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PUBLIC BOARD MEETING	26 March 2025 Item 06
THIS PAPER IS FOR DISCUSSION	
DELIVERING OUR 2030 STRATEGY UPDATE	

Lead Director Author	Michael Dickson, Chief Executive Portfolio Executive Directors Karen Brogan, Director of Strategy, Planning & Programmes																																			
Action required	The Board is asked to note and discuss progress in relation to delivery of the 2030 Strategy portfolios.																																			
Key points	<p>The purpose of the 2030 Strategy Portfolio Board update is to</p> <ul style="list-style-type: none"> • Provide a high level summary of progress around delivery of the 2030 Strategy Portfolios and demonstrate the impact on delivery of our strategic aims. • Provide assurance to the Board that mitigating actions are in place for projects that are not within timeline. • Highlight any issues or risks that require escalation to the Board. <p>Overall 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.</p> <p>Table 1 – High Level Summary of Project Status</p> <table border="1"> <thead> <tr> <th>Portfolio</th> <th>Green</th> <th>Amber</th> <th>Red</th> <th>Other</th> </tr> </thead> <tbody> <tr> <td>Integrated Planned, Unscheduled & Urgent Care</td> <td>8</td> <td>2</td> <td>1</td> <td></td> </tr> <tr> <td>Data, Digital, Innovation & Research</td> <td>8</td> <td></td> <td></td> <td>1</td> </tr> <tr> <td>Communities & Place</td> <td>8</td> <td></td> <td></td> <td>2</td> </tr> <tr> <td>Preventative & Proactive Care</td> <td>5</td> <td></td> <td></td> <td></td> </tr> <tr> <td>Workforce & Wellbeing</td> <td>6</td> <td></td> <td></td> <td>2</td> </tr> <tr> <td>Totals</td> <td>35</td> <td>2</td> <td>1</td> <td>5</td> </tr> </tbody> </table> <p>There are no issues or risks that require escalation to the Board.</p>	Portfolio	Green	Amber	Red	Other	Integrated Planned, Unscheduled & Urgent Care	8	2	1		Data, Digital, Innovation & Research	8			1	Communities & Place	8			2	Preventative & Proactive Care	5				Workforce & Wellbeing	6			2	Totals	35	2	1	5
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	The Board are also asked to note that work has been underway to refresh the Boards Medium Term Plan and Annual Delivery Plan for 2025/26 and response to the Workforce Guidance DL 2024 (33). These are being presented in the Board Private session.
Timing	This paper is being presented to the March 2025 Board and is a standing item on the Board agenda.
Associated Corporate Risk Identification	4636 – Health & Wellbeing of Staff 5602 – Service’s defence against a Cyber Attack 4638 – Hospital Handover Delays 5062 – Failure to achieve Financial Targets 5519 – Statutory & Mandatory training
Link to Corporate Ambitions	We will <ul style="list-style-type: none"> • Work collaboratively with citizens and our partners to create healthier and safer communities • Innovate to continuously improve our care and enhance the resilience and sustainability of our services • Improve population health and tackle the impact of inequalities • Deliver our net zero climate targets • Provide the people of Scotland with compassionate, safe and effective care when and where they need it • Be a great place to work, focusing on staff experience, health and wellbeing
Link to NHS Scotland’s quality ambitions	<ul style="list-style-type: none"> • Safe • Effective • Person Centred
Benefit to Patients	Patients are provided with the right care, in the right place at the right time, enabling improved outcomes for patients.
Equality and Diversity	No equality and diversity points to note. EQIA will be undertaken if necessary, on commencement of the work.



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SCOTTISH AMBULANCE SERVICE BOARD

2030 STRATEGY DELIVERY UPDATE

**KAREN BROGAN, DIRECTOR OF STRATEGY PLANNING &
PROGRAMMES**

SECTION 1: PURPOSE

The purpose of the 2030 Strategy Portfolio Board update is to

- Provide a high-level summary of progress around delivering the 2030 Strategy Delivery Plans and demonstrate the impact on delivering our strategic aims.
- Provide assurance to the Board that mitigating actions are in place for projects not within the timeline.
- Highlight any issues or risks that require escalation to the Board.

SECTION 2: RECOMMENDATIONS

The Board is asked to note and discuss progress in relation to the delivery of the 2030 Strategy portfolios and note the work that has been underway to

- Refresh the Boards 3 Year Medium Term Plan and Annual Delivery Plan for 2025/26.
- Develop a response to the Workforce Guidance (2024) DL 33

SECTION 3: BACKGROUND

The 2030 Strategy was developed and launched in September 2022. In November 2022, the Board subsequently established a supporting governance structure consisting of 5 Portfolio Boards and a 2030 Steering Group to ensure effective monitoring and delivery of the strategy. The portfolio boards are chaired by an executive lead and report directly to the 2030 Steering Group, chaired by the Chief Executive. The portfolio boards are supported by a 2030 portfolio manager and a strategy administrator to develop and ensure high-quality, standardised reporting across projects, programmes, and portfolios.

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SECTION 4: DISCUSSION

4.1 Summary of Progress

Progress continues to be positive across all work areas with no projects currently in Amber or Red status for delivery.

