



**NOT PROTECTIVELY MARKED**

**Public Board Meeting**

**30 July 2025**

**Item No 13**

**THIS PAPER IS FOR DISCUSSION**

**STAFF EXPERIENCE AND PERFORMANCE REPORT**

|                        |   |
|------------------------|---|
| <b>Lead Director</b>   | Graeme Ferguson, Acting Director of Workforce   |
| <b>Authors</b>         | Alison Ferahi, Head of Organisational Development & Wellbeing<br>Fay McNicol, Head of Health and Safety<br>Coralie Colburn, Senior HR Manager   |
| <b>Action required</b> | The Board is asked to <b>discuss</b> the Staff Experience and Performance report.   |
| <b>Key points</b>      | <p>Key points to note:</p> <ol style="list-style-type: none"><li>1. We have not received Occupational Health data for Q4 2024/2025 and Q1 2025/2026 from National Services Scotland due to short staffing. NSS are working on the data now to have it ready for the next Health, Safety &amp; Wellbeing Group, National Partnership Forum and Staff Governance Committee.</li><li>2. The current rolling contract with Webropol for delivering iMatter is due for renewal in summer 2027. We have been advised that, unless alternative arrangements are discussed in advance, the contract will be automatically renewed, which would likely mean a further extended period before any other options for measuring staff experience could be explored.</li></ol> <p>iMatter has provided a consistent national framework for over 10 years; however, engagement levels remain comparatively low, and feedback from other NHS Boards suggests increasing discussion about the tool's effectiveness in driving meaningful change. The upcoming renewal period may therefore be an important point for the Board to consider whether iMatter continues to provide the level of insight required to improve staff experience at individual, team, and organisational levels – and ultimately enhance the experience of both colleagues and patients.</p> |

|   |  |
|---|--|
|   | 3. We held our third Healthy Culture Week from 23 to 27 June 2025, centred around the theme "Care and Compassion – It's All About You." Over the course of the week, we held 12 events with 434 participants attending that rated an average of 8.8/10 for effectiveness of the session.   |
| <b>Timing</b>                                   | This is a new format report which seeks to present a cohesive and consolidated update on our overall staff experience and workforce performance within SAS. It incorporates the previous separate reports on health, safety and wellbeing and introduces some new workforce performance metrics. We will continue to refine the report based on the feedback received. |
| <b>Associated Corporate Risk Identification</b> | Risk ID 4636<br>Risk ID 5651<br>Risk ID 5652<br>Risk ID 5653   |
| <b>Link to Corporate Ambitions</b>              | This paper relates to the following Corporate Ambition: <ul style="list-style-type: none"> <li>We will be a great place to work, focusing on staff experience, health and wellbeing.</li> </ul>  |
| <b>Link to NHS Scotland's Quality Ambitions</b> | This paper relates to 'Safe', 'Effective' and 'Person Centred' NHS Scotland's Quality Ambitions.   |
| <b>Benefit to Patients</b>                      | The steps we are taking via our organisation wide staff experience commitments to support, nurture, retain, develop & enable our people to thrive at work will in turn have a direct impact on improving the quality of care we provide to patients.   |
| <b>Climate Change Impact Identification</b>     | This paper has identified no impacts on climate change.  |
| <b>Equality and Diversity</b>                   | An Equality Impact Assessment was completed on 8 July 2024 for our Health & Wellbeing Strategy 2024-27 and filed with the Service EDI Lead for publication on @SAS.  |



**Scottish  
Ambulance  
Service**

Working in Partnership with Universities



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**STAFF AMBULANCE SERVICE BOARD**

**STAFF EXPERIENCE AND PERFORMANCE REPORT**

**GRAEME FERGUSON, ACTING DIRECTOR OF WORKFORCE**

**ALISON FERAHI, HEAD OF OD & WELLBEING**

**FAY MCNICOL, HEAD OF HEALTH AND SAFETY**

**CORALIE COLBURN, SENIOR HR MANAGER**

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## **SECTION 1: PURPOSE**

This paper provides an update on staff experience and workforce performance over the last reporting period to July 2025.

## **SECTION 2: RECOMMENDATIONS**

The Board is asked to **discuss** the Staff Experience and Performance report.

## **SECTION 3: DISCUSSION**

This paper provides the Committee with oversight and assurance on the progress of maintaining a positive staff experience within SAS by measuring this against key workforce performance metrics during this reporting period.

The Workforce Directorate has its own Annual Operating Plan (AOP) which is aligned to the Staff Governance Action Plan (SGAP) and the Service's Annual Delivery Plan (ADP). Our AOP is currently being re-prioritised in line with the SGAP for 2025/26. Progress on this will be reported to Board and Staff Governance Committee over the course of 2025/26.

Our Health & Wellbeing Strategy 2024-27 builds upon the approach of its predecessor and is grounded in a solid and growing evidence base highlighting the importance of prioritising the health and wellbeing of our workforce. Six ambitions have been developed for 2025/26, the second year of our Health & Wellbeing Strategy (2024-27) that underpin our SAS 2030 Strategy and take steps to address our iMatter results and the Improving Workplace Staff Experience & Wellbeing Pulse Survey (2024). These ambitions are incorporated into this new style report under the Health & Wellbeing, Learning, Innovation and Culture & Leadership sections.

|   |      |   |
|---|------|---|
| Doc: 2025-07-30 Staff Experience & Performance Report | Pg 1 | Authors: A Ferahi, F McNicol, C Colburn |
| Date: 2025-07-15                                      | V 1  | Review Date: September 2025             |

### 3.1 WORKFORCE PLANNING

Significant preparatory work is underway to develop the next 3-year workforce plan for 2025-28. Although no definitive timescale has been confirmed yet by Scottish Government (SG), an abridged version of this plan was sent to SG in mid-March 2025. This had a particular focus on “difficult to recruit areas and roles” and more general workforce challenges. Our intention this year is to submit our next 3-year SAS workforce plan at the beginning of 2026 at the same time as the Service submits its Annual Delivery Plan and Financial plan.

The workforce information contained in the Vector of Measures outline varied performance across the different metrics. Key points for noting and discussion are outlined below along with an update on proposed developments in our workforce reporting approach.

#### Employee Resourcing

##### Staff in Post

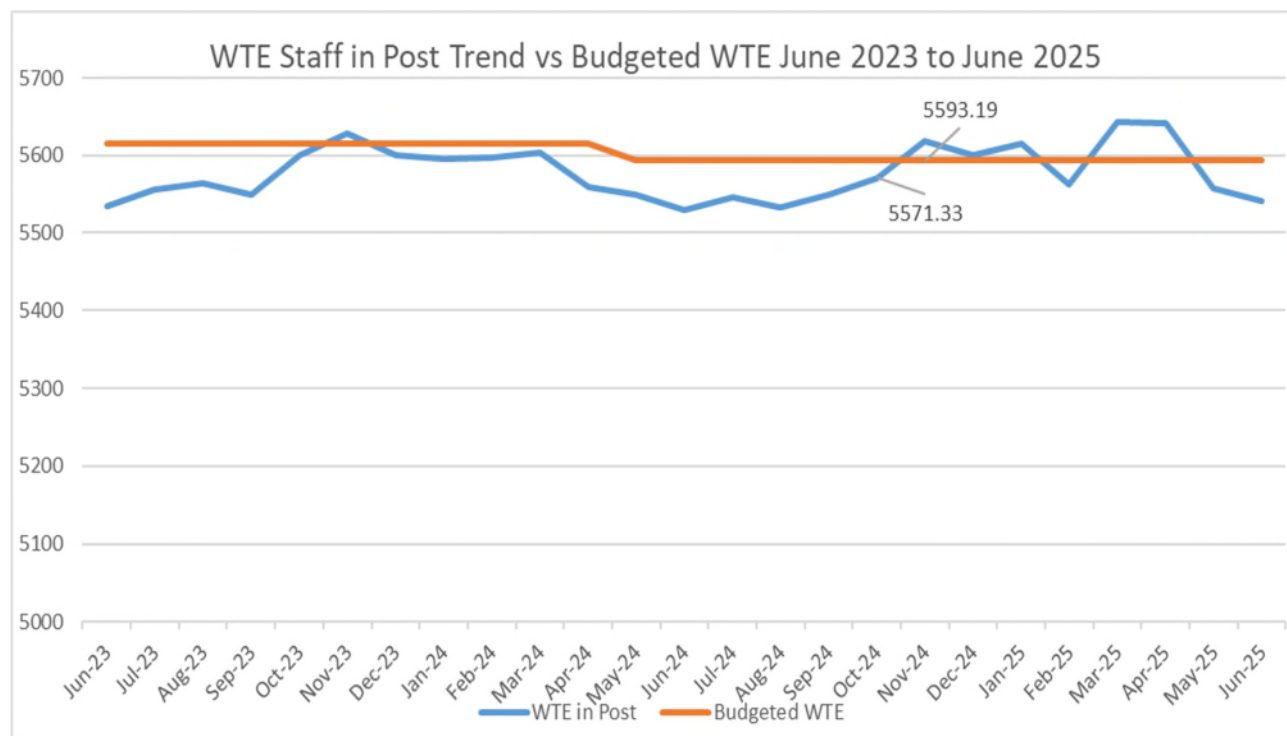
Table 1 confirms that at the end of June 2025, SAS employed 6670 staff, contributing 5540.76 WTE.

| Scottish Ambulance Service                                  |           |         |
|---|-----------|---------|
| Staff in post as at the end of June 2025 (Headcount vs WTE) |           |         |
| SAS Job Family  | Headcount | WTE     |
| Ambulance Paramedic   | 2403.00   | 2121.97 |
| Ambulance Technician  | 1563.00   | 1456.61 |
| Ambulance Care Assistant                                    | 969.00    | 707.17  |
| Ambulance Services - Driver                                 | 44.00     | 10.88   |
| Ambulance Services - EMDC Operative                         | 478.00    | 385.28  |
| Ambulance Services - Operations Manager                     | 115.00    | 98.13   |
| Ambulance Services - PTS Control                            | 91.00     | 75.42   |
| Medical   | 122.00    | 4.20    |
| Nursing   | 136.00    | 32.66   |
| Senior Managers   | 15.00     | 8.29    |
| Administrative Services                                     | 602.00    | 525.10  |
| Support Services  | 132.00    | 115.05  |
| Grand Total   | 6670      | 5540.76 |

Table 2 shows the in-post staffing by Job Family and Region.

| Scottish Ambulance Service  |              |             |             |                     |                     |             |
|---|--------------|-------------|-------------|---------------------|---------------------|-------------|
| WTE Staff in post as at end of June 2025 by Job Family and Region |              |             |             |                     |                     |             |
| SAS Job Family  | North Region | East Region | West Region | National Operations | Corporate Functions | Grand Total |
| Ambulance Paramedic   | 399.37       | 636.75      | 851.37      | 218.03              | 16.45               | 2121.97     |
| Ambulance Technician  | 320.79       | 467.99      | 646.42      | 21.41               | 0.00                | 1456.61     |
| Ambulance Care Assitant   | 82.19        | 247.79      | 376.19      | 1.00                | 0.00                | 707.17      |
| Ambulance Services - Driver                                       | 0.00         | 0.00        | 8.88        | 0.00                | 2.00                | 10.88       |
| Ambulance Services - EMDC Operative                               | 0.00         | 0.00        | 0.00        | 385.28              | 0.00                | 385.28      |
| Ambulance Services - Operations Manager                           | 8.81         | 18.81       | 19.00       | 20.51               | 31.00               | 98.13       |
| Ambulance Services - PTS Control                                  | 0.00         | 0.00        | 2.00        | 73.42               | 0.00                | 75.42       |
| Medical   | 0.00         | 0.00        | 0.00        | 2.69                | 1.51                | 4.20        |
| Nursing   | 2.00         | 1.65        | 3.00        | 20.55               | 5.46                | 32.66       |
| Senior Managers   | 0.00         | 0.00        | 0.00        | 0.00                | 8.29                | 8.29        |
| Administrative Services   | 13.24        | 24.79       | 36.18       | 108.37              | 342.52              | 525.10      |
| Support Services  | 3.00         | 1.07        | 10.07       | 1.00                | 99.91               | 115.05      |
| Grand Total   | 829.40       | 1398.85     | 1953.11     | 852.26              | 507.14              | 5540.76     |

