paper was taken as read and Graeme highlighted that the report continues to evolve and provided assurance that backlog around occupational health has significantly improved.

Madeline thanked Graeme for the overview and opened to Committee for comments and questions. The Committee noted continued improvements in both content and presentation. Members welcomed the enhanced dashboards, clearer narrative and reduction in repetitive legacy content, which were felt to provide more accessible information for assurance and scrutiny. Committee noted the significant progress in reducing the backlog in relation to Occupational Health referrals which was expected to be cleared by the end of the month. The Committee welcomed this improvement and the continued exploration of improved occupational health provision going forward.

Committee went on to discuss appraisal completion rates, noting that performance had plateaued at a level that continued to present risk to the organisation. Members highlighted the need for this to be formally reflected as a risk, supported by clearer narrative and a plan to improve completion rates, recognising that seasonal pressures were a recurring rather than exceptional challenge.

Action/s: ***3. Acting Director of Workforce to ensure that clearer narrative is included in relation to appraisal completion rates as well as a plan for improvement is included in the Staff Experience and Performance Report going forward.***

Mike McCormick asked for additional clarification to be added in relation to Table 5, particularly the number of posts required under each staff category to provide clearer insight to understand organisational performance. ***(Action 2025/09/07.1 (2) on the Action Tracker refers).*** Thane Lawrie asked what the initial feedback was from the Staying Well service. Alison Ferahi advised that there is early positive activity relating to the Staying Well Service, with strong referral uptake within its first three months and provided Committee with confirmation that all referrals have been supported appropriately. Members welcomed emerging indications that earlier wellbeing interventions may be reducing inappropriate referrals into TRiM and agreed that this should continue to be monitored to assess longer term impact and outcomes. Further discussion focused on air quality monitoring, which members noted had been undertaken in response to staff concerns about extended periods spent waiting at hospitals. It was clarified that this was not routine monitoring but a targeted response to specific staff feedback.

Clarification was sought and provided on Newly Qualified Paramedic (NQP) contracts, with confirmation that the intention remains to move staff recruited on part-time contracts to full-time contracts from April, while retaining flexibility for future recruitment. Committee went on to discuss protected time for Team Leaders, noting that reported levels remained significantly below target. Members requested a more detailed narrative and progress plan, including geographical context where appropriate, to provide assurance on how this issue is being addressed. It was agreed that further work would be undertaken to validate the data, understand regional variation and clarify actions being taken. ***(Updated Action 2025/09/07.1 (4) on the Action Tracker refers).*** Members also highlighted the inter relationship between protected time, statutory and mandatory training, and appraisal completion, and requested that future reporting consider these areas collectively to support clearer organisational oversight.

Madeline thanked Graeme for the overview and Committee discussed and noted the report presented.

ITEM 8 APPROPRIATELY TRAINED AND DEVELOPED

Item 8.1 Education Update

Cheryl Harvey presented an update on Education developments which provided Committee with a progress update since the last Committee meeting and was taken as read. Cheryl advised

Committee that four Band 6 trainer posts for Moving & Handling and Violence Prevention and Reduction have been successfully appointed which was welcomed by Committee.

Madeline thanked Cheryl for the overview and opened to Committee for questions and comments. Madeline queried the progress against plan for LiP training, noting that current delivery was slightly below target and that the remaining programme appeared ambitious. Cheryl acknowledged that given the winter pressures, planned timescales may not be fully achieved and that a potential extension may be required. The recent appointment of the four Band 6 trainers is expected to support improvement in delivery and modelling work is currently underway. Madeline also expressed concerns in relation to Practice Educator capacity. Cheryl confirmed that a meeting with partnership colleagues, including Executive level input will take place in March which will focus on agreeing actions to address current challenges with outputs and next steps.

Committee commended the quality of the paper presented, acknowledged the ongoing improvements and thanked Cheryl for the detailed update presented.

ITEM 9 TREATED FAIRLY AND CONSISTENTLY, WITH DIGNITY AND RESPECT, IN AN ENVIRONMENT WHERE DIVERSITY IS VALUED

Item 9.1 Equality Diversity and Inclusion Fora Update

Coralie Colburn presented Committee with an update in relation to Equality Fora work for the various Equality Networks across the Service and commended the contributions made by Shy Das-Bharadwa in producing this latest report for Committee. The report was taken as read and Committee welcomed plans to move to a more focussed, themed approach from June onwards.

The Chair highlighted the value of the support provided by the Equality and Diversity Project Officer during the period of secondment. It was noted that, should this support be viewed as a longer term investment, the impact of the role would need to be clearly articulated to support a future business case. The information set out in the paper was recognised as contributing to demonstrating this impact.

Committee noted the Equality Fora Update presented.