Table 1 – High-Level Summary of Project Status

Portfolio	Green	Amber	Red	Other
Integrated Planned, Unscheduled & Urgent Care	8	2	1	
Data, Digital, Innovation & Research	8			1
Communities & Place	8			2
Preventative & Proactive Care	5			
Workforce & Wellbeing	6			2
Totals	35	2	1	5

4.2 Projects in Other Status

The 'other' category relates to projects in planning or scoping stages or projects that have come to an end. There are 5 Projects across the portfolios that are in the other category.

4.2.1 Digital Workplace

The Digital Workplace Project was formally closed by the Project Board at the end of December and the end of project report was presented for approval by the Project Board at the end of January 2025. The current ICT staff seconded to the DWP Project will remain in place until the end of March 2025 to support M365 and ongoing pilot projects.

For the 2025/26 Financial year, a new Best Value project will be established to identify opportunities to optimise and deliver further efficiencies through the use of M365.

4.2.2 Community Planning Development

The community planning project is about ensuring that the Scottish Ambulance Service supports the improvement of local health outcomes and equity in community services through strategic participation in Community Planning Partnerships (CPPs).

An analysis of service representation in CPPS throughout Scotland found that 23 out of the 32 CPPs have service representation (72%). Representation varies by region: East (92%), West (62%), and the North (57%).

To improve our current arrangements with CPPs, we are developing a plan to enhance local health outcomes and equity in community services by standardising our strategic

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participation in CPPs. These measures are expected to improve our collaboration with CPPs, ensuring that our participation is effective and beneficial to local communities.

The Strategic Planning Team will lead on this work, working closely with local Heads of Service. This work is also linked to the stakeholder engagement action agreed by the Board in response to the Blueprint for Governance self-assessment.

An initial stakeholder mapping exercise has been carried out and shared at a meeting with directors and a non-executive board member in March 2025. This discussion highlighted the complexities of the system and volume of local and national stakeholders. A follow-up session is planned to review our engagement approach, to identify and prioritise who we should be engaging with and to better understand what role we want to play in influencing our stakeholders to reduce inequalities in health, create safer communities and improve population health.

Through the Young minds save life project we have secured funding for a small community action team. This resource will be key in helping us target pilot areas to shape how we take this forward.

We are planning to hold discussions with PHS to consider how we connect data across the system and how we use it to better effect to identify opportunities for improvement.

Workplan and delivery milestones will be developed by the end of April 25/26.

4.2.3 Community Hubs / South Station Delivery

The Community Hub/South Station development project was established to identify options and develop an Outline Business Case (OBC) for the replacement of Glasgow South Station.

As previously highlighted to the Board, the development of the OBC has been delayed due to national pause in capital funding. Despite this, the Scottish Government has confirmed they would support the project's advancement, to ensure the Service can progress this rapidly as soon as funding becomes more certain however at this stage this is limited. Our engagement with local community members through YMSL paramedics remains ongoing as we continue to gather insights into local needs for the community hub concept.

We continue to work closely with Healthcare Improvement Scotland to meet the engagement requirements set out within the 'Planning with People – Community engagement and participation guidance' (Planning with People) which represents a national approach to engagement on appraising different locations for the station. This appraisal will consider both the current location and any newly identified alternative sites. To maintain momentum these meetings are now every six weeks.

Additionally, an analysis of population health data is underway to help inform suitable location and services for a community hub.

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The South Station project has been approved at the Initial Agreement (IA) stage. As part of the whole system capital planning process for Boards, the next steps involve seeking approval to set up a formal project board in preparation for a potential release of capital investment in the 2027/28 period.

A new project proposal was presented to the Engine Room on the 12th of February and approved by the 2030 Steering Group on the 18th of March. There is a requirement to allocate resources to formally get this project up and running.

4.2.4 Review of EPDD Training & Education

The review of the EPDD Training & Education model will now commence in the 2025 Financial Year. Key milestones for this will be developed by August 2025.

4.2.5 Workforce Planning & Performance monitoring

Key milestones for this will be developed by the end of April 2025 and resources will be identified to help support and move this work forward next year.

Scottish Government recognises the workload pressures facing NHS Boards and HSCPs as well as the difficulty in planning for the workforce in the current environment. As a result, Scottish Government issued a workforce guidance letter in December 2024 (DL 2024-33).

Within the guidance letter, NHS Boards and HSCPs were asked to complete a template with 9 specific questions. The reporting template asks NHS Boards and HSCPs to draw out key information in a concise manner for rapid review by the Scottish Government to provide a precis of overarching workforce planning activity and key messages.

This interim process brings together workforce information in line with submission of the financial plan and Annual Delivery Plan and gives further time for Scottish Government to consider the best approach to fully aligning workforce planning with operational delivery planning and financial planning in the future.

SAS have prepared a response to the template, and this is available as part of the ADP paper in the private session.

4.3 Projects in the Amber Status

At the January Board meeting it was highlighted that there were no projects in the Amber Status for delivery. In this reporting period there are 2.

