



NOT PROTECTIVELY MARKED

MINUTES OF THE 209TH PUBLIC MEETING OF THE SCOTTISH AMBULANCE SERVICE BOARD

1000 HOURS ON WEDNESDAY 29 MAY 2024 ON MS TEAMS

Present:

Board members: Tom Steele, Chair (Chair)
Irene Oldfather, Non Executive Director & Vice 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
Mike McCormick, Non Executive Director
Cecil Meiklejohn, Non Executive Director
Carol Sinclair, Non Executive Director
Dr Jim Ward, Medical Director
Maggie Watts, Non Executive Director

Regular attendees: Paul Bassett, Chief Operating Officer/Deputy Chief Executive
Karen Brogan, Director of Strategy Planning and Programmes
Dave Bywater, Interim Director of Care Quality & Professional Development
Kenny Freeburn, Regional Director, East
Mark Hannan, Head of Corporate Affairs & Engagement
Pippa Hamilton, Acting Board Secretary
Avril Keen, Director of Workforce
Stephen Massetti, Director, National Operations
David Robertson, Regional Director, West
Milne Weir, Regional Director, North

In attendance: Peter Oakley, Member of the Public (*from 10:15*)
Lesley Kay, Corporate Governance Administrator (*Observing*)
Sarah Stevenson, Risk Manager (Item 08)

WELCOME AND INTRODUCTION

The Chair welcomed everyone to the 209th Scottish Ambulance Service Board meeting. Apologies were noted from Madeline Smith, Non Executive Director.

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ITEM 01 PATIENT STORY

Board members viewed the patient story in advance of the meeting which featured the story of a patient who had a secondary postpartum haemorrhage at her home just two days after giving birth.

The Board discussed the story which highlighted the working relationship between our Advanced Paramedic Practitioners in Urgent and Primary Care, Critical Care Paramedics and Accident and Emergency crews.

The Board discussed the story and asked that thanks be conveyed to the patient for sharing her experience and to the Advanced Paramedic Practitioners in Urgent and Primary Care, Critical Care Paramedics and Accident and Emergency crews involved for the care provided to the patient.

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 MARCH 2024

Members discussed the minutes of 27 March 2024. Liz Humphreys asked that the discussion on page 7 where it was agreed that the Medical Director would take forward a discussion with the Board Chair and Chair of Clinical Governance Committee in relation to wider patient safety reporting relationship between Clinical Governance Committee and the Public Board be pulled out as an action within the minute and added to the Board Action Tracker.

Jim Ward advised that the action remained outstanding as wider discussion required to be had in relation to the balance of clinical data to Clinical Governance Committee and Public Board meetings. Carol Sinclair suggested that this could be discussed at the next Integrated Governance Committee.

Subject to the above amendments, the Board approved the minutes of 27 March 2024.

Action:

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1. **Acting Board Secretary** to update page 7 of March public Board minutes and action tracker to reflect that the Medical Director would take forward a discussion with the Board Chair and Chair of Clinical Governance Committee in relation to wider patient safety reporting relationship between Clinical Governance Committee and the Public Board.
2. **Acting Board Secretary** to add discussion in relation to the balance of clinical data to Clinical Governance Committee and Public Board meetings to the next Integrated Governance Committee agenda.

ITEM 04 MATTERS ARISING

Board noted that 7 actions were proposed for closure.

Board members approved the removal of matters arising 205/6/12, 207/3/04, 207/3/05, 208/3/05(2), 280/4/07, 208/4/08, 208/9/17 and noted that 208/3/05(1) was not due until July 2024.

ITEM 05 BOARD MEASUREMENT FRAMEWORK 2024/25

Katy Barclay joined the meeting for this item and presented the Board with a paper which set out the proposed measurements aims for the 2024/25 which are reported to the Board and Sub Committees. Katy advised that the aims were discussed at the Board Development session on 24 April 2024 and are now presented to the Board for approval and submission to the Scottish Government in line with the Annual Delivery Plan.

