



NOT PROTECTIVELY MARKED

MINUTES OF THE 214TH PUBLIC MEETING OF THE SCOTTISH AMBULANCE SERVICE BOARD

1000 HOURS ON WEDNESDAY 29 JANUARY 2025 ON MS TEAMS

Present:

Board members: Tom Steele, Board Chair (Chair)
Julie Carter, Director of Finance, Logistics & Strategy
Stuart Currie, Non Executive Director
Michael Dickson, Chief Executive
Steven Gilroy, Employee Director
Liz Humphreys, Non Executive Director
Thane Lawrie, Non Executive Director
Mike McCormick, 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, Board Secretary
Stephen Massetti, Director, National Operations
Milne Weir, Regional Director, North

In attendance: Sarah Stevenson, Risk Manager (Item 07)
Gillian MacLeod, Interim Associate Director of Care Quality and Professional Development

WELCOME AND INTRODUCTION

The Chair welcomed everyone to the 214th Scottish Ambulance Service Board meeting. Apologies were noted from members: Irene Oldfather and regular attendees, Avril Keen, Paul Bassett, Dave Bywater, Kenny Freeburn and David Robertson.

The Chair gave a particular welcome to Thane Lawrie to his first Board meeting since beginning his appointment as a Non Executive Board member on 16th January 2025.

The Chair further welcomed Gillian MacLeod, Interim Associate Director of Care Quality and Professional Development who was in attendance at the meeting to deputise in the absence of Dave Bywater.

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ITEM 01 PATIENT STORY

Board members viewed the patient experience video in advance of the meeting which featured the story of Kevin McRobb's dad who experienced an extended wait for an ambulance and then a further wait at Aberdeen Royal Infirmary (ARI). While Kevin speaks highly of the Scottish Ambulance Service staff involved, he raised several concerns of his dad's experience. The video also seen the ambulance crew share their perspective and the ongoing issues at ARI.

The Board ensued on a lengthy discussion on the impact of hospital handover delays experienced through December 2024 and January 2025 and the effect they have on patients and crews, which was reinforced by the powerful patient story. Although the solutions to handover delays do not directly rest with the Board, there was full agreement that the situation should not be accepted as normal. The Board noted its support for the efforts being made by the Service in addressing this ongoing issue. The Board agreed that a Board to Board discussion should take place between SAS and NHS Grampian and that the Chair and Chief Executive would discuss how to take the Board to Board approach forward.

The Chair asked that thanks be conveyed to Kevin McRobb and the ambulance crew for sharing their experience.

Action:

1. **Chief Executive and Chair** to discuss the arrangements for a Board to Board discussion with NHS Grampian.

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 27 NOVEMBER 2024

Members **approved** the minutes of the 27 November 2024 public Board meeting.

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ITEM 04 MATTERS ARISING

The Board noted that 7 actions were proposed for closure.

Board members **approved** the removal of matters arising 212/06/11 (1), 212/06/11 (2), 213/02/05 (1), 213/02/05 (2), 213/02/05 (3), 213/08/14, 213/08/15.

ITEM 05 BOARD QUALITY INDICATORS AND PERFORMANCE REPORT

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

Michael Dickson highlighted that as a result of the winter planning efforts, particularly within the Integrated Clinical Hub and Pathways initiatives, in December 2024 a total of 55.2% of patients were managed without conveyance to hospital. Michael Dickson added that unscheduled call demand saw a 13.0% increase in December 2024 on the same period last year, with 110,992 calls. The Board noted that the increase in calls resulted in a comparable increase in the number of unscheduled care incidents of 7.7% compared to December 2023 with 78,711 incidents, the highest monthly total experienced by the Service.

The Board noted that in relation to scheduled care, in line with REAP 4 actions, the decision was taken to suspend outpatient activity, with the exception of renal dialysis and oncology patients, to maximise resources to discharge and timed admission capacity.

Jim Ward provided an update on the launch of our Cardiac Arrest Rescue (CARE) Zones initiative which will strengthen and mobilise community response of Out of Hospital Cardiac Arrests (OHCA) in Scotland. Jim advised that mapping of GoodSAM response data has been completed which provided insight regarding the gap that exists between where cardiac arrests are likely to occur, the concentrations of GoodSAM responder in that area, and the number of alerts that those responders accepted. The GoodSAM data is now being used to optimise use of the system and inform local strategies around community response to OHCA.

The Board noted that the plan for this initiative is to engage with local councils with the aim of aligning this with their local community strategies in a hyperlocal way that optimises the chain of survival to the needs of that location. The work will also involve extensive engagement with all relevant stakeholders. Jim Ward added that utilising the GoodSAM mapping data we have met with one Council area with the view that they will be our first partner in this project. When all relevant local stakeholders are engaged and there has been a comprehensive assessment of the communities most impacted by OHCA and what resources are available across the council area then a plan will be co-produced.

Stuart Currie suggested in relation to Public Access Defibrillators (PADs), it may be beneficial to engage with local authorities in relation to what guidance can be issued to planning authorities for potential developer contributions of PADs to be included as part of the planning application process. Jim Ward thanked Stuart Currie for the suggestions and advised that he would ensure that this was followed up.

