



NOT PROTECTIVELY MARKED

MINUTES OF THE 211TH PUBLIC MEETING OF THE SCOTTISH AMBULANCE SERVICE BOARD

1000 HOURS ON WEDNESDAY 31 JULY 2024 ON MS TEAMS

Present:

Board members: Carol Sinclair, Non Executive Director (Chair)
Julie Carter, Director of Finance, Logistics & Strategy
Michael Dickson, Chief Executive
Steven Gilroy, Employee Director
Liz Humphreys, Non Executive Director
Mike McCormick, Non Executive Director
Cecil Meiklejohn, Non Executive Director
Carol Sinclair, Non Executive Director
Madeline Smith, Non Executive Director
Dr Jim Ward, Medical Director
Maggie Watts, Non Executive Director

Regular attendees: Karen Brogan, Director of Strategy Planning and Programmes
Graeme Ferguson, Deputy Director of Workforce
Mark Hannan, Head of Corporate Affairs & Engagement
Pippa Hamilton, Acting Board Secretary
David Robertson, Regional Director, West

In attendance: Karen Burnett Head of Infection Prevention and Control (*Observing*)
Freya Gillies, Corporate Governance Administrator (*Observing*)
Lesley Kay, Corporate Governance Administrator (*Observing*)
Sarah Stevenson, Risk Manager (Item 07)
Daren Nelson, Interim Head of Organisational Development (Item 08)

WELCOME AND INTRODUCTION

The Chair welcomed everyone to the 211th Scottish Ambulance Service Board meeting. Apologies were noted from members: Tom Steele, Irene Oldfather, Stuart Currie and regular attendees, Kenny Freeburn, Paul Bassett, Stephen Massetti, Avril Keen, Milne Weir and Dave Bywater.

ITEM 01 PATIENT STORY

Board members viewed the patient story in advance of the meeting which featured the story of a patient who gives thanks to everyone at the Scottish Ambulance Service for attending to him after he had a heart attack. He praised the efforts of everyone involved and said it shows how good the healthcare system works, starting from the initial 999 call to his treatment at hospital.

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The Board discussed the story and asked that thanks be conveyed to the patient for sharing his experience.

ITEM 02 DECLARATION OF INTERESTS

The following standing declarations were noted: -

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

ITEM 03 MINUTES OF MEETING HELD ON 29 MAY 2024

Members **approved** the minutes of the 29 May 2024 public Board meeting.

ITEM 04 MATTERS ARISING

Board noted that 7 actions were proposed for closure.

Members discussed action 209/8/03, (clinical reporting relationship between Clinical Governance Committee and the Public Board) and Jim Ward highlighted that as an example in relation to clinical data reporting, the November Clinical Governance Committee will be presented with the National Cardiac Arrest Report and the National Stroke Audit which will provide more clinical data for these areas. Members thanked Jim for the update and Board members were encouraged to make contact with the relevant Executive Governance Committee leads and Committee Chairs to gain further assurance from governance committee level if required.

Members agreed that action 209/8/13 (review and refresh of patient and staff safety HAI update) would remain open as the newly appointed Head of Infection Prevention and Control only took up post from 01 July 2024 and would be undertaking work to review and refresh the presentation of the paper in advance of the September Board meeting.

It was agreed that Carol Sinclair would discuss with the Board Chair on how the continuous improvement of Board papers should be captured.

Board members approved the removal of matters arising 208/3/05, 208/7/12, 209/5/07, 209/6/08, 209/7/12, 209/8/03.

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Action:

1. **Carol Sinclair** to discuss with Board Chair on how continuous improvement of Board papers should be captured within the public board action tracker.

ITEM 05 BOARD QUALITY INDICATORS AND PERFORMANCE REPORT

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

Michael Dickson advised that a change which has been made to the response time definition from 01 April 2024, which now aligns with all other UK Ambulance Services. Michael Dickson added that the response to patient is now measured from the point at which acuity of the patient is determined. The previous definition measured response from the same point in every 999 call regardless of patient acuity and when the chief complaint was established. Members noted that the updated solution has been delivered and testing is being undertaken for the new measure, and response times will continue to be reported under the previous definition until the data has been validated.

