Scottish Ambulance Service
Working in Partnership with Universities

NHS SCOTLAND

Public Board Meeting **29 July 2026**
Item No 13

THIS PAPER IS FOR DISCUSSION

STAFF EXPERIENCE AND PERFORMANCE REPORT

Lead Director	Elise Gallagher, Director for People and Culture
Authors	Graeme Ferguson, Deputy Director of People and Culture Alison Ferahi, Head of Organisational Development & Wellbeing Fay McNicol, Head of Health and Safety Chris Carron, Head of Workforce Systems and Analytics Coralie Colburn, HR Manager (ER & Equalities)
Action required	The Board is asked to **discuss** the Staff Experience and Performance report.
Key points	Key points to note: • Total sickness absence has increased from 8.5% in May 2026 to 9.31% in June 2026. There was an increase in both long-term (6.37%) and short-time absence (2.94%) against the previous month. • Our 'Staying Well' Service launched on 1 December 2025 has supported 364 members in the first 7 months of operation with mental health accounting for 93% of all referrals into the service. The interim evaluation report at the 7-month point shows positive progress against the agreed 12-month outcomes, but there is a need for additional accessible mental health pathways to keep pace with the growing demand & complexity of referrals. • Appraisal data as of 6 July 2026 is continuing to show an upward trajectory with completed appraisals at 32.97%. There are currently 1,546 appraisals in progress. Completion of these, together with the 427 partially completed appraisals, would increase the overall SAS appraisal completion rate to 61.8%. • The 2026 iMatter Staff Experience Survey results show positive movement, with the highest response rate to date (62%) and an increase in both Employee Engagement Index (up 2 points to 69) and overall experience score (6.1 to 6.3).

Timing	This report seeks to present a cohesive and consolidated update on our overall staff experience, cultural transformation 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.
Associated Corporate Risk Identification	Risk ID 4636 Risk ID 5651 Risk ID 5652 Risk ID 5653
Link to Corporate Ambitions	This paper relates to the following Corporate Ambition: • We will be a great place to work, focusing on staff experience, health and wellbeing.
Link to NHS Scotland's Quality Ambitions	This paper relates to 'Safe', 'Effective' and 'Person Centred' NHS Scotland's Quality Ambitions.
Benefit to Patients	The steps we are taking via our organisation wide staff experience commitments to support, nurture, retain, develop & enable our people to thrive at work which will in turn have a direct impact on improving the quality of care we provide to patients.
Climate Change Impact Identification	This paper has identified no impacts on climate change.
Equality and Diversity	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

NHS SCOTLAND

SCOTTISH 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

SECTION 1: PURPOSE

This paper provides an update on Staff experience and Workforce performance over the last reporting period to June 2026.

SECTION 2: RECOMMENDATIONS

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

SECTION 3: DISCUSSION

This paper provides the Board 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 2026/27.

We are currently in the process of developing the next three-year workforce plan. The Finance, Strategy (Planning) and Workforce strategic leads are working to closely to ensure all three strands are aligned with the SAS 2030 Strategy".

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. The actions for our six ambitions that were developed for 2025/26 were achieved and six new priorities have been developed for 2026-27.

3.1.5 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 number of open ER cases across the service has shown a downward trend since September 2025. There has been a slight decrease in cases in June with 151 total cases compared to 152 cases in May 2026.

The number of staff suspended in June is 10. The length of time individual staff have been suspended is below:

- Between 1 – 6 months: 7
- Between 6 – 12 months: 1
- Between 12 – 18 months: 2

Table 4 summaries the broad key themes of current conduct cases.

Number of Conduct Cases by Theme	
Clinical Care	4
Driving	1
Falsification of records / Plagiarism	4
Fraud	1
Inappropriate or unprofessional behaviour	19
Non-adherence to policy	4
Sexual Safety / misconduct	4
Substance Misuse	1
Misuse of service vehicle	4
Other	4

3.1.6 Rest Breaks

Rest breaks remain a significant challenge for the Service. 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 trade union 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”.

An agreed SOP is now in place to support the test of change for the newly agreed Rest Breaks process.

3.2 WORKFORCE METRICS

Significant work is underway to develop the next 3-year workforce plan for 2026-29. Although no definitive timescale has been confirmed yet by Scottish Government (SG), an abridged Workforce Plan (using a nationally agreed template) 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 is to align our next 3-year SAS workforce plan with the Annual Delivery Plan and Financial plan. A further draft of the Workforce Plan was presented to Staff Governance Committee in June 2026 and will be revised following comments for presentation at the next scheduled meeting in September.

