

Annual Members Meeting 2025

9 October 2025



South Central
Ambulance Service
NHS Foundation Trust



Welcome

We'll be starting at 5pm
Please check your microphone is muted

Agenda

Annual Members Meeting 9 October 2025

1. Chair's welcome
2. Review of 2024/25
3. Auditor's report
4. Financial review and accounts
5. Questions
6. Service presentation – reducing handover times at Queen Alexander Hospital
7. Council of Governors' review
8. Questions and close





South Central
Ambulance Service
NHS Foundation Trust



Review of 2024/25

David Eltringham
Chief Executive Officer

Our services and strategy

999



111



PTS



Vision

The right care, first time,
for our patients.

Values



Caring



Professional



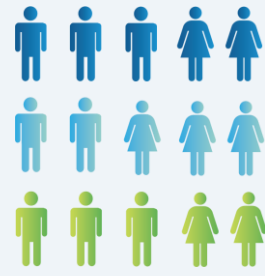
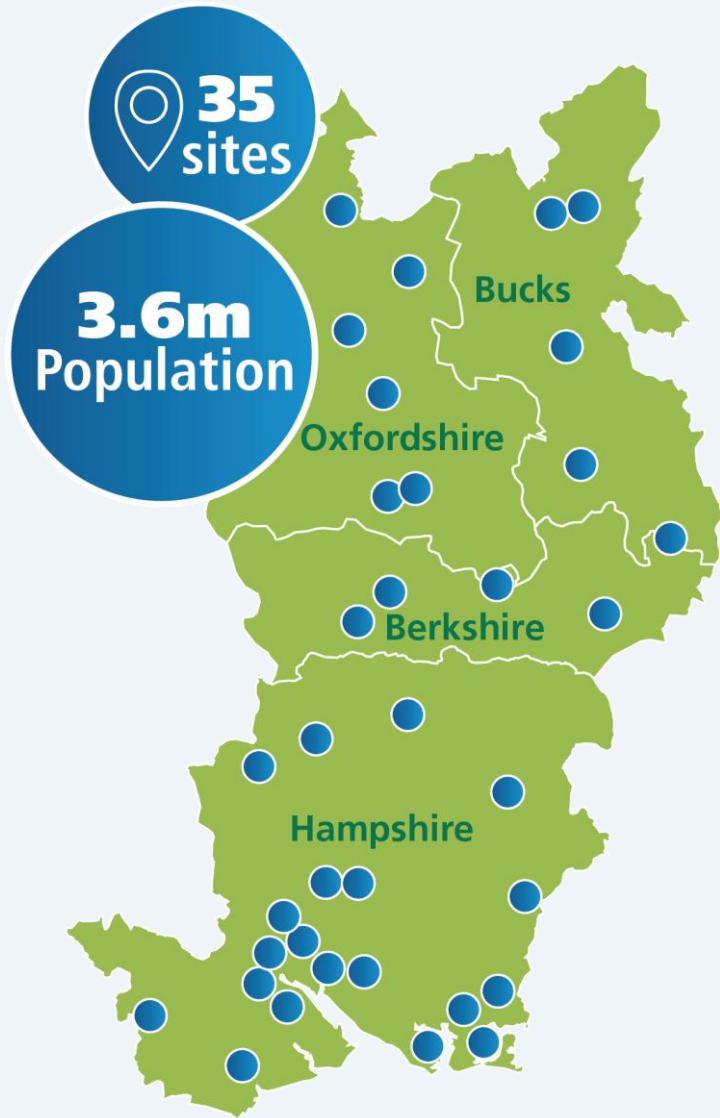
Innovative



Teamwork



SCAS in numbers



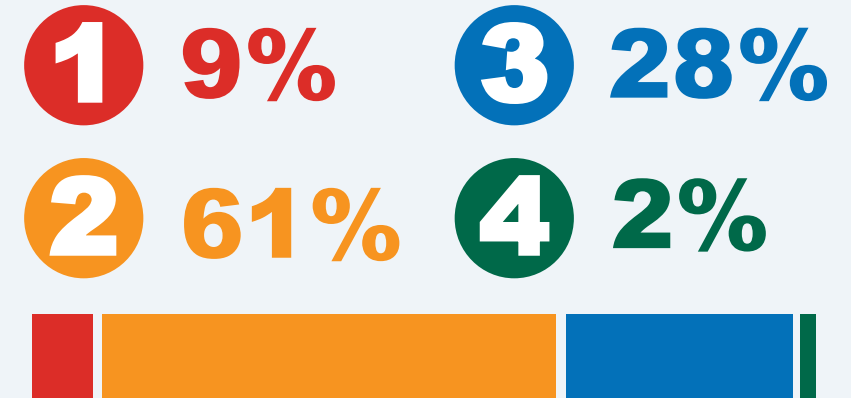
4,300
Staff



845
Volunteers

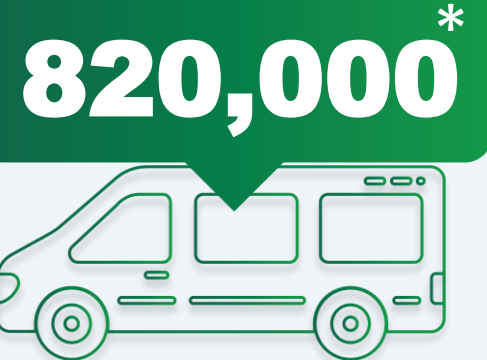


Categories



1.4m
111 Incidents

Patient
Transport
Service
journeys



2024/25 in context

Hospital handover improvements

- Long-standing challenges addressed

Patient Transport Service changes

- Transferring 400 staff to new providers

Collaborations with other ambulance trusts

- South East Coast Ambulance Service
- Five southern ambulance services

Financial recovery progress

- Year two of a three-year plan



Performance summary

999



Contact centres

Calls made	837,121
Average call answer time	12 seconds
Hear & Treat rate	13.9%

Operations	Demand	Response Time	Target
Category 1	45,995	0h 08m 54s	7 mins
Category 2	313,753	0h 31m 58s	18 mins
Category 3	141,195	2h 35m 02s	2 hour
Category 4	7,472	6h 27m 37s	3 hours

111



	Actual	Target
Calls answered	1,404,606	
Answered within 120 seconds	81.7%	95%
Abandoned after 30 seconds	3.35%	3%

PTS



- No national targets, but over 60 key performance indicators across multiple local contracts.
- Performance trend charts within the annual report.