Item 9.2 Culture Update

Committee received a presentation from Elise Gallagher providing an overview of the cultural work undertaken to date. The presentation aimed to:

- Provide an overview of the work completed so far;
- Share initial themes and observations;
- Support discussion on the purpose and future direction of the cultural work.

The initial brief was to bring a fresh perspective to existing cultural activity across the organisation, with a view to bringing this together into a coherent plan, followed by analysis of organisational capacity and capability to deliver. No evidence was identified of systemic poor or unacceptable behaviour, although it was acknowledged that isolated instances of poor behaviour exist, as in any organisation, and that safeguards should remain a feature of future work. Organisational data indicates that there are areas for improvement, including appraisal completion, mandatory training compliance and absence hotspots. Positive indicators include low turnover, strong recruitment, staff retention and a relatively balanced level of compliments and complaints with learning processes in place. Significant progress has been made on wellbeing, but further work is needed to ensure support is felt in day-to-day staff experience and targeted at the most stressful aspects of roles.

Some staff reported perceptions of not feeling “cared for” by the organisation, although this was not linked to the availability or quality of wellbeing services (which were consistently positively recognised), but rather to unresolved operational or management issues and perceived lack of follow-up. Home working among administrative and support staff was identified as a cultural consideration, particularly in relation to team cohesion and integration of new starters.

Committee welcomed the presentation and the organisation’s investment in bringing together initiatives into a clearer overall narrative and direction. Reflections were shared on the mixed impact of home working with benefits including improved collaboration across Scotland and the flexibility offered by technology. Challenges for some staff were the impact on relationship building, particularly for those joining the Service. Communication challenges were discussed as well as staff perceptions of organisational care which are often shaped by day to day operational pressures i.e. late finishes, demand etc.

Elise advised that the next phase of work will focus on clarifying the cultural direction with recommendations on the way forward presented to the Board by the end of April 2026 with engagement from partnership colleagues in advance. Ongoing engagement with Staff Governance Committee will continue.

Committee thanked Elise for the comprehensive presentation and the reflections and noted the early findings and proposed next steps.

Item 9.3 Policies

No Policies presented for consideration this reporting period.

Item 9.4 Whistleblowing Quarterly Report

Emma Stirling presented the Whistleblowing quarterly report which Committee were asked to discuss and note. Key points included:

- There were 2 concerns raised. Both were initially managed under business as usual (BAU) but were raised as Whistleblowing concerns at the request of the complainants. One has been launched as a Stage 1 and one as a Stage 2.
- There is one concern currently with INWO for further investigation.

Madeline thanked Emma for the overview and opened to Committee for comments and questions. Committee welcomed the 2 matters initially managed through BAU processes which were subsequently re-escalated under the Whistleblowing procedure at the request of the complainant. The approach was commended as demonstrating appropriate responsiveness and flexibility in handling concerns. Mike McCormick referred to the timescales for the open INWO investigation. Emma confirmed that as the report relates to the previous quarter, an update will be included in the next quarterly Whistleblowing Report.

Committee noted the Whistleblowing Quarterly report presented.

ITEM 10 INVOLVED IN DECISIONS

Item 10.1 Partnership Update

Committee noted the paper presented on recent partnership activity, including updates on Hot Topics, Reduced Working Week and Rest Breaks. The Hot Topics meetings facilitate open dialogue on challenging issues and Committee recognised the complexity of these discussions and the shared responsibility between management and staff representatives to resolve matters constructively. Stevie Gilroy reported that work is at an advanced stage in relation to the reduced working week. A minor delay is anticipated in uploading amended shift patterns to the system due to the volume and final stages of agreement, but this was noted as a positive position reflecting progress made. A meeting with full time officials and Scottish Government is scheduled, with the aim of reaching agreement and finalising the Standard Operating Procedure (SOP). Subject to agreement, implementation is expected to follow shortly after the Easter leave period.

Kevin Stewart raised an issue with the wording in the paper relating to Rest Breaks, noting that small changes may be required rather than minor tweaks and Stevie agreed that this wording would be amended.

Tom Steele asked for assurance that the organisation would meet the target for implementation of the reduced working week, noting the requirement for assurance to be provided to the Cabinet Secretary. Stevie confirmed that the necessary work had largely been completed with all relevant rostering arrangements prepared. Whilst some system updates remained in progress Stevie provided assurance that the organisation would meet the 36 hour working week commitment.

The Committee welcomed the update and the assurance provided in relation to the progress towards implementation of the reduced working week.

Item 10.2 Partnership Conference Update

Stevie Gilroy provided Committee with a verbal update in relation to the forthcoming Partnership Conferences which will take place in 2026. Stevie highlighted that further discussions in relation to topics are planned and engagement is ongoing to finalise arrangements with an update due to be issued as soon as possible. Committee members expressed an interest in participating in the Partnership Conferences and welcomed the opportunity for Staff Governance representation.