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 in our new workforce dashboard report which has been developed by our Finance colleagues.

3.2.1 Newly Qualified Paramedics

SAS commenced the 2026/27 Newly Qualified Paramedic (NQP) recruitment programme with a recruitment advert running from 29 May to 28 June. The advert closed on 28 June and attracted **482 applications**. In addition, the communication exercise undertaken in March generated **84 expressions of interest** in NQP opportunities. Collectively, this provides an applicant pool of approximately **560 individuals** for consideration.

Regional teams are continuing to finalise current and projected vacancies and locations, with recruitment activity being coordinated to align with university graduation timelines. The volume of applications received is significantly higher than the projected number of graduates from Scottish universities, suggesting that a substantial proportion of applications have been received from other UK nations. This is likely to reflect the impact of recruitment controls and pauses for Newly Qualified Paramedics introduced by several ambulance services in England and Wales, resulting in graduates seeking employment opportunities elsewhere.

An initial shortlisting exercise is currently underway to identify and remove any ineligible applicants, such as those who do not hold the required qualifications or who do not have the appropriate right to work in the UK. Applicants who meet the eligibility criteria will be required to successfully complete the standard SAS fitness assessment before progressing to interview.

Given that the number of applications received is significantly more than the anticipated number of available vacancies, it is expected that many suitably qualified applicants will be unsuccessful in securing an NQP post through this recruitment round. This reflects the increasingly competitive labour market for newly qualified paramedics across the UK and the attractiveness of current opportunities within SAS.

Considering the current national oversupply of newly qualified paramedics and the prevailing labour market, SAS's Technician to Paramedic "Earn as you Learn" programme also remains under review.

3.2.2 Sickness absence levels

Total sickness absence during the last reporting period has increased from 8.5% in May to 9.31% in June. The Attendance Management Project Board is now in place 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, that our internal processes are applied consistently and to look at examples of innovative and best practice from elsewhere.

A new attendance dashboard is currently being trialled within SAS and is being progressively rolled out to managers at all levels in order to provide access to significantly more attendance-related data than ever before. As part of this programme, the views of staff are being sought about the attendance management process itself with particular emphasis on those who have been directly involved in the process.

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 The Ambulance Staff Charity (TASC), Employee Assistance Service (EAS), Occupational Health Service (OHS), Keil Centre and our own mental health team.

Particular focus on wellbeing support is being provided for Call Handling colleagues in ACC where sickness absence rates have reached unsustainable level.

3.2.3 Occupational Health Activity

A meeting took place on 24/06/2025 with Public Service Delivery OH, the consortium of boards OH and SAS to discuss the SLA (which remains out of date) and agree a continuation for a 12-month rolling year.

The initial meeting was positively received by all and agreements made as to how to improve the service. The SAS Staying Well Service, e.g. what they do and how to access it and what services they can offer, was shared with OH along with the Health Mind Policy and guidance. Details of the Health Passport, the managers guidance and employee guidance, and the OH driving standard were also provided.

It has also been agreed that the service will arrange some training events for OH nurses/Doctors to allow them to gain a better understanding of the equipment we use, the jobs we do, what can and cannot be facilitated as reasonable adjustments. They were all very keen to engage and conversations have commenced with local Heads of Service to free up a vehicle, kit etc.

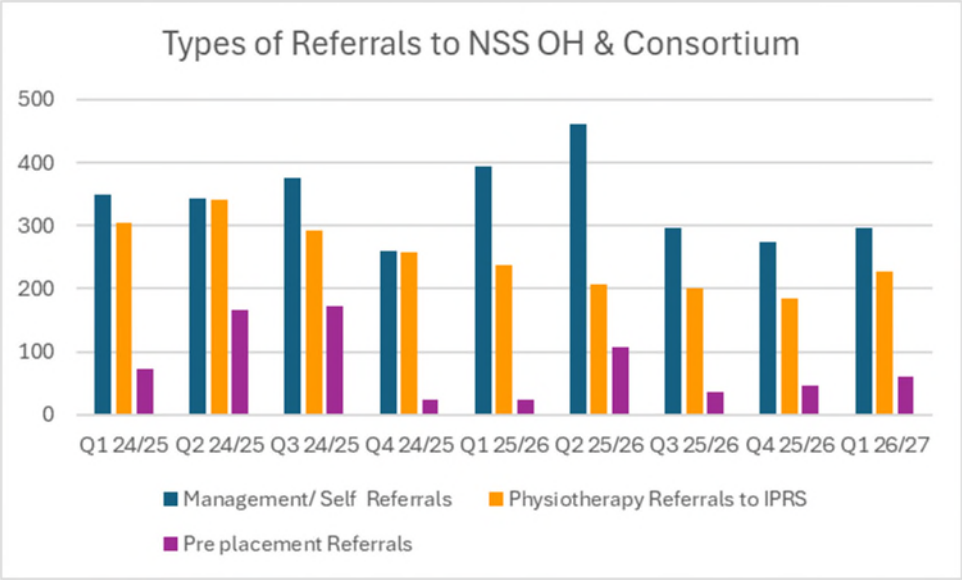
Short term arrangements for support are being provided by NHS Lanarkshire until October; however, it is anticipated that this will continue, and they will be offered the opportunity to become part of the consortium going forward.

