



NOT PROTECTIVELY MARKED

MINUTES OF THE 215TH PUBLIC MEETING OF THE SCOTTISH AMBULANCE SERVICE BOARD

1000 HOURS ON WEDNESDAY 26 MARCH 2025 ON MS TEAMS

Present:

Board members: Tom Steele, Board Chair (Chair)
Irene Oldfather, Non Executive Director (Vice Chair)
Julie Carter, Director of Finance, Logistics & Strategy
Stuart Currie, Non Executive Director
Michael Dickson, Chief Executive
Steven Gilroy, Employee Director
Thane Lawrie, Non Executive Director
Mike McCormick, Non Executive Director
Carol Sinclair, Non Executive Director
Madeline Smith, Non Executive Director

Regular attendees: Paul Bassett, Chief Operating Officer
Karen Brogan, Director of Strategy Planning and Programmes
Dave Bywater, Interim Director of Care Quality and Professional Development
Graeme Ferguson, Deputy Director of Workforce
Pippa Hamilton, Board Secretary
Mark Hannan, Head of Corporate Affairs & Engagement
Stephen Massetti, Director, National Operations
David Robertson, Regional Director West

In attendance: Sarah Stevenson, Risk Manager (Item 07)
Gareth Evans, Associate Medical Director
Robbie Brown (*member of the public, observing*)

WELCOME AND INTRODUCTION

The Chair welcomed everyone to the 215th Scottish Ambulance Service Board meeting. Apologies were noted from members: Liz Humphreys, Maggie Watts and Jim Ward and regular attendees, Avril Keen, Kenny Freeburn and Mine Weir.

The Chair welcomed Gareth Evans, Associate Medical Director who was in attendance at the meeting to deputise in the absence of Jim Ward.

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ITEM 01 PATIENT STORY

Board members viewed the patient experience video in advance of the meeting which featured the story of a young girl, aged four, who had to be helped by an ambulance crew after choking on food on Christmas Eve.

The Board discussed the story and noted the extremely distressing nature of the call for all involved. The Board noted its thanks to all staff involved for the professionalism shown.

The Chair asked that thanks be conveyed to the patient's family and staff involved for sharing their experience.

ITEM 02 DECLARATION OF INTERESTS

The following standing declarations were noted: -

- Stuart Currie - Non Executive Director, State Hospital.
- Liz Humphreys - Non Executive Director, Public Health Scotland, member of the Audit and Accountability Committee of the Police Investigations and Review Commission, Non Executive Director Independent Living Fund Scotland, and Trustee Scottish Action for Mental Health.
- Irene Oldfather - Director of Scotland's Health and Social Care Alliance and Member and Vice Chair, Domestic Advisory Group (DAG), Trade and Cooperation Agreement with the European Union.
- Madeline Smith – Board member, Construction Leadership Forum, Board member of Scottish Fire and Rescue Service
- Carol Sinclair – Trustee, Scotland's Charity Air Ambulance.
- Paul Bassett - Trustee, Scotland's Charity Air Ambulance
- Mike McCormick – Member of Independent Advisory Group, Member to the Home Office regarding the Emergency Service Mobile Communications Programme
- Dave Bywater, Trustee of Sandpiper Trust

ITEM 03 MINUTES OF MEETING HELD ON 29 January 2025

Members **approved** the minutes of the 29 January 2025 public Board meeting.

ITEM 04 MATTERS ARISING

The Board noted that 7 actions were proposed for closure and that one matters arising item had a due date of May 2025, which would be carried forward to the May Board meeting.

Board members **approved** the removal of matters arising 214/02/01, 214/03/05, 214/04/07, 214/05/08, 214/06/10 (2), 214/07/11, 214/08/15.

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ITEM 05 BOARD QUALITY INDICATORS AND PERFORMANCE REPORT

Michael Dickson presented members with the report and asked members to note that any new information contained within the paper since the last presentation was highlighted in red text to support effective discussion.

Michael Dickson highlighted that the unprecedented unscheduled care demand seen in December 2024 and January 2025 has returned to within the control limit. It was noted that median response times to purple category calls in February 2025 was 7 minutes 12 seconds. Michael Dickson added that the Integrated Clinical Hub (ICH) and Pathways initiatives continued to perform well throughout February, with 48.9% of patients managed out with the Emergency Department.

Members discussed Hospital Turnaround Times (HTAT) and noted that variation continues to be experienced across the Regions. The Board noted that on average turnaround time for February 2025 was 1 hour 0 minutes 51 seconds. The Board also noted the updates for each of the three Regions which outlined in more detail the improvement work which continues to be undertaken in collaboration with the respective Health Boards to reduce turnaround times.