The Board noted that the median response time to purple category calls in June 2024 was 6 minutes 43 seconds with the key influencing factors on response times as service time, including hospital turnaround times, emergency demand, shift cover and staff availability during shift. Michael Dickson advised that the continued extended hospital turnaround times in many hospital sites remains an area of significant concern and provided assurance to the Board that focused work continues by the Service management teams with Health Boards to produce site action plans in line with the Safe Handover at Hospital Principles to support the reduction in delays and early escalatory actions.

Members welcomed the level of candour being applied by the Service in relation to hospital turnaround times but raised concern at the lack of improvement within some Health Board areas, notwithstanding the volume of engagement, improvement efforts and escalation which continued to be carried out by the Service. The Board took assurance that the Service are utilising all routes of escalation in relation to this.

Madeline Smith asked in relation to employee resourcing, if there was a better way to present this data to move away from tables and numbers and have trajectory information with supporting narrative. It was suggested that a balanced scorecard presentation of the data may be beneficial. It was agreed that Karen Brogan would discuss this with the Business Intelligence Team for future reporting.

Jim Ward highlighted that in relation to details clinical data reporting, the November Clinical Governance Committee will be presented with the National Cardiac Arrest Report and the National Stroke Audit which will provide more clinical data for these areas. Board members were encouraged to make contact with the relevant Executive Governance Committee leads to gain further assurance from a governance committee level.

Board members **noted** the report and discussion and noted improvements continue to be made to data and narrative as the opportunity arises.

Action:

2. **Director of Strategy, Planning and Programmes** to discuss the future presentation of employee resourcing data and the suggested move away from tables and numbers and

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inclusion of trajectory information and supporting narrative with the Business Intelligence Team.

ITEM 06 DELIVERING OUR 2030 STRATEGY – PORTFOLIO UPDATES

Michael Dickson provided a summary of the main points from the paper and highlighted that good progress continues to be made across all portfolios of work, with mitigating actions put in place for any delays to delivery timelines due to operational pressures or other factors. Michael added that there are currently no risks across any of the Portfolios which require escalation to the Board with all risks currently being managed through respective portfolio boards or already exists on the Corporate Risk Register.

The Board noted the letter of approval of the Boards 2024/25 Annual Delivery Plan was also included within the paper presented. It was noted that the letter welcomed the approach being taken by the Board to develop service delivery and financial plans in an integrated way ensuring patient safety and that front line services are appropriately prioritised whilst working within agreed budgets. There was also recognition of the significant and ongoing challenge this represents and acknowledgement that planning is currently set within a landscape of uncertainty and risk. In particular, delivery is dependent on achieving the necessary savings as set out in the Financial Plan.

Members discussed the projects with “amber” status and asked that more assurance be provided within future reporting which outlined the pathway to “green” status for any such projects and would welcome if this would also include a percentage progress to plan for each.

Members also requested that all new information contained within the paper since the last presentation was highlighted in red text to support effective discussion.

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

Action:

3. **Director of Strategy, Planning and Programmes** to ensure that the pathway to “green” and percentage progress to plan is included within future reporting for all projects with “amber” status to provide more assurance to the Board.
4. **Director of Strategy, Planning and Programmes** to ensure that all new information contained within future presentations of the Delivering our 2030 Strategy paper is highlighted in red text to support effective Board discussion.

ITEM 07 CORPORATE RISK REGISTER (PUBLIC)

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

Sarah advised that members were asked to:

- **Note** Changes made following previous presentation to the Board are highlighted red including:
 - The updated risk description on CRR ID 5603 (Maintaining Required Service Levels) to include the impact of climate change.
 - Further detail on the mitigating actions supporting the hospital handover risk and staff health and wellbeing risk.
- **Approve** the risk register as presented.

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Members welcomed the additional narrative included in relation to mitigating actions, however asked that this shows less history and more trajectory. Members also asked that within the “effect of risk” column that progress towards tolerance is also included.

Members **approved** the risk register.

Action:

5. **Risk Manager** to show more trajectory and less history in relation to mitigating actions and within the “effect of risk” column include progress towards tolerance within future reporting.