The Chair advised that Madeline Smith had commented during the Board Development Session that the proposal to amend the Hospital Turnaround Time 2024/25 Improvement Aim to 50 minutes rather than this remaining at the 2023/24 recovery aim of 40 minutes be reconsidered. The Chair added that Madeline had provided a further virtual comment on this area in advance of this meeting, in which she suggested that the improvement aim should remain at 40 minutes whilst acknowledging there is a risk of this not being achieved, rather than accepting an increased aim of 50 minutes.

Paul Bassett advised that the proposed target of 50 minutes was based on a proportionate reflection of where we are as part of a system wide target. Michael Dickson provided the Board with assurance that there are real ambitions from the Executive Team and Operational Teams to continue the improvement work with Health Boards within areas with known issues to achieve the ultimate improvement aim.

The Chair thanked members for the discussion and noted that a variety of views have been noted, however the recommendation from the Executive Team is that the aim would be 50 minutes. The Chair added that the Board will take assurance from the discussion and that assurance will continue to be received from the Executive Team at every Board meeting.

The Board **approved** the Measurement Framework for 2024/25.

ITEM 06 BOARD QUALITY INDICATORS AND PERFORMANCE REPORT

Michael Dickson presented members with the reviewed and refreshed report as agreed at the January 2024 Board meeting.

Michael provided a summary overview of the report and advised that the 30 day survival figures post Out of Hospital Cardiac Arrest has remained above the average of 10% since February

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2023 and noted this was encouraging progress towards the aim of reaching 15% survival by 2026. Michael added that variation continues in Hospital Turnaround Times (HTAT) with delays remaining within a number of hospital sites, however, focused work with those specific Boards continues. Michael added that work is ongoing in relation to the reduction in the reduced working week for Agenda for Change (AfC) staff and provided assurance of the volume of work being undertaken in partnership to make the changes required to staff resources and any model adjustments that may be required as a result of the reduced working week.

Carol Sinclair noted that she welcomed the improvements to the report, adding that the narrative supports more effective assessment of the data.

Mike McCormick added that he welcomed the improved report and enhanced data commentary. Mike asked in relation to the agreed high level programme of recruitment which will see phased recruitment of 122 WTE Ambulance Care Assistants across the Service and if assurance could be provided that there is budget in place to allow this recruitment to be undertaken.

The Board discussed the work which is ongoing in relation to recruitment with weekly meetings taking place, the development of detailed station level recruitment and training plans and financial plans. Paul Basett and Julie Carter advised that the paper outlines a highly ambitious recruitment plan however provided assurance to the Board that all the relevant work was being undertaken. Mike McCormick thanked Julie and Paul for the information and confirmed that from the assurance provided he was comfortable that this work was joined up.

Members noted that future versions of the paper presented to the Board will have new information contained within the paper since the last presentation highlighted in red text to support effective discussion.

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

ITEM 07 DELIVERING OUR 2030 STRATEGY – PORTFOLIO UPDATES

Karen Brogan 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.

Members noted that 4 programme areas sitting within the red category, however, took assurance that those are linked to Reduced Working Week interdependencies and will therefore be reassessed and rebaselined.

Members noted that the outline Business Case for replacing Glasgow South Station has been delayed due to uncertainty surrounding the availability of capital funding in the coming years, however, despite this the Scottish Government has confirmed that the project should continue to be advanced and that preparations should be made to resume work as soon as funding becomes more certain.

Karen Brogan highlighted 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.

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Karen Brogan added that in relation to population health, Association of Ambulance Chief Executives (AACE) are running a session for all National Ambulance Service Board members and advised that she would arrange for the meeting invitation to be circulated to the Board.

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 send details of AACE Population Health Session to the **Acting Board Secretary** for circulation to Board members.

ITEM 08 CORPORATE RISK REGISTER (PUBLIC)

Sarah Stevenson joined the meeting. Julie Carter and Sarah Stevenson 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:

- **Approve** the reduction in risk level of Risk ID 5519 – Statutory and Mandatory training from very high to high.
- **Approve** the removal of reference to rest breaks and the cost-of-living crisis in the description of Risk ID 4636 – Health and Wellbeing of staff.
- **Approve** the increased tolerance of the Finance Risk given the current pressures.
- **Review** the additional narrative regarding consequential and projectional risk for Risks 4638 – Handover Delays and 5602 – Finance.