4.3.1 Resource Planning Review

The majority of the resource planning project has now been delivered. The remaining aspect is to develop a paper to set out a number of Resource Planning Structure Options. The availability of stakeholders in the review has impacted delivery timescales. An initial meeting was held with Operational Directors on 12th Feb, followed by workshop on the 6th March with key stakeholders to discuss our survey results, outputs of previous stakeholder workshops and to seek agreement on what we want the resource planning structure to deliver. (what does good like like). In doing this, we now need to consider the potential roles,

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structure options and operating hours. It is now anticipated that this will be presented to the Executive Team in May 25.

4.3.2 Health Care Professional (HCP) Online Booking

SAS current receives around 3000 calls per week from HCPs. Implementation of an online booking process for HCPs will reduce the need for voice calls between healthcare professionals and SAS by automating the process straight to dispatch, reducing call volume and talk time for both HCPs and SAS

The HCP online booking pilot went live on 18th June with Lanarkshire and Greater Glasgow & Clyde. As of 20th February, 3,111 online bookings have been made.

The overall status of the project is amber due to the uncertainty in relation to when Boards will receive internal sign-off to adopt online booking. The route to green is dependent on territorial boards accepting the user authorisation approach which requires the use of generic accounts, one per site. The date for return to green is therefore unknown and out with the Service's sphere of influence but work is ongoing to mitigate this.

4.4 Projects in the Red Status

4.4.1 Air Ambulance Contract Implementation

A new project has been established to progress implementation of the new Air Ambulance Contract. The project is currently in red status for delivery due to the supplier notifying SAS of expected production delays for the fixed wing aircraft. Delivery dates for the fixed wing aircraft will be beyond the original project dates. Work is ongoing to reduce impact as much as possible and negotiations are ongoing to establish dates.

Issues and Risks for Escalation

At this stage, no risks across any of the Portfolios require escalation to the Board. All risks are managed through respective portfolio boards or exist on the Corporate Risk Register.

4.6 Annual Delivery Plan 2025/26 and Medium Term Plan

Work on the development of the 2025/26 Annual Delivery Plan and a refresh of the rolling 3-year Medium Term has been underway and were tabled in January. Plans have been further refined and being tabled in the private session under agenda item 26 with the response to the workforce DL 2024 (33).

4.7 Next Steps on demonstrating where we are now on our journey to implementation our 2030 Strategy.

The Strategy Team are currently collating a detailed roadmap, setting out

- What we said we do in our 2030 Strategy

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- What have we delivered against all of our ambitions so far and the impact that we are making and
- What we are planning to do against our ambitions in 2025/26 and in the medium term (2025-2028)

We are also in the process of reviewing the current format for Board reporting to explore opportunities for refinement and improvement for the 25/26 Financial Year.

We had initially anticipated having this ready for the March board however this has been impacted by resourcing within the team and a need to prioritise the annual delivery plan, development of the anchor plan priorities and response to the workforce template. Work will progress on this ahead of the May Board meeting.

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Service Board Portfolio Summary Pack

March 2025

Reporting as of 21 February 2025





Portfolio Summary

Progress continues to be made across the portfolio of work with 8 out of 11 projects/programmes on track.

The Reduced Working Week (RWW) Programme continues to progress well. Reconciliation work is required to be undertaken by the eRostering Team, this work is required to be completed before 31/03/25. A formal quote has been received by a supplier whose services can be accessed via an existing Procurement framework for rostering software. Further work has been requested to bring together options for review and approval. 70,162 RWW Accrued Hours have been entered into our eRostering system for leave year 2024/25, with local Resource Planners continuing to process requests. Colleagues have begun to add request RWW Accrued Hours for 2025/26, but the numbers are small (203). FAQs and Key Messages continue to be drafted and shared on our intranet page, in addition to frequent updates drafted and shared within the weekly Chief Executive Bulletin.

For the resource planning review and redesign, E-Mail messaging for overtime has been implemented for the East, West and North Resource Planning Teams. On-going support and review are in place to assess impact on coverage. For the Resource Planning Options Structure Paper, the availability of stakeholders in the review has impacted delivery timescales. An initial meeting was held with Operational Directors on 12th Feb, followed by workshop on the 6th March with key stakeholders to discuss our survey results, outputs of previous stakeholder workshops and to seek agreement on what we want the resource planning structure to deliver. (what does good like like). In doing this, we now need to consider the potential roles, structure options and operating hours. It is now anticipated that this will be presented to the Executive Team in May 25.

The New Project Proposal (NPP) for The Scheduled Care Improvement Process was approved in June 2024 however there have been further discussions regarding the scope of the Project. These discussions have been driven through the development of the supporting project documentation (Project Brief and Project Initiation Documents). Milestone timescales are currently under review pending outcome of further discussions regarding the scope and the aim of the project. A meeting with the Chief Operating Officer and Director of Finance was held on the 3rd March to finalise scope and aim. The Best Value savings for the project have been achieved and as there will be no Strategy implemented, the project and aim will be re-baselined for the next reporting period.