2024/25 highlights

Chief Paramedic role introduced

- Part of wider executive restructure
- Joint strategic advisor role with SECamb

Single Point of Access Pilot

- Multi-disciplinary team including GPs
- Co-located in Southern HQ
- Helping patients on the phone
- Supporting our crews on the road

Fleet improvements

- 70 new ambulances
- 6 new specialist vehicles
- Pilot of 2 fully electric rapid response cars
- Managing supply challenges



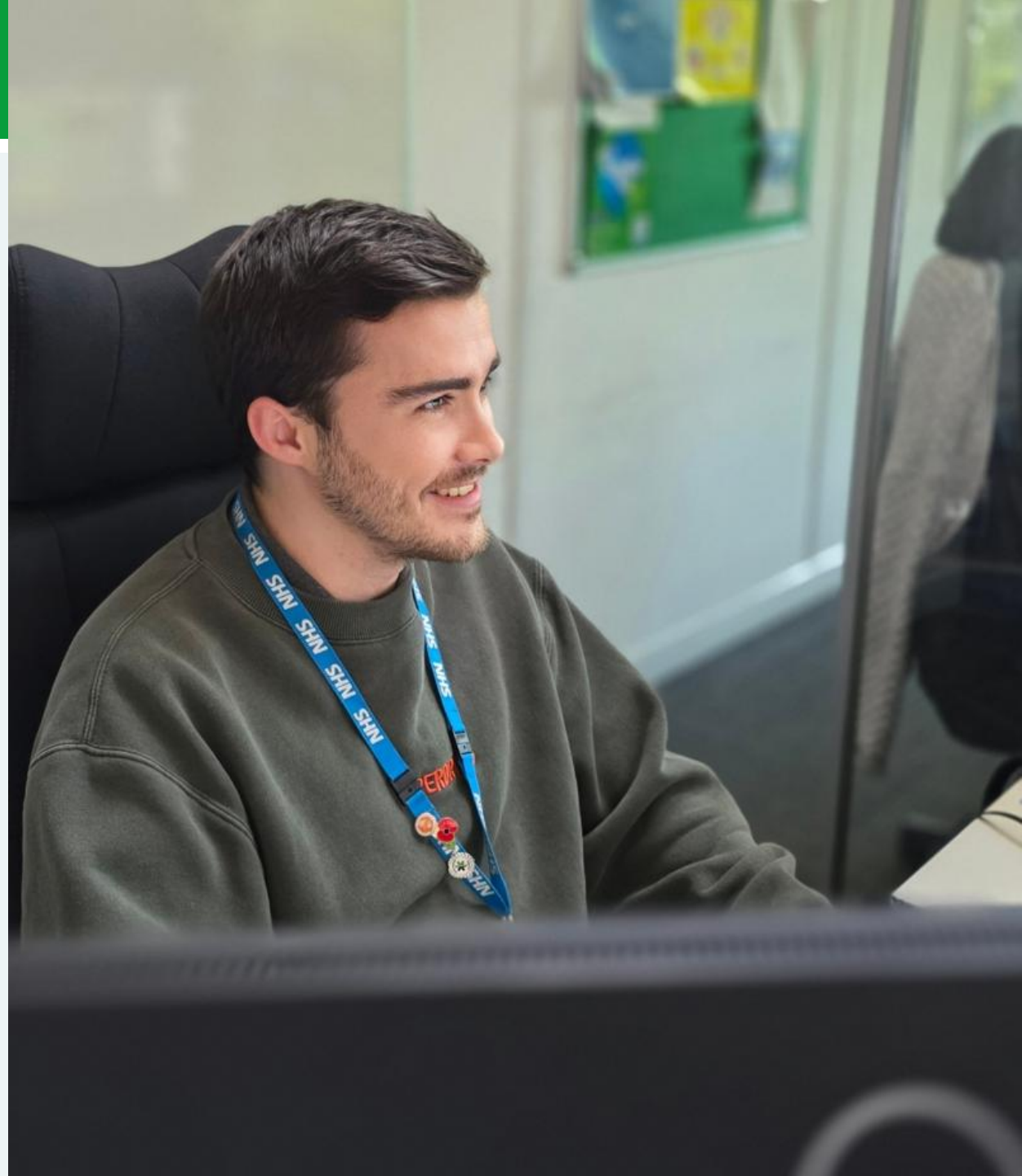
2024/25 highlights continued

Supporting our people

- Piloting new local leadership models
- Sexual safety charter and training
- Military and Men's staff networks launched

Charity and volunteers

- 850 volunteers, including 790 active Community First Responders and co-responders from Fire and Military
- 33,890 incidents responded to
- 7,350 Public Access Defibrillators supported, with nearly 555 deployments
- Challenging climate for charitable donations



2025/26 and beyond

Five strategic themes to be Fit for the Future

- Clinical Effectiveness
- People and Culture
- Digital Transformation
- Enabling Services
- Partnerships and Sustainability