PSD OH have also recently recruited and will be in a better position to support going forward.

In addition, Occupational Health has advised that they will not be taking direct referrals from TRiM due to the retiral of a staff member in OH. This will place an increased pressure on our Staying Well service. An initial discussion has taken place and a follow up date is being arranged to facilitate a change on how we manage TRIM and Keil referrals.

IPRS (the fast-track physio) continues to work well albeit the contract is out of date . The tender is being finalised and will be issued shortly. IPRS have built a new electronic referral system, and testing has taken place which looks to be favourable. A potential launch date of August 3rd is looking favourable, and Managers will then be able to electronically refer staff and staff will be sent a link to book an appointment date. This will reduce the time waiting for PSD OH sending the referral to IPRS and reduce administrative time for PSD OH. All completed documents will continue to be uploaded on staff OH record on PSD's system.

Data for Q1 (2025/26) received from NSS:



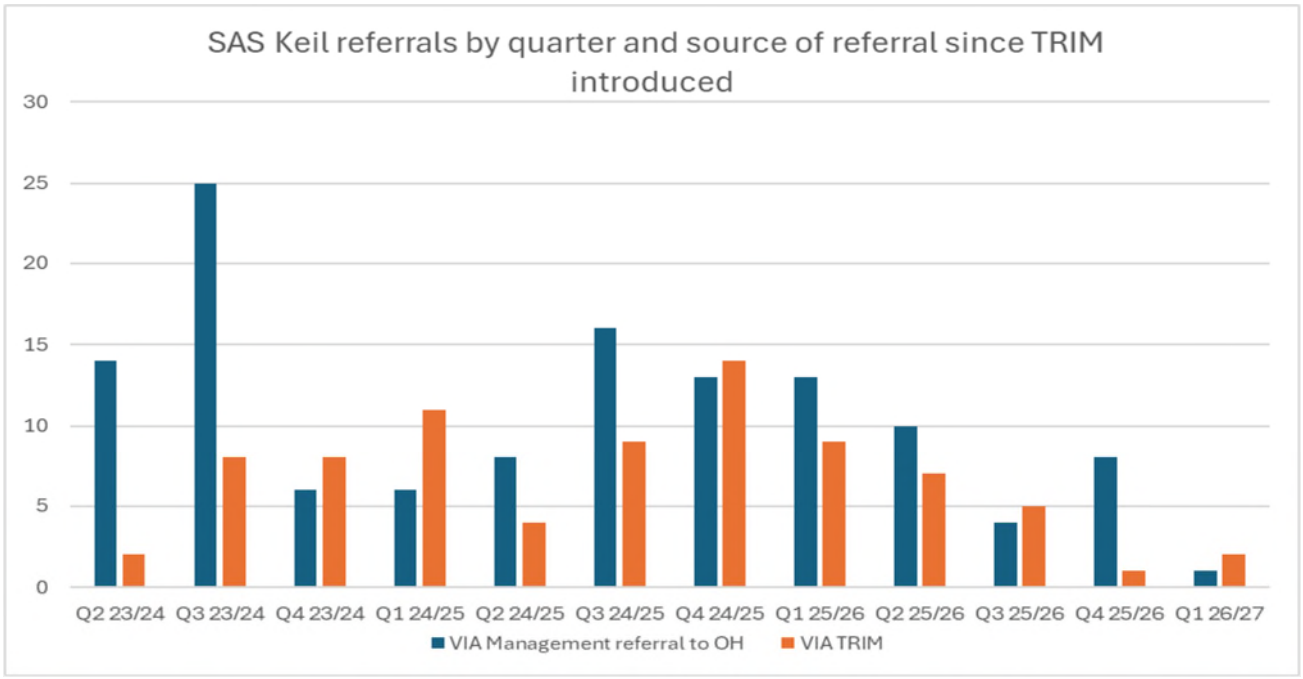
Occupational Health Management Referrals

There have been 527 referrals submitted this fiscal year, The main initial triage categories remain the same: anxiety/stress/depression and other psychiatric illness being the highest.