ITEM 08 HEALTH AND WELLBEING STRATEGY

Daren Nelson joined the meeting for this item and provided a summary of the main points from the paper which included:

1. The document retains the two themes of the previous strategy of ‘Being Well’ and ‘A Great Place to Work’.
2. It has captured the views of our people through workplace visits, forums and workshops. Most recently a short-life working group has met several times and provided feedback on the development of the strategy.
3. It encompasses the recommendations of the KPMG Internal Audit, conducted in 2023 (resource assessment to be included within annual delivery plan).
4. An accessible ‘staff-friendly’ version of the strategy has been incorporated within the accompanying roadmap document.
5. The three themes of the strategy are ‘Healthy Mind’, ‘Healthy Body’ and ‘Healthy Workplace’, and these are underpinned by the roots of staff empowerment and a preventative/proactive approach to health and wellbeing.
6. The strategy sets out to establish a more-evidence-based approach.

Members noted that the draft Strategy had been discussed by the Staff Governance Committee with any suggestions by Committee incorporated into the version presented to the Board.

Members discussed the paper and thanked Daren Nelson for the volume of work undertaken.

Board members **approved** the Strategy.

ITEM 09 FINANCIAL PERFORMANCE TO 30 JUNE 2024

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

1. The financial position at the end of month 3 is reporting a deficit of £6.18 million.
2. Impact of ongoing post COVID/operational pressures of £2.92 million have been incurred over this period
3. Overtime costs continue to increase compared with the same period last year with a detailed analysis of the key drivers of this included within the paper.
4. In relation to the £12.0 million efficiency savings target, to date £0.51 million has been delivered against a year to date target of £1.2 million, recognising that this is early in the financial year
5. Additional recurring funding of £5 million from Scottish Government has been received in this first quarter.
6. Given the current financial challenges a first estimate of a full year forecast has been completed. At this early stage in the financial year this is presented as a best, likely and worst case position. The different scenarios represent the slower start to the year of the

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efficiency savings plans, additional cost pressures and the additional recurring funding received of £5 million.

7. The paper also includes an update on progress against the 15 Box Grid, that support the delivery of the 3% Board efficiency savings targets.

Board members discussed the report and **noted** the financial position.

ITEM 10 PERSON CENTRED CARE UPDATE

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

Board members noted the complaints compliance with Stage 1 reported at 96.8% and Stage 2 reported at 92.0% against a compliance target of 70%.

Jim Ward highlighted that of the 317 complaints received between 01 April 2024 and 30 June 2024, the 3 most common themes for complaints are:

- Attitude and Behaviour – 88 complaints (27.76% of the total compared to 29.29% reported in the last Board paper).
- PTS Eligibility – 52 complaints (16.4% of the total, compared to 11.99% reported in the last Board paper).
- Triage/Referral to NHS 24 – 45 complaints (14.2% of the total, compared to 12.83% reported in the last Board paper).

Carol Sinclair noted that she welcomed that the Involving People section of the paper, however asked that for future reporting for this to also be aligned to the 2030 Strategy. It was agreed that Mark Hannan would take this forward and ensure that this was included within future reports.

Board members **noted** the report.

Action:

6. **Head of Corporate Affairs and Engagement** to ensure that future reporting of the involving people section of the person centred care paper is aligned to the 2030 Strategy.

ITEM 11 PATIENT AND STAFF SAFETY HAI UPDATE

Jim Ward provided a summary of the main points from the paper. Board members noted that the Infection Prevention and Control (IPC) Programme of work for 2024/25 was approved by the Clinical Governance Committee in May 2024 and the Head of Infection Prevention and Control is currently undertaking a scoping exercise to ascertain the progress of items which target dates are imminent.

Members noted that the RIVO audit system (IPC audit of ambulance vehicles and stations) has now closed and will be replaced with Evotix.

Jim Ward added that compliance with the Peripheral Venous Catheter (PVC) bundle remains above the target of 95%.

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Jim highlighted that Karen Burnett, Head of Infection Prevention and Control took up post on 01 July 2024 and it was anticipated that the recruitment of the substantive post of Lead Infection Prevention and Control Practitioner will commence in early August.

Board members **noted** the report.

ITEM 12 HEALTH AND WELLBEING UPDATE

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

Graeme Ferguson highlighted that a total of 45 referrals to the internal provision of trauma support through the TRiM programme had been facilitated during the reporting period. The second “Healthy Culture Week” took place from 17 – 21 June with a total of 12 sessions delivered, generating 770 engagements, including views of the session recordings, reaching approximately 11.6% of the workforce.