The Board **noted** the report.

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- 2. Medical Director** to take forward suggestion of engagement with local authorities in relation to what guidance can be issued to planning authorities for potential developer contributions of Public Access Defibrillators (PADs) to be included as part of the planning application process.

ITEM 06 DELIVERING OUR 2030 STRATEGY – PORTFOLIO UPDATES

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

Karen Borgan provided a summary of the main points from the paper and highlighted that good progress continues to be made across all portfolios of work, with path to green plans in place for projects in Amber or Red status. Karen Borgan 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 project updates and welcomed the implementation of the digital patient handover project with NHS24.

Madeline Smith welcomed the progress outlined within the paper, and advised that in relation to the section 4.2.6, people strategy, although it has been agreed that there is no requirement to develop a people strategy and that these ambitions and deliverables will be set out within the workforce plan, the wording surrounding this requires to be strategic. It was agreed that Karen Borgan would pick this up offline with Madeline Smith and Graeme Ferguson to ensure that accurate wording is included.

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

ITEM 07 CORPORATE RISK REGISTER (PUBLIC)

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

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

Sarah advised that members were asked to:

- **Review the Corporate Risk Register and note** the actions in place and the assurance being received that the risks are being controlled effectively, noting specifically the inclusion of 5 new Corporate Risks as identified at the October Board Development Session.
- **Approve** the risk register as presented.

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

- Risk 5888 workforce planning and 5889 workforce sustainability, it was suggested that wording needs to be included to reflect future capability in these areas.
- Risk 5891, collaborative working, it was suggested that the risk description should be updated to include differing risk appetites of stakeholders and not just competing priorities.

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It was agreed that Sarah Stevenson would update the next version of the Corporate Risk Register to incorporate the Boards discussions and suggestions.

Members **approved** the risk register.

Action:

3. Risk Manager to update Corporate Risk Register following the undernoted suggestions from members:

- Risk 5888 workforce planning and 5889 workforce sustainability, it was suggested that wording needs to be included to reflect future capability in these areas.
- Risk 5891, collaborative working, it was suggested that the risk description should be updated to include differing risk appetites of stakeholders and not just competing priorities.

ITEM 08 BOARD ASSURANCE FRAMEWORK

Julie Carter provided a summary of the main points from the paper and asked members to review and approve the Board Assurance Framework format, work to date and next steps. Julie Carter provided assurance to the Board that the Audit and Risk Committee have had continuous oversight in the development of the Board Assurance Framework.

Carol Sinclair as Chair of Audit and Risk Committee added that the Committee has thoroughly explored and examined the purpose, presentation gaps and opportunities of the Framework and noted that it would be a living document that would evolve and improve. Carol added that the Framework allows the Service to strongly embed the spirit of enhanced governance and presented information and assurance provided to the Board and Standing Committees.

It was agreed that a discussion at a future Board Development Session would take place in relation to assurance thresholds as outlined within the Board Assurance Framework.

The Board approved the format, work to date and next steps of the Board Assurance Framework.

Action:

4. Board Secretary to add Board Assurance Framework Assurance Thresholds to Board Development Workplan.

ITEM 09 FINANCIAL PERFORMANCE TO 31 DECEMBER 2024

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

1. The financial position at the end of month 9 is reporting a deficit of £0.87 million, reflecting both the additional £5.0 million recurring funding received to offset operational commitments and £9.0 million non-recurring in respect of post COVID/system pressures.
2. Impact of ongoing post COVID/system pressures of £6.82 million have been incurred over this period and been offset against the £9.0 million full year funding received.
3. A detailed analysis of the key drivers of high overtime costs are included within the paper, driver for these include higher shift cover to manage increased demand.

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4. In relation to the £12.0 million efficiency savings target, to date £7.85 million has been delivered against a year to date £9.2 million. The full year trajectory has been assumed within the revised forecast and is updated within the paper.
5. The revised full year forecast of £17.5 million deficit reported previously to month 8 is now reporting a break even position, enabled through receiving additional funding for the ongoing COVID/system pressures.
6. The agenda for change reform funding received has been offset against the reduced working week additional costs.

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

ITEM 10 PERSON CENTRED CARE UPDATE

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

Board members noted the complaints compliance with Stage 1 reported at 94.6% and Stage 2 reported at 93.0% against a compliance target of 70%.

Mark Hannan highlighted that of the 861 complaints received between 01 April 2024 and 31 December 2024, the 3 most common themes for complaints are:

- Attitude and Behaviour – 268 complaints (31.13% of the total, compared to 26.68% in the last paper).
- Delayed Response – 154 complaints (17.89% of the total, compared to 13.77% in the last paper).
- Triage/Referral to NHS24 – 128 complaints (14.87% of the total, compared to 12.9% in the last paper).

Mark Hannan advised that work was currently ongoing with Care Opinion to develop a mechanism to allow children to feedback in line with the United Nations Convention on the Rights of the Child (UNCRC).