- 296 Management and self-referrals
- 228 Physiotherapy referrals
- 60 preplacement referrals
- 3 referrals to Keil (in table below)

Keil Referrals

There were 3 TRIM referrals in Q1 (table below) this shows the number of staff refered through management referral and through TRIM from its introduction to the service.



3.3 HEALTH & WELLBEING STRATEGY 2024-27

We have developed six priorities for the third and final year of our Staying Well Strategy 2026-27 that align to our ambitions in our 2030 Strategy and have been informed by discussions and feedback from our workforce via pulse surveys, meetings and ongoing programme of station/location visits.

Our six priorities for 2026/27 are:

1. Increasing awareness, knowledge and access to wellbeing support & resources and continuing to test and establish new pathways of support.
2. Developing proactive approaches to improve mental and physical health & wellbeing in the workplace.
3. Implementing interventions & support that contribute to the development of a healthy workplace culture & SAS as a great place to work.
4. Enhancing & building leadership capacity & capability from Aspiring Leaders to Senior Leadership level.
5. Evaluating the impact of the Staying Well Strategy 2024-27 and developing the Health & Wellbeing Strategy 2027-2030.
6. Implementing relevant actions within the Workforce, Culture & Inclusion section of the SAS/NHS24 Joint Collaboration board Joint Action Plan.

3.3.1 Staying Well Service

This service was launched on 1 December 2025, managed by the SAS Wellbeing Team, to take a more proactive approach to supporting our workforce's health & wellbeing. This service is for advice and support or for staff who may be struggling at work and can be via self-referral or via a manager or colleague. Referrals are either addressed by members of the Wellbeing Team, signposted to additional help or support or onward referral to more specialist services.

We have had 364 referrals since launch on 1 December 2025 – 30 June 2026. The table below highlights the number of referrals per month since launch of the Staying Well service on 1 December 2025.

Table 13

Month	Number of Referrals	Total
December 2025	27	27
January 2026	37	64
February 2026	35	99
March 2026	43	142
April 2026	46	188
May 2026	84	272
June 2026	92	364

Table 14 gives an overview of the reasons for referral to this service on a percentage basis as of 30 June 2026. Mental health referrals account for 93% of the total number of referrals – this has increased significantly since the inception of the service.

Table 14. Referrals to Staying Well Service as of 30 June 2026

Reason for Referral	% of Referrals
Mental Health	93
Bereavement	3
Women's Health	1
Physical Health	2
Sexual Assault	1
Financial	1

Early evidence indicates the service is contributing positively to staff wellbeing and attendance, with absence related to anxiety, stress & depression at its lowest level since 2023.

The interim evaluation report at the 7-month point shows positive progress against the agreed 12-month outcomes, but there is a need for additional accessible mental health pathways to keep pace with the growing demand & complexity of referrals.

3.3.2 Trauma Risk Management (TRiM)

TRiM continues to provide support to our staff who have been exposed to traumatic events.

We have had 760 referrals since launch from the end of June 2023 as highlighted in Table 3 below. Of these referrals 294 have been from the West Region, 287 from the East Region, 132 from the North Region, 47 from National Operations with a total of 131 onward referrals to Occupational Health.