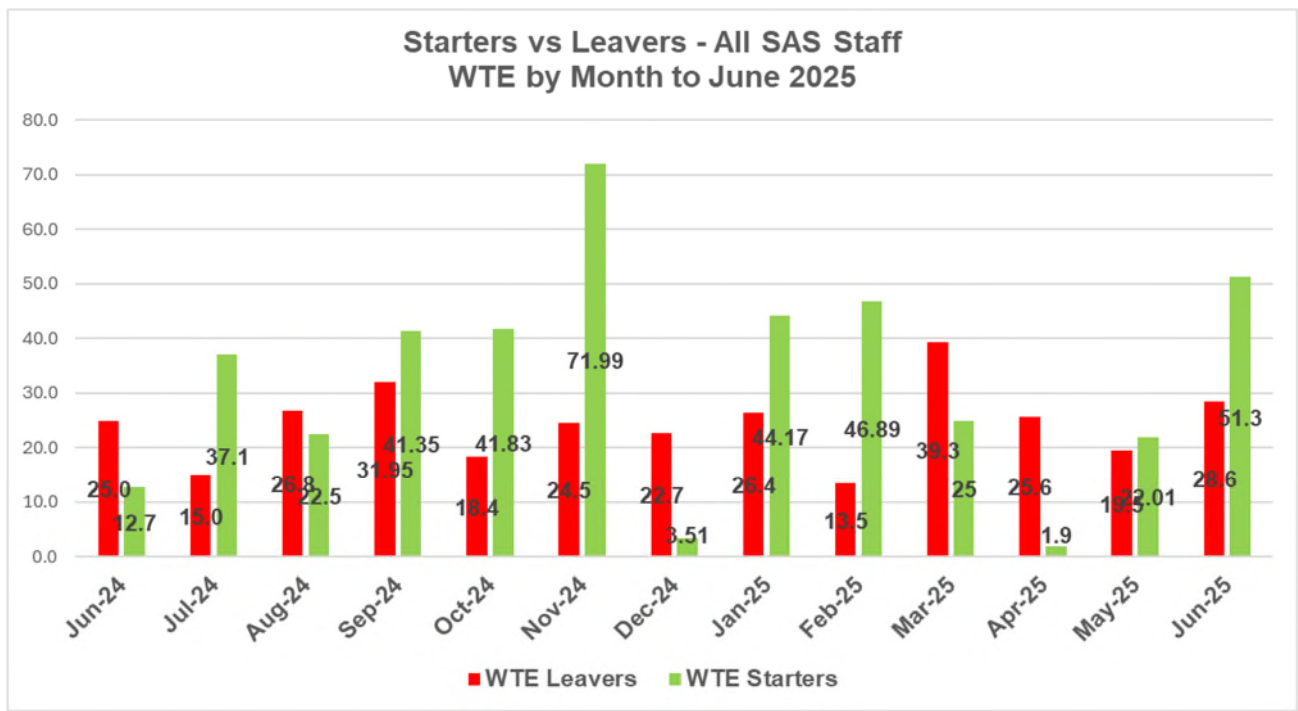
Table 3 below shows SAS WTE in post Staffing trend against budgeted WTE by month.



Workforce Change – Starters and Leavers

Table 4 highlights that the number of staff leavers exceeded starters in the first three months of the financial year (although staff starting on bank contracts present as 0 WTE on the eESS system).

Table 4



3.2 ATTRACT, RECRUIT, RETAIN

3.2.1 Newly Qualified Paramedics

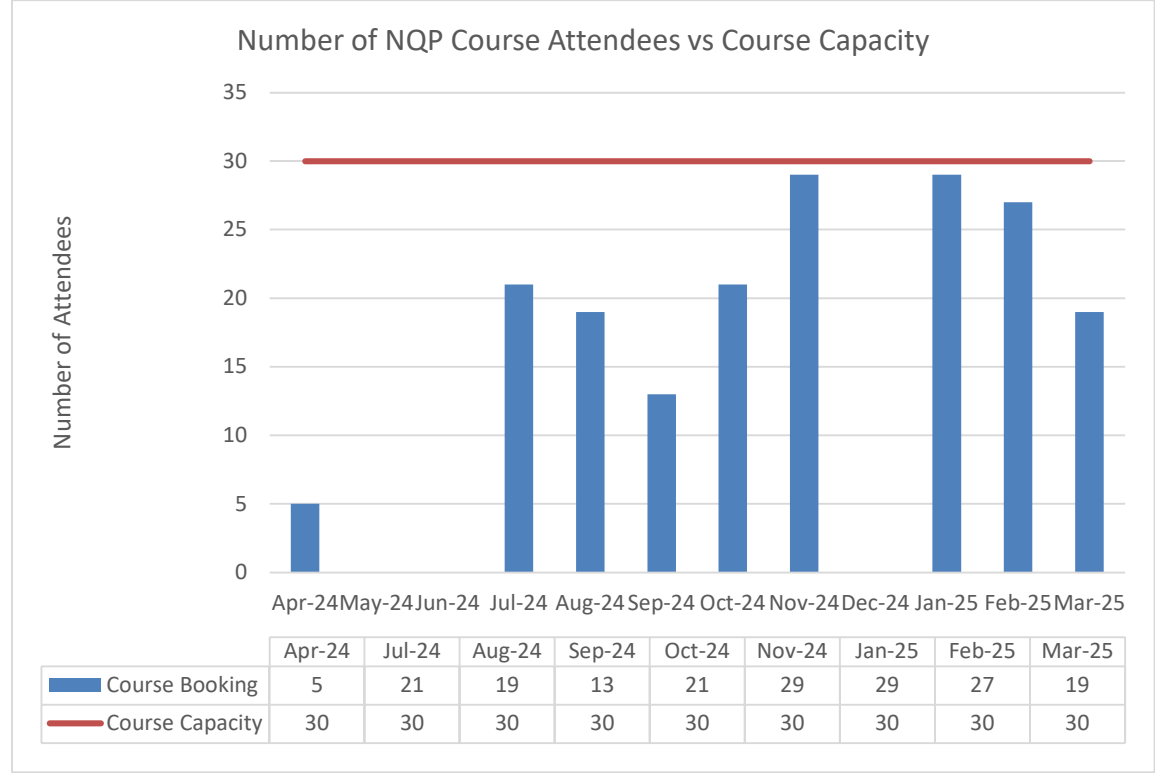
Early courses have been running at approximately 2/3rds of capacity. The primary reasons for this are.

- Candidates refusing offers of employment due to geographic/location preferences (remaining in holding pools)
- Uncertainty of additional funding associated with reduction in the working week (limiting additional resource for new posts)
- Graduate candidates failing to meet necessary criteria to commence employment (exam fails/HCP registration/C1 driving licence).

Later courses have been very close to capacity and this is encouraging going forward.

Table 5 shows the recruitment numbers for newly qualified paramedics for 2024/25 against current course intakes.

Table 5



Newly qualified paramedics have been identified as the primary source of recruitment across 2025/26 with provision in place for additional recruitment to technician posts to address any shortfalls in paramedics recruitment. The initial recruitment targets for Technician (150) and Ambulance Care Assistants (120) are currently being assessed in light of recent developments regarding the provision of national funding to compensate for the reduction in the working week, which was one of the primary drivers of WTE recruitment assumptions. Also an internal re-appraisal of the Tech to Para “Earn as you Learn” programme is also now under review in light of the national NHS Scotland funding challenges. Once the revised numbers have been agreed, progress against targets will be included in future reports.

The 2025 recruitment campaign for Newly Qualified Paramedics has now commenced. The Service received 474 applications from interested candidates, of which 412 have been shortlisted. Interviews and fitness testing took place in June – 400 fitness tests and 325 interviews. 80 offers of employment have been made, with others to follow. Active engagement with each of the 5 Universities has proved to be very successful and we anticipate a much more positive candidate experience this year as a result.

### 3.2.2 Sickness absence levels

Total sickness absence during the last reporting period has increased from 8.77% in early May to 9.13% in June. There was a decrease in long-term absence (6.23%) against the previous month.

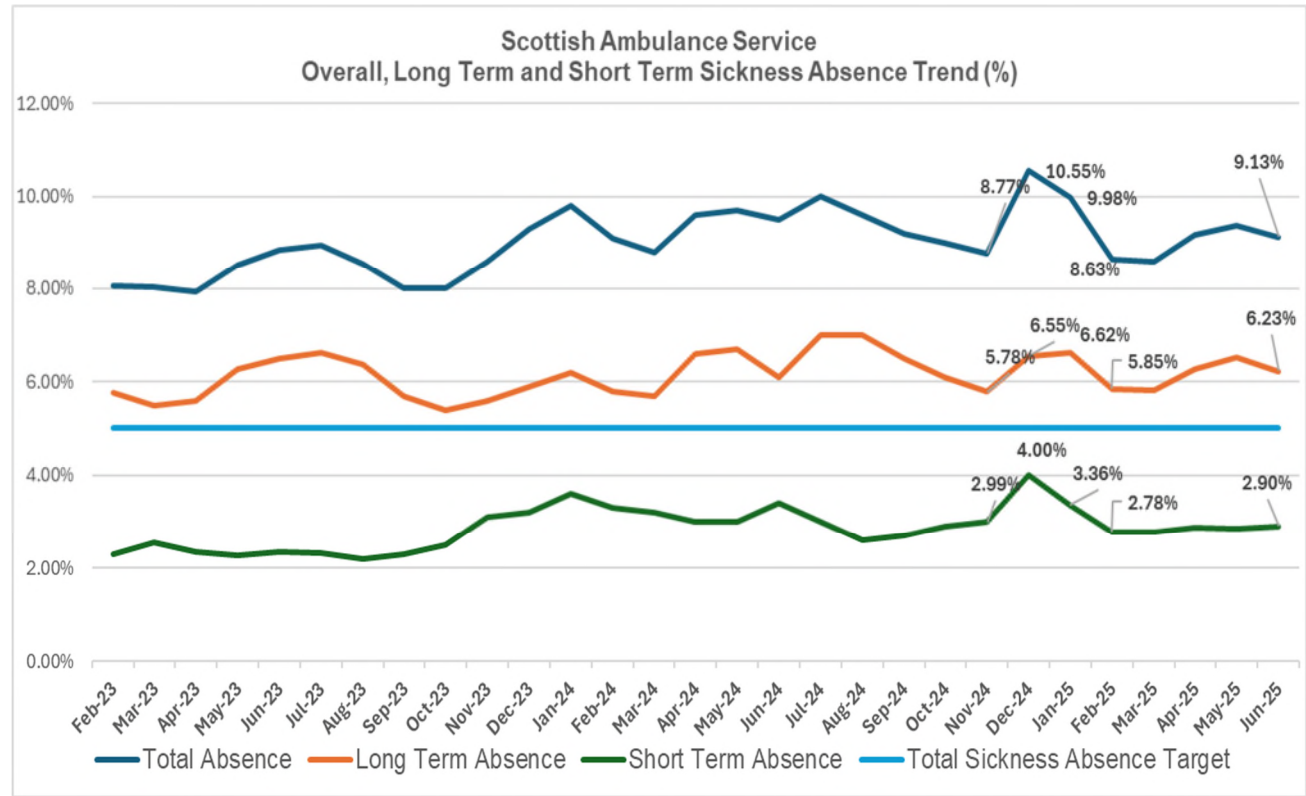
Patterns of absence indicate that there has historically been an increase in sickness levels observed across the winter months and this continues to be monitored given the current elevated

levels of staff absence. An executive oversight group has been established to identify the key factors driving sickness absence and develop actions required to reduce both long- and short-term absences. The key driver for this group is to ensure that all available support is in place to support staff with challenging health issues and that our internal processes are applied consistently.

