Public Board Meeting	**24 September 2025** **Item No 13**
THIS PAPER IS FOR DISCUSSION **STAFF EXPERIENCE AND PERFORMANCE REPORT**	

Lead Director	Graeme Ferguson, Acting Director of Workforce
Authors	Alison Ferahi, Head of Organisational Development & Wellbeing Fay McNicol, Head of Health and Safety Coralie Colburn, Senior HR Manager
Action required	The Board is asked to **discuss** the Staff Experience and Performance report.
Key points	Key points to note: • A focus on conducting weekly wellbeing visits and support to staff in ACCs along with various other Organisational Development and Wellbeing location visits throughout the organisation. • Development and progression of bids to support staff health & wellbeing through our Endowment Funds. • As of 8 September, our SAS TURAS Appraisal completion rate is 16.85%. There are currently 1794 in progress appraisals, and should these be completed alongside the 317 partially completed we would see our completed appraisals within SAS reach 48.8%. • A new attendance dashboard is currently being trialled within SAS and this will provide access to significantly more attendance-related data than ever before. • A Suicide Prevention & Postvention Short Life Working Group has been established bringing together expertise and knowledge from across the Service to develop and progress an organisational plan and deliverables for suicide awareness, prevention and postvention in SAS.

	• A formal evaluation of the People Services Hub is being undertaken with engagement of service users and key partners following the 6 months test of change.
Timing	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.
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 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.

NOT PROTECTIVELY MARKED

SCOTTISH AMBULANCE SERVICE BOARD

STAFF EXPERIENCE AND PERFORMANCE REPORT

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SECTION 1:   PURPOSE

This paper provides an update on Staff experience and Workforce performance over the last reporting period to September 2025.

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 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.

2025-26 ADP Strategic aim:

"We will be a great place to work, focusing on staff experience, health and wellbeing".

3.1 Staff Experience

3.1.1 Health and 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 ongoing steps throughout the year to increase awareness and understanding of support available:
- Increasing the number of wellbeing visits we are conducting 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.

This reporting period has seen:
- A focus on conducting weekly wellbeing visits and support to staff in ACCs and various other OD & Wellbeing location visits throughout the organisation.
- The commencement of our Lead Green Champion station visits to promote the green agenda and physical activity in outdoor spaces to support health & wellbeing.
- Development and progression of bids to support staff health & wellbeing through our Endowment Funds.
- Promoting national campaigns and our employee led fora and networks via our monthly Live Well Work Well newsletter in addition to features such as physical strength training and staff stories.
- Introduction of a Remote & Rural Wellbeing Group recognising the unique challenges faced by our remote and rural locations and facilitating the bespoke support required.

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. Within this reporting period this has included:

- Developing plans for utilisation of the Police Treatment Centre following a decision by the Police Treatment Centre Board to open up its facilities to SAS employees on the same terms and conditions as Police colleagues. This will be launched in an upcoming Staff Engagement Session.
- Progressing plans to develop in house 'Staying Well' service that will be staffed by specialist Wellbeing Leads for help, advice and triaging wellbeing support that will be launched in November.

3.1.2 Trauma Risk Management (TRiM)

TRiM continues to provide support to our staff that have been exposed to traumatic events. Referral figures have now reached 591 since the launch of the scheme end of June 2023.
Of these referrals 234 have been from the West Region, 229 from the East Region, 93 from the North Region, 35 from National Operations.

There has been a total of 102 onward referrals to Occupational Health.

The number of referrals per month is highlighted below:

Month	Number of Referrals	Total
July 2023 – March 2025	509	509
April 2025	19	528
May 2025	13	541
June 2025	8	549
July 2025	21	570
August 2025	11	581
September (up to 8th September)	10	591

3.1.3 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 8 September, our SAS TURAS Appraisal completion rate is 16.85%. There are currently 1794 in-progress appraisals, and should these be completed alongside the 317 partially completed we would see our completed appraisals within SAS reach 48.8%. 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.

3.1.4 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.