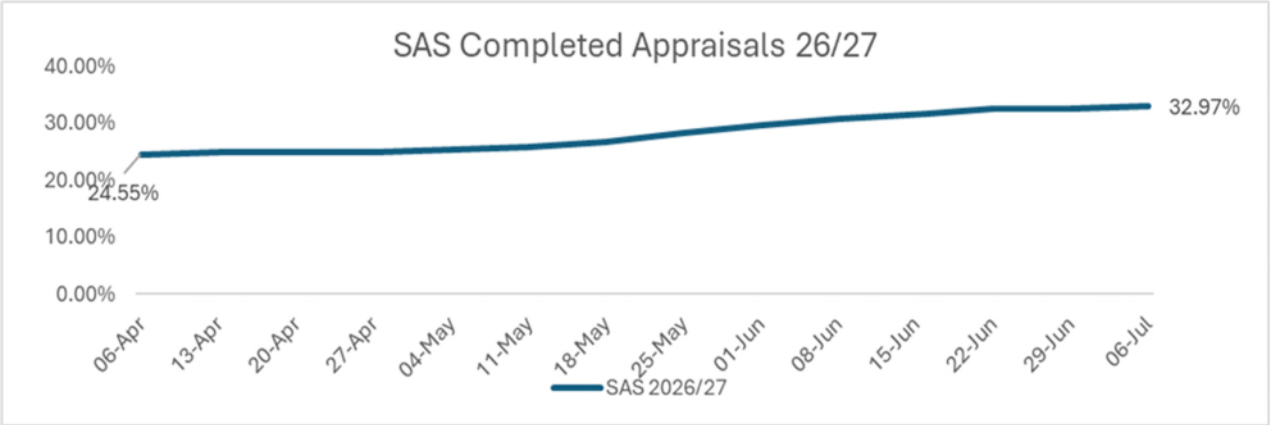
Occupational Health has advised that the previously agreed fast-track route for TRiM referrals with high trauma scores to the Keil Centre is no longer available. Consequently, all TRiM referrals will now be managed initially through the Staying Well Service, placing additional demand on the service.

Table 15. TRiM Referrals since launch of service end June 2023

Month	Number of Referrals	Total
July 2023 – March 2026	700	700
April 2026	18	718
May 2026	23	741
June 2026	19	760

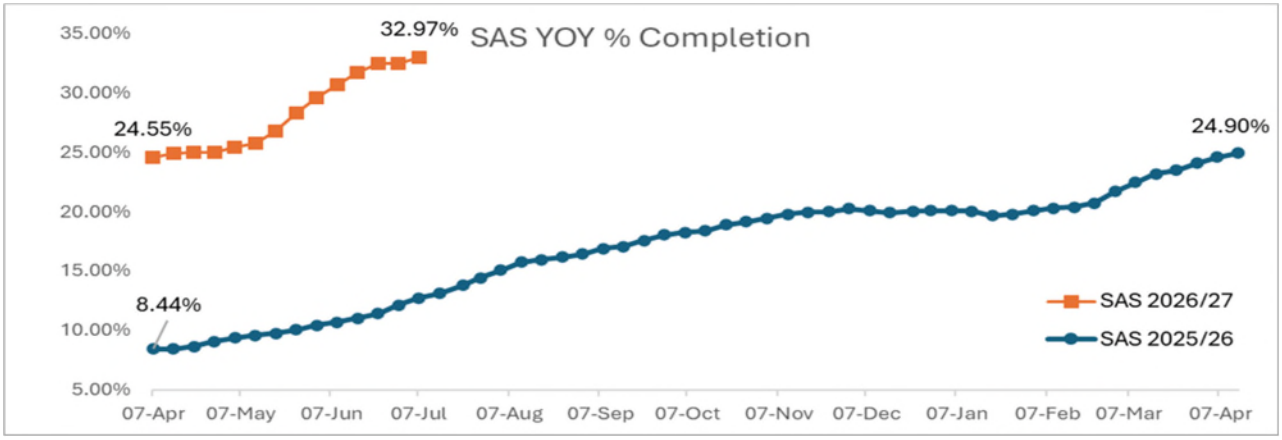
3.3.3 Employee Development - Appraisal

Appraisal data as of 6 July 2026 is continuing to show an upward trajectory with completed appraisals at 32.97%.