Considerable data analysis has now been undertaken which gives the Service far more workforce data than ever before to analyse underlying causes of sickness absence, including down to station and individual level, as well as highlighting wider abstraction reasons with this data now in place, there can be much more credence given to the available information which in turn will prompt more person centred and supportive management actions to address high level of sickness absence.

Table 6 highlights the overall long term and short-term sickness absence trends over the last 2 years.

Table 6



The top reason for sickness absence remains anxiety/stress and depression and much focused work is progressing to enable the Service to interact more proactively with staff with mental health issues to feel more positively supported. Signposting to other sources of help remains available such as TASC, EAS, OHS, Keil Centre and our own mental health team. Serious consideration is being given to establishing a wellbeing hub within SAS. This may be an extension of the current People Services Hub, or an entirely separate internal facility available to all staff.

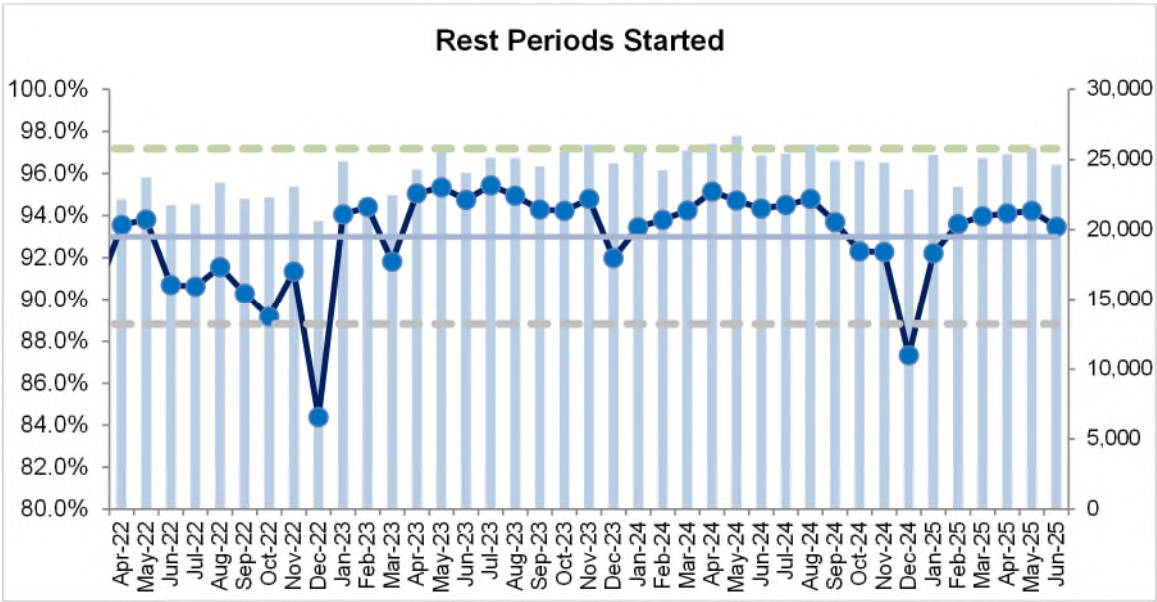


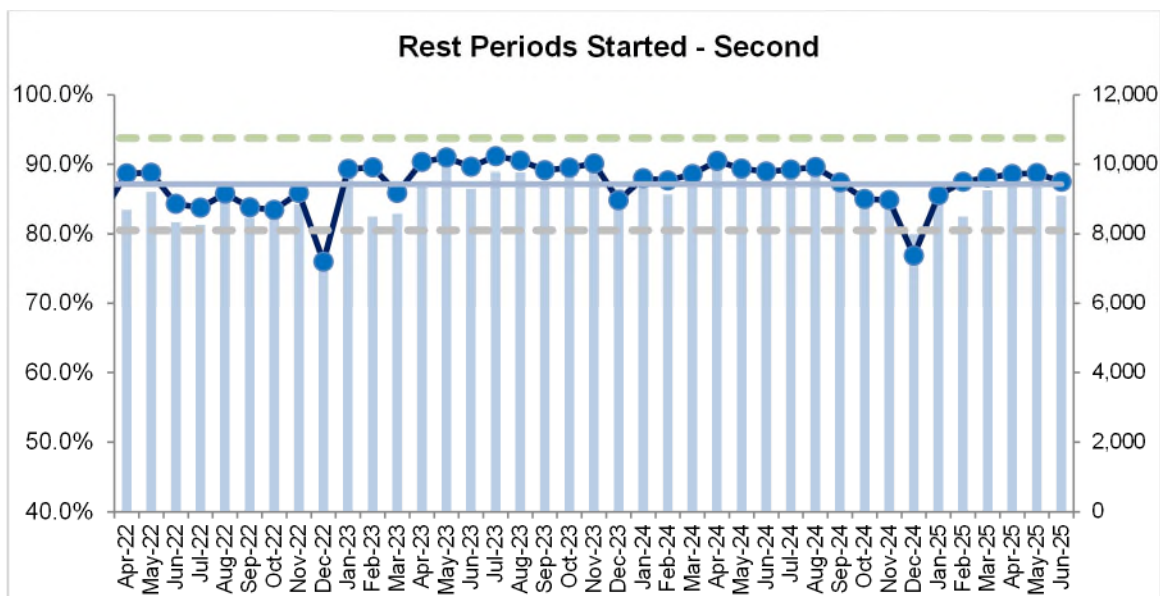
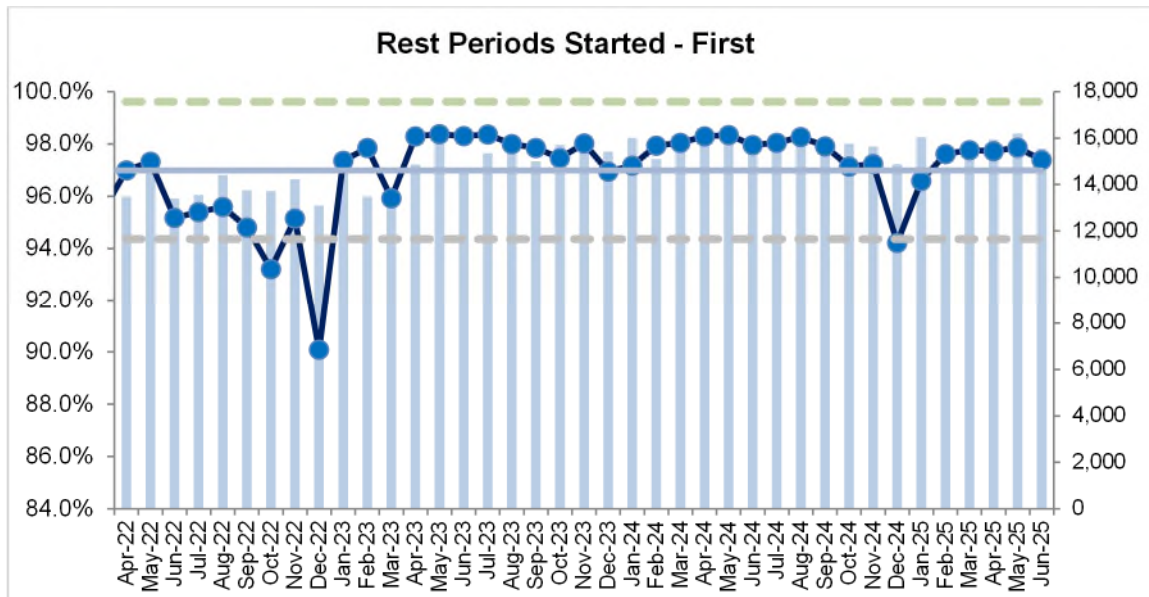
3.2.3 Rest Breaks

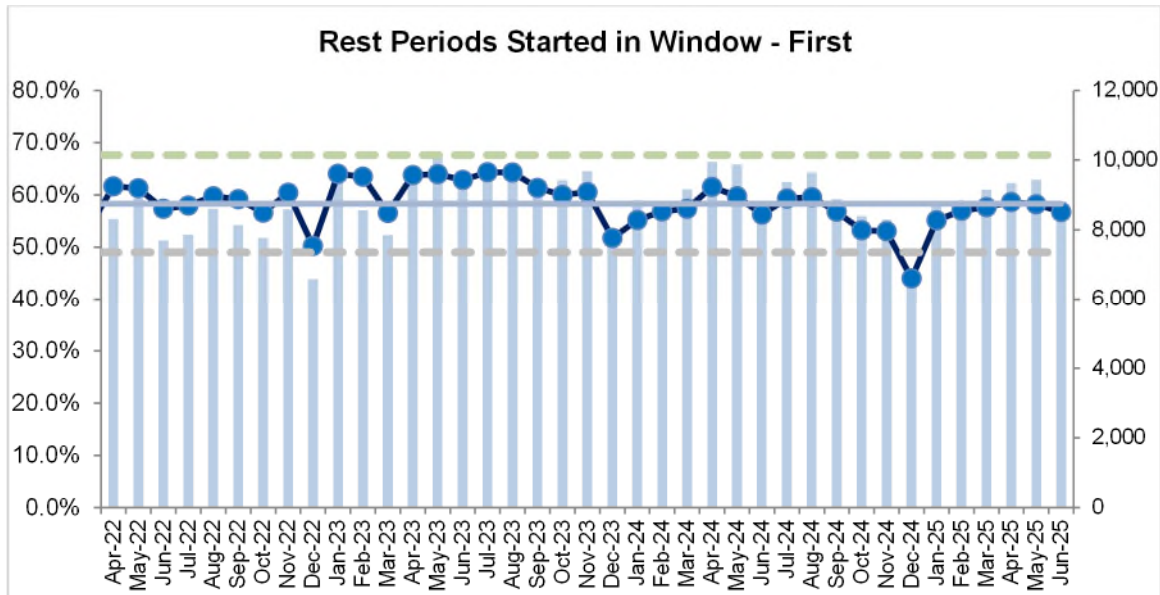
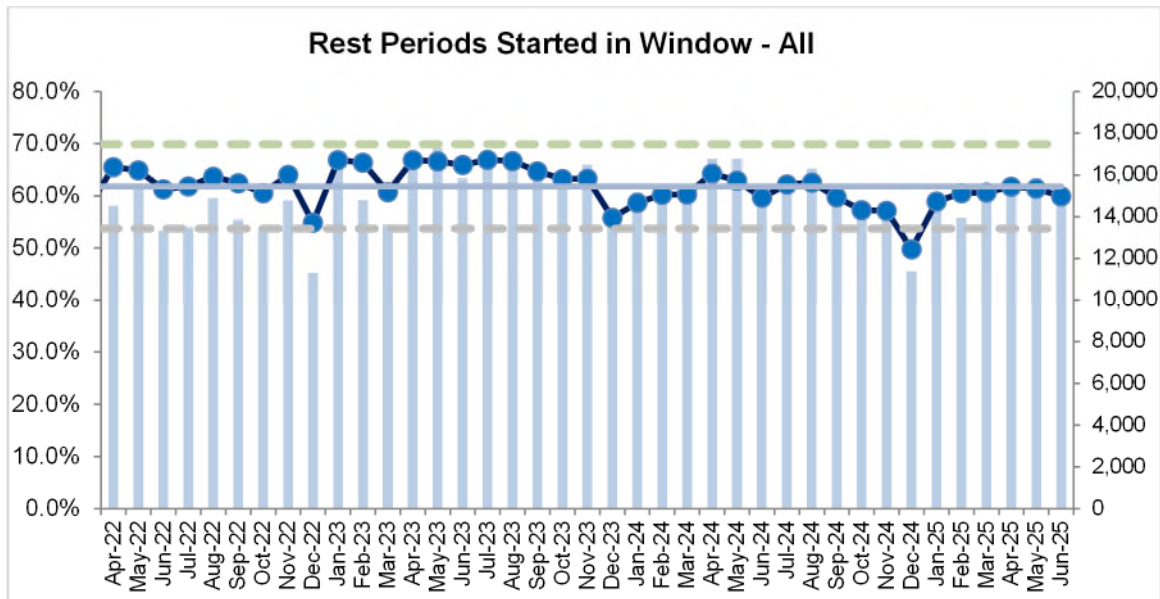
Rest breaks remain a significant challenge for the Service. Discussions are ongoing with our staff side colleagues, Scottish Government and SAS to seek a permanent resolution to this issue. All sides remain committed to finding a solution and there are currently two proposals under consideration. Working in partnership with our staff side colleagues, the Rest Break Programme Board continues to focus on ways to improve rest break compliance across the Service with positive and sustained improvements being seen as a result of the introduction of the tests of change throughout 2023 and 2024. SAS has reiterated its commitment to balancing the needs of patients with the wellbeing of staff by ensuring that crews are protected and rested within a shift.