Care Quality Commission

- Clinical service reinspected
- Well-led inspection to follow

Embracing Artificial Intelligence

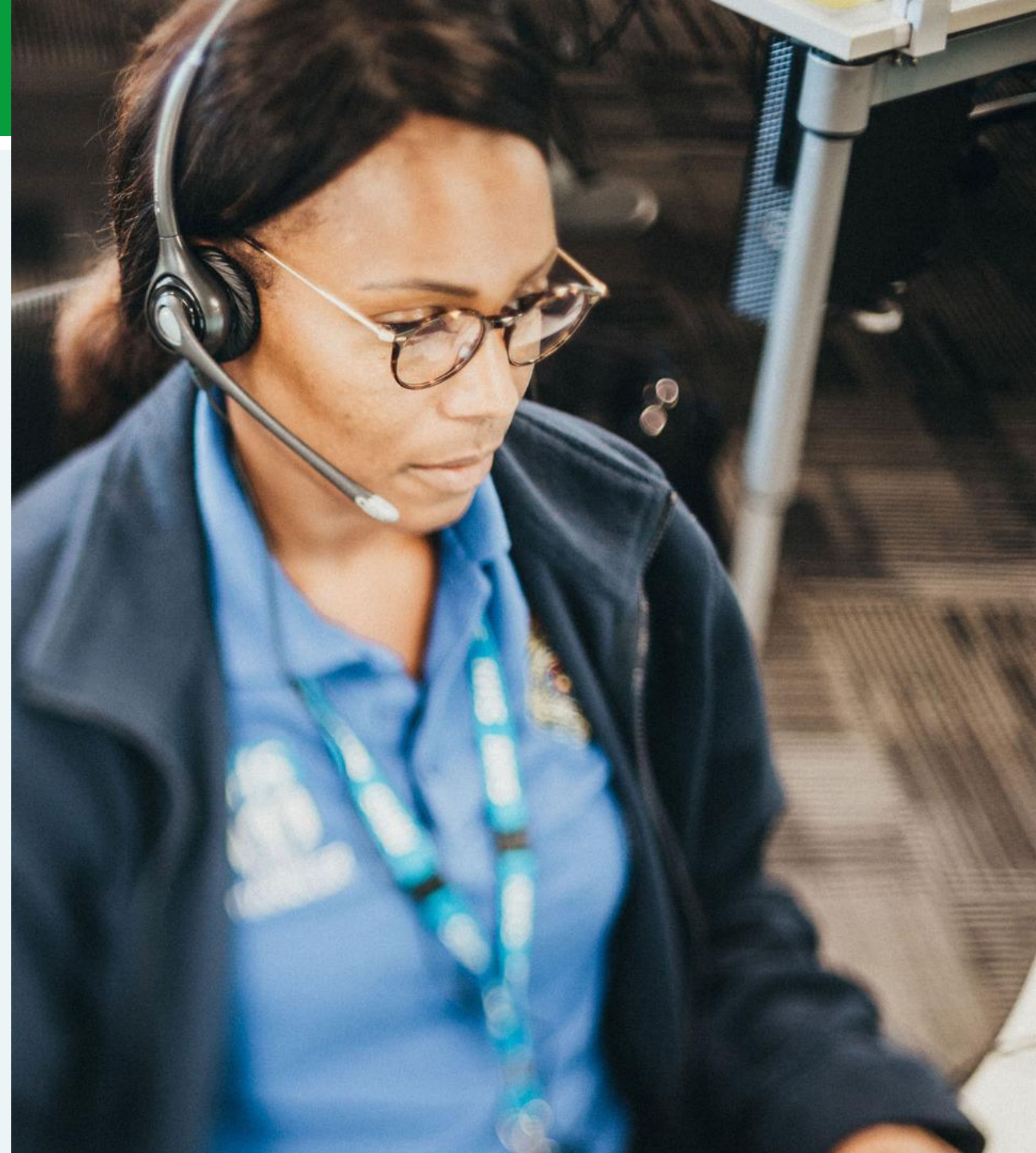
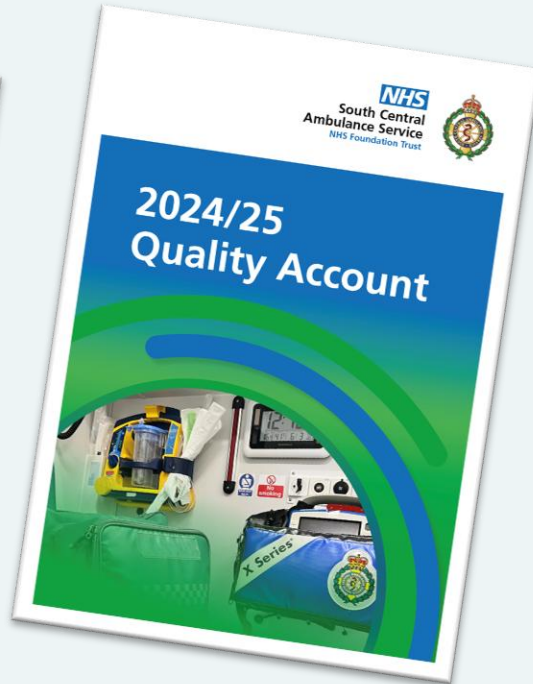
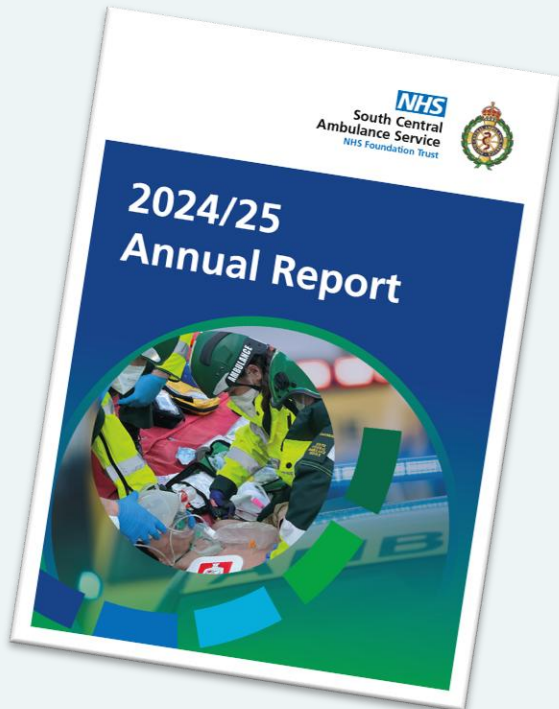
- Staff training
- Call handling support



Find out more

Our full Annual Report and Quality Account for 2024/25 are available on our website:

www.scas.nhs.uk/about-scas/publications





South Central Ambulance Service NHS Foundation Trust



Summary Auditor's Annual Report for AMM

Year ended 31 March 2025

September 2025

Key messages

The purpose of the Auditor's Annual report is to bring together all of the auditor's work over the year. A core element of the report is the commentary on value for money (VFM) arrangements, which aims to draw to the attention of the Board and the wider public relevant issues, recommendations arising from the auditor's work and the auditor's view on whether previous recommendations have been implemented satisfactorily.