Table 1 below represents initial outputs of the online recording as the end of August 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. We will be reporting to future SGC meetings in detail on the key ER themes across SAS.
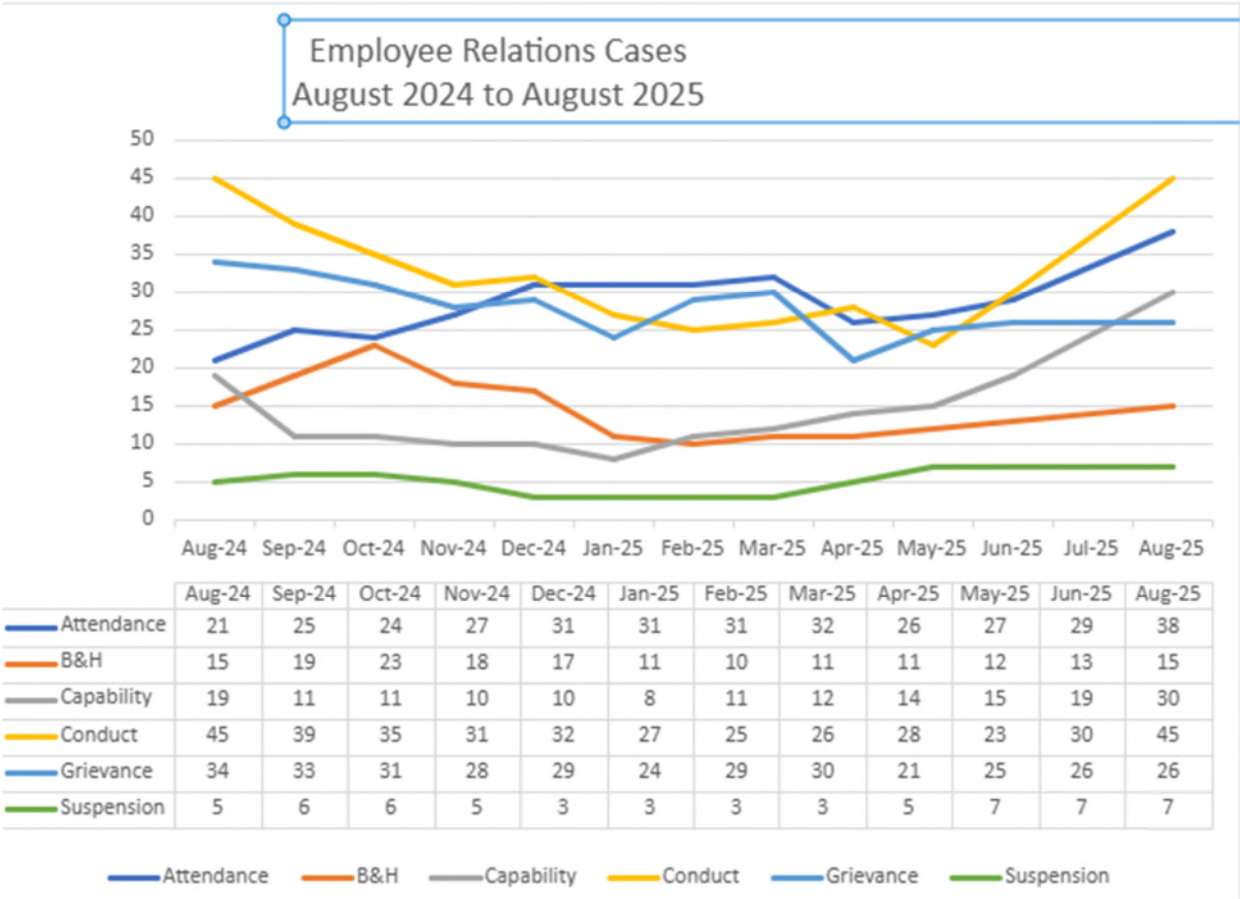
Table 1

	Aug-24	Sep-24	Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Aug-25
Attendance	21	25	24	27	31	31	31	32	26	27	29	38
B&H	15	19	23	18	17	11	10	11	11	12	13	15
Capability	19	11	11	10	10	8	11	12	14	15	19	30
Conduct	45	39	35	31	32	27	25	26	28	23	30	45
Grievance	34	33	31	28	29	24	29	30	21	25	26	26
Suspension	5	6	6	5	3	3	3	3	5	7	7	7

Table 2

Aug-25	Attendance	B&H	Capabilty	Conduct	Grievance	Suspensions	Total
Operations - West	19	4	16	13	11	1	**64**
Operations - North	1	1	3	13	2	2	**22**
National Operations	6	3	4	8	9	2	**32**
Operations - East	9	6	7	8	2	2	**34**
Finance, Strategy and Logistics	3	0	0	2	0	0	**5**
Care, Quality & Professional Development	0	0	0	0	0	0	**0**
Medical	0	0	0	1	0	0	**1**
Collective (National)	0	1	0	0	2	0	**3**
Total	**38**	**15**	**30**	**45**	**26**	**7**	**161**

The number of ER cases across the service has shown an upward trend across the last 2 months (109 cases in May 2025 to 124 cases in August 2025).