The Board noted that 3 National Partnership Conferences had been completed with positive feedback received from attendees. The 2024 iMatter Staff Survey has completed and generated a 59% response rate and an employee engagement index score of 66 with further work now being undertaken to deeper analyse the data.

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

ITEM 13 CHAIR’S VERBAL REPORT

In the absence of the Board Chair, Carol Sinclair provided an update on the Chair’s activity during the reporting period and Board members noted:

- The Chair met with the Cabinet Secretary on 5th June with various ministerial concerns discussed, including hospital turnaround times and technician to paramedic education pathways.
- The Chair has been meeting regularly with the Chairs of NHS Grampian and NHS Ayrshire and Arran in relation to ambulance waiting times within the Health Board areas and the requirement for robust collaborated working between the Health Boards and the Service.
- The Chair attended the Aspiring Chairs event on 28 June and presented on innovation and digital challenges and opportunities.

ITEM 14 CHIEF EXECUTIVE’S UPDATE

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

- Michael highlighted that a significant and sustained focus remains on finance across NHS Scotland.
- On 8 July International Paramedic Day was celebrated with colleagues around the world and is dedicated to celebrating paramedics and the vital role they place in healthcare.

ITEM 15 STAFF GOVERNANCE COMMITTEE

Members discussed the inclusion of the written updates presented to the Board from the most recent governance committee meetings as requested at the March Board meeting. Following

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the discussion, it was suggested that it may be more useful for only the agenda from the most recent meeting to be shared rather than a full written update. It was agreed that future Governance Committee reporting would include the latest approved minutes and agenda from the last meeting rather than a written report. Members were also advised that if they wished to have sight of any governance committee agenda item paper or be provided with an update on the discussions in advance of the approved minute being presented to the Board, they should contact the Executive Lead and Secretariat of the Committee.

Board members noted the minutes of 14 March 2024 approved by the Committee on 06 June 2024 and the written update from the meeting held on 06 June. Board members noted the Committee:

- Received a presentation on the reducing misogyny and improving sexual safety in the Ambulance Service.
- Approved the Staff Governance Committee Terms of Reference and Annual Report.
- Reviewed and approved the Workforce Risk Register.
- Noted the revised Health, Safety and Wellbeing Strategy Audit report and management actions.
- Approved 16 policies.
- Received updates on workforce reporting, internal audit actions, staff experience, health and safety, education, rest break improvement, partnership working and workforce communications and engagement.

ITEM 16 AUDIT AND RISK COMMITTEE

Board members noted the minutes of 22 April 2024 approved by the Committee on 13 June 2024 and the written update from the meeting held on 13 June. Board members noted the Committee:

- Reviewed, discussed and approved the Corporate Risk Register and Risk Management Annual Report.
- Reviewed the Governance Committee Annual Reports, Terms of Reference and Self-Assessments and recommended these for Board approval.
- Reviewed the Internal Audit Annual Report
- Discussed and noted the draft Annual Report and Accounts 2023/24 prior to presentation to the June Board.
- Reviewed the External Audit Annual Report, draft letter of representation and third party audits 2023/24
- Received update reports on Fraud, Best Value and Information Governance.

ITEM 17 INTEGRATED GOVERNANCE COMMITTEE

Board members noted the written update from the first meeting of the Integrated Governance Committee held on 03 June 2024. Carol Sinclair highlighted that as this was the first meeting of the Committee, the minutes of the June 2024 meeting will be presented to the next Integrated Governance Committee meeting on 07 November 2024 for approval and then presented to the November 2024 Board.

Board members noted the Committee:

- Reviewed and discussed the Terms of Reference and approved this subject to minor changes and recommended these to the Board for approval.
- Discussed the Blueprint for Good Governance Development Plan actions.

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- Noted that a mapping exercise would be carried out to map this years Annual Delivery Plan, Corporate Objectives and Corporate Risks to the Board Assurance Framework, as has been done in previous years, to highlight any gaps.

ITEM 18 DATE OF NEXT MEETING

- The next meetings will be held on 25 September 2024

Carol Sinclair thanked members for their participation and the focus and attention given throughout the discussion.

Carol Sinclair closed the meeting.

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