Committee noted the update provided.

ITEM 11 ACTION TRACKER

Committee noted the following items as closed and approved their removal from the SGC action tracker.

Team leader protected time to be left open, Committee content with the remainder.
Staff Nos – also to remain open until June.

2025/03/07.2	Staff Experience & Staff Story
2025/06/09.2	Staff Experience & Performance Report
2025/09/07.1 (1)	Staff Experience & Performance Report
2025/09/07.1 (3)	Staff Experience & Performance Report
2025/12/03	Minutes of Meeting Held on 4 September 2026
2025/12/05	Special Topic -Quality Safety and Learning and Links to LiP and Professional Standards

2025/12/06.1	Workforce Risk Register
2025/12/07.1	Staff Experience & Performance Report
2025/12/08.1	Education Update

Committee discussed the undernoted Actions and agreed to extend their timelines to June 2026.

2025/09/07.1 (2)	Staff Experience & Performance Report
2025/09/07.1 (4)	Staff Experience & Performance Report
2025/12/09.1	Equality Fora Update

ITEM 12 Staff Governance Action Plan 2025/26

Graeme Ferguson presented Committee with the Staff Governance Action Plan from 01 April 2025 – 31 March 2026 and Committee were asked to:

- Discuss and approve the activity on the Staff Governance Action Plan from 1st April 2025 – 31 March 2026. This is the closing position for 2025 - 26 and some items will be carried forward into the next iteration for 2026-27 SGAP which is in development and will be available for the June meeting.
- Note that as a reprioritisation exercise of the Service's priorities is undertaken, the initiatives within the SGAP will be developed or changed to reflect these.

Madeline asked that the item in relation to the Workforce Plan 2025-28 rolls over into the subsequent year to ensure continuity and avoid loss of momentum. It was noted that this could be reframed as a new action with a revised focus, but continued oversight is required.

Action/s: 4. Acting Director of Workforce to ensure that the Workforce Plan 2025-28 rolls over into the Staff Governance Committee 2026/27 Action Plan to ensure continuity and avoid any loss of momentum.

The Committee reviewed and acknowledged significant progress across multiple areas and approved the closing position of the Staff Governance Action Plan for 2025/26.

ITEM 13 DRAFT STAFF GOVERNANCE COMMITTEE ACTION PLAN 2026/27

Committee were asked to note that the Draft Staff Governance Committee Action Plan for 2026/27 is in development and will be presented to the June Staff Governance Committee meeting. The Chair emphasised the importance of ensuring the Action Plan includes clear milestones noting many Staff Governance actions span multiple years and benefit from defined delivery point rather than being treated as continuous activity. Graeme Ferguson confirmed that milestone based actions would be incorporated into the development of the 2026/27 Action Plan.

Committee noted the update and welcomed the commitment to provide a draft of the 2026/27 Staff Governance Committee Action Plan with a focus on milestones for the June meeting of the Committee.

Action/s: 5. Acting Director of Workforce to ensure that clear milestones are included in the Staff Governance Committee Action Plan 2026/27.

ITEM 14 STAFF GOVERNANCE COMMITTEE WORKPLAN 2026

Members noted the Committee Workplan which is provided to each meeting for assurance and Information with any changes annotated in red.

ITEM 15 STAFF GOVERNANCE COMMITTEE ANNUAL MONITORING RETURN 2024-25

Madeline Smith presented the Staff Governance Committee Annual Monitoring Return for 2024-25 and Committee were asked to note that the report was submitted to Scottish Government on 23/02/26 and is presented to Committee for information.

Committee noted the Staff Governance Annual Monitoring Return 2024-25 presented.

ITEM 16 ANY OTHER BUSINESS

No items of other business have been received in advance of today's meeting.

Madeline Smith thanked members and attendees for their participation and contributions to the meeting.

Committee praised the high quality of the papers prepared before today's meeting, which facilitated a good quality discussion.

On behalf of the Workforce Directorate and Staff Governance Committee, Graeme Ferguson thanked Madeline for her leadership as Chair of the Staff Governance Committee in this her last meeting as Chair. Madeline's commitment to staff and partnership working have been hugely valuable and it has been a pleasure working with her.

DATE OF NEXT MEETING

The next meeting will take place on Thursday 4th June 2026 at 10:00 am.

Scottish Ambulance Service
Working in Partnership with Universities

NHS SCOTLAND

MEETING OF THE STAFF GOVERNANCE COMMITTEE
10:00 AM ON WEDNESDAY 4 JUNE 2026
VIRTUAL MEETING VIA MICROSOFT TEAMS
AGENDA

The matrix below links the agenda items within the Staff Governance Committee with the Corporate Risks (CR) in place across the Service.