3.1.5 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 WORKFORCE METRICS

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 in our new workforce dashboard report which has been developed by our Finance colleagues.
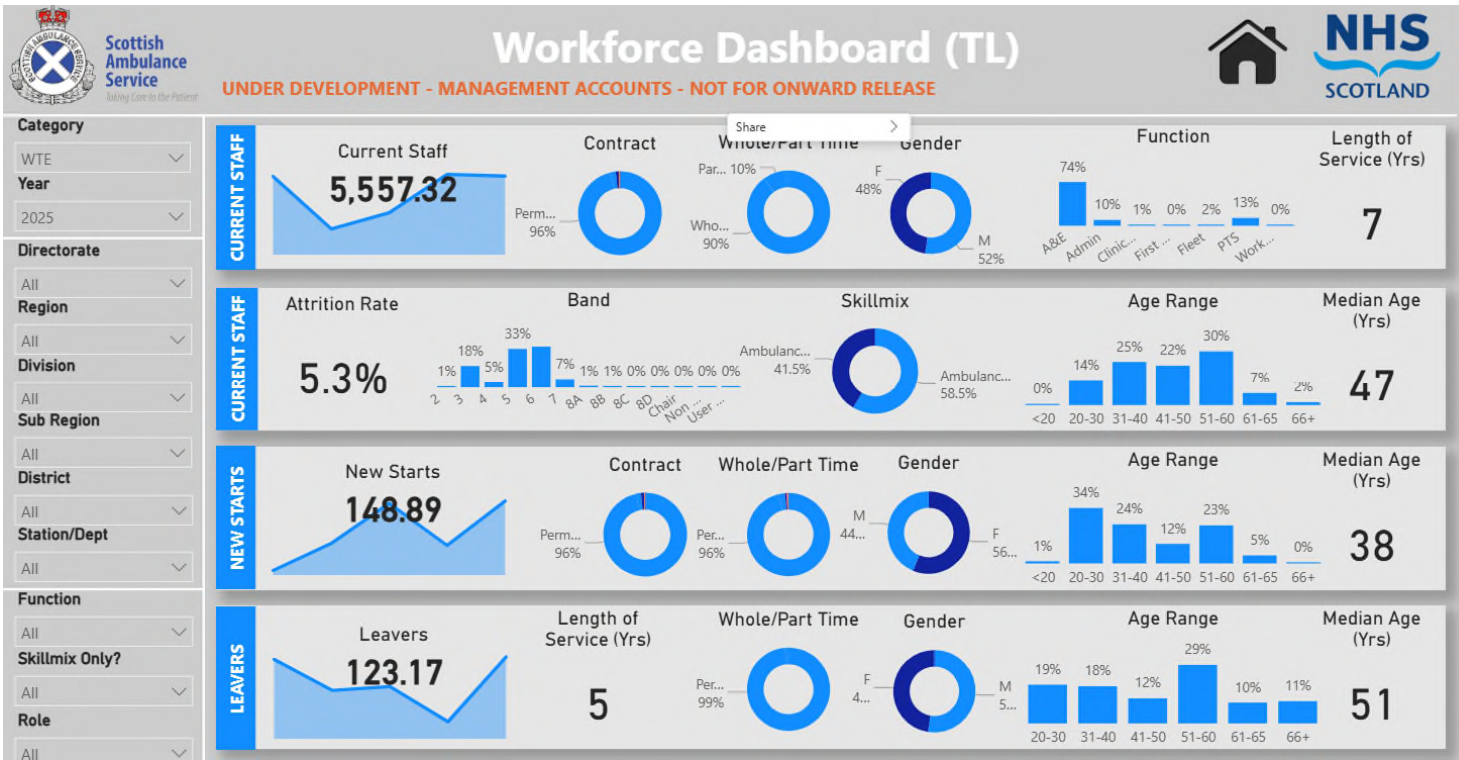
3.2.1 Newly Qualified Paramedics