The Board noted the update provided within the paper in relation to the Scheduled Care Improvement Programme and welcomed the development of a proposal to trial a Transport Hub to reduce delayed discharges and improve hospital flow.

Carol Sinclair asked for assurance that Scotland's Charity Air Ambulance (SCAA) colleagues were fully engaged in relation to the Air Ambulance Efficiency Project. Paul Bassett provided assurance that representatives from SCAA are engaged in this Project. Carol thanked Paul for the assurance.

Mike McCormick suggested that it would be beneficial to members if the number of 999 calls could be included within the "999 calls picked up in 10 seconds" percentage chart within the report to allow for better understanding of performance and demand. It was noted that as part of the ongoing work to review various Board papers, an update on which would be discussed at agenda item 16, this suggestion would be taken forward as part of the work to review the future presentation of the Board Quality Indicators and Performance Report.

The Board **noted** the report.

ITEM 06 DELIVERING OUR 2030 STRATEGY – PORTFOLIO UPDATES

Members noted that all new information contained within the paper since the last presentation was highlighted in red text.

Karen Borgan provided a summary of the main points from the paper and highlighted that 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. Karen Brogan added that there are currently no risks across any of the Portfolios which require escalation to the Board with all risks currently being managed through respective portfolio boards or already exists on the Corporate Risk Register.

Members particularly welcomed the progress being made in relation to the South Station Project and noted that a new project proposal was approved by the 2030 Steering Group in March, which is a requirement to enable the allocation of project management resources and establishment of a programme board to align to the work.

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Board members noted progress and thanked the Executive Team and their teams for their work to progress the delivery of the 2030 Strategy portfolios.

ITEM 07 CORPORATE RISK REGISTER (PUBLIC)

Sarah Stevenson joined the meeting and provided a summary of the main points from the paper and Board members noted the update on corporate risks.

Members noted that the Corporate Risk Register had been discussed in detail at the last Audit and Risk Committee. Following feedback from the Audit and Risk Committee discussion, it was agreed that additional detail would be added to Risk 5891 in relation to community engagement partnership.

Sarah advised that members were asked to:

- **Review the Corporate Risk Register and note** the actions in place and the assurance being received that the risks are being controlled effectively.
- **Approve** the reviewed risk tolerance levels and the updated risk description for Risk ID 5889 Workforce Sustainability.
- **Note** that the colour coding has been removed from interconnected risk table.
- **Approve** the risk register as presented.

Members discussed the presented risk register and made the undernoted suggestion to be taken forward:

- Review the future risk on NHS Fragile Services be undertaken to establish whether this risk may need to be brought forward to the current year. It was agreed that Sarah Stevenson and Karen Brogan would discuss this further offline and take to the Performance and Planning Steering Group for consideration.

Members **approved** the risk register.

Action:

1. **Risk Manager and Director of Strategy, Planning and Programmes** to discuss and review the future risk on NHS Fragile Services to establish whether the risk should be brought forward to the current year and take this through the Performance and Planning Steering Group for consideration.

ITEM 08 SUSTAINABILITY ACTION PLAN

Julie Carter provided a summary of the main points from the paper and asked members to review and approve the 3 year action plan 2025-2028 to support the 2030 Path to Net Zero Strategy. The Board noted that the strategic aims of the strategy remain in place and this 3 year action plan extends the actions for the next 3 years.

Members noted that the 3 year action plan is reviewed by the Climate Emergency Response and Sustainability Group (CERAS) at each meeting. Julie Carter added that the actions reflect the current constraints and the need for additional capital and revenue funding to implement some of the actions. Members noted that the constraints have been acknowledged by the National NHS Scotland Climate Emergency and Sustainability Delivery Group.

The Board noted the ambitious programme of work and thanked the team involved for pulling the work together.

The Board **approved** the Sustainability Action Plan.

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ITEM 09 FINANCIAL PERFORMANCE TO 28 FEBRUARY 2025

Julie Carter provided a summary of the main points from the paper:

1. The financial position at the end of month 11 is reporting a deficit of £0.45 million, reflecting both the additional £5.0 million recurring funding received to offset operational commitments and £9.0 million non-recurring in respect of post COVID/system pressures.
2. Impact of ongoing post COVID/system pressures of £8.41 million have been incurred over this period and has been offset against the £9.0 million full year funding received.
3. A detailed analysis of the key drivers of high overtime costs are included within the paper, drivers for these include higher shift cover to manage increased demand.
4. In relation to the £12.0 million efficiency savings target, to date £9.75 million has been delivered against a year to date target of £10.5 million. The full year trajectory has been assumed within the revised forecast and is updated within the paper.
5. The revised full year forecast of £17.5 million deficit reported previously up to month 8 was revised in month 9 and is now reporting a forecast break even position, enabled through receiving additional funding for the ongoing COVID/ System Pressures, a review of phasing of cost pressures and non-recurring slippage in the reduced working week implementation, this break even position remains on track.
6. The agenda for change reform funding received has been offset against the reduced working week additional costs.

