



NOT PROTECTIVELY MARKED

MINUTES OF THE 212TH PUBLIC MEETING OF THE SCOTTISH AMBULANCE SERVICE BOARD

1000 HOURS ON WEDNESDAY 25 SEPTEMBER 2024 ON MS TEAMS

Present:

Board members: Tom Steele, Board 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
Graeme Ferguson, Deputy Director of Workforce
Kenny Freeburn, Regional Director, East
Mark Hannan, Head of Corporate Affairs & Engagement
Pippa Hamilton, Board Secretary
Stephen Massetti, Director, National Operations
David Robertson, Regional Director, West
Milne Weir, Regional Director, North

In attendance: Sarah Stevenson, Risk Manager (Item 07)

WELCOME AND INTRODUCTION

The Chair welcomed everyone to the 212th Scottish Ambulance Service Board meeting. Apologies were noted from members: Madeline Smith and regular attendees, Avril Keen.

The Chair advised members that following a competitive recruitment process, Pippa Hamilton has been appointed into the substantive post of Board Secretary.

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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 an accident while on Arthur's Seat in Edinburgh. In the video the patient speaks about the role both our Special Operations Response Team (SORT) and Accident and Emergency (A&E) teams played.

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

ITEM 02 DECLARATION OF INTERESTS

The following standing declarations were noted: -

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

ITEM 03 MINUTES OF MEETING HELD ON 31 July 2024

Members asked for a minor typo within page 7, item 13, second bullet point "Ayrshire and Aaram" to be amended to read Ayrshire and Arran. Subject the above amendment being made members **approved** the minutes of the 31 July 2024 public Board meeting.

ITEM 04 MATTERS ARISING

The Board noted that 4 actions were proposed for closure.

Members noted the updates to the undernoted actions:

- **209/8/13** (review and refresh of patient and staff safety HAI update), a refreshed version of the paper was presented at agenda item 11 for discussion and feedback.
- **211/4/04** (continuous improvement of board papers) – it was noted that this discussion will be taken to the November Integrated Governance Committee.
- **211/4/06 (1)** (path to green and percentage progress to be included within future reporting) – it was noted that the path the "Green" is included within the paper presented at item 06 for amber and red projects. The Board discussed the inclusion of percentage completion, and it was agreed that the use of RAG status was sufficient for project

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reporting and therefore percentage completion was not required to be included within future project reporting.

Members noted the updates provided to matters arising 211/2/04 and 211/4/06 (1) as above and subsequently agreed that these could be closed. Board members therefore approved the removal of matters arising 209/8/13, 211/2/04, 211/3/05, 211/4/06 (1), 211/4/06 (2), 211/5/07, 211/6/10.

ITEM 05 BOARD QUALITY INDICATORS AND PERFORMANCE REPORT

Paul Bassett 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.

The Board noted that the median response time to purple category calls in August was 6 minutes 52 seconds with the key influencing factors on response times as service time, including hospital turnaround times, emergency demand, shift cover and staff availability during shift. Paul Bassett highlighted that work remains focused around the Integrated Clinical Hub Pathway initiative developments with an additional focus on what can be done in advance of winter. Paul Bassett added that the Service continues to see around 50% of patients being managed without the need for ambulance conveyance to the Emergency Department however, the Service continues to explore the factors that influence variation across the country.

Members noted that unscheduled care demand remained within the control limits with demand at a 5.9% increase on the same period last year. For red and amber calls in August 2024, the Service attended 50% of red category incidents within 8 minutes 16 seconds and amber category incidents within 16 minutes 40 seconds.

The Board noted that a test of change was being implemented within NHS Grampian in an effort to reduce ambulance waits, with ambulance crews handing over patients within a defined period, where there has been a delay in ability to do so. Michael Dickson advised that the test of change was an acceleration of patient handover of clinically stable patients to the Acute Medical Initial Assessment Unit (AMIA) by increasing temporary capacity to allow more rapid assessment in AMIA and allowing ambulances to be released to respond to emergencies in the community. It was noted that this test of change would run from 29 October 2024 and would be continually reviewed. Michael Dickson provided the Board with assurance that the NHS Grampian Chief Executive and senior leadership team, along with Scottish Government had been made aware of the implementation of the test of change and added that this will only relate to admissions to the medical assessment unit and not the Accident and Emergency Department.

The Board **noted** the report.

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 as requested by members at the July Board meeting.