For HCP online Booking, as of 20th February, 3,111 online bookings have been made. In terms of pickup target, 90% are 1 hour (urgent), 7% are two hour (planned) and the remaining 3% are 4 hour (routine). No specific rollout order has been confirmed but regular updates are being sought. The overall BRAG of the project is amber due to the uncertainty in relation to when Boards will receive internal sign-off to adopt online booking. The route to green is dependent on territorial boards accepting the user authorisation approach which requires the use of generic accounts, one per site. The date for return to green is therefore unknown and out with the Service's sphere of influence but work is ongoing to mitigate this.

For Digital Patient Handover, as of 21st February, 872 Timed Admissions have been digitally transferred from NHS24 to SAS. It should be noted that from the data available, all except 4 bookings have been requested with a one-hour target response time. Since early February, the data illustrates that digital transfers have (with a few exceptions) equated to 80% or more of all timed admissions transferred. It is however expected that telephone transfer volume should continue to decline as NHS24 Call Handlers become more accustomed to the change in process.

The Air Ambulance Implementation project is in the planning stage with key documentation produced and in draft. Monthly meetings with the supplier are in place and workshops are also progressing. The supplier has notified SAS of delays to the delivery of the fixed wing aircraft due to production delays. The delay will mean that delivery dates into service for the fixed wing will be beyond the original project dates. Work is ongoing to reduce impact as much as possible and negotiations are ongoing.



Portfolio Summary (Continued)

The Neonatal Transport Service continue to undertake a workforce review in line with the released data modelling, following a devised options appraisal process to understand feasible options which may be available. The final options have been chosen, and the team is now finalising the business case.

The Out of Hospital Cardiac Arrest Project is progressing well, There has been a meeting held with the heads of Education and Communities, who the CEO of Dumfries & Galloway (D&G) council has tasked to progress the Cardiac Arrest Rescue (CARE) Zones. A high-level draft framework has been developed for this area and the next steps is to have a wider stakeholder day, which the council are organising, planned for March 2025. This work was presented to the Clinical Governance Committee with excellent support and offers of help and advice.

Following a hiatus of High-Performance CPR during REAP 4 there has been a refreshed focus on developing a new 3RU governance framework during this reporting period. A new project plan is being progressed to ensure the development of a fully governed framework which should be in place by March 2025.

The Major Trauma team now aim to review progress since the launch of The Critical Care Desk (CCD) which was established in October 2022. Following this the team look to establish a plan and recommendations to develop and optimise the CCD operations. Terms of Reference (ToR) for the CCD Review project group have been drafted and sent to the group. The Major Trauma pre-hospital Clinical Governance Structure has been reviewed and improved with the introduction of a new dedicated Major Trauma mailbox for incoming enquiries and feedback. The mailbox is monitored regularly by clinical leads and enquiries can be escalated through 3 levels of scrutiny depending on their complexity. The most complex will be considered at the quarterly Scottish Trauma Network (STN) pre-hospital clinical governance meeting. The plan is to focus on a model of 'pushed' patient outcome information currently being trialled in South-East Major Trauma Centre (MTC). The aim will be to replicate this with other 3 MTCs across the network. The Major Trauma team is now working to roll out patient outcome feedback to all areas. The SAS major trauma team has begun to engage with 'green tier' ambulance clinicians to provide major trauma Continuous Professional Development (CPD), establish their understanding of major trauma care and what support they require to maintain and develop their competence. The first session was held at Fort William on 19/12/24, the team are currently engaging with divisional management to help support regional engagement and further dates for formal sessions will be timetabled in 2025.

For Stroke and Thrombectomy, correct application of FAST (Face, Arms, Speech, Time) remains a key objective across SAS. In partnership with SG and Chest Heart and Stroke Scotland (CHSS), there is a shift in language used in relation to stroke education replacing 'FAST awareness' with 'Correct Application of FAST.' Failure to apply the FAST test accurately or to mis-interpret the results can lead to both over and under triage of stroke patients. Currently SAS need to improve compliance with EPR (Electronic Patient Record) completion of the stroke page as this is current sitting at 55%. Within the East of Scotland Stroke Improvement Programme, the 'Time at Patient' study is active in Forth Valley, Fife and Borders sub-regions with West Lothian and Tayside set to commence on the 3rd March 2025. The study continues to show encouraging times Ambulance Clinicians spend on-scene after making direct contact with the patient, thus demonstrating significant improvement in on-scene activity with time-critical patients. Compared to the forecast for thrombectomy, SAS have not completed as many as predicted, this is due to the operating hours of the hubs.

SAS continues to strengthen its position in NHS Scotland in terms of how it manages urgent care patients. This is supported by our work with a range of stakeholders including health boards, primary care in and out of hours and other health and social care partners. For the month of January 2025 of all attended incidents 15054 patients were managed without conveyance to hospital. This equates to 33.6% of all attended incidents. The team continue to see variation across the country in terms of non-conveyance with this being influenced by both. There was an opportunity to share the considerable progress of SAS in its urgent care journey with the national Urgent and Unscheduled Care Transformation Board. Three meetings have taken place and will inform next steps on the wider redesign of urgent care etc.