Mike McCormick asked for more detail in relation to the overspend on staffing budget within the Finance and Logistics Directorate highlighted within the paper. Julie Carter advised that the Finance and Logistics cost centre is used a control account and advised that she would discuss the more granular detail of this with Mike out with the meeting, along with how this could be presented to the Board in future to aid clearer understanding.

Board members discussed the report and **noted** the financial position and continued to welcome the level of detail contained within the report.

Action:

2. **Director of Finance, Logistics and Strategy** to discuss the granular detail of the staffing budget over spend allocated to the Finance and Logistics control account and give thought to how this can be presented to the Board in future to aid clearer understanding.

ITEM 10 PERSON CENTRED CARE UPDATE

Dave Bywater provided a summary of the main points from the paper and Board members noted recent patient experience activity, involving people work, compliments and complaints compliance, themes and actions and an update on the cases with the Scottish Public Services Ombudsman (SPSO).

Board members noted the complaints compliance with Stage 1 reported at 94.6% and Stage 2 reported at 91.9% against a compliance target of 70%.

Members noted that of the 1041 complaints received between 01 April 2024 and 28 February 2025, the 3 most common themes for complaints are:

- Attitude and Behaviour – 282 complaints (27% of the total, compared to 31% in the last paper)

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- Delayed Response – 165 complaints (16% of the total, compared to 18% in the last paper)
- Triage/Referral to NHS24 – 142 complaints (14% of the total, compared to 15% in the last paper)

Members noted the substantial increase in complaints relating to the Patient Transport Service (PTS) eligibility and that the rise may be explained in part by the tightening of the Patient Needs Assessment (PNA) and the introduction and expansion of the Integrated Clinical Hub.

Members advised that they would welcome more detail in relation to the changes made to gain understanding of the implications. It was agreed that this would be looked into further and that Mark Hannan would pick this up with Stephen Massetti and the Ambulance Control Centre Team.

Board members **noted** the report.

Action:

- 3. Head of Corporate Affairs and Engagement and Director National Operations** to discuss the request from Board members to have sight of the changes made to the Patient Transport Service Patient Needs Assessment to enable the Board to gain clearer understanding of the implications of the changes.

ITEM 11 PATIENT AND STAFF SAFETY HEALTHCARE ASSOCIATED INFECTION (HAI) UPDATE

Dave Bywater provided a summary of the main points from the paper and highlighted to members that as part of the ongoing Board paper review work, the paper presented has been reviewed and refreshed and asked members for their feedback on the format of the report and level of detail provided.

Board members noted that as previously agreed Maggie Watts met with the Head of Infection Prevention and Control and discussed the future presentation of the Board report.

Members also noted that although HAI is the required element for Board reporting, the report author, as the service lead for infection prevention and control (IPC) also includes information to the Board on wider IPC issues. It was therefore suggested that future reporting may be more appropriately titled as Infection Prevention and Control Activity Update Incorporating Healthcare Associated Infection.

Members discussed the report and asked that more detailed narrative is included to accompany the vaccination data within future reports.

Board members **noted** the report and **approved** the change of title of future reporting as recommended.

Action:

- 4. Interim Director of Care Quality and Professional Development** to ensure that more detailed narrative is included to accompany the vaccination data contained within future reporting.

ITEM 12 HEALTH AND WELLBEING UPDATE

Graeme Ferguson provided a summary of the main points from the paper. Board members noted that the paper provided an update on health and wellbeing activity.

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Members noted and discussed the report including:

- 25 actions (out of total of 27) within the Health and Wellbeing Roadmap have been completed with a blue BRAG and the remaining 2 actions being behind schedule with a BRAG status of Amber.
- The 2 Amber actions are:
 - Developing awareness, training & support mechanisms for suicide prevention & postvention.
 - Collaborative work between Green Champions and OD & Wellbeing to support progression of staff health & wellbeing activity.
- Work is underway to review and further develop how we present our staff experience, health and wellbeing progress at a more strategic level to the Board over the next reporting period with a reviewed paper to be presented to the Board meeting in July for discussion.

Board members **noted** the update and report.