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 mitigating actions put in place for any delays to delivery timelines due to operational pressures or other factors. Karen Borgan added that there are currently no risks across any of the Portfolios which require escalation to

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the Board with all risks currently being managed through respective portfolio boards or already exists on the Corporate Risk Register.

Karen Brogan highlighted that a formal programme of work is being established to ensure that the objectives of the Service's Anchor Strategic Plan are efficiently and effectively met with this being formally reported through the Communities and Place Portfolio Board.

The Board also noted that a Reduced Working Week Programme will be established to implement the necessary changes in relation to the implementation of the reduction in the full-time hours for Agenda for Change staff as set within the Scottish Government direction.

Karen Brogan advised that 2 projects were at "red" status and added that in relation to the Digital patient handover with NHS24, the project had an anticipated go live date of 31 July, however an agreement with NHS24 was required in relation to exception handling which was currently being followed up by the Project Team and Executive Lead. Karen Brogan added that the Rest Period Project was due to formally close at the end of June, however further discussions are due to take place in September with the outcome of this meeting determining whether the project can be formally closed and managed as business as usual.

Carol Sinclair asked if the Service was content with the progress being made on the Annual Delivery Plan (ADP) and Medium Term Plan (MTP). Karen Brogan advised that the quarter 1 update on the ADP was submitted to the Scottish Government and added that progress was being made in terms of the MTP.

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.

Sarah advised that members were asked to:

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

Members requested that the mitigating actions for Risk 4636, Health and Wellbeing and Risk 5653, Organisational Culture be reviewed to ensure that areas such as iMatter, staff engagement and TRiM referrals are captured. It was agreed that Sarah Stevenson, Karen Brogan and Graeme Ferguson would review the mitigating actions for these risks ahead of the November Board meeting.

Members **approved** the risk register.

Action:

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1. **Risk Manager, Director of Strategy Planning and Programme, Deputy Director of Workforce** to review the mitigating actions for risks 4636 and 5653 to ensure that areas such as iMatter, staff engagement and TRiM referrals are captured.

ITEM 08 PATIENT EXPERIENCE ANNUAL REPORT

Mark Hannan provided a summary of the main points from the paper and members noted that the report has been presented to the August 2024 Clinical Governance Committee with feedback from members reflected within the version presented to the Board.

Members noted that following Board approval and prior to publication the presentation of the report will be refreshed to include a front page and graphics and will reflect any changes requested by Board members.

Members discussed the Report and suggested minor amendments. Members **approved** the report subject to the suggestions and feedback from members being made.

ITEM 09 FINANCIAL PERFORMANCE TO 31 AUGUST 2024

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

1. The financial position at the end of month 5 is reporting a deficit of £7.16 million, reflecting the additional £5 million recurring funding received to offset operational commitments.
2. Impact of ongoing post COVID/system pressures of £3.53 million have been incurred over this period.
3. Overtime costs continue to increase slightly compared with the same period last year with a detailed analysis of the key drivers of this included within the paper, these include increased shift cover to manage demand.
4. In relation to the £12.0 million efficiency savings target, to date £1.73 million has been delivered against a year to date target of £2.2 million reflecting a normal slow start to the year. 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 in month 5 remains on track and is slightly lower than the £18.35 million deficit included within the financial plan.

The Board noted that overtime costs remain a key focus within the 2024/25 financial plan with rising costs post COVID. Julie Carter highlighted that whilst additional controls are in place, significant work is also in progress to critically review the other key drivers of this to allow corrective action to be taken.

Julie Carter added that a huge amount of work was being undertaken in relation to overtime with good work being carried out regionally.

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

Dave Bywater 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).

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Board members noted the complaints compliance with Stage 1 reported at 96.5% and Stage 2 reported at 95.6% against a compliance target of 70%.

Dave Bywater highlighted that of the 515 complaints received between 01 April 2024 and 01 September 2024, the 3 most common themes for complaints are:

- Attitude and Behaviour – 146 complaints (28.35% of the total, compared to 27.76% in the last paper)
- PTS Eligibility – 75 complaints (14.56% of the total, compared to 16.4% in the last paper)
- Triage/Referral to NHS24 – 68 complaints (13.2% of the total, compared to 14.2% in the last paper)

Carol Sinclair suggested that future reporting should focus more on areas of person centred care which are not progressing so well and it was agreed that Carol Sinclair would undertake an offline discussion with Mark Hannan in relation to this.