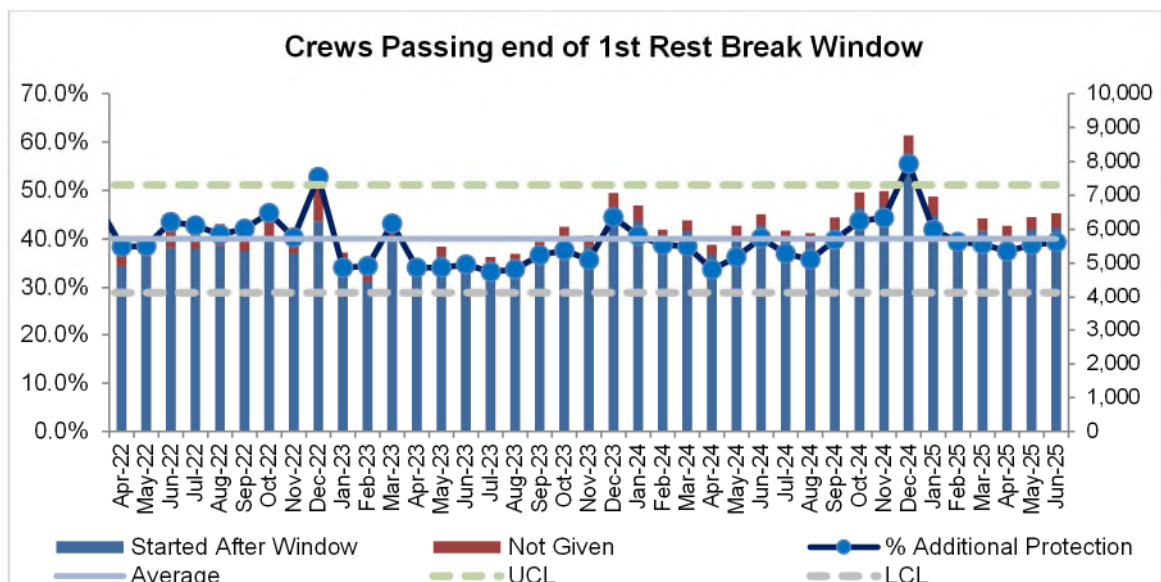
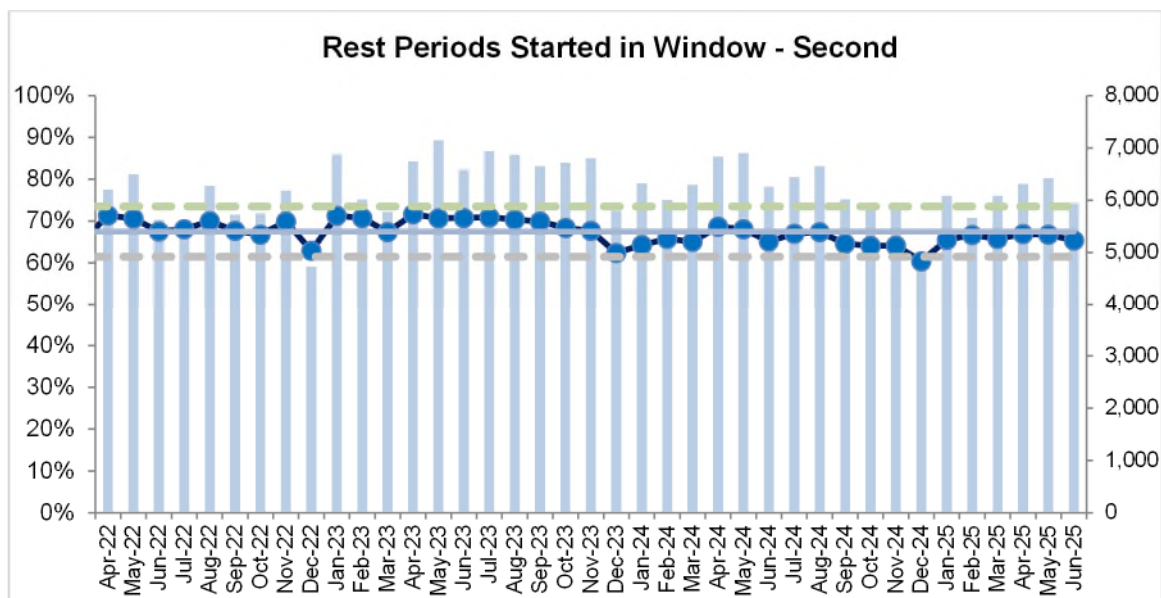
In response to feedback from partnership colleagues, SAS and the trade unions have collectively agreed to simplify the currently agreed Additional Rest Break Protection options to the benefit of both frontline crews and Dispatch colleagues. This streamlined process has been in place since 06:00hrs on Friday 23rd May 2025. This process ensures SAS has a range of options to support the wellbeing of frontline crews and ensure a timely rest break can be facilitated.

In recognition of the current system pressures and periods of increased demand, should a crew reach the end of their first rest break window and feel they require additional protection to facilitate this rest break, this can be achieved by requesting to be made unavailable for a “Special Break”.









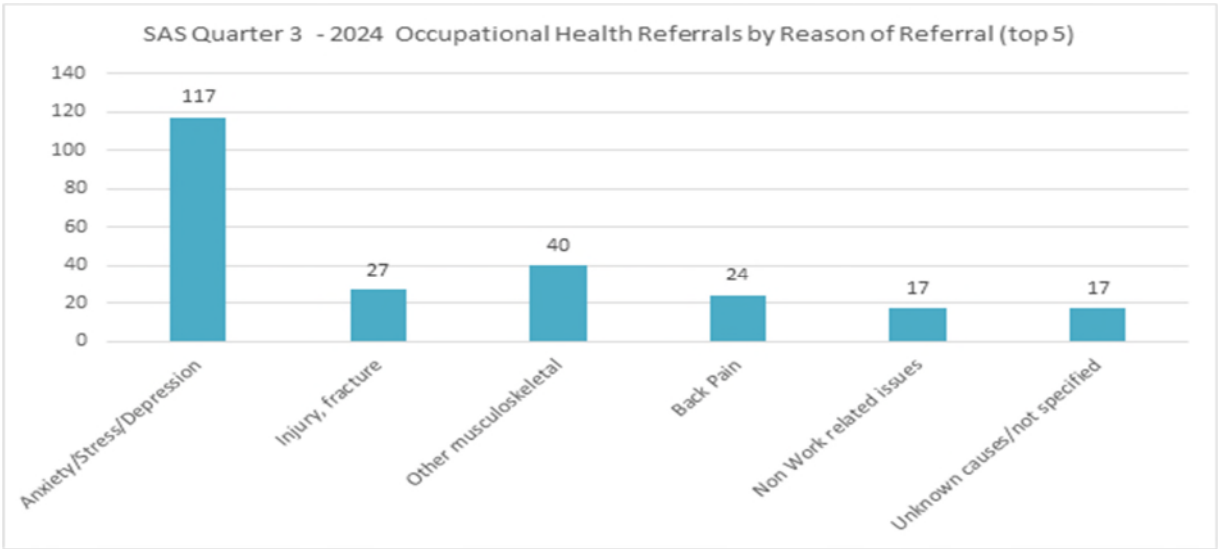
3.2.4 Occupational Health Activity

There remains considerable scrutiny of our various OH providers and significant disquiet with the baseline service itself. Whilst we are continually seeking to rectify any Service related problems as quickly as possible, urgent internal discussions are ongoing around possible options to replace the current service level agreement.

We have not received Occupational Health data for Q4 2024/2025 and Q1 2025/2026 from National Services Scotland due to short staffing. They are working on the data now to have it ready for the next Health, Safety & Wellbeing Group, National Partnership Forum and Staff Governance Committee.

The data in Tables 7 and 8 below are from the third quarter of 2024/25. There were 353 referrals submitted across the third quarter of 2024/25. The top five initial referral reasons are shown below in table 7.

Table 7



3.2.5 Pre-employment Checks

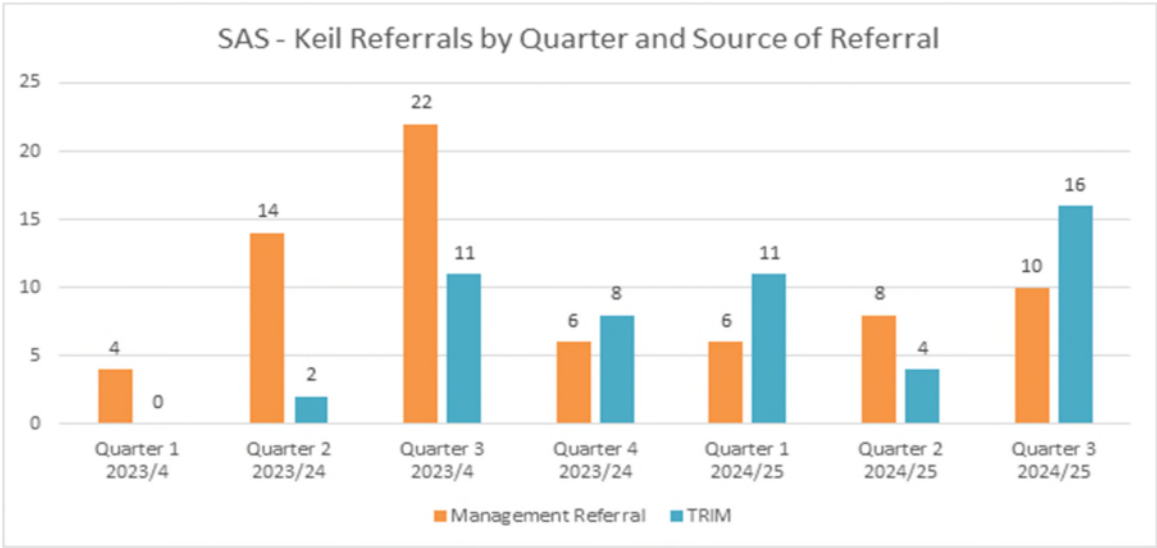
There were 173 pre-employment assessments during the third quarter.

Pre-placements by role were: 41% Ambulance Paramedic, 15% Ambulance Technician, 8% Call Handler and 7% Ambulance Care Assistant.