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 went live on 5 March 2025. Recruitment of newly qualified paramedics direct from University is still ongoing and we are continuing to work to improve the experience of BSc Students regarding recruitment and onboarding. Feedback from university partners on the revised process this year is positive to date. Applications closed on 20 April, and we received 478 applications which exceeds the circa 350 we were expecting. 412 have been shortlisted for interview. Staff within HR along with EPDD have formed a central recruitment team to enable a consistent approach and implement critical learning from last year's process.

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.

The interview and fitness testing process has concluded with 269 candidates identified as potential appointees. EPDD has scheduled programmes for 272 individuals to mitigate any minor deviations in the planned delivery schedule. Table 3 details the schedule and activity to date.

Table 3 – NQP Schedule and Activity to Date

Cohort	Start Date	Target No	Activity to Date
1	21/07/2025	7	6
2	18/08/2025	37	35
3	15/09/2025	30	
4	13/10/2025	33	
5	10/11/2025	33	
6	05/01/2026	33	
7	02/02/2026	33	
8	02/03/2026	33	
9	23/03/2026	33	
	TOTAL	**272**	**41**

3.2.2 Sickness absence levels

Total sickness absence during the last reporting period has decreased slightly to 9.13% in June. There was also a slight 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 recently 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. A new attendance dashboard is currently being trialled within SAS and this will provide access to significantly more attendance-related data than ever before.

Table 4 below highlights the overall long term and short-term sickness absence trends over the last 2 years.
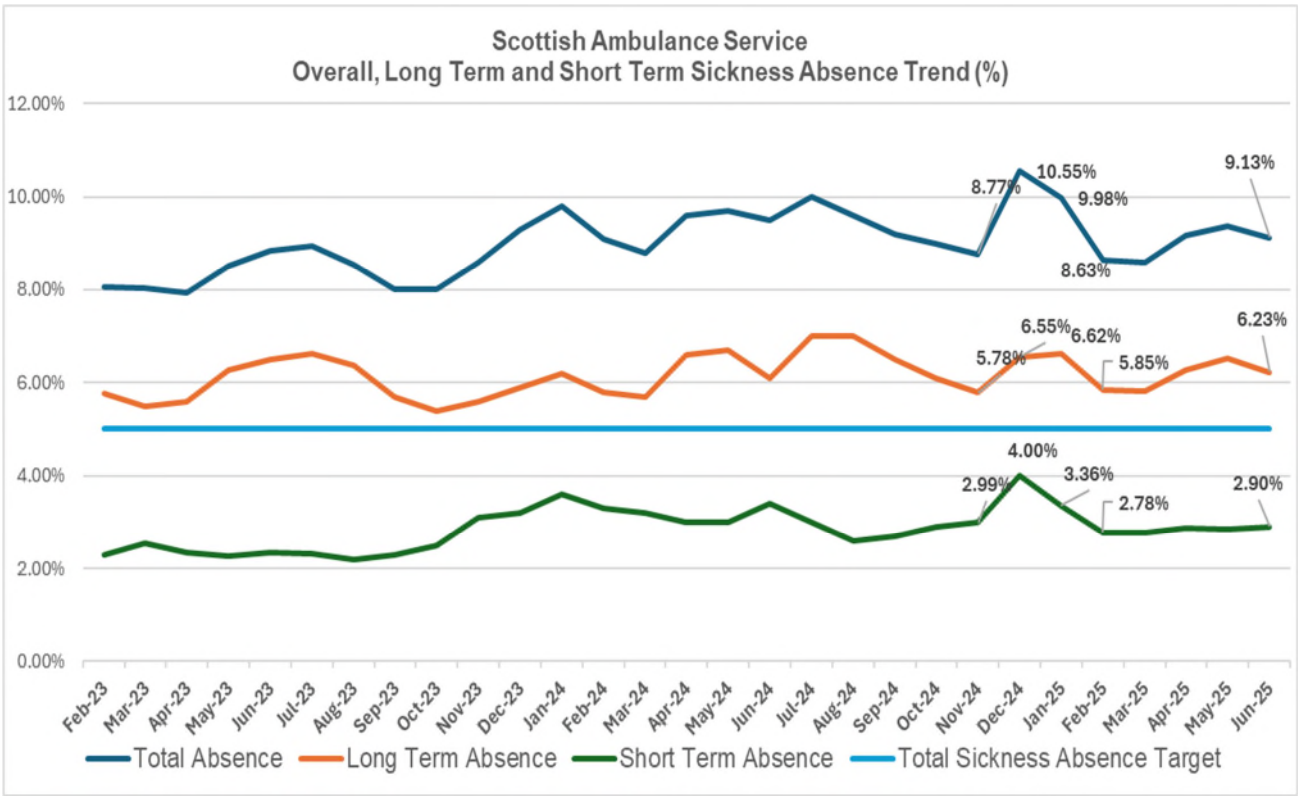
The top reason for sickness absence remains anxiety/stress and depression and much focused work is progressing to enable the Service to interact more proactively with staff with mental health issues to feel more positively supported. Signposting to other sources of help remains available such as The Ambulance Staff Charity (TASC), Employee Assistance Service (EAS), Occupational Health Service (OHS), Keil Centre and our own mental health team. 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.