Integrated Planned Urgent and Unscheduled Care Portfolio Report – 2030 SSG



Portfolio Lead:

Paul Bassett

Period covered:

25 Jan to 21 Feb

Portfolio RAG

Portfolio Timeline

Project / Activity	Start Date	End Date	Project Health		FY 24 / 25						FY 25 / 26				25 / 26		26 / 27				
					Q3			Q4			Q1		Q2		Q3	Q4	Q1	Q2			
					Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25					
Reduced Working Week	10/07/24	30/09/27	→	Milestones		<p>01/12 - Handover from temp structure to wider RWW & PL Programme</p> <p>Q4 24/25 - Planning for working parties</p> <p>Q4 24/25 - Dev & approve Roster keys for 36 hpw</p> <p>Q1 25/26 - Working party 2</p> <p>Q2 25/26 - Roster voting</p> <p>Q4 25/26 - Rosters built on GRS</p> <p>Q4 25/26 - Acc Hrs Taken - 25/26</p>															
				Risks (VH&H)	0																
				Issues (H)	0																
				Finance																	
Air Ambulance Implementation	01/11/24	30/11/26	→	Milestones		<p>01/11 - Project commenced</p> <p>12/25 - Aircraft medical interior design complete</p> <p>04/26 - Estate changes complete</p> <p>10/26 - Aircraft in Service</p> <p>06/26 TBC - Aircraft build and interior fit complete</p> <p>06/26 TBC - Training complete</p> <p>11/26 - Project Close</p>															
				Risks (VH&H)	0																
				Issues (H)	1																
				Finance																	
Resource Planning Review	01/09/22	31/05/25	→	Milestones		<p>10/24 - 11/24 01/25 - Implementation of OT messaging approach</p> <p>06/24 07/24 08/24 10/24 12/24 01/25 04/24 - Resource Planning Structure Options paper</p> <p>03/25 05/25 - Project close</p>															
				Risks (VH&H)	0																
				Issues (H)	0																
				Finance	N/A																
Scheduled Care Improvement	12/06/24	30/06/25	→	Milestones		<p>03/25 - WS2- Recruitment</p> <p>03/25 - WS 5- Assess Taxi Usage</p> <p>04/25 03/25 04/25 - WS 6-Sched Care Strategy</p> <p>03/25 - WS 3- Timed Admissions (Card 46)</p> <p>09/24 04/25 - WS 4- Dynamic and demand led support for Timed Admissions</p> <p>06/25 - Project Close</p>															
				Risks (VH&H)	0																
				Issues (H)	1																
				Finance	TBA																
OHCA	01/04/22	31/03/25	→	Milestones		<p>10/24 - Plan the SCAS 2024</p> <p>03/24 08/24 - Develop a measurement framework for tCPR</p> <p>12/24 - Analyse GoodSAM data as per data plan</p> <p>03/25 - GoodSAM partnership engagement</p> <p>05/24 10/24 - Develop new Timelines for "survival zones" & "cardiac responder expansion</p> <p>12/24 - Internal process for SAS responders / Child Death Review process</p> <p>12/24 - Draft data driven plan for GoodSAM stakeholder engagement</p> <p>03/25 - Thematic analysis of 12 months data on approp of resus attempt</p>															
				Risks (VH&H)	0																
				Issues (H)	1																
				Finance	N/A																

Plan being re-baselined following a redevelopment of the scope



Portfolio Lead:

Dr Jim Ward

Period covered:

25 Jan to 21 Feb

Portfolio RAG

Portfolio Summary

The Volunteer Enhancement Project will now include Community First Responders, extensive work has still been ongoing. The Review of Volunteer Services was shared with the Public at the end of January and a Facebook live session was held with volunteers and the Chief Executive to reinforce organisational and commitment to volunteering. There has been ongoing discussions around the systems and capacity of implementing deployment of volunteers

The Mental Health team continue to progress their aims. Progress has been made with Forth Valley and the team are due to pilot a direct professional to professional support with their Mental Health Assessment Unit. Communications continue with NHS24, Police Scotland and Scottish Government. Call demand attendance and conveyance of calls continue to be monitored, and clinical effectiveness leads continue to work with local teams to address any variation. Education continues, to date the team have trained 3342 clinicians in a variety of mental health related subjects which will continue to be developed. The team are currently working on the evaluation of year 2 and 3 of the mental health response cars to identify if there is a preferred model of delivery.

The Dementia Team have had Scottish Government funding secured for a Dementia Lead Post. Support is in place to recruit to a permanent Dementia Lead Post agreed by Exec Team in November 2024. Job description has been agreed and VAF completed, which has progressed to advert which seen 21 applications, interviews have been arranged.

The South Station project has been approved at the Initial Agreement (IA) stage. The capital position for NHS Scotland is becoming clearer. As part of the whole system capital planning process for Boards, the next steps involve seeking approval to set up a formal project board in preparation for a potential release of capital investment in the 2027/28 period. A new project proposal was presented to the Engine Room on the 12th of February and approved at the 2030 Steering Group on the 18th of March.

Community Planning Development remains in development due to broader national engagement discussions. An initial stakeholder mapping exercise has been carried out and shared at a meeting with directors and a non-executive board member in March 2025. This discussion highlighted the complexities of the system and volume of local and national stakeholders. A follow-up session is planned to review our engagement approach, to identify and prioritise who we should be engaging with and to better understand what role we want to play in influencing our stakeholders to reduce inequalities in health, create safer communities and improve population health.