3.2.6 Keil Referrals

There were 26 Keil referrals submitted in Q3. The management referral outcome for Keil support was 38% and 62% identified through TRiM referrals. (table 8)

Table 8



3.2.7 Health & Wellbeing

**Ambition 1 - To create an awareness and understanding at local level of the range of health & wellbeing support available to our workforce and how to access it.**

This ambition aligns with our strategic inputs by:

- Increasing awareness and visibility of health and wellbeing pathways.
- Empowering individuals to take ownership of their own wellbeing.
- Growing and raising the profile of our wellbeing networks to build local communities of support.
- Ensuring new colleagues feel welcome and supported from the beginning of their journey.
- Creating a supportive environment where wellbeing conversations are normalised.

Whilst there is a good awareness and knowledge of health and wellbeing support available to our workforce in some areas of the service, this is not consistent throughout our organisation. We are taking the following steps to increase awareness and understanding of support available:

- Increasing the number of wellbeing visits we are conducting throughout the year to have direct contact with staff
- Reviewing our communication and methods of communication to ensure messaging reaches a wider audience
- Promoting key activity through the Live Well Work Well newsletter
- Expanding the wellbeing content in our internal leadership development programmes

## **Ambition 2 - To expand the range of wellbeing help & support available to our workforce, recognising one size doesn't fit all.**

This ambition aligns with our strategic inputs by:

- Expanding the range of health and wellbeing support available, recognising individual needs and preferences.
- Encouraging a proactive and preventative approach to health and wellbeing.
- Creating accessible pathways to rehabilitative and specialist support.
- Supporting leaders and managers to recognise early warning signs and signpost to appropriate help.
- Reducing barriers to access by identifying and targeting support where it is needed most.

Work is progressing to develop our range of help and support available to staff and trial new initiatives. This includes:

- Developing a 'Staying Well' service staffed by specialist Wellbeing Leads for help, advice and triaging wellbeing support.
- Enabling staff to take forward their own ideas to support their health and wellbeing locally utilising funds secured from Endowments.
- Green Champion visits to locations commencing 23 July to promote the use of nature and exercise to support health & wellbeing.

### **3.2.8 Employee Development - Appraisal**

Our ambition is for every member of staff in SAS to have an appraisal. Historically our appraisal rate has been consistently below 10%, however we are beginning to see slight incremental increases month on month. As of 14 July, our SAS TURAS Appraisal completion rate is 13.12%. There are currently 1757 in progress appraisals, and should these be completed alongside the 288 partially completed we would see our completed appraisals within SAS reach 44.1%. Appraisal figures are circulated to Regions and National Operations & Departments on a weekly basis that has undoubtedly provided a renewed focus on appraisal completion across the organisation.

Completion rates do vary across Regions. However, completing staff appraisals and PDPs are an integral part SAS approach to learning and development of staff. The completion of TURAS Appraisals, PDPs and Objectives continues to be a challenge due to the operational pressures within the Service. A detailed appraisal action plan has been developed to ensure both appraisers and appraisees remain focused on this important human connection activity.

|   |      |   |
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Table 9

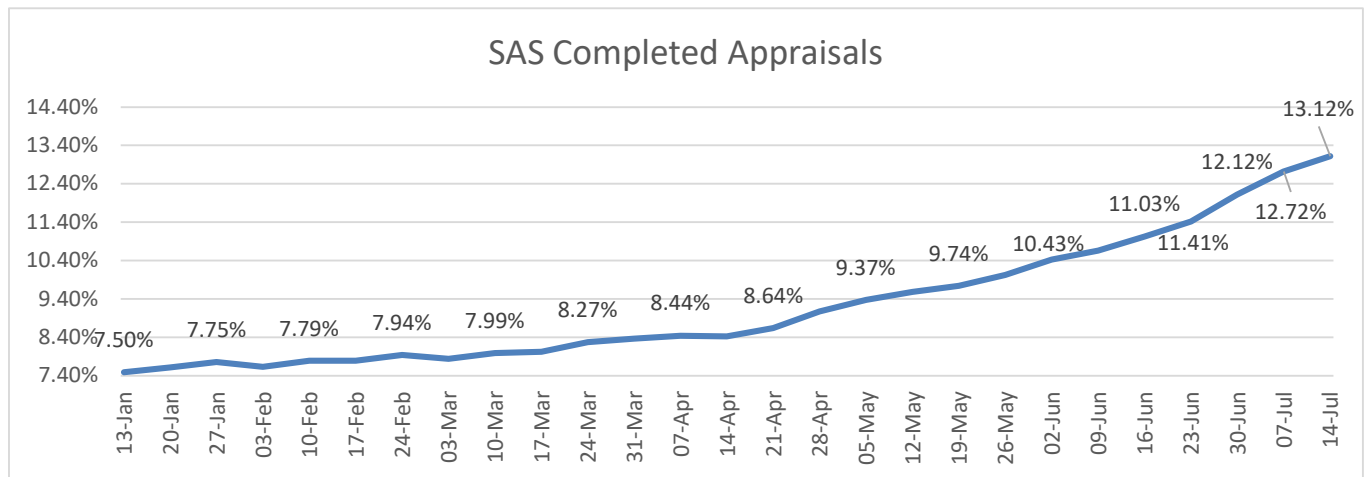


Table 10

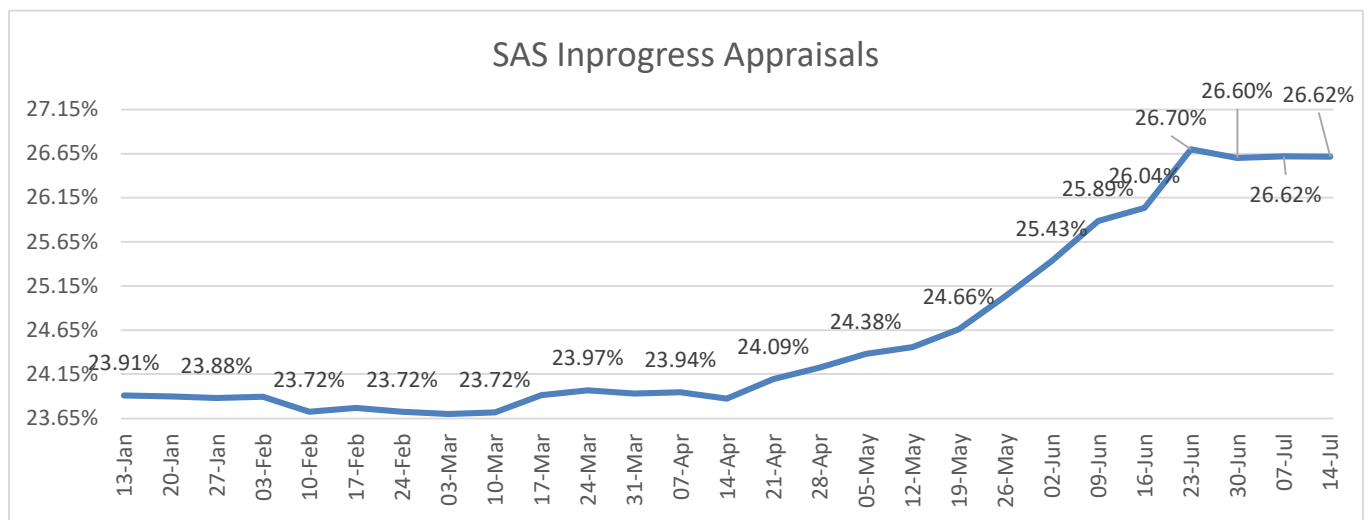
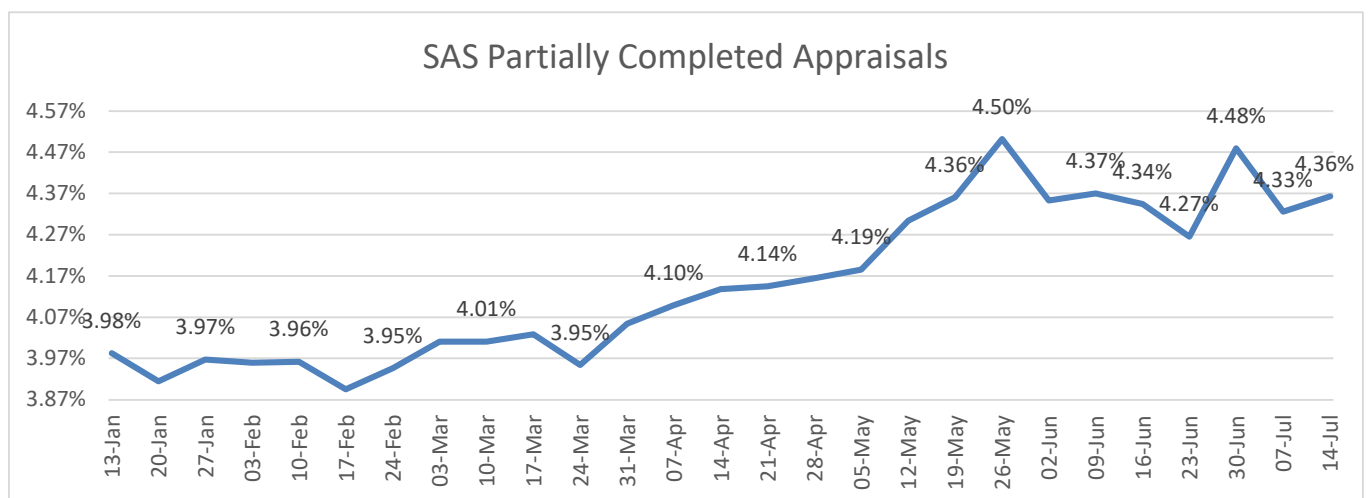


Table 11





### West Region

TURAS data as at 14/07/2025 for the last 3 months confirms that the West Region is showing an upward trajectory of completed appraisals from 4.8% at the end of May to 10.11%. In progress Appraisals currently are 471, which is an increase. Should these be completed alongside the 83 partially completed we would see our completed appraisals within the West increase to 30.8%.

### East Region

TURAS data as at 14/07/2025, is showing an upward trajectory in the East Region. There are currently 512 In progress appraisals. Should these be completed alongside the 109 partially completed we would see our completed appraisals within the East move to 57.5%.

### North Region

TURAS data as at 14/07/2025, is showing a slight decrease in trajectory. It is of note however that some teams within Highlands and Western Isles have 100% completion rates. There are currently 339 in progress appraisals, and should these be completed alongside the 34 partially completed, we would see our completed appraisals within the North reach 55.7%.

### National Operations & Departments

TURAS data as at 14/07/2025, is showing a slight upward trajectory in NHQ/Support Departments and ACC and trajectories in ScotSTAR and NRRD have plateaued. There are currently 435 appraisals in progress, and should these be completed alongside the 62 partially completed we would see our completed appraisals within the National Operations rise to 41.7%.