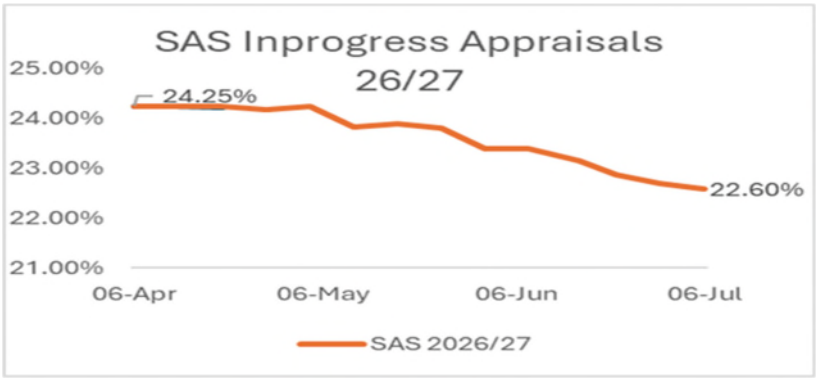


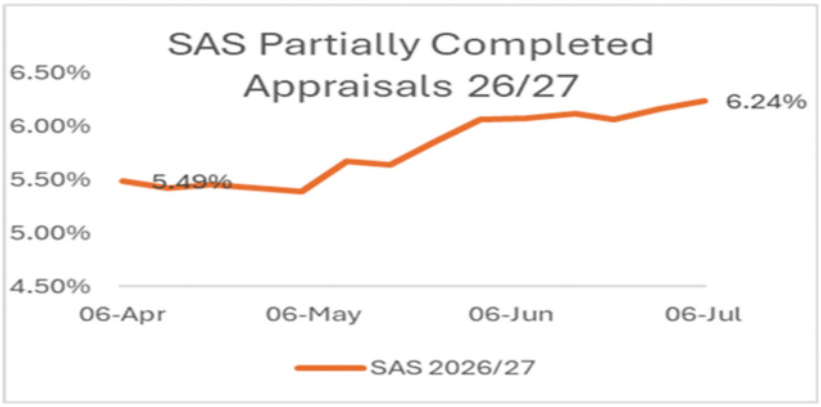
The year-on-year comparison shows an overall improvement in appraisal completion across SAS, with progress remaining variable by region. Continued leadership focus and targeted follow-up will be required to improve consistency, convert in-progress appraisals into completed reviews, and strengthen organisational assurance.

Table 17.

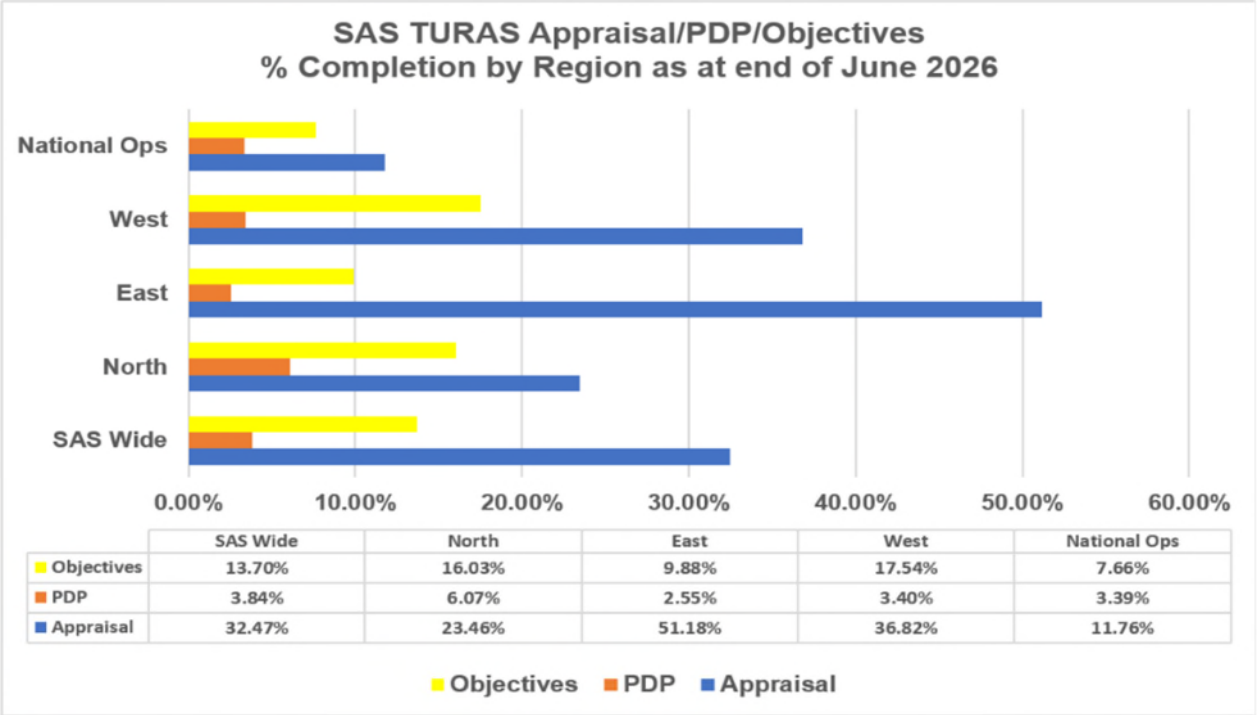


There are currently 1,546 appraisals in progress. Completion of these, together with the 427 partially completed appraisals, would increase the overall SAS appraisal completion rate to 61.8%





The table shows the number of completed appraisals, PDPs and objectives by Region / National Operations as of end of June 2026.