The Young Minds Saves Lives (YMSL) Project Team have seen a considerable amount of work ongoing within this reporting period. Preparation has been in place for the co-design events and delivery in three new schools. The team are scoping structure options for a Community Action Team relating to the NHS Charities Together (NHSCT) Community Resilience grant funding. The PAFS programme planning has been ongoing. The team have been working towards learning and understanding the necessary adaptations for additional support for learning schools to ensure all students receive an inclusive and engaging educational experience.

High Intensity Use (HIU) had a meeting in February 2025 to finalise a supportive patient letter and agree updated Guidance, further changes are to be made and there has been an agreed go live date of April 2025. The HIU team have been meeting with QI team to discuss test of change for the supportive letter being sent to unreviewed cases. The project close has been extended as the project may be delayed moving to BAU.

The Anchor Strategic Plan has established a steering group with key representatives. The first meeting was held on 10th December 2024. Project objectives have been established and Project Brief draft presented which was submitted to the Portfolio Board for approval. One to one meetings were held with identified workstream leads to define key priorities and metrics which are now complete for submission in March 2025.



Portfolio Lead:

Julie Carter

Period covered:

25 Jan to 21 Feb

Portfolio RAG

Portfolio Summary

Overall good progress continues to be made across all projects within the portfolio.

The Digital Maturity Assessment (DMA) Service Improvement paper and action plan were presented at the DDIR Board in January have been completed. Work will now progress on each of the agreed actions with each of the relevant National Leads. The Digital Delivery Plan work-streams are progressing in line with the agreed milestones. The digital deliverables have been mapped to the SAS Digital & Data Strategy, the SAS Annual Delivery Plans, the SAS Medium-term Plan, and the Scottish Government Digital Delivery Plan. Scottish Government (SG) attended the board to discuss the DDaT (Digital, Data and Technology) Framework and work between SAS and SG will continue to progress this.

For GRS Timecard, the outstanding system issue regarding the application of unsocial hours to part time staff has been escalated through the appropriate channels and a timeline on resolution is still to be provided. Re-engagement with stakeholders has commenced and pilot sites have been established and agreed which cover all regions. Outstanding Business decisions have been progressed and agreed and will be communicated to staff prior to commencement of the pilot in March. An audit process for pilot submissions has been workshopped with a draft process underway for circulation prior to pilot commencement. Localised communications have been drafted for end users and authorisers as well as an internal review of already drafted training materials.

The Digital Workplace Project was formally closed by the Project Board at the end of December, the End of Project Report was presented for approval by the Project Board at the end of January 2025. The current ICT staff seconded to the DWP Project will remain in place until the end of March 2025 to support M365 and the ongoing pilot projects, there will also be part-time Project Manager support until the end of March.

Research and Innovation is going well. In terms of research, Stroke video feasibility study has now been completed and is now in project write up for SG. Staff development continues with contact from the Palliative Care Team. The PEACE3 violence and aggression study has been submitted, awaiting funder decision. The team is supporting the Exec/Non-Exec with Data Frontiers meeting with other organisations such as Public Health Scotland, National Services Scotland and Research Data Scotland which are now developing options. The CRASH4 TXA drug trial is near final approval. Three other clinical trials are being discussed. For Innovation, Corti go-live date set as 31st March and EU Horizon Grant planning for 2025/2026 is ongoing.

For Inphase, the team have successfully transferred the system over from Datix and Inphase is now live. There are active post go live issue logs which the team are monitoring. Checks are still being done on the data that has been transferred on Datix before the system is shut down.

The DPIA for the 'AI in the Ambulance Control Centres Project' was re-submitted to the ICO and a final meeting has taken place. The final draft has now been approved and as noted above the go live date has been confirmed for the 31st of March.

For eRostering, Project initiation almost complete, project brief approved at the January DDIR board with essential project documentation review in progress. Weekly progress meetings with the supplier and fortnightly NHS Scotland tripartite meetings being held. The suppliers project initiation requirements completed and moved into readiness stage. Early adopter group engagement set up and regular communications and updates in place. Data Gathering complete and data checking in progress. All invites for deployment training been issued to line managers. There may be a delay to the go-live date of the project due to issues with Single Sign On being provided by the supplier.



Digital Data Innovation and Research Portfolio Report – 2030 SSG



Portfolio Lead:

Julie Carter

Period covered:

25 Jan to 21 Feb

Portfolio RAG

Portfolio Timeline

Project / Activity	Start Date	End Date	Project Health		FY 24 / 25						FY 25 / 26					25 / 26		26 / 27			
					RAG & Trend	Key Controls	Q3			Q4			Q1			Q2		Q3	Q4	Q1	Q2
							Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25				
Digital Strategy Delivery	01/04/24	31/03/25	→	Milestones		31/03 - Delivery of digital delivery plan															
				Risks (VH&H)	0																
				Issues (H)	0																
				Finance	N/A																
Data Strategy Development & Delivery	01/05/24	31/03/25	→	Milestones		31/03 - Delivery of Data delivery plan															
				Risks (VH&H)	0																
				Issues (H)	0																
				Finance	N/A																
GRS Timecard and App	09/09/22	02/08/25	→	Milestones		05/11 14/01 Live system upgrade						31/04 06/06 Training complete		12/03 09/07 Live roll out complete		02/05 15/08 Project closed					
				Risks (VH&H)	0																
				Issues (H)	2	30/10 UAT Complete	05/12 Small scale pilot complete				28/02 Hot Fix - System readiness			01/02 01/06 Go Live	07/03 04/07 Communications complete						
				Finance	N/A																
Digital Workplace Phase 3	23/09/22	31/01/25	Closed	Milestones		31/03 30/09 31/12 M365 Capabilities & Skills Set Model						31/03 30/09 31/12 Viv a Engage		31/04 31/10 01/25 - Close							
				Risks (VH&H)																	
				Issues (H)																	
				Finance																	
Inphase	01/06/24	02/05/25	→	Milestones		17/07 30/10 - Process / Report Builder complete						28/10 25/01 10/03 Final cut data maigration		25/10 15/02 31/03 Training Complete		03/25 15/04 - Datix decommission					
				Risks (VH&H)	0																
				Issues (H)	0																
				Finance		09/07 30/10 - End User Forms sign off						04/11 25/01 11/03 - Go Live with modules			25/10 15/02 12/03 - Comms complete			02/05 - Project Close			



Digital Data Innovation and Research Portfolio Report – 2030 SSG



Portfolio Lead:

Julie Carter

Period covered:

25 Jan to 21 Feb

Portfolio RAG

Portfolio Timeline (continued)

Project / Activity	Start Date	End Date	Project Health		FY 24 / 25						FY 25 / 26				25 / 26		26 / 27	
					Q3			Q4			Q1		Q2		Q3	Q4	Q1	Q2
					Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25	Jun-25	Jul-25	Aug-25	Sep-25		
AI in the ACC	31/10/24	28/11/25	→	Milestones														
				Risks (VH&H)	2													
				Issues (H)	1													
				Finance														
eRoasting	01/12/24	30/05/25	→	Milestones														
				Risks (VH&H)	3													
				Issues (H)	3													
				Finance														
Research	01/04/22	31/03/25	→	Milestones														
				Risks (VH&H)	3													
				Issues (H)	0													
				Finance														
Innovation	01/04/22	31/03/25	→	Milestones														
				Risks (VH&H)	4													
				Issues (H)	0													
				Finance	N/A													



Portfolio Lead:

Dr Jim Ward

Period covered:

25 Jan to 21 Feb

Portfolio RAG

Portfolio Summary

Progress continues across each of the clinical workstreams within this Portfolio with continued collaboration across health and social care partners.

The partnership between SAS and MacMillan Cancer Care is now in its final weeks and with the aim of continuing this work into the future and building a lasting legacy a business case has been submitted to Scottish Government following approval by the SAS Board. In the interim period there a plan is being developed to support ongoing delivery of key elements of the programme from within the Clinical Directorate.

Across our Pathways initiative the team continue to work closely with regional management teams and health board partners to support frontline clinicians help meet patient need through access to appropriate and accessible pathways. We recognise the challenges experienced by our staff and are looking to seek feedback to allow this to be improved. The Pathways Hub continues to expand what it can offer and has taken over the new digital process for Confirmation of Death out of hours utilising the Adastra system. The feedback from frontline clinicians is extremely positive and an evaluation will get underway imminently. From a Pathways Hub perspective over 700 referrals were made to external partners in February 2025 and there is a plan to target sub-regions/stations where usage remains lower than expected.

The Drug Harm Reduction team have been working closely with Public Health Scotland and area specific partners in response to drug alerts including contribution to a number of national meetings based on insight that SAS is sharing via RADAR reports. We continue to promote the use of Naloxone and engagement with stations is ongoing. This will be a key focus in the first quarter of 2025-26.

Our work in partnership with NHS24 and GP OOH services continues to progress, with a GP OOH SOP developed. SLWG's established between SAS/ NHS24 and GPOOH's. This work is being re-focussed with revised deliverables for 2025-26.

The Population Health workstream continues to be developed with a baseline assessment of progress currently underway which will help inform our priorities for the coming year. This will reflect the work of our established clinical workstreams in contributing to a reduction in health inequalities as well as opportunities within the wider health and social care system.



Portfolio Summary

The overall direction of the Portfolio Board remains on target and considerable progress is being made across all the individual projects.

Extensive work has been ongoing for the Health and Wellbeing implementation. There is a new Wellbeing Lead, (0.6WTE) that has started in post week commencing 17th February and is currently going through a period of induction to the Service. A bid has been developed with initiatives and activity to further support staff health and wellbeing, that will be discussed at the March Endowment Committee Meeting. Ongoing wellbeing visits and support has been provided to Livingston Station and East Ambulance Control Centre (ACC) following the loss of two colleagues. Staff Engagement Session on 13th February to raise awareness of the sexual safety and reducing misogyny work that is happening in the Service.

The leadership and management training and development is progressing well, the Leadership Training Programmes have not experienced any delays in this reporting period. The process of accreditation renewal is ongoing.