## **3.2.9 Employee Relations**

### **National Employee Relations Activity**

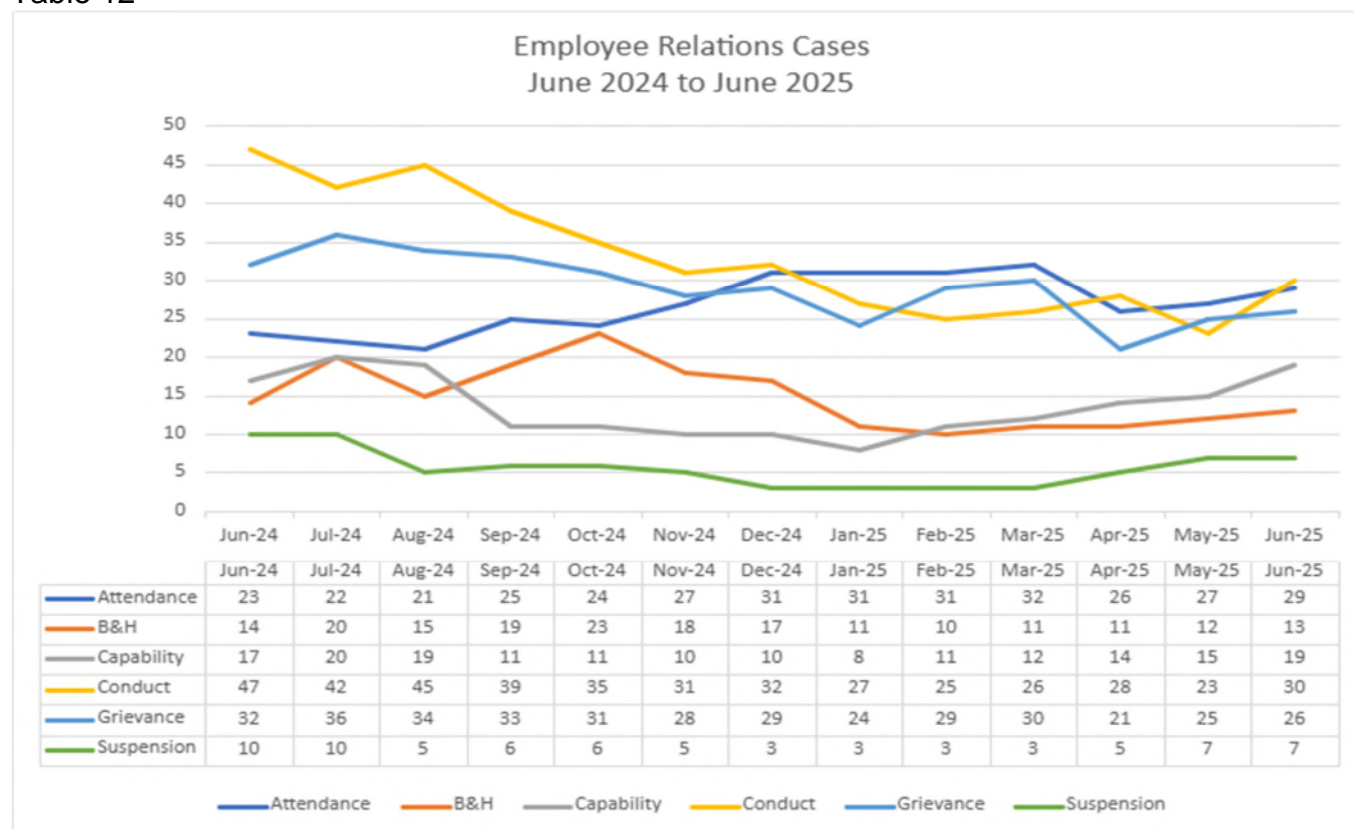
Recording of Employee Relations activity re Grievances, Bullying and Harassment and Conduct as well as Capability and Attendance is monitored via an online recording sheet which is intended to provide timeous recording of ongoing cases along with additional data which facilitates tracking of timescales and risk status.

The undernoted table reports on current employee relations activity and application of the relevant Once for Scotland Policies.

The tables below represent initial outputs of the online recording as the end of June 2025. Support for ER case work is now being coordinated through the People Services Hub and a new system for recording and reporting is being developed.

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Table 12



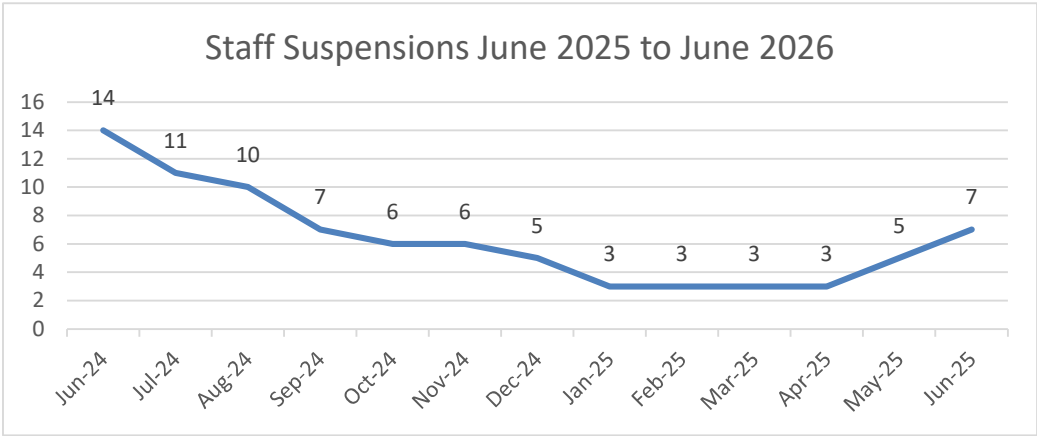
The number of ER cases across the service has shown an upward trend across the last 2 months (105 cases in April 2025 to 124 cases in June 2025).

Table 13 shows all Employee Relations case activity as of June 2025 by category and region/directorate.

|   | Jun-25 | Attendance | B&H       | Capability | Conduct   | Grievance | Suspensions | Total      |
|---|--------|------------|-----------|------------|-----------|-----------|-------------|------------|
| <b>Operations - West</b>                            |        | 14         | 4         | 11         | 10        | 11        | 1           | <b>51</b>  |
| <b>Operations - North</b>                           |        | 1          | 1         | 1          | 6         | 1         | 2           | <b>12</b>  |
| <b>National Operations</b>                          |        | 4          | 3         | 1          | 6         | 9         | 2           | <b>25</b>  |
| <b>Operations - East</b>                            |        | 7          | 4         | 6          | 6         | 5         | 2           | <b>30</b>  |
| <b>Finance, Strategy and Logistics</b>              |        | 3          | 0         | 0          | 1         | 0         | 0           | <b>4</b>   |
| <b>Care, Quality &amp; Professional Development</b> |        | 0          | 0         | 0          | 0         | 0         | 0           | <b>0</b>   |
| <b>Medical</b>                                      |        | 0          | 0         | 0          | 1         | 0         | 0           | <b>1</b>   |
| <b>Collective (National)</b>                        |        | 0          | 1         | 0          | 0         | 0         | 0           | <b>1</b>   |
| <b>Total</b>  |        | <b>29</b>  | <b>13</b> | <b>19</b>  | <b>30</b> | <b>26</b> | <b>7</b>    | <b>124</b> |

There has been an increase in the number of staff who have been suspended in recent months, from 3 employees in April to the 7 employees currently suspended.

Table 14



### 3.3 LEARNING AND INNOVATION

#### 3.3.1 Learning

##### Statutory and Mandatory Training Compliance

The TURAS Learn platform was launched in March 2024 and staff are currently working towards completion of the twelve statutory and mandatory training modules. Table15 shows progress in the levels of completion since the launch of the TURAS Learn platform to March 2025 by Sub Division level. The RAG status shown is illustrative only as the final percentage completion classifications have still to be formally agreed.

Work continues to progress TURAS Phase 2 looking at statutory and mandatory training per job role, and the Health & Safety Team are also feeding into the wider NHS Scotland review of all E-Learning courses to see what can be made Once for Scotland. This involves five courses for Health & Safety to date.

We will also be developing mandatory wellbeing training as part of TURAS Phase 2.

##### Violence Prevention and Reduction (VPR) and Manual/Patient Handling update

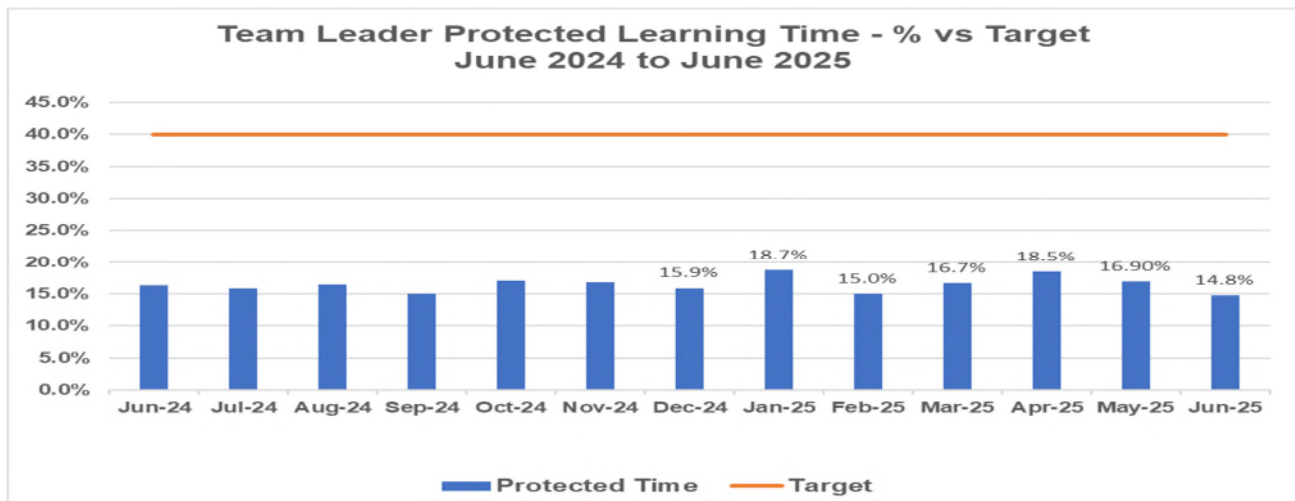
VPR train the trainer for Clinical Training Officers (CTO) was booked for March and April through NHS Tayside, who will train and then mentor the trainers to ensure they remain competent. VPR and Manual/Patient Handling and training for staff through LIP commenced mid-April with all CTOs now trained in both disciplines.

Table 15

| % Compliance at date of report  | ACC                   | ScotStar | East Central | NHQ/ SAC            | NRRD | North | South East          | South West | West Central |
|---|-----------------------|----------|--------------|---------------------|------|-------|---------------------|------------|--------------|
| Basic Life Support  | 68                    | 60       | 42           | 45                  | 85   | 62    | 61                  | 45         | 38           |
| Fire Safety Awareness Training  | 67                    | 70       | 57           | 53                  | 87   | 61    | 67                  | 49         | 40           |
| Health and Safety Awareness   | 66                    | 66       | 54           | 50                  | 82   | 58    | 64                  | 46         | 39           |
| Infection prevention and control (foundation)                                       | 57                    | 59       | 59           | 35                  | 68   | 61    | 62                  | 50         | 44           |
| Initial Operational Response  | 41                    | 45       | 41           | 29                  | 76   | 49    | 51                  | 39         | 25           |
| Introduction to equality, diversity and human rights                                | 56                    | 40       | 27           | 40                  | 77   | 49    | 49                  | 32         | 31           |
| Moving and handling (Module A)  | 61                    | 56       | 53           | 47                  | 73   | 58    | 61                  | 41         | 35           |
| Office Ergonomics -Display Screen Equipment (DSE) / Preventing Aches and Pains      | 63                    | 59       | 51           | 50                  | 78   | 56    | 62                  | 44         | 36           |
| PREVENT Duty Awareness  | 52                    | 40       | 24           | 29                  | 72   | 45    | 48                  | 29         | 27           |
| Public Protection - child protection and adult support and protection for SAS staff | 59                    | 47       | 49           | 38                  | 74   | 55    | 59                  | 42         | 32           |
| Safe information handling   | 70                    | 66       | 54           | 40                  | 66   | 57    | 49                  | 57         | 45           |
| Staying safe online: top tips for staff   | 41                    | 50       | 46           | 40                  | 59   | 53    | 56                  | 45         | 30           |
| Violence Prevention Reduction: Conflict Management                                  | 59                    | 51       | 48           | 41                  | 76   | 55    | 58                  | 41         | 34           |
| Completion % status   | Under 50 % Completion |          |              | 50 - 60% Completion |      |       | Over 60% Completion |            |              |

## Effective Leadership and Management

Protected time for Team Leaders in June 2025 was recorded at 14.8%, a decrease on previous months as can be seen in Table 16 below. Work is ongoing to improve the level of protected time with further discussions in progress with operational colleagues to significantly improve the compliance level.