However, due to the persistent and unacceptably high levels of sickness absence across SAS, it has been agreed to implement a formal PMO led programme structure to ensure appropriate governance, scrutiny and oversight are maintained to achieve a sustainable and tangible reduction in sickness absence. The Programme Board will be chaired by the Acting Director of Workforce.

3.2.3 Occupational Health Activity

There remains considerable scrutiny of our various occupational health 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.

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

Occupational Health Management Referrals (not including Trims or Keil)

- There have been 393 referrals submitted this fiscal year, The main initial triage categories being anxiety/stress/depression and other psychiatric illness at 30%, Return to work plans at 28%, other musculoskeletal problems 11%, and back problems 7%.

Pre-Placements

- 24 pre placements were submitted in Q1
- Highest Directorates undertaking recruitment were the North with 38% and ACC at 17%

Keil Referrals

- There have been 21 referrals submitted to Keil during Quarter 1.
- 8 were identified through TRiM and 13 via occupational health management referrals

Physiotherapy

- There have been 237 referrals received into the SAS OH Hub during Quarter 1.

We have been advised that due to demand of occupational health services, all NHS Boards are currently working to approximately 8 to 12 weeks wait time from receipt of referral to appointment.

With our Wellbeing team now supplemented by 4 new part time staff from October 2025, we are in a very good position to significantly enhance our internal support for staff wellbeing. With more specialist skills available and improved signposting to the appropriate specialist support available to all staff, there is a clear expectation that we will reduce "waiting times" for our staff to expedite their return to work, but as importantly to reduce the need to be off work in the first place. Together with our newly established access to Police Scotland's Treatment Centre in Auchterarder, we are able to offer an increasing wide range of wellbeing support going forward. This is a positive message to all our staff.

3.3.1 Learning and Development

Statutory and Mandatory Training Compliance

The TURAS Learn platform was launched in March 2024 and staff are currently working towards completion of the thirteen statutory and mandatory training modules. Table 5 shows progress in the levels of completion since the launch of the TURAS Learn platform to August 2025 by Sub Regional level. The RAG status shown is illustrative only as the final percentage completion classifications have still to be formally agreed. It was agreed at Staff Governance Committee to increase the Service compliance target to 80% and this is now shown in the table.

We have also been developing statutory and mandatory wellbeing training as part of TURAS Phase 2. The Executive Team was recently presented with a detailed role specific analysis of statutory and mandatory training requirements per individual job role, which for the first time establishes a benchmark for all job families in SAS. This extensive work now highlights what statutory and mandatory training is required for every role within the Service. The next stage is to continue to measure, and improve, our compliance levels and to ensure that sufficient protected time is made available to all staff.

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.