Area of work	Our responsibilities	Conclusions
Financial statements	We are required to audit the financial statements of the Trust and Group under the National Health Service Act 2006. We express an opinion as to whether: - the accounts give a true and fair view of the financial position of the Trust and Group and of the expenditure and income for the year; and - the accounts have been prepared in accordance with proper practices and the requirements of the National Health Service Act 2006. We confirm whether the financial statements have been prepared in line with the Group Accounting Manual prepared by the Department of Health and Social Care (DHSC).	We issued an unqualified audit opinion on the Trust's and Group's financial statements. This means that we consider the financial statements give a true and fair view of the financial performance and position of the Trust and Group.
Annual report, AGS and other information published with the financial statements	We assess whether the annual report is consistent with our knowledge of the Trust. We perform testing of certain figures subject to audit (labelled in the remuneration report and the staff report) as prescribed by the Foundation Trust Annual Reporting Manual (the 'ARM'), We consider whether the Annual Governance Statement does not comply with the disclosure requirements set out in the ARM or is misleading or inconsistent with information of which we are aware from our audit. We are not required to consider whether the Annual Governance Statement addresses all risks and controls or that risks are satisfactorily addressed by internal controls.	We did not identify any unadjusted significant inconsistencies between the information presented in the annual report and our knowledge of the Trust. Our audit opinion on the audited sections of the remuneration report and the staff report was unqualified. We confirmed that the Governance Statement had been prepared in line with the requirements set out in the ARM.

Key messages

Area of work	Our responsibilities	Conclusions
Value for money	We are required under Schedule 10 (1)(d) of the National Health Service Act 2006 to satisfy ourselves that the Trust has made proper arrangements for securing economy, efficiency and effectiveness in its use of resources. The Code of Audit Practice issued by the National Audit Office requires us to report to you our commentary relating to proper arrangements. We assess the arrangements in place for securing economy, efficiency and effectiveness in the Trust's use of resources and provide a summary of our findings in the commentary in this report. We are required to report if we have identified any significant weaknesses as a result of this work. We are required to report our commentary under specified criteria: Financial sustainability, Governance and Improving economy, efficiency and effectiveness.	We have not identified any significant weaknesses in the arrangements for securing at economy, efficiency and effectiveness in the use of resources at the Trust. We have made "other" recommendations to support the Trust's ongoing improvement.
Public interest report	Under Schedule 10 (3) of the National Health Service Act 2006 the auditor of a foundation trust must consider whether to make a report in the public interest if they consider a matter is sufficiently important to be brought to the attention of the audited body or the public.	We did not identify any matters for which we considered a public interest report to be required as part of our external audit for 2024/25.
Referral to NHS England	Under Schedule 10 (6) of the National Health Service Act 2006 the auditor of a foundation trust must consider whether to make a referral to a foundation trust's regulatory body (NHS England) if the auditor has reason to believe that the trust, or a director or officer of the trust is about to make, or has made, a decision which involves or would involve the incurring of expenditure which is unlawful, or is about to take, or has taken, a course of action which, if pursued to its conclusion, would be unlawful and likely to cause a loss or deficiency.	We did not identify any matters for which we considered a referral to be required as part of our external audit for 2024/25.

Other recommendations

DRAFT

These recommendations relate to less significant deficiencies or opportunities for improvement we have identified during the course of our work. Progressing the actions management has identified to address the recommendations made will support the Trust in realising the improvement opportunities identified from our work.

Criteria	Other recommendations	Management response
Financial sustainability	The Trust should ensure that post implementation reviews are completed for CIPs which they have achieved to ensure that service delivery is not impacted negatively.	The Trust acknowledges the importance learning lessons from Cost Improvement Plans (CIPs) to ensure that financial efficiencies do not adversely impact service quality or patient outcomes - QIAs are done and any lessons learnt will be taken forward and PIR carried out as appropriate. We are committed to all findings reported to the Financial Sustainability and Development Group (FSDG), FRG, EMC, F&PC and the Quality Committee and upward report to the Board as appropriate. This approach will support continuous learning, ensure alignment with strategic objectives, and provide assurance to the Board that cost savings are being delivered in a sustainable and safe manner.
Financial sustainability	The Trust should ensure that timely and accurate monitoring of CIPs is completed and reported to the relevant committees, to ensure any slippage is identified and mitigated as soon as possible.	The Trust fully agrees with the recommendation and recognises the critical importance of robust, timely, and accurate monitoring of Cost Improvement Plans (CIPs) to ensure delivery against financial targets and to mitigate any emerging risks. To strengthen oversight, the Trust will enhance its existing CIP governance framework by: • Ensuring all nodes/sector/directorate, etc submit monthly updates on CIP progress, including risk ratings and delivery status. • Escalating any slippage or underperformance to the Financial Sustainability and Development Group (FSDG), Financial Recovery Group, EMC, and Finance and Performance Committee for timely intervention. These measures will support proactive decision-making and ensure that corrective actions are taken promptly to maintain financial resilience.

Other recommendations

DRAFT

Criteria	Other recommendations	Management response
Financial sustainability	The Trust should ensure that they have identified significant risks, challenges and pressures that are relevant to its medium terms plans and ensure that a strategy is in place to address this.	The Trust acknowledges the importance of proactively identifying and addressing significant risks, challenges, and pressures that may impact the delivery of its medium-term financial and operational plans. To strengthen our strategic planning, the Trust is: • Finalising its medium term plan as well as its Medium-Term Financial Plan (MTFP), which incorporates known cost pressures, workforce challenges, and system-wide changes. • Aligning the MTFP with the Fit for the Future strategic framework and Integrated Care System (ICS) priorities. • Enhancing risk identification through regular scenario planning and sensitivity analysis, with oversight from the Financial Sustainability and Development Group (FSDG), FRG, EMC, etc • Embedding a structured risk escalation process to ensure timely Committees and Board-level visibility and response. These actions will ensure that the Trust's medium-term strategy is both resilient and responsive to emerging pressures, supporting sustainable service delivery.
Governance	The Trust should continue to monitor progress made against the 2023 finance undertakings and remaining action points which have been included in a revised set of 2024 undertakings, ensuring reporting to Board in a timely manner and focusing on actions becoming embedded within the Trust.	The Trust acknowledges the importance of maintaining momentum in delivering the financial undertakings agreed in 2023 and ensuring that outstanding actions are effectively addressed through the revised 2024 undertakings. We are committed to robust monitoring of progress against these actions, with clear accountability and ownership at both operational and executive levels. To support this, the Trust will continue to provide regular and timely updates to Committees or Board as appropriate, ensuring that reporting is transparent, and aligned with the agreed milestones. Particular focus will be placed on embedding these actions into the Trust's core financial governance and operational processes, to ensure sustainable improvement and long-term financial resilience. Progress will be tracked through established performance management and accountability frameworks and any emerging risks or delays will be escalated promptly with appropriate mitigation plans.
Governance	The Trust should ensure that all relevant information for our value for money assessment is provided to the audit team in a timely manner and be offered proactively to evidence progress made by the Trust in a clear and concise way.	The Trust fully recognises the importance of supporting the value for money (VfM) assessment through the timely and proactive provision of relevant information. We are committed to working collaboratively with the audit team to ensure that all necessary evidence is shared in a clear, concise, and structured manner. To facilitate this, the Trust will implement a coordinated approach to information collation and submission, led by the governance and finance teams, with oversight from executive leadership. This will include early identification of key documentation, progress updates, and supporting evidence that demonstrate the Trust's improvements and outcomes against VfM criteria. And look to start the work earlier with the auditors, ensuring that regular communication channels are maintained with the audit team to anticipate information needs.