ITEM 13 HEALTH AND CARE STAFFING (SCOTLAND) ACT ANNUAL REPORT

Dave Bywater advised members that the Act requires an annual report to be submitted to the Scottish Government and then publicly published by 30th April of each year. Members noted that the Scottish Ministers must collate all Health Board reports and lay that combined report before the Scottish Parliament with an accompanying statement.

Members discussed the report and made the undernoted suggested amendments:

- Page 5 box 5 paragraph 1 “staff” should be “staffed”.
- Page 11 text in the box is incomplete – perhaps due to a formatting change.
- Page 21 comment / response to first item, line 4 needs the word “followed” inserted.

Madeline Smith asked for clarification on whether the introduction of Inphase will improve the ability to manage the information required for future Health and Care Staffing (Scotland) Act reporting. It was agreed that Dave Bywater would seek clarity from David Payne, Practitioner for Health and Care Staffing and Workforce on his return from leave.

Members **approved** the content of the Annual Report subject to the suggested amendments being made. Member **noted** that following the amendments being made the Annual Report would then be submitted to the Scottish Government.

Action:

5. **Interim Director of Care Quality and Professional Development** to seek clarity as to whether the introduction of Inphase will improve the ability to manage the information required for future Health and Care Staffing (Scotland) Act reporting.

ITEM 14 CHAIR’S VERBAL REPORT

The Chair provided an update on his activity during the reporting period and Board members noted:

- The Chair attended the Ambulance Leadership Forum in Leeds on 11 and 12 March.
- The Chair spoke at the Academy of Medical Sciences’ Forum on 14 March which looked at innovation adoption.
- The Chair recently hosted a visit by Robbie Brown as Trustee of Scotland’s Charity Air Ambulance (SCAA) to West Ambulance Control Centre and the Air Base at Glasgow Airport.

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ITEM 15 CHIEF EXECUTIVE'S UPDATE

Michael Dickson provided an update on key activity during the reporting period.

Michael highlighted that the Chief Executive of St John's Ambulance Papua New Guinea, along with the National Ambulance Service Ireland recently undertook a visit to the Service to gain more understanding of the workings of our Air Ambulance assets.

Michael advised that Board Chief Executives recently met with the First Minister in which the essential requirement for collaborative working across all Board was discussed. Board members noted that a Collaboration Position Statement from Board Chief Executives would be presented at today's private Board meeting for endorsement.

ITEM 16 BOARD REPORTING REVIEW MEETING UPDATE

The Board noted the update on the progress of the work to review the reporting of the undernoted areas to future Board meetings:

- Review of Board Quality Indicators and Performance Report.
- Removal of Workforce data and information from Performance Report and development of a Workforce Directorate Report to also combine current Health and Wellbeing Board Report.
- Balance of Clinical data reporting between Clinical Governance Committee and Public Board reporting.
- Review of Healthcare Associated Infection (HAI) Board Report

ITEM 17 BOARD COMMITTEE VICE CHAIR APPOINTMENTS

The Chair advised that the Integrated Governance Committee approved the proposal of the introduction of a formal Vice Chair for each of the Standing Board Committees.

The Board noted that the Vice Chairs for each Committee would be:

- Audit and Risk Committee – Mike McCormick
- Clinical Governance Committee – Maggie Watts
- Staff Governance Committee – Liz Humphreys
- Remuneration Committee – Mike McCormick

The Board noted and welcomed the appointments of Vice Chairs which would ensure resilience and good practice.

ITEM 18 CLINICAL GOVERNANCE COMMITTEE

Board members **noted** the minutes of the Clinical Governance Committee held on 13 November 2024, approved by the Committee on 10 February 2025 and the agenda from the meeting held on 10 February 2025.

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ITEM 19 AUDIT AND RISK COMMITTEE

Board members **noted** the minutes of the Audit and Risk Committee held on 10 October 2024, approved by the Committee on 23 January 2025 and the agenda from the meeting held on 23 January 2025.

ITEM 20 INTEGRATED GOVERNANCE COMMITTEE

Board members **noted** the minutes of the Integrated Governance Committee held on 03 June 2024, approved by the Committee on 05 February 2025 and the agenda from the meeting held on 05 February 2025.

ITEM 21 BOARD DEVELOPMENT UPDATE

Board members **noted** the report. The Chair recorded his thanks to everyone for the facilitation of the Board's visit to the National Risk and Resilience Department (NRRD) undertaken as part of the development session.

ITEM 22 AOB AND DATE OF NEXT MEETING

Date of next meeting – 28 May 2025.

The Chair thanked members for their participation and the focus and attention given throughout the discussion.

The Chair closed the meeting.

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