Liz Humphreys commented in relation to Risk 5603, Business Continuity, that it states that Business Continuity plans are to be completed and signed off by the end of October 2024 and added that there feels to be a lack of urgency in the narrative of this risk. Paul Bassett advised that the narrative of this risk refers to the transfer of Business Continuity Plans to the Business Continuity Management System (BCMS) and not the development of Business Continuity plans.

The Chair highlighted that the Board are being asked to approve the reduction in risk level of Risk 5519, Statutory and Mandatory Training and asked for confirmation from the Chief Executive that he was content with the proposed reduction in risk level. Michael Dickson advised that he was content with the proposed reduction in risk level and added that the Executive Team have plans in place to oversee the delivery and compliance of statutory and mandatory training.

Carol Sinclair asked the Board to note that a discussion took place at the last Audit and Risk Committee in relation to the proposal to deescalate Risk 5653, Organisational Culture and Audit and Risk Committee members agreed that the evidence was deemed insufficient to deescalate the score and asked for additional evidence to be brought back to the next Audit and Risk Committee.

Mike McCormick highlighted that he did not like to see the word “reputation” played out within risk descriptors and added that reference should not be made to Service reputation but that of public confidence in the Service. The Chair thanked Mike for highlighting this and added that reputational risk was a legacy of risk management and suggested that consideration be given to the wording within future reporting. It was agreed that Sarah Stevenson and Julie Cater would take this forward.

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Members **approved** the risk register, the reduction in risk level for Risk 5519, the removal of reference to rest breaks and cost of living crisis from the description of Risk 4636 and the increased tolerance of the Finance Risk.

Action:

4. **Risk Manager and Director of finance, Logistics and Strategy** to consider the removal of reference to reputational risk within the risk descriptors of future reporting.

ITEM 09 BOARD STANDING ORDERS

The Chair referred to the annual review of the Service's Standing Orders, which were reviewed by the Audit and Risk Committee at its meeting on 22 April 2024 and recommended to the Board for approval with no change.

Board members **approved** the Standing Orders.

ITEM 10 FINAL INTERNAL AUDIT PLAN 2024/25

Julie Carter presented the Board with the Final Internal Audit Plan 2024/25 and advised that the Plan had been developed through the undernoted process and is now presented to the Board for approval:

- Internal audit review of areas not yet reviewed, audit risk universe and areas identified as part of the 3 year plan.
- 1-1 meetings with Chairs of Governance groups, Chief Executive, Chair and Executive Team.

Members **approved** the final Internal Audit Plan for 2024/25.

ITEM 11 FINANCIAL PERFORMANCE TO 29 FEBRUARY 2024

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

1. The financial position shows a small surplus of £0.03 million after year end adjustments and budget allocations.
2. Impact of ongoing post COVID/system pressures of £9.68 million have been incurred in the year.
3. In relation to local efficiency savings, the annual target was £4.74 million and to date £4.21 million has been delivered. Best value schemes of £6.95 million has been delivered to date. Grip and Control has identified £0.84 million to date against a £1.0 million plan. This has resulted in the full £12.0 million savings target has been delivered this financial year.
4. Through the back to balance plan with the focus on priority high overspend areas has delivered £2.672 million against a full year target of £6.125 million. Noting this was partially masked by new emerging cost pressures that have been prevalent through the year.

Members discussed the paper and noted the positive news of a financial position with a small surplus of £0.03 million.

Board members **noted** the financial position and welcomed outturn and passed on its thanks for the finance team and wider organisation for all the work carried out to achieve this position.

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ITEM 12 PERSON CENTRED CARE UPDATE

Dave Bywater provided a summary of the main points from the paper and Board members noted recent patient experience activity, PFPI 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 97.4% and Stage 2 reported at 94.6% against a compliance target of 70%.