The Board discussed the update provided on SPSO cases and noted concern that there continue to be cases which the Service had not upheld, which following investigation by the SPSO, were then being upheld.

Michael Dickson advised that he had recently had a discussion with the SPSO and agreed that in investigations such as these it was not always down to agreement in clinical practice in paramedicine and pre hospital care but about the clinical evidence that supports the decision made. Michael added that the SPSO acknowledged they don't have an extensive resource to tap into for clinical knowledge in relation to paramedicine and advised that the Service is working with them to improve this. Michael provided assurance to members that work was ongoing with the SPSO to build relationships to collaborate understanding and learning.

Members thanked Michael for this update and took assurance from the work being undertaken with the SPSO to enable them to foster better understanding of the Service and its constraints compared to other parts of the Health Service.

Board members **noted** the report.

Action:

- 2. Non Executive Director Carol Sinclair and Head of Corporate Affairs and Engagement** to have an offline discussion in relation to future reporting having more focus on areas of person centred care which are not progressing so well

ITEM 11 PATIENT AND STAFF SAFETY HAI UPDATE

Dave Bywater 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.

Mike McCormick suggested that within chart 1, National cleaning Services Specification (NCSS) audits, it would be more beneficial to members that only rectifications which have not been completed after 21 days should be included within the chart and ones in process be removed. Maggie Watts also noted that within chart 1 there appeared to be more bars on the charts than station names and asked that this be looked into.

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Members noted and welcomed the work being undertaken with NHS Assure in relation to current ambulance design for patients with high consequences infectious disease.

Board members **noted** the report.

Action:

- 3. Head of Infection Prevention and Control** to amend chart 1, National cleaning Services Specification (NCSS) audits, to include only rectifications which have not been completed after 21 days and any in process be removed.
- 4. Head of Infection Prevention and Control** to review chart 1 as there were more bars on the charts than station names.

ITEM 12 HEALTH AND WELLBEING UPDATE

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

Graeme Ferguson highlighted that a total of 318 referrals to the internal provision of trauma support through the TRiM programme had been made since June 2023. Graeme added that a review of the Service's TRiM licence will be undertaken to ensure that it continues to meet requirements and offers best value.

Members noted that comparative data provided for the 2024 iMatter Staff Survey with qualitative feedback also obtained through staff responses to the lowest performing areas within the survey.

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

ITEM 13 HEALTH AND CARE STAFFING ACT QUARTER 1 REPORT

Jim Ward provided a summary of the main points from the paper and advised that the Service has made excellent progress in recognising and aligning its current systems to the duties prescribed in the legislation. Jim added that the drivers for our continued non-compliance include the launch of our Real-time Reporting tool, ongoing healthcare sector pressures on hospitals, and resources for releasing staff for training and time for clinical leaders.

Members noted that the draft public report for quarter 1 2025/26 will be presented to the Board prior to publication.

Members **noted** the report.

ITEM 14 CHAIR'S VERBAL REPORT

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

- The Chair has now stood down as the Chair of NHS Scotland Volunteering Advisory Board.
- The Chair has been asked to join the Care and Wellbeing Portfolio Board from October 2024.
- The Chair updated members on his most recent observer shift with an A&E crew which he continued to find impactful.

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- Weekly meetings continue between the Chair and Chief Executive which allow for meaningful discussions and collaborated influence.

ITEM 15 CHIEF EXECUTIVE’S UPDATE

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

Michael Dickson highlighted that he attended the National Ambulance Memorial Service arranged by The Ambulance Staff Chairty (TASC) on 19 September. Michael highlighted that this was a well organised service and an extremely powerful tribute to honour and remember ambulance staff no longer with us from across the UK.

ITEM 16 STAFF GOVERNANCE COMMITTEE

Members noted that as discussed and agreed at the July Board meeting the Governance Committee reports now included the latest approved minutes, and agenda from the most recent meeting rather than a written report as previously provided.

Board members noted the minutes of 06 June 2024 approved by the Committee on 05 September 2024 and the agenda of the meeting held on 05 September.

ITEM 17 CLINICAL GOVERNANCE COMMITTEE

Board members noted the minutes of 13 May 2024 approved by the Committee on 12 August 2024 and the agenda of the meeting held on 12 August.

ITEM 18 DATE OF NEXT MEETING

- The next meetings will be held on 27 November 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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