	SAS Wide	North	East	West	National Ops
Objectives	13.70%	16.03%	9.88%	17.54%	7.66%
PDP	3.84%	6.07%	2.55%	3.40%	3.39%
Appraisal	32.47%	23.46%	51.18%	36.82%	11.76%

3.3.4 iMatter Staff Experience Survey

The Board has agreed that iMatter results will be a key measurement tool of our culture programme and furthermore a paper was discussed at the May Executive Team meeting regarding strengthening our approach to iMatter across SAS.

The paper outlined our approach to planning a year-long improvement cycle approach to iMatter, rather than it being perceived as a one-off annual event.
Actions to strengthen our approach include:

- Having an Executive sponsor for iMatter with increased Executive leadership & support for the improvement cycle.
- Regular messaging throughout the year.

- Setting up a small working group to co-ordinate the phases of iMatter (not just one person that was previously in place).
- Meaningful and visible action planning.

We are currently in the action planning phase of the 2026 iMatter programme (lasting until 12 August 2026). The 2026 results show positive movement, with the highest response rate to date and an increase in both EEI and overall experience score. This suggests not only stronger participation, but also an improvement in how staff are reporting their overall experience of working in SAS.

The following table highlights our progress over the last 4 years.

Table 21

Metric	2023	2024	2025	2026
Response Rate (%)	56	59	55	62
Number of Respondents	3175	3176	3021	3629
Employee Engagement Index	67	66	67	69
Overall Experience (0 – 10)	6.2	6.0	6.1	6.3

The iMatter Working Group has been meeting regularly throughout the cycle and collaborating across the Service regarding how we could encourage participation, increase completion rates and develop meaningful action plans with ongoing communication to highlight where additional support is required.

3.3.1 Learning and Development

Statutory and Mandatory Training Compliance

The TURAS Learn platform was launched in March 2024, with staff progressing towards completion of the 12 SAS statutory and mandatory training modules. Table 16 summarises completion rates from launch to the end of June 2026 by Sub-Division, with RAG status aligned to Staff Governance Committee KPIs.

Work is ongoing to progress TURAS Phase 2, aligning statutory and mandatory training to job roles. This approach was initially approved at Board level, with a further implementation paper presented in February 2026.

The ‘Once for Scotland’ (OFS) statutory and mandatory modules were launched on 2 March 2026. Of the nine modules (OFS), SAS was currently delivering eight, with the remaining Fraud Awareness module now added. While refresher periods vary, overall requirements are expected to balance over time, with some modules requiring less frequent completion and two requiring more frequent renewal.

The Health and Safety Team is contributing to the wider NHS Scotland review of e-learning to support the 'Once for Scotland' approach. To date, five Health and Safety courses have been included, with one nearing completion.

We will also be developing mandatory wellbeing training as part of TURAS Phase 2. The SLWG for suicide pre and post vention have reviewed training modules for suicide awareness and will be recommending this be adopted. The guidance for post vention was published in December.

Completion of all 13 modules remains a challenge, but the trajectory is positive with 10 more modules moving into the Green (21 now in June as opposed to 11 in May) and we will continue to monitor this to achieve 100% completion rate for all prescribed modules, which is the goal. The Staff Governance Committee agreed a stepped approach to compliance with 80% being the target set for now and this will be reviewed in Q2 2026.

Arrangements are in place within the Regions to achieve 80% by November. The overall completion rate is 64%, Over the last three months this has increased steadily by 2% each month. Additional focus will be required to achieve the target of 80% by November 2026.

Table 7 below highlights the current compliance levels, now adjusted to 80%.