### **Ambition 3 – To further develop our workforce’s knowledge and skills to help support one another, build resilience and signpost to further help as required.**

This ambition aligns with our strategic inputs by:

- Taking a proactive and preventative approach to health and wellbeing.
- Decreasing stigma and reducing barriers to accessing mental health support.
- Creating a supportive environment where wellbeing conversations become normal practice.
- Empowering individuals to take ownership of their own health & wellbeing and confidence support one another and intervene early.
- Cultivating resilience to help colleagues cope with the effects of trauma and stress.
- Supporting leaders and managers to recognise early warning signs and signpost to appropriate help.

Our priority within the next reporting period is to progress the suicide prevention and postvention work, including the AACE (Association of Ambulance Chief Executives) 10 point action plan that has stalled for some time due to capacity issues. A short life working group will convene next month to progress this work at pace.

#### **3.3.2 Innovation**

##### **People Service’s Hub**

The new **People Services Hub** has been in place since 3rd February 2025, and is currently in its test of change phase until 31 August 2025. The objective of the People Services Hub is to provide a professional HR service to the organisation in relation to providing a fast and consistent response to enquiries, as well as dedicated HR professional support for employee relations cases.

The key aims of the People Services Hub are to:

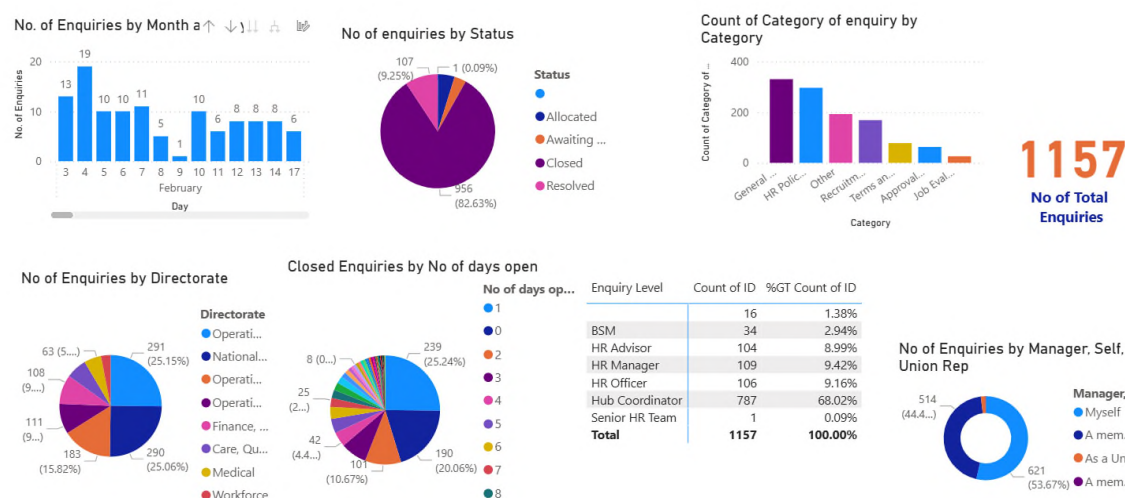
1. Provide consistency in HR advice across all Directorates with an understanding of varying service needs.
2. Provide fast and accurate responses to enquiries with an initial response given within 48 hours (excluding weekends and public holidays).
3. Allocate an appropriate HR professional to support employee relations cases and accurately track the progress of each case.
4. Provide robust and accurate reporting of employee relations activities.
5. Reduce the amount of HR Advisor time spent on low-level enquiries to allow more focus on higher-level work, such as ER cases, portfolio projects, and support organisational delivery of strategic objectives.

The People Services Hub offers two distinct services to SAS staff, staff partners and managers:

1. The Enquiry Management system, and
2. The ER Case Support Management system.

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**Table 17. People Services Hub enquiries: 3<sup>rd</sup> February to 15<sup>th</sup> July 2025**



#### Ambition 4 - To become more evidence and data driven in our approach to creating a healthy workplace.

This ambition aligns with our strategic priorities by:

- Strengthening our use of evidence and insight to improve staff experience, support early intervention, and foster a culture of continuous improvement.
- Developing an evidence-based understanding of the underlying causes of absence.
- Creating a culture where early intervention is normalised and supported.
- Embedding continuous improvement through regular feedback and movement towards a just culture.

We are currently exploring how we can develop a culture dashboard to highlight a more visual representation of progress made in further developing a healthy workplace.

### SECTION 3.4 CULTURE AND LEADERSHIP

#### Ambition 5: To enable staff to feel valued at work by embedding supportive behaviours within our organisation.

This ambition aligns with our strategic inputs by:

- Leaders treating everyone with dignity and respect and consistently role model positive behaviours and healthy working practices.
- SAS being an inclusive organisation that values diversity and creates an environment where employees feel safe to speak up with ideas, questions, concerns or mistakes.
- SAS owning a reputation for having a positive work culture where employees thrive and feel valued for the work they do.
- Ensuring our values and behavioural expectations are embedded and demonstrated throughout the employee journey.

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- Ensuring our people are actively developed and supported through mentoring and lived experience.

Deliverables to support this ambition include focused support to the proposed outcomes of Equality and Diversity Mainstreaming Report (2025-29), raising appraisal completion rates, facilitate a culture of role modelling values-driven behaviour and calling out inappropriate workplace behaviours. The focus of work in the last reporting period was Healthy Culture Week.

### Healthy Culture Week

The third annual Healthy Culture Week took place from 23 to 27 June 2025, centred around the theme "Care and Compassion – It's All About You." Over the course of the week, twelve engaging events were delivered by a mix of external guest speakers and members of the Organisational Development and Wellbeing Team.

This year's sessions placed a strong emphasis on embedding values-based behaviours within teams, with topics including:

- In Conversation with TASC – The Ambulance Staff Charity
- What's Stopping You Bringing Your Best Self to Work?
- How Great Are You as a Boss? Thirteen Things You Can Do to Create a Great Team Culture
- How to Create Team Joy and Wellbeing
- Intelligent Kindness: You Make a Difference

In alignment with our broader engagement efforts, the week’s activities were complemented by the fortnightly Staff Engagement Session, led by the Equality, Diversity and Inclusion Team. This session highlighted our refreshed Staff Networks, a key enabler of the Health and Wellbeing Strategy (2024–2027).

To enhance accessibility, most sessions were recorded, allowing staff to engage with the content at their convenience. While on-demand viewing figures are still emerging due to the short time since the event, early data indicates a growing interest. Live attendance remained consistent with 2024 figures, reflecting a sustained commitment among staff to fostering a positive workplace culture.

A comparative summary of attendance figures is provided in Table 18.

Table 18: Comparative Footfall for Healthy Culture Week (2023-2025)

| Healthy Culture Week | 2025 | 2024 | 2023 |
|----------------------|------|------|------|
| Attendees            | 434  | 436  | 407  |
| Streaming views      | 122  | 425  | 173  |
| Total engagements    | 556  | 861  | 580  |

Feedback was actively sought from staff who attended the live sessions, resulting in 57 responses, representing a 13.1% response rate. The survey was designed to evaluate the effectiveness of the sessions and also included both quantitative ratings and qualitative insights to assess perceptions of SAS as “a great place to work.”

Participants were asked to rate various aspects of the sessions on a scale of 1 to 10, with 10 being the highest possible score. The average scores for each category are presented below, alongside comparative figures from 2024 (in parentheses):



- Effectiveness of sessions – 8.8 (8.8)
- SAS as a great place to work – 7.1 (7.5)

## iMatter 2025 Update

The 2025 iMatter survey ran from 27 May to 17 June, achieving a 55% response rate (3,021 respondents from 5,498 staff). This represents a four-percentage point decrease compared to 2024. The Employee Engagement Index increased by one point to 67, placing the organisation in the Strive & Celebrate range. Action planning will conclude on 13 August 2025.

The additional questions on raising concerns is as follows on Table 19 below:

| Raising Concerns   | 2025 | 2024 | 2023 |
|--|------|------|------|
| I am confident that I can safely raise concerns about issues in my workplace | 70   | 69   | 70   |
| I am confident that my concerns will be followed up and responded to         | 61   | 60   | 62   |

Staff continue to feel safe raising concerns, but there is less confidence that concerns are consistently acted upon. Strengthening feedback loops and closing the communication gap will remain a focus.

### Staff Governance Standards

The Staff Governance Standards remain broadly consistent year on year. Well Informed remains strong at 74, while Involved in Decisions has seen a slight improvement to 60, but continues to require focused attention. Appropriately Trained & Developed (63), Treated Fairly & Consistently (69), and Safe and Healthy Working Environment (69) – remain stable.

### Key Points

Staff continue to feel clear about their roles, proud of their work, and well supported by direct line managers. The main challenges remain leadership visibility, trust in Board decision-making, and demonstrating that staff concerns are acted upon.

### Next Steps

Team-level action planning should continue to build on local strengths, where confidence is consistently high. At an organisational level, leadership visibility and communication will remain priorities to ensure staff see how their feedback is used to inform decision-making.

### Future of Staff Experience Measurement – iMatter Contract Renewal

The current rolling contract with Webropol for delivering iMatter is due for renewal in summer 2027. We have been advised that, unless alternative arrangements are discussed in advance, the contract will be automatically renewed, which would likely mean a further extended period before any other options for measuring staff experience could be explored.

iMatter has provided a consistent national framework for over 10 years; however, engagement levels remain comparatively low, and feedback from other NHS Boards suggests increasing discussion about the tool's effectiveness in driving meaningful change. The upcoming renewal period may therefore be an important point for the Board to consider whether iMatter continues to provide the level of insight required to improve staff experience at individual, team, and organisational levels – and ultimately enhance the experience of both colleagues and patients.

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If there is appetite to explore alternative approaches, this would need to be raised proactively with the Scottish Government and the iMatter team ahead of the contract renewal to ensure there is an opportunity for discussion before automatic renewal takes effect.

**Ambition 6: To further develop our leadership and enable leaders to become more connected at all levels of the organisation.**

This ambition aligns with our strategic inputs by:

- Supporting leaders to actively prioritise their team’s health, wellbeing, and development.
- Building leaders’ confidence and awareness to recognise early warning signs of deteriorating wellbeing and signpost appropriately.
- Ensuring leaders treat everyone with dignity and respect, while consistently role modelling positive behaviours and healthy working practices.

Planned activity includes expanding our virtual Leadership Academy, introducing wider coaching and mentoring opportunities, facilitating people-centred leadership approaches, and creating a shared understanding of complementary leadership domains within the reporting hierarchy.

**SECTION 3.5 EQUALITY, DIVERSITY AND INCLUSION**

**3.5.1 Legislative context**

The Equality Act 2010 created a requirement for public authorities, including Scottish Ambulance Service, to meet the public sector equality duty to have due regard to eliminate discrimination, advance equality of opportunity and foster good relations. The Equality Act 2010 (Specific Duties) (Scotland) Regulations 2012 list the obligation to report progress on mainstreaming the public sector equality duty and to report progress on equality outcomes work every two years. Every four years there is a requirement to develop and publish new equality outcomes. All of our key reports were published at the end of April, as detailed below:

- 1) Mainstreaming Report (2025-29)
- 2) Equality Outcomes (2025-29)
- 3) Gender Pay Gap Report (2025)
- 4) Equal Pay Statement (2025)

The purpose of these reports is to provide examples of how our activities demonstrate we are building equality and diversity in to all that we do. This work aligns with the requirements of the public sector duty to: eliminate discrimination, advance equality of opportunity and foster good relations. Reference is also made to a number of activities to illustrate how our work contributes to reducing health inequalities.