A 25% increase in the overall number of compliments received by the Service in the last year was noted, along with a 16.8% decreased in the number of complaints received in comparison to 2022/23.

Carol Sinclair commented that the phrase Patient Focussed Public Involvement (PFPI) was an outdated phrase and suggested that this could simply be referred to as "Involving Patients and People". Carol suggested that this section of the paper would benefit from review, particularly strengthening the context within this section to outline how these areas are supporting the 2030 Strategy and wider programmes.

Board members **noted** the report.

Action:

- 5. Interim Director of Care Quality and Professional Development/Head of Corporate Affairs and Engagement** to carry out a review of the PFPI section of the report, to remove outdated phrase of PFPI and ensure that context of the section is reviewed to outline how this work is supporting the 2030 Strategy and wider programmes.

ITEM 13 PATIENT AND STAFF SAFETY HAI UPDATE

Dave Bywater provided a summary of the main points from the paper. Board members noted the Infection Prevention and Control Programme of Work for 2023/24 continues to progress.

Members noted that the Work programme for Infection Prevention and Control (IPC) was presented to and approved by the Clinical Governance Committee on 13 May 2024.

Dave Bywater advised that following a review of the comprehensive Infection Prevention and Control audit programme of ambulance vehicles and stations (RIVO audits) the proposed audit scoring matrix was reviewed and approved at the Infection Control Committee meeting on 20 March 2024 which will see future audit programmes being aligned with risk using a green, amber and red scoring system and will allow the IPC team to devote more time to support staff and managers in stations where scores are in the amber or red category.

Dave Bywater highlighted that compliance with the Peripheral Venous Catheter (PVC) bundle remains above the target of 95%.

Carol Sinclair suggested that she would welcome a refresh of this paper, particularly to strengthen the paper to pick out areas which are ongoing issues or areas of concern. Michael Dickson agreed that there is opportunity for the paper to be presented in a different way by framing risks and clinical areas. Dave Bywater advised that a new format of the Infection Prevention and Control Committee would take place on 18 June and he would take that opportunity to discuss a reformatted paper with a refreshed presentation to be provided to the July Board. Dave Bywater added that he would also discuss the refreshed paper with Carol Sinclair and Michael Dickson in advance of the July Board.

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Members acknowledged that this was Sarah Freeman, Head of Infection Prevention and Control last day with the Service ahead of retiral and that Karen Burnett would be joining the Service as the new Head of Infection Prevention and Control from 01 July 2024. The Board passed on its thanks to Sarah for all her work during her time with the Service and wished her well in her retirement.

Board members **noted** the report.

Action:

- 6. Interim Director of Care Quality and Professional Development** to take forward a review and refresh of the Patient and Staff Safety HAI Board paper and strengthen the presentation to highlight areas which are ongoing issues or areas of concern together with framing risks and clinical areas.

ITEM 14 HEALTH AND WELLBEING UPDATE

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

Avril Keen highlighted that work had completed on the draft Health and Wellbeing Strategy 2024-2027 and this will be presented for approval to the June Staff Governance Committee and July Board.

Members welcomed that measures continue to expand for the network of Trauma Risk Management support and the development sessions planned for June 2024.

Avril Keen added that cultural development initiatives have included planning for Healthy Culture Week, planning and delivery of the first of three Regional Partnership Conferences, development sessions aligned to sexual safety in the workplace and delivery of iMatter support sessions.

Members welcomed the update and the particular focus highlighted on Health Culture Week.

Mike McCormick noted the reference within the paper that members of the HR and Wellbeing Team attended sessions as part of the Ambulance People Profession Development Programme and asked how this work will be taken forward within the wider workforce beyond Healthy Culture Week. Avril Keen advised that this initiative was developed through the Association of Ambulance Chief Executives (AACE) with the aim to support colleagues working within people profession roles to strengthen capability and learning surrounding the subject of sexual safety in the workplace. Avril added that further sessions are scheduled for June and July 2024 with an additional Board Development Session for the Service planned for August 2024.

Dave Bywater added that the Health and Care Professions Council (HCPC) were also originally engaged in this work, and it continues to be high on their agenda.