For TURAS Learn, Phase Two, Delivery of Manual Handling and Violence Prevention and Reduction courses beginning April 2025 is a priority. The Turas Learn booking system and reporting functionality is under development to monitor the face-to-face delivery of these courses. Some supplementary e-learning is also required to form part of the learning and is now under development in conjunction with the Training lead. A learning matrix of content for all clinical staff has been agreed and approved by project Board with next step to seek approval via Clinical governance group. This will then be prioritised in terms of development and addition to “role specific” content. Proposals for role specific learning content including Public Protection, Sexual Safety and Infection Prevention and Control will be put to Project Board for discussion and approval.

Multiple changes have been made to the Rest Break SOP and this has seen a sustained improvement in rest break compliance since 2023. Other pressures continue to impact on rest break compliance. In February 2025, staff-side colleagues suggested further changes to be made which are now being discussed. The objective of the group and related milestones have been updated to reflect the extended timeline and the new focus.

Work is ongoing in all areas of BAU Equality Diversity and Inclusion work. Planning for Mainstreaming, Equality Outcomes, Gender Pay Gap reports and Equal Pay Statement are underway for 2025 reporting.

The Health & Care Staffing Act project has been successful in engaging with and identifying areas of SAS that do not align with the Health and Care Staffing Act. Solutions are organisation wide and out of this project’s scope.

In terms of workforce planning, Scottish Government recognises the workload pressures facing NHS Boards and HSCPs as well as the difficulty in planning for the workforce in the current environment. As a result, Scottish Government issued a workforce guidance letter in December 2024 (DL 2024-33). Within the guidance letter, NHS Boards and HSCPs were asked to complete a template with 9 specific questions. The reporting template asks NHS Boards and HSCPs to draw out key information in a concise manner for rapid review by the Scottish Government to provide a precis of overarching workforce planning activity and key messages. A draft has been completed.



Workforce and Wellbeing Portfolio Report – 2030 SSG



Portfolio Lead:

Graeme Ferguson

Period covered:

25 Jan to 21 Feb

Portfolio RAG

Portfolio Timeline

Project / Activity	Start Date	End Date	Project Health		FY 24 / 25				FY 25 / 26				25 / 26		26 / 27		
					Q3		Q4		Q1		Q2		Q3	Q4	Q1	Q2	
					Oct-24	Nov-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May-25					Jun-25
Health & Wellbeing	01/04/21	31/03/25	→	Milestones		<p>08/24 10/24 - Del H/W Culture Pulse Survey</p> <p>07/24 10/24 - Dev virt H&W ideas box</p> <p>09/24 10/24 - Conduct TRIM survey - co-ord, assessors etc</p> <p>12/24 03/25 - Explore further mental health pathways</p> <p>11/24 12/24 03/25 - Recruit additional 30 TRIM assessors</p> <p>03/25 - Deliver EDI "time to learn" & "civility saves lives"</p> <p>- Dev SLWG increase TURAS appraisal completion rates.</p> <p>- In conjunction with partner orgs, del best practice info campaigns.</p> <p>- Benchmark physical health initiatives within AACE.</p> <p>- Deliver quarterly "culture club" forum.</p> <p>- Intro a "Wellbeing Check" to assist managers in wellbeing conversations.</p> <p>- Deliver regular "Action Learning Sets" to support our managers.</p> <p>- Provide access to staff led "Health Passports"</p> <p>- Further develop wellbeing networks by locality and region.</p>											
				Risks (VH&H)	0												
				Issues (H)	0												
				Finance	N/A												
Organisational Leadership Development	01/04/22	31/03/25	→	Milestones		<p>16/10 - ALDP Cohort 24-1 Finishes</p> <p>16/10 - ILMP 24-1 finishes</p> <p>20/11 - ALDP Cohort 24-2 Commences</p> <p>06/03 - FLMP Cohort 24-1 finishes</p> <p>01/04 - Project moves to BAU</p>											
				Risks (VH&H)	0												
				Issues (H)	0												
				Finance	N/A												
Turas Learn & Statutory / Mandatory Training (Phase 2)	01/07/24	30/04/25	→	Milestones		<p>02/25 - Digital content complete</p> <p>01/25 10/03 - Prioritisation complete</p> <p>21/03 - Booking & reporting provision complete</p> <p>25/04 - Phase 2 complete</p> <p>02/25 - Classroom content complete</p> <p>04/25 31/03 - Workplan</p> <p>31/03 - Comms complete</p>											
				Risks (VH&H)	0												
				Issues (H)	0												
				Finance													
Rest Break	28/09/22	30/04/25	→	Milestones		<p>03/03 - Investigate options for second rest break</p> <p>30/04 - Investigate and implement further changes to the Rest Break SOP</p> <p>30/04 - Group closed and handover to BAU</p>											
				Risks (VH&H)	0												
				Issues (H)	0												
				Finance	N/A												
Equality, Diversity & Inclusion	TBA	30/04/25	→	Milestones		<p>04/25 Suite of reports due - Mainstreaming Report/ Equality Outcomes update/ Gender Pay Gap report/ EqualPay Statement</p>											
				Risks (VH&H)	0												
				Issues (H)	0												
				Finance	N/A												