Madeline Smith noted that the governance reporting structure in relation to the Youth Charter and UNCRC required to be discussed and suggested that this is discussed at the next Integrated Governance Committee.

Members suggested that consideration should be given to updates on the implementation of The Promise Scotland being included within future Person Centred Care reporting.

Liz Humphreys suggested that the Person Centred Care report could be further enhanced with the addition of narrative on what positive changes have been made as a result of complaints.

Mark Hannan thanked members for their comments and advised that he would discuss these with the new Patient Experience Manager and take these forward within future Board reporting.

Board members **noted** the report.

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5. **Head of Corporate Affairs and Engagement** to discuss the inclusion of the undernoted areas into future Board Reporting with the Patient Experience Manager:
 - Updates on the implementation of The Promise Scotland.
 - Addition of narrative on what positive changes have been made as a result of complaints.
6. **Board Secretary** to add governance reporting structure in relation to the Youth Charter and UNCRC to the next Integrated Governance Committee agenda for discussion.

ITEM 11 PATIENT AND STAFF SAFETY HAI UPDATE

Gillian MacLeod provided a summary of the main points from the paper and highlighted to members that the paper presented has been reviewed and refreshed and asked members for their feedback on the format of the report and level of detail provided.

Members noted that the percentage of uptake of staff vaccinations for Covid Booster and Flu Vaccination remained low and that work was ongoing to try to improve staff uptake going forward. Members also noted the updates within the paper in relation to Education and Training, Standard Infection Control Precautions (SICPS) Audit and Clean and Safe Care Equipment.

Board members agreed that further work was required to develop the structure and presentation of the report. It was agreed that Gillian MacLeod and Karen Burnett would arrange to meet with Maggie Watts to discuss future presentation of the report to ensure that this provides the right level of assurance and information Board members require.

Board members **noted** the report.

Action:

7. **Interim Associate Director of Care Quality and Professional Development** to meeting with Head of Infection Prevention and Control and Maggie Watts, Non-Executive Director to discuss future presentation of the HAI report to ensure that this provides the right level of assurance and information Board members require.

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. Members noted that work was underway to develop a new Workforce Report for Board reporting which would combine health and wellbeing and all other workforce matters into one report.

Members noted and discussed the report including:

- An overview of the Improving Workplace Staff Experience & Wellbeing Pulse Survey results and themes arising from the qualitative responses of the 600 staff who completed the survey.
- 16 actions (out of a total of 28) within the Health & Wellbeing Roadmap 2024-25 are on track for delivery with a green BRAG status and the remaining 12 actions are complete with a blue BRAG status.
- Trauma Risk Management (TRiM) referral data.
- An update on the progress of leadership development programmes.

Madeline Smith provided assurance to the Board that the Staff Governance Committee had discussed the results of the Improving Workplace Staff Experience & Wellbeing Pulse Survey

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results in detail and that further work was being undertaken to understand and respond to any common themes along with work to try to encourage and increase completion of future surveys.

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

ITEM 13 CHAIR'S VERBAL REPORT

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

- The Chair undertook visits to Livingston Station and Ambulance Control Centre East on 31 December 2024
- The Chair attended the NHS Scotland Executive Leadership Forum on 22 January 2025.
- The Chair attended the First Minister Speech on 27 January 2025.

ITEM 14 CHIEF EXECUTIVE'S UPDATE

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

Michael highlighted that December 2024 and January 2025 were extremely challenging for the Service, bringing significant and sustained demand across our services. This was directly linked to extended hospital handover times at key sites in Scotland with other traditionally 'stable' Emergency Departments also starting to struggle with demand.

Along with the ongoing pressures due to ambulance handover delays, flu and other respiratory illnesses rose and a drop in temperatures and extreme weather contributed to this high-pressure period. Michael added that it was essential that through this period that staff knew they were supported, and the Executive Team undertook a test of change, Operation Thin Ice, whereby increased measures were put in place in the undernoted areas:

- Operational Response
- Professional Guidance
- Wellbeing Initiatives
- Additional Support for Ambulance Control Centres (ACCs), Hospital Ambulance Liaison Officers (HALO) and Welfare Officers.
- NHS Grampian specific focused action
- Communication
- Increased Director Visibility

The Board noted that feedback has been captured following Operation Thin Ice which will now be taken forward by the Executive Team.

ITEM 15 STAFF GOVERNANCE COMMITTEE

Board members **noted** the minutes of 05 September 2024 approved by the Committee on 12 December 2024 and the agenda of the meeting held on 12 December 2024.

The Board noted that an action was taken at the December Staff Governance Committee meeting for an update on Equality Fora be undertaken as part of a Board Development Session. It was agreed that this would be added to the Board Development Workplan and be undertaken during the April Board Development Session.

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Action:

- 8. Board Secretary** to add Equality Fora update to the Board Development Workplan for April 2025.

ITEM 16 BOARD DEVELOPMENT AND BREIFING UPDATE

Board members **noted** the report.

ITEM 17 AOB AND DATE OF NEXT MEETING

Date of next meeting – 26 March 2025.

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

The Chair closed the meeting.

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