% Compliance at date of report	ACC	ScotStar	East Central	NHQ/SAC	NRRD	North	South East	South West	West Central	Date of last data
Basic Life Support (SAS)	60	70	76	55	81	70	76	84	57	25/06/2026
Fire Safety (OfS)	59	72	77	58	80	71	76	83	57	25/06/2026
Health and Safety Awareness (SAS)	71	74	79	59	86	72	78	84	59	25/06/2026
Why Infection Prevention and Control matters (OfS)	48	60	68	50	76	64	64	80	46	25/06/2026
Initial Operational Response (SAS)	55	58	61	47	87	58	60	77	40	25/06/2026
Understanding equality, diversity and human rights (OfS)	51	65	70	54	77	64	68	81	48	25/06/2026
Manual handling (OfS)	68	73	80	60	87	73	78	85	58	25/06/2026
Office Ergonomics -Display Screen Equipment (DSE) / Preventing Aches and Pains (SAS)	69	72	77	60	84	71	77	85	57	25/06/2026
PREVENT Duty Awareness (SAS)	54	58	68	50	79	62	67	80	47	25/06/2026
Child protection and adult support and protection (OfS)	51	64	70	52	73	68	69	81	49	25/06/2026
Public Protection - child protection and adult support and protection for SAS staff	52	59	70	51	73	65	67	80	50	25/06/2026
Safe information handling (OfS)	53	67	71	56	81	66	65	80	48	25/06/2026
Cyber Security (OfS)	48	62	56	49	71	53	49	68	39	25/06/2026
Prevention and management of violence and aggression (OfS)	67	73	79	58	83	72	76	85	56	25/06/2026
Fraud Awareness (OfS) (NEW spring 2026)	35	47	42	33	46	38	34	51	25	25/06/2026
Completion Status	Under 50% Compliance Non Compliant			50-79% Compliance Partially Compliant			Over 80% Compliance Compliant			

							Go Live 2nd March		
	Aug	Sept	Oct	Dec	Jan	Feb	Apr	May	June
Total	23	21	22	21	16	19	27	25	20
	89	91	90	90	94	91	98	99	94
	5	5	5	6	7	7	10	11	21
	117	117	117	117	117	117	135	135	135

Note: module completion rates can alter as the expiry dates vary dependent on when staff members completed the course initially.

3.3.2 Innovation

People Services Hub

The **People Services Hub** has been in place since 3rd February 2025 and is currently completing its test of change phase. 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 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.

As at 28th June 2026, the People Services Hub have dealt with 2909 enquiries and received 379 requests for HR support for ER cases.

The majority on enquiries come from employees themselves (1477 enquiries), closely followed by managers enquiring about a member of their team (1377 enquiries).

Development of a Workforce "Chatbot" is underway with the initial build phase in progress with the developers. An internal evaluation of the functionality is currently in progress with a view to making a final decision at the end of July 2026.

SECTION 3.5 EQUALITY, DIVERSITY AND INCLUSION

3.5.1 Sexual Safety Programme Update

The Workforce Equality Monitoring Report 2024/25 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:

- The Executive Team is currently discussing bespoke cultural interventions in order to embed a more inclusive and person-centred approach to staff engagement and staff relations. This is a key element of focus of our agreed Culture Programme.
- 244 staff (as of end June 26) have completed the preventing and responding to sexual harassment Turas module and discussions taking place to include this as part of the statutory and mandatory list of modules for all staff
- Workshops are now included in the new ACA and NQP induction training weeks with EPDD. There is a plan to include this workshop in the next round of LiP ensuring it is built into the programme, will likely begin roll out in 2027. Discussions are ongoing to increase the number of front-line staff attendance on this important workshop.

- Sexual Abuse and Sexual violence awareness week was 3 – 8 February and we included topics in our 'live well, work well' newsletter for to share key messages and content
- A group of managers will be trained to carry out the most serious/complex investigations, including sexual misconduct – to enhance the speed and quality of investigation processes and outcomes limiting harm where possible. Dates are now agreed for 16th and 17th of September.
- We have created an anonymous guidance document to support the handling of anonymous complaints and encourage consistency and a robust process. This being reviewed with the HR team and WPSG for approval and distribution
- We have developed key metrics /KPIs to assess the impact of these initiatives on staff and our ultimate objective to prevent these types of behaviours in our workplace- these metrics will be gathered and included in an update report biannually
- We are now progressing our aim to gain Equally Safe at Work accreditation during 2026 and have submitted our request with Close the Gap.
- We continue to engage with student paramedics at the Universities and deliver sessions in conjunction with our OD team. Student website pages are live with more details
- We are in process of creating manager guides to go alongside the sexual safety policy. We are planning manager-specific sessions in conjunction with HCPC during 2026 to raise awareness of sexual misconduct in the workplace and their responsibilities when a member of staff approaches them to make a report.

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.

There has been no HSE involvement this reporting period.

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.

RIDDOR

There were:

- 7 April (this includes 2 patient handling, 1 slip/trip/fall same level, 3 physical assault, 1 struck by or against)
- 18 May (this includes 9 patient handling, 1 other handling, 5 slip/trip/fall same level, 2 struck by or against and 1 patient RIDDOR, struck by or against
- 14 June (this includes 5 patient handling, 4 other handling, 3 slip/trip/fall same level, 1 slip/trip/fall from height, 1 struck by or against