Key:
CR 4638 – Very High – Hospital Handover Delays
CR 5062 – Very High – Failure to Achieve Financial Target
CR 5602 – High - Service's Defence Against a Cyber Attack
CR 4636 – High - Health and Wellbeing of staff affected
CR 5653 – High - Organisational Culture and Staff Experience
CR 5889 – High – Future Workforce
CR 5891 – High - Collaborative Working
CR 5560 – High – Future Direction of NHS (New Proposed Risk)

		IMPACT				
		Low (1)	**Minor (2)**	**Moderate (3)**	**Major (4)**	**Extreme (5)**
LIKELIHOOD	**Almost Certain (5)**				CR4638 – 8 Items	
	Likely (4)			CR4636 - 10 Items	CR5062 – 1 Item CR5653 – 7 Items	
	Possible (3)			CR5891 – Item CR5889 – 2 Items		
	Unlikely (2)					
	Rare (1)					

	Agenda Item		**Brief Type**	**Lead**	**Risk**
10:00	1.	Welcome & Apologies	For Noting	M McCormick	_
	2.	Declarations of Interest relevant to meeting	For Noting	M McCormick	_
	3.	Minutes of meeting held on 4 March 2026	For Approval	M McCormick	_
	4.	Matters Arising not on the Agenda	For Discussion	M McCormick	_
10:10	5.	**SPECIAL TOPIC** "Inclusion"	For Discussion	C Colburn/M McEwan	
	5.1	Culture Update	For Noting	E Gallagher	CR 5653
10:30	6.	Staff Governance Committee and Sub-Group Terms of Reference Review	For Approval	M McCormick	-
10:40	7.	Staff Governance Committee and Sub-Group Annual Reports	For Approval	M McCormick	-
10:50	**8.**	**STAFF GOVERNANCE**			
	8.1	Workforce Risk Register	For Approval	S Stevenson	CR 4636 CR 4638 CR 5653
	8.2	Internal Audit Action Update Report	For Discussion/ Approval	G Ferguson	CR 4636
	8.3	Rest Break Compliance Internal Audit			

11:10	**9.**	**PROVIDED WITH A CONTINUOUSLY IMPROVING AND SAFE WORKING ENVIRONMENT, PROMOTING THE HEALTH AND WELLBEING OF STAFF, PATIENTS AND THE WIDER COMMUNITY**			
	9.1	Workforce Plan Proposal Update	For Discussion	C Carron	CR 4636, CR 5653 CR 5889
	9.2	Staff Experience and Performance Report – Including Staff Story	For Discussion	G Ferguson / A Ferahi / F McNicol	CR 4636 CR 4638 CR5653
11:30	**10.**	**APPROPRIATELY TRAINED AND DEVELOPED**			
	10.1	Education Update	For Noting	C Harvey	CR 4636 CR 4638 CR 5062 CR 5889
11:40	**11.**	**TREATED FAIRLY AND CONSISTENTLY, WITH DIGNITY AND RESPECT, IN AN ENVIRONMENT WHERE DIVERSITY IS VALUED**			
	11.1	Equality Fora Update	For Noting	C Colburn	CR 4636, CR 4638
	11.2	Policies No Policies for consideration this quarter.	For Information	F McNicol	-
	11.3	Whistleblowing Annual Report	For Noting	A Carruthers	CR 4636 CR 4638 CR 5653
12:00	**12.**	**INVOLVED IN DECISIONS**			
	12.1	Partnership Update	For Noting	G Ferguson/S Gilroy	CR 4636 CR 4638 CR 5653
	12.2	Partnership Conference Update - Verbal	For Discussion	G Ferguson/S Gilroy	CR 4636 CR 4638 CR 5653
	13.	**WELL INFORMED**			
12:15	13.1	Workforce Communications and Engagement Update	For Noting	M Hannan/C Higgs	-
12:25	14.	Draft Staff Governance Action Plan 2026/27	For Information	G Ferguson	CR4636, CR 4638
12:30	15.	Action Tracker	For Approval	M McCormick	
12:35	16.	Staff Governance Committee Workplan 2026	For Noting	M McCormick	_
12:40	17.	Any Other Business			
	Private Session – (Invoking Standing Order 5.22 resolution to take items in closed session)				
12:45	18.	Staff Governance Committee Effectiveness Review *(checklist circulated virtually to members for completion and collated checklist presented to June Committee meeting for approval)*	For Approval	M McCormick	

Date of next meeting: Thursday 3 September 2026 at 10:00 am

RECORDING PRIVACY NOTICE

Please note this meeting will be recorded for the purposes of the minute. The audio recording will be deleted after the minute is produced and approved in line with the MS Teams Audio & Transcription Guidance.