**South Central
Ambulance Service**
NHS Foundation Trust



Financial review and accounts 2024/25

**Stuart Rees
Chief Finance Officer**

Financial performance 2024/25

Overall position: a reportable Surplus £4.6m and inline with System Control Total.

A deficit of £1.1m per accounts including peppercorn rent adjustments (accounting treatments applied to assets leased at a nominal rent - these adjustments ensure SCAS's financial statements reflect the true economic cost of using assets, even if no cash rent is paid. Aligns with national accounting standards).

Discontinued operations relate to the loss of the Thames Valley and Sussex Patient Transport Services contracts

Capital expenditure (two elements):

- Normal capital was £15m, ICB agreed £2.1m over the limit of £12.9m.
- IFRS 16 (leases) was £4.8m, £23.8m under the limit of £28.6m due to the delay in the 2023/24 and 2024/25 Ambulance cohorts.

Year-end cash balance: £28m

Staff costs: £232.6m
(£216.9m in 2023/24)

Suppliers paid within 30 days: 97.7%
(95.8% 2023/24), target 95%.



Income & Expenditure

Income for 2024/25 was £380.8m
(2023/24: £353.2m)

- Integrated Care Boards income increased by £29.3m (9.1%)
- Non-Recurrent Deficit Funding £6m
- Non-Recurrent Brokerage Funding £7.5m
- Additional 111 Service Funding £2m
Inflation Funding (inc Pay Rise) £13.8m

Expenditure increased by £3.3m to £381.7m
(£378.4m in 2023/24)



Capital investment

The largest **estates** investments:

- Lymington property purchase £0.6m
- Winchester & Eastleigh Resource Centre & Cosham upgrades £0.5m
- Sluices upgrade £0.5m
- Electric vehicles charging points £0.4m

The largest **vehicle** investments:

- 2022/23 ambulance replacement £2.8m
- 2023/24 ambulance replacement £2.5m
- 2024/25 ambulance replacement £4.0m
- Rapid Response and Specialist vehicles £3.6m

The largest **equipment** investments:

- Defibrillators £0.8m

Capital proceeds: vehicle sale and leaseback £7.5m

	2024/25	2023/24
	£'000	£'000
Group Capital Spend		
Estates	4,071	4,506
Equipment - Operations	806	1,070
South Central Fleet Services Limited	135	16
Information Technology	4,109	772
NHS Digital	-	531
Vehicles	5,857	5,077
Donated Ventilator Equipment	-	2,758
Education	-	275
Total CDEL	14,978	15,005
Group IFRS16 Capital Spend		
Buildings*	(1,770)	1,791
Vehicles	5,717	1,389
Equipment	73	
Total IFRS16 CDEL	4,020	3,180
Total Capital	18,998	18,185
* Includes -£2,337k PTS lease disposal.		

Financial Recovery Plan

2025/26 is the third year of a Financial Recovery Plan to return the Trust to balance.

The Trust is currently forecasting to break-even for 2025/26.

Savings target for 2025/26 is £24.4m, includes:

- original Cost Improvement Plan target of £21.6m
- additional £2.8m to address in year cost pressures.





Reducing Hospital Handovers in 2024/25

South Central Ambulance Service NHS FT
&
Portsmouth Hospitals University NHS Trust

An enduring challenge



Historic pressure on urgent and emergency care. Clear evidence of impacts on patient care and experience.



Delays existed at every step

- In the community awaiting emergency **response**
- At the Emergency Department awaiting ambulance **handover**
- In the Emergency Department awaiting **treatment**
- In the Emergency Department awaiting **admission**
- In the hospital wards awaiting **discharge / onward care**

Release to respond

- Aim to reduce handover delays and have no handovers over 45 minutes
- National Directive from NHS England
- Workshops held with all hospital trusts
- All partners supported the aim but acknowledged the impact on Emergency Departments
- Identified a need to expand alternative pathways, so appropriate patients avoid Emergency Departments
- Joint protocols developed between SCAS and each hospital trust