Julie Carter added that recent work with Police Scotland provided a presentation on the work that they are doing within this space. Julie added that she has also linked in the Service's HR and Wellbeing Teams into the work with Police Scotland.

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

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ITEM 15 CHAIR'S VERBAL REPORT

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

- It was noted that wider emergency service engagement with Police Scotland and the Scottish Fire and Rescue Service continues to be useful.
- The Chair attended the Realistic Medicine Senior Leader Event on 23 April 2024.
- A meeting is planned with the Chair and Cabinet Secretary which will provide opportunity to discuss both the Service and Innovation.
- The Chair noted that Scotland's Charitable Air Ambulance (SCAA) pilot Captain Russell Myles was retiring after 11 years of dedicated service. It was noted that Captain Myles won the Air Ambulance UK Pilot of the Year Award in 2023 which is not only another great achievement but acknowledges his work with SCAA and the Service.

ITEM 16 CHIEF EXECUTIVE'S UPDATE

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

- The Chief Executive recently carried out station visits in Stirling, Perth, Blairgowrie and Dundee.
- It was highlighted collaboration and engagement meeting have recently taken place with the State Hospital, Scottish Fire and Rescue Service and the Chief Executive of North Cumbria Integrated Care.

ITEM 17 CLINICAL GOVERNANCE COMMITTEE

Board members noted the minutes of 12 February 2024 approved by the Committee on 13 May 2024 and the written update from the meeting held on 13 May. Board members noted the Committee:

- Received a presentation on the work being carried out in relation to Advanced Airway Guidance.
- Approved the Adverse Event and Duty of Candour Policy
- Reviewed and approved the Clinical Risk Register.
- Noted the Clinical Governance and Patient Safety Report and took assurance from the overview provided in relation to current clinical governance and patient safety activities.
- Approved the Clinical Governance Committee and sub group Annual Reports 2023/24 and Terms of Reference.
- Received updates on mental health, infection prevention and control, education and clinical services transformation programme.
- Noted minutes from the Clinical Assurance Group, Medicines Management Group, National Clinical Operational Governance Group, Public Protection Assurance Group and Patient Safety and Risk Group

ITEM 18 AUDIT AND RISK COMMITTEE

Board members noted the minutes of 18 January 2024 approved by the Committee on 22 April 2024 and the written update from the meeting held on 22 April. Board members noted the Committee:

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- Reviewed and discussed the Corporate Risk Register and agreed that the rating for Risk 5653 (Organisational Culture) would remain at high.
- Reviewed the Board Standing Orders and subsequently recommended these to the Board for approval.
- Noted and approved the Board Members Declarations of Interest and Gifts and Hospitality declarations to 31 March 2024.
- Approved the Audit and Risk Committee Annual Report as part of the annual governance and assurance cycle.
- Approved the arrangements for the Endowment Fund Accounts which would see the Unaudited Endowment Fund accounts consolidated into the Service accounts with an audit of the Endowment Fund accounts being undertaken after June 2024 by the existing endowment auditors.
- Approved the Final Draft Internal Audit Plan 2024/25 and Internal Audit Charter
- Approved two final Audit Reports (Health and Wellbeing Strategy, and Smart Devices Project).
- Noted the Audit Scotland Report on the NHS in 2023, the External Audit Annual Report, Accounting Estimates, Internal Audit Follow Up Report.

ITEM 19 BOARD DEVELOPMENT REPORT – FEBRUARY 2023

Board members noted the report.

ITEM 20 BLUEPRINT FOR GOOD GOVERNANCE SELF-ASSESSMENT FINAL DEVELOPMENT PLAN

The Chair asked members to formally note the final Development Plan which was submitted to the Scottish Government on 01 May 2024 following agreement by the Board at the Development Session on 24 April 2024. The Chair added that formal monitoring of the plan will be undertaken by the newly established Integrated Governance Committee, which in turn will report to the Board on a regular basis.

Members **noted** the Plan.

ITEM 21 DATE OF NEXT MEETING

- The next meetings will be held on 31 July 2024.

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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