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 that 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 5 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	71	75	69	56	86	69	73	63	47	25/08/2025
Fire Safety Awareness Training	69	74	67	59	83	66	71	61	44	25/08/2025
Health and Safety Awareness	68	71	64	57	84	64	70	59	43	25/08/2025
Infection prevention and control (foundation)	58	65	58	45	70	63	60	57	41	25/08/2025
Initial Operational Response	42	54	47	36	78	53	54	48	29	25/08/2025
Introduction to equality, diversity and human rights	59	61	56	51	79	58	61	51	38	25/08/2025
Moving and handling (Module A)	63	62	63	55	81	64	67	56	41	25/08/2025
Office Ergonomics - Display Screen Equipment (DSE) / Preventing Aches and Pains	65	65	61	56	80	62	67	56	40	25/08/2025
PREVENT Duty Awareness	55	52	51	41	76	55	59	48	34	25/08/2025
Public Protection - child protection and adult support and protection for SAS staff	59	57	56	44	76	58	62	50	36	25/08/2025
Safe information handling	71	72	55	54	69	60	51	58	41	25/08/2025
Staying safe online: top tips for staff	39	56	53	46	58	55	53	51	31	25/08/2025
Violence Prevention Reduction: Conflict Management	60	58	60	50	78	61	63	54	39	25/08/2025
Completion Status	Under 50% Compliance			50-79% Compliance			Over 80% Compliance			
	Non Compliant			Partially Compliant			Compliant			

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.

This reporting period has seen progress in the following areas:

- A Suicide Prevention & Postvention Short Life Working Group has been established bringing together expertise and knowledge from across the Service to develop and progress an organisational plan and deliverables for suicide awareness, prevention and postvention in SAS. This includes increasing awareness, improving confidence to have conversations about suicide, putting in place safe and evidence-based interventions for staff with suicidal ideation or with active plans in place and support in the aftermath of a suspected or survived staff suicide attempt. A series of meetings have been put in place in order to progress this important area of work at pace.

3.3.2 Innovation

People Services Hub

The new **People Services Hub** has been in place since 3rd February 2025 and is currently in its test of change phase until 30 September 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.

A formal evaluation is being undertaken with engagement of service users and key partners following the 6 months test of change with a view to establishing the People Services Hub on a permanent basis wef 1st October 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.

In this reporting period the OD Team have developed a culture dashboard to highlight a more visual representation of progress made in further developing a healthy workplace. This will be discussed at an upcoming Workforce Senior Leadership Team meeting to explore how we can integrate this into our Staff Experience & Performance reporting with the first version presented to the December Staff Governance Committee,

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.
- 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, facilitating a culture of role modelling values-driven behaviour and calling out inappropriate workplace behaviours.

In this reporting period the following work has progressed:
- A paper was approved at the Equality, Diversity & Inclusion Steering Group regarding introducing reverse mentoring. This will enable individuals from underrepresented groups to

mentor senior leaders, sharing lived experience to influence organisational culture and decision-making. The first cohort will commence in the next reporting period focusing on racial equality with mentors selected from our Ethnic Minority Forum.

- Following on from the success of Healthy Culture Week one of our OD Leads presented a session on 'Developing a manual for me' at the inaugural 'National Wellbeing Week' in the first week of September. This event was co-ordinated by the Scottish Government with the support of the National Wellbeing Champions on the first week of September and was open to all Health & Care organisations across Scotland with plans to make this an annual event.

iMatter 2025 Update

The 2025 iMatter survey ran from 27 May to 17 June with comparative figures shown in the table below from the last 5 years.

Year	Response Rate %	Employee Engagement Index	Action Plan Completion rate %
2025	**55**	**67**	**68**
2024	59	66	65
2023	56	67	71
2022	52	67	62
2021	60	65	41

Responses regarding the two additional questions on raising concerns (since they were introduced into the survey in 2023) are:

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

iMatter was discussed in depth as the special topic at the September Staff Governance Committee with useful points raised that will be taken on board to continue to improve results for next year's cycle.

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 and facilitating people-centred leadership approaches.

In this reporting period we have been:

- Developing the reverse mentoring programme as described in Ambition 5 above.
- Continuing our core leadership programmes and preparing documentation for re-accreditation of our Foundation Programme that is due for renewal in November.
- Developing plans to gain accreditation for our Aspiring Leaders and Intermediate Leadership programmes.
- Discussing ideas to develop training for those conducting assessment centres to ensure a consistent approach across SAS.

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.

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:

- 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).
- The sexual safety communication and engagement plan is updated regularly.

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 1 HSE involvement during 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:

- 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.
- 6 July (all staff, no patients).
- 12 August (all staff, no patients).

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.