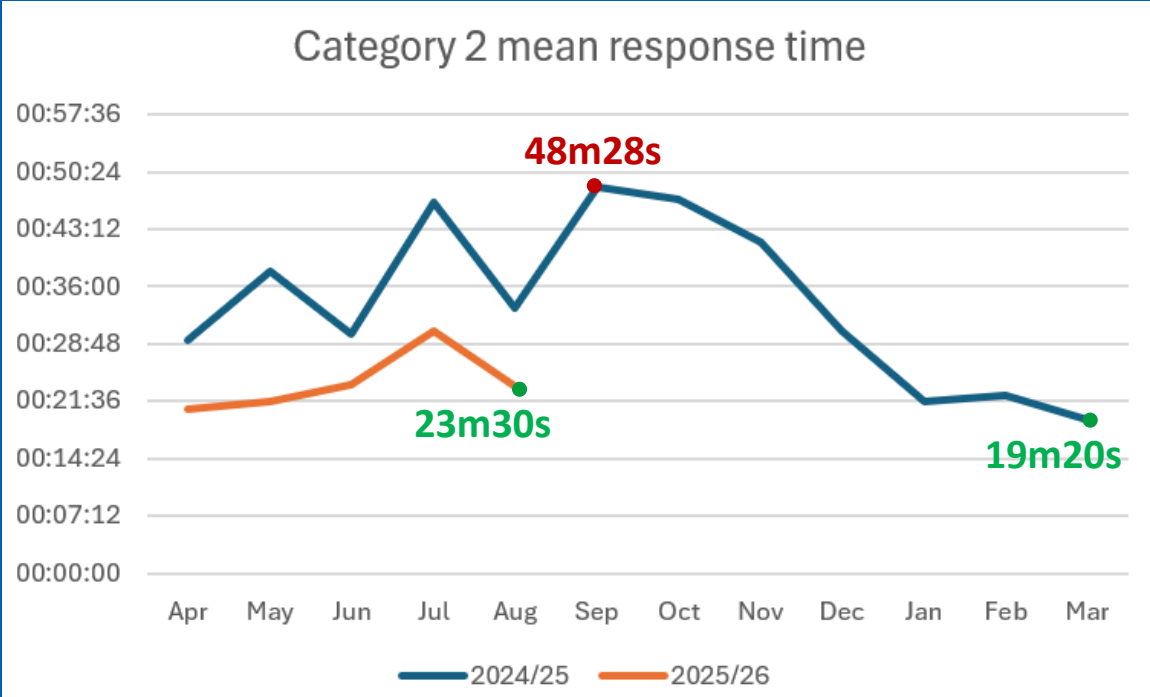
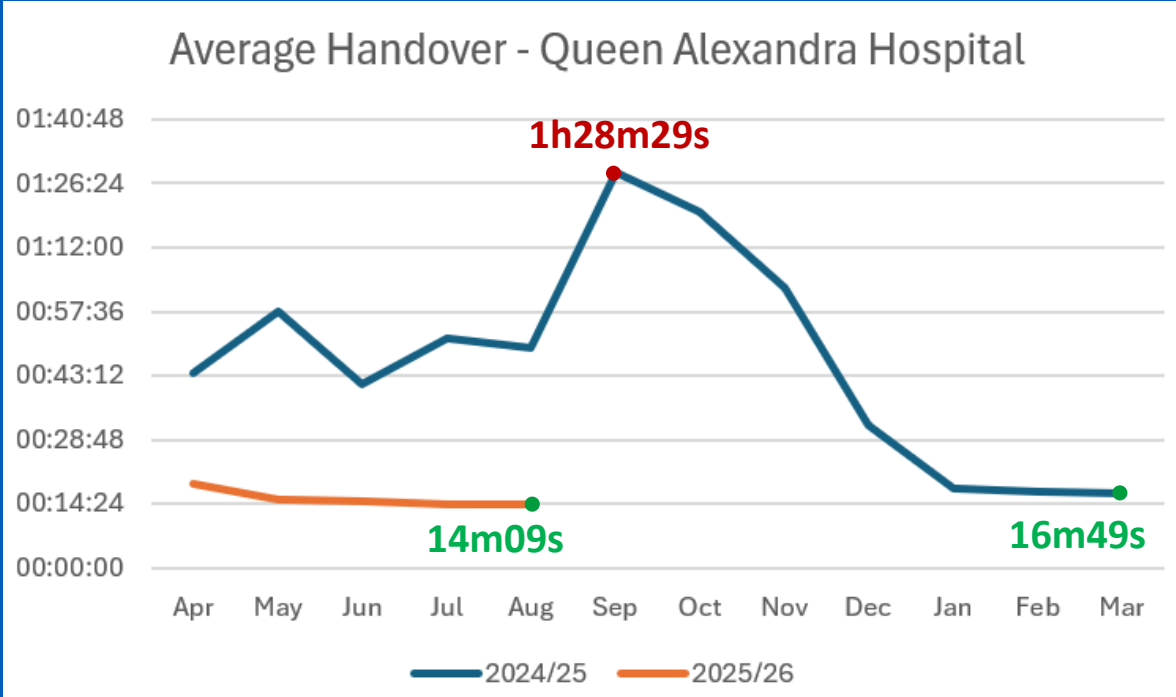


The year of transformation



Sept 2024
1hr28min handover
48min C2 response

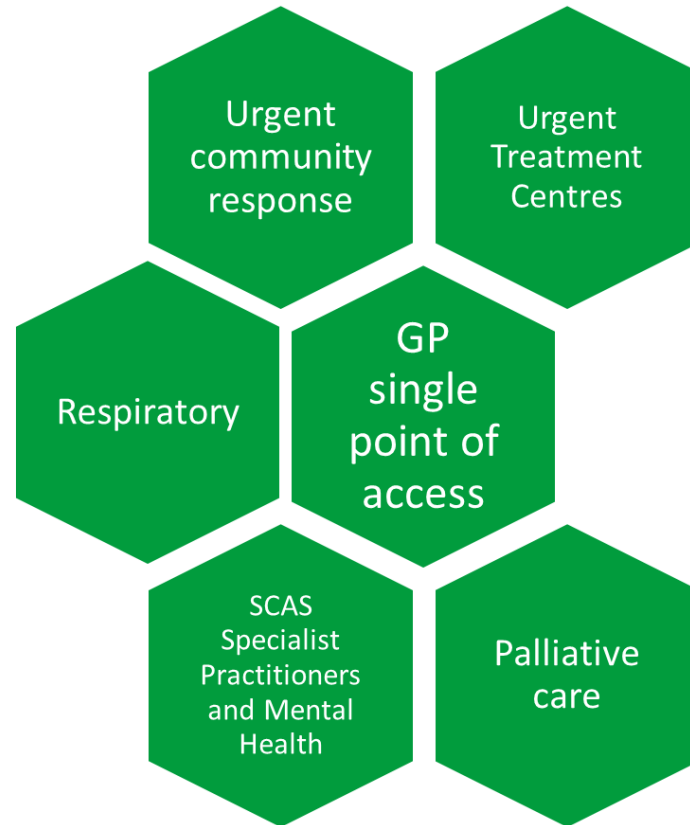
March 2025
16min handover
19min C2 response