A key element of the mainstreaming report is to illustrate how employee information is gathered and used to support change and improve outcomes for our workforce. Therefore, the annual workforce equality monitoring report 2023/24 and equal pay information are referenced in the reports.

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The recent Supreme Court judgement in regard to transgender citizens of the UK has required a major review to be undertaken across all employment sectors in the UK into how transgender colleagues should be treated. SAS, in line with our sister NHS Boards, is currently awaiting further EHRC updated guidance on this matter. In the meantime, we are undertaking an internal review to ensure that our transgender colleagues continue to be treated with fairness, equity and understanding.

### 3.5.2 Sexual Safety Programme Update

The Workforce Equality Monitoring Report 2023/24 referred to the Service being a key partner across AACE, NHSS and other emergency services in implementing the Reducing Misogyny Improving Sexual Safety work. A major focus on the EDI agenda this year has been on reducing misogyny and improving sexual safety in SAS. The latest update is detailed below:

- A pulse survey was issued to all staff during December 2024. The purpose of the survey was to help us understand people's experiences at work. We will use the results to help shape the steps we take to prevent sexual harassment happening and respond better when it does take place. The survey was also promoted through line managers to encourage as many staff as possible to complete it.
- The sexual misconduct policy has now been approved and will be made available on @SAS. The policy has been created with reference to the Once for Scotland Bullying and Harassment policy and the Once for Scotland Sexual Harassment Guide, which is due to go live in 2025
- We are working on the development of an all-staff online learning session/module which focuses on preventing sexual misconduct, reinforcing expected behaviours and how to 'Speak Up' and challenge inappropriate behaviour. This will complement the existing TURAS module 'Sexual Harassment for Line Managers'
- Sexual Safety Workshops are ongoing, in conjunction with Police Scotland. Several of our staff attended the sessions and we are gathering feedback to ensure that the sessions are meaningful and productive. These workshops are timetabled throughout the year and time is being provided by means of TOIL to allow attendance.
- We are in the process of creating a structured guidance document for students and university contacts to refer to if they have experienced or witnessed sexual misconduct whilst working with us.
- The sexual safety learning and development plan is updated regularly
- We are engaging with universities and have attended a recent Scottish Collaboration of Paramedic Education (SCoPE) meeting to discuss the sexual safety of students whilst on placement within the Service
- We have launched an @SAS page dedicated to reducing misogyny and sexual safety at work. A communications plan has been produced to promote this across the Service. It includes relevant guides, links and contacts for support (e.g. TASC).
- SAS work on sexual safety and misogyny was showcased at the NHS Scotland Conference on 9 June 2025.
- The sexual safety communication and engagement plan is updated regularly.

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## 3.6 COMPLIANCE

### 3.6.1 Health and safety update

The Service remains committed to achieving and maintaining consistently high standards of health and safety compliance. Monitoring these standards is a fundamental aspect of the H&S work programme which enables the Service to comply with its statutory and mandatory requirements. Auditing health and safety compliance remains a key performance measure, and the new audit window has commenced for this financial year, and we will be using the new EVOTIX system which will allow better data analysis. We are continuing to train all managers on how to clear tasks raised on the system and have introduced the escalation process whereby Heads of Service are notified if the actions are not completed in a timeous manner.

The new Fleet Workshops audit is now live, and H&S team will continue to train the workshop staff how to complete this audit. Feedback on the new system has been largely positive as people get used to the new system.

There has been no HSE involvement this reporting period.

DL (2024) 17 was issued on August 5<sup>th</sup>, 2024. In response to this, the Scottish Ambulance Service recently formalised the governance of water management. This will provide assurance that the water supply, storage, and distribution services within its properties are installed and operated within the terms of various pieces of legislation including:

- Scottish Health Technical and Memorandum (SHTM) 04-01 Water Safety for Healthcare Premises Parts A&B

A New Water Safety Group which will be a subgroup of the IPC Committee has had their initial meeting, and data will be shared going forward at the HSWG and IPC Committee.

Work has commenced with SOCOTEC who were successful with the tender to carry out air quality monitoring in some hospitals and all SAS workshops over the coming months. The H&S Team will continue to work closely with Fleet and all local SAS staff, staff side colleagues and Other H&S Staff in the relevant health boards. The ones completed so far are:

- 16<sup>th</sup> June: Aberdeen Workshop
- 17<sup>th</sup> June: Aberdeen Royal Infirmary
- 24<sup>th</sup> June: Wishaw Hospital
- 25<sup>th</sup> June: Motherwell Workshop
- 10<sup>th</sup> July: Dumfries Workshop
- 11<sup>th</sup> July Glasgow Workshops – Cancelled on day due to staff leave and limited work being undertaken, rearranged to 29<sup>th</sup> October.

Other dates up to end of October have been pencilled in for the remaining chosen sites.

Work has commenced on the (Injury Prevention and Rehabilitation Service) IPRS retender with Procurement and NSS.

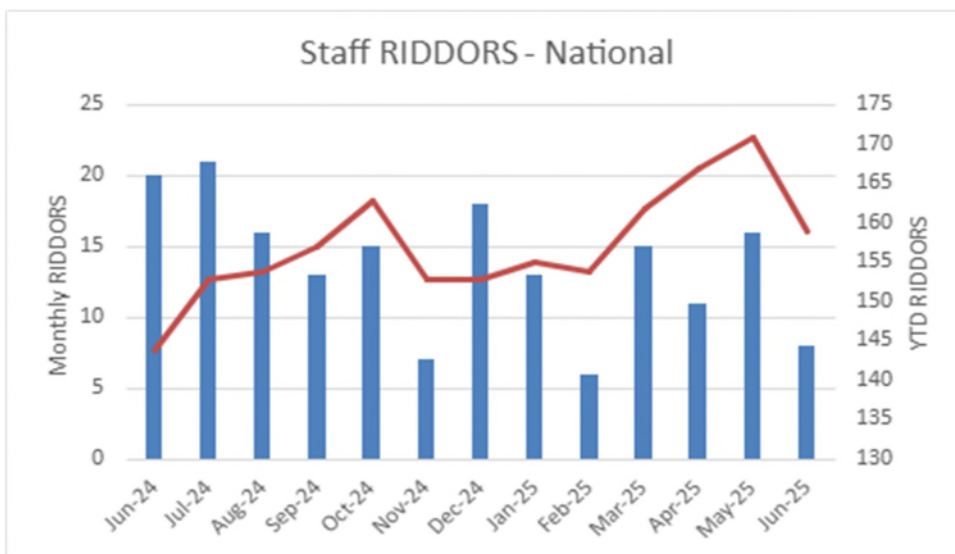
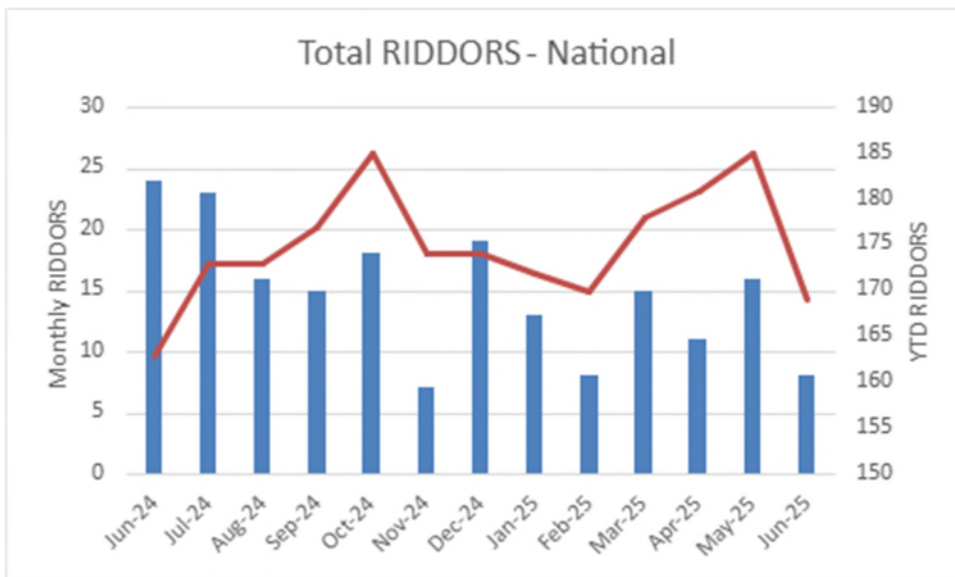
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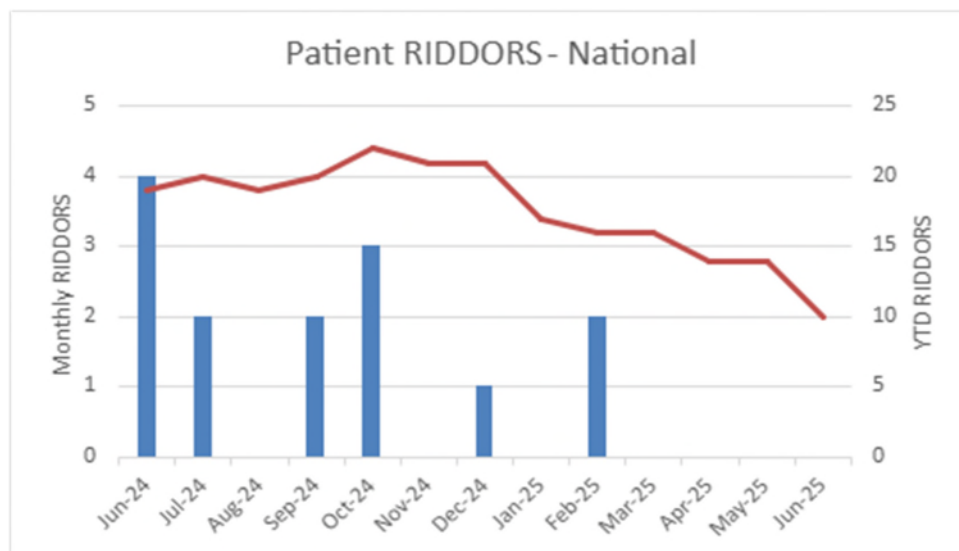
## Accidents

The H&S team continue to work with the Risk Manager to iron out any issues that are highlighted on the In Phase system.

The team continue to review every H&S incident that is reported on In Phase and quality control the information at point of entry to ensure that it is in the correct category, e.g. RTC's are not being reported as vehicles issues when it is clearly an RTC.

\*\* Reminder that the H&S Officers report all RIDDOR reports – Line Managers should report to the Regional Officer if they suspect the incident will be RIDDOR reportable. Neither of these processes have changed with the change over to In Phase.





## RIDDOR

There were:

- 11 April (this includes 6 patient handling, 5 slip/trip/fall,)
- 16 May (this includes 7 patient handling, 2 other handling, 2 slip/trip/fall, 2 slip/trip/fall from height, 2 physical assaults, 1 contact with/struck by)
- 8 June (this includes 6 patient handling, 1 slip/trip/fall from height, 1 contact with/struck by).

## Face Fit Testing

The RPE group continues to work through the action plan to ensure this progresses. 3 full time permanent face fit testers roles have been advertised, and recruitment continues. Staff on redeployment and light duties have been trained by Mark Traherne from NRRD, and arrangements have been made with the universities to ensure all students coming in on placement are face fit tested. All staff are now on the list and will be face fit tested as they become non-compliant. Face fit testing will transfer over to the Head of IPC and will be reported against in future IPC papers.