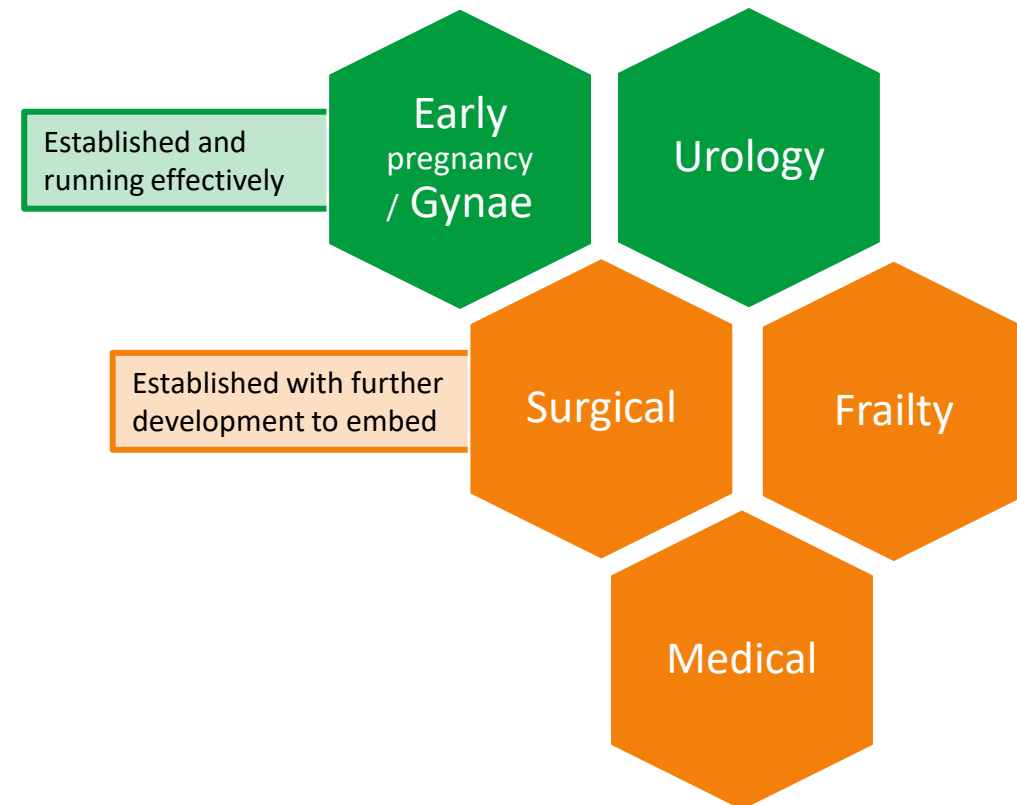
Transformation and improvement Pathways for ambulance crews



Increased community pathways to avoid hospital



Increased direct referral pathways to avoid ED

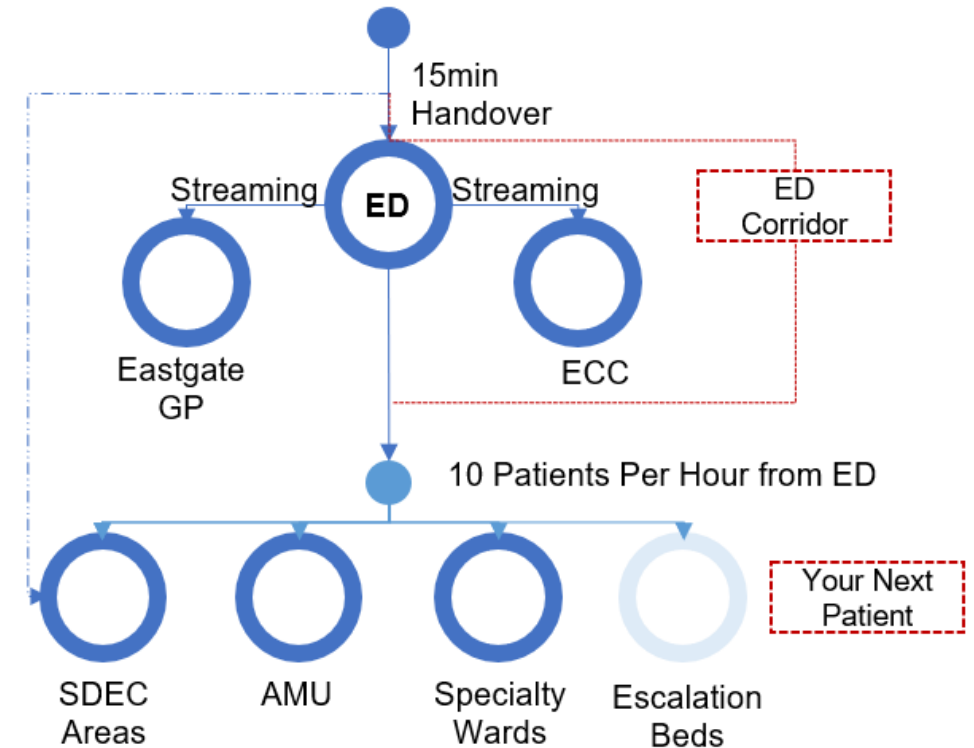


Transformation and improvement

A new Emergency Department & Continuous Flow Programme



- New Emergency Department opened 26 Nov 2024
- Rapid Assessment and Treatment models in each part of the department
- Productivity improvements from physical environment
- Right specialty ward for the right patient
- Distribution of risk from ED to whole hospital with 10 beds an hour program
- Maintaining patient flow through the hospital
- Optimisation of Same Day Emergency Care and other alternatives to bedded services
- Maximising use of discharge lounge and early planned patient flow



Next steps



Portsmouth Hospitals

- Streamline pathways and improve movement through the department
- Realigning clinical rotas to better match current demand profiles
- Enhance offering for medical Same Day Emergency Care
 - Greater access for GP / ED / Ambulance patients
 - Older persons SDEC reduced age profile to 65 from 85
- Improved ward processes to deliver consistency in clinical management of patients
- Increase discharges by midday from 19% to 25%; increases beds to ED by 12-15 each morning
- Realignment of medical bed base to ensure a better balance of beds by speciality

South Central Ambulance

- Further development of clinical pathways to reduce conveyance
- Improved utilisation of Single Point of Access for clinical advice
- Increasing Hear and Treat by 4% to reduce ED attendance (up to 18% of all calls)





Lead Governor Report

Helen Ramsay

Overview

1. The role of Governors
2. Our Governors
3. Holding Non-Executives to account for Board performance
4. Our members and how and why we engage with them
5. Governor focus on health inequalities
6. NHS 10-year plan
7. Elections



The role of Governors

Two main statutory duties of equal importance:

1. Representing the interests of:
 - Members in their constituency
 - The wider public across the SCAS area
 - The trust as a whole
2. Holding the Non-Executive Directors to account for the performance of the Board of Directors



Governance structure

Trust Chair

Board of Directors

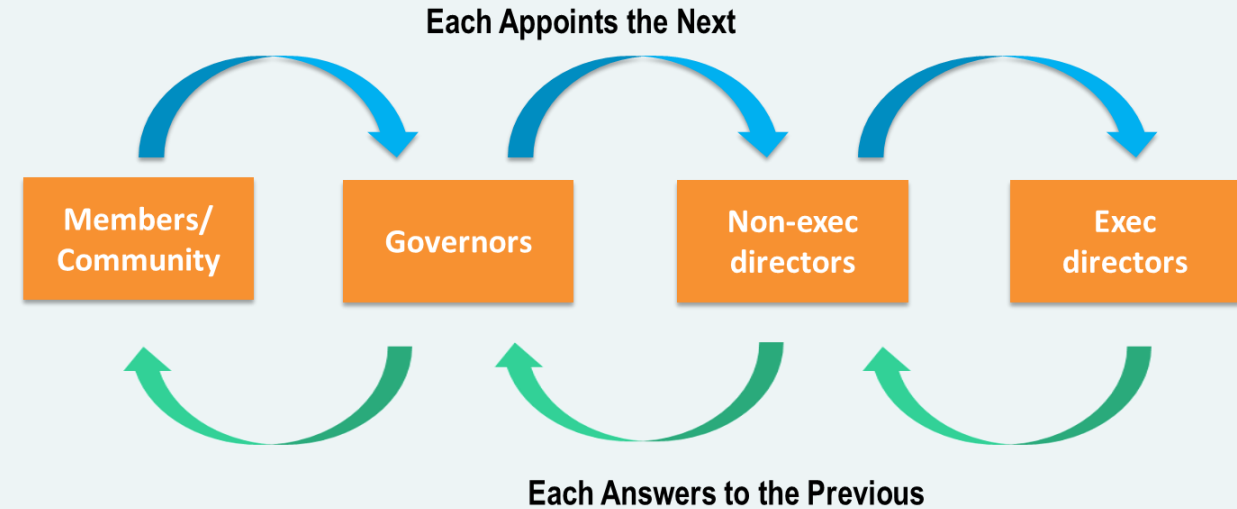
- 7 Non-Executive Directors + Chair
- 5 Voting Executive Directors
- 3 Non-voting Executive Directors

Council of Governors

- 16 Public Governors
- 6 Staff Governors
- 1 Community First Responder Governor
- 4 Appointed Governors (from partner organisations)

Membership

- 4,403 Public Members
- 4,249 Staff Members



Our governors (2024-25)



Find out more about individuals at: www.scas.nhs.uk/scas-governors

Holding NEDs to account for Board performance 2024/25

- Asked questions of the Non-Executive Directors at formal Council of Governor meetings
- Governor attendance at board meetings
- Meetings with buddy Non-Executive Directors
- Governor visits to ambulance sites
- Appointed 3 new Non-Executive Directors using a recruitment approach to support and encourage diversity



Our members

SCAS has a total membership of 8,652 members, as of 3 October 2025, made up of:

- Public: 4,403
- Staff: 4,249

Membership is free and keeps you connected with the latest news and events.

Please join us:

www.scas.nhs.uk/get-involved/membersgovernors



Why do we engage

Public Relations

Recruitment:
Staff
Volunteers
FT Members

**Service
Improvement**

Health Inequalities
(underrepresented
communities, areas
of demand and
deprivation)



Campaigns



Events



Health Inequality Work

How do we engage to represent our members and the wider public

1. Public engagement :
 - Emergency Services Days & partnership working
 - Engagement with local communities
 - Public Health Talks (in person and online)
2. Engagement with underrepresented communities to understand and address health inequalities with thematic analysis of feedback and insights
3. Collaboration with patient panels, voluntary and community groups, and other NHS Trusts
4. Membership and Engagement Committee
5. Buckinghamshire, Oxfordshire and Berkshire West Lead Governors Group



How Governors help reduce health inequalities

Improving pathways and interventions

Governors provide a way to both listen to and shape the Trust's response to the members and the wider public helping to give those underrepresented a voice.



NHS 10 Year Health Plan (Jul 25)

'We will reinvigorate and reinvent the NHS Foundation Trust (FT) model'

*'We will **remove** the requirement for FTs to have governors'*

- Who will hold the Non-Executive Directors accountable for the running of the trust?
- Who will appoint the Non-Executive Directors and the Chair?
- Who will represent the voice of members and the public at the highest level of the trust?

For the foreseeable future, Foundation Trusts are legally required to have Governors – **we need you!**



SCAS Governor Elections

Public Governors

- Berkshire (3)
- Buckinghamshire (3)
- Hampshire (6)
- Oxfordshire (3)
- Rest of England & Wales (1)

Staff Governors

- 999 Operations (North)
- 999 Operations (South)
- 999 Emergency Operations Centre (EOC)
- NHS 111
- Patient Transport Services and Logistics (EOC & Frontline)
- Corporate / Support / Other

Community First Responder Governor

- To represent the interests of the trust's Community First Responders (1)

Appointed Partner Governors

- Local Authority
- Air Ambulance

Vacancies to be filled as part of Winter 2025 Governor Elections Campaign

- Berkshire (1)
- Hampshire (4)
- Oxfordshire (2)
- Rest of England & Wales (1)
- NHS 111 (1)
- Corporate / Support / Other (1)
- Community First Responder (1)

Nominations Open to Members: 9th December 2025

Join Us!

Find out how to become a
member of
South Central Ambulance Service
Foundation Trust:

[www.scas.nhs.uk/get-
involved/membersgovernors](http://www.scas.nhs.uk/get-involved/membersgovernors)

