NHS
South Central Ambulance Service
NHS Foundation Trust

Council of Governors Meeting in Public

Agenda

Date: Monday 26 October 2026
Time: 1830 -2100
Venue: Newbury Education & Recruitment Centre, Bone Lane, Newbury, RG14 5UE / Teams

Item	Title	Lead	Source	Action	Time
1	Chair's Welcome and Apologies for Absence	Colin Dennis	Verbal	Noting	1830-1835
2	Declarations of Interest	Colin Dennis	Verbal	Noting	
3	Minutes of the previous meeting	Colin Dennis	Enc 1	Approval	
4	Action Log & Matters Arising	Colin Dennis	Enc 2	Noting	
Governor Development					
5	Clinical Operational Model	Duncan Robertson	Presentation Q&A	Noting	1835
Statutory Duties - Performance and holding to Account					
6	Chief Executive's Update	Simon Ashton/ Stuart Rees	Enc 3	Noting	1905
7	**Area of assurance** • Governor Priorities and areas of interest (pre-agreed) • Governor questions submitted 48 hours in advance of the meeting • Questions arising from Integrated Performance Report & Board Committee Escalation Reports For supporting information refer to: Integrated Performance Report; Board Committee Escalation Reports; and other information in the September 2026 Board in Public meeting papers at SCASpublic-Board-papers_03092026_v1.1.pdf	Non-Executive Directors	Enc 4	Assurance	1920
Council of Governors Operations					

8	Group Model / NHS Health Bill	Colin Dennis	Verbal	Noting	1955
9	Membership and Engagement Committee Update	Alan Weir	Enc 5	Discussion	2010
10	Appointment of Trust External Auditor	Becky Murray	Enc 6	Approval	2020
11	Annual Report and Accounts	Stuart Rees	Presentation	Noting	2030
Closing Business					
12	Any Other Business	Colin Dennis	Verbal	Noting	2040-2050
13	Questions from Members/Observers (Questions submitted via the Company Secretary mailbox 48 hours in advance of the meeting)	Colin Dennis	Verbal	Noting	
14	Review of meeting / actions	Colin Dennis	Verbal	Noting	
The next meeting of the Council of Governors will take place at 1830 on 20 January 2027 at Newbury Education & Recruitment Centre, Bone Lane, Newbury RG14 5UE / Teams					

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Minutes

Council of Governors Meeting in Public

10 June 2026

Governor's present	
David Wesson (DW)	Public Governor, Oxfordshire, Lead Governor (Teams)
Mike Appleyard (MA)	Public Governor, Buckinghamshire
Marina Bang (MB)	Public Governor, Oxfordshire
Adrian Black (AB)	Public Governor, Oxfordshire (Teams)
Rachael Cook (RC)	Staff Governor, 999 EOC
Anne Crampton (AC)	Appointed Governor (Teams)
Lloyd Day (LD)	Staff Governor, 999 Operations South (Teams)
David Drew (DD)	Public Governor, Hampshire
Jeremy Green (JG)	Community First Responder
Grahame Hoskin (GH)	Appointed Governor
Janet Lamont (JL)	Public Governor, Hampshire (Teams)
David Luckett (DL)	Public Governor, Hampshire (Teams)
Charles McGill (CM)	Public Governor, Hampshire, Deputy Lead Governor
Karen Sadler (KS)	Public Governor, Berkshire (Teams)
Alan Weir (AW)	Staff Governor, Corporate Services
Governor apologies	
Rebecca Brackwell-Slade (RBS)	Air Charities Partner Governor
Lynn Dove-Dixon (LDD)	Public Governor, Hampshire
Chris Jenner (CJ)	Staff Governor, PTS and Logistics
Tony Jones (TJ)	Public Governor, Berkshire
Mark Potts (MP)	Public Governor, Berkshire
Sandra Treacher (ST)	Governor, Rest of England
Governors not in attendance	
Ian Sayer (IS)	Staff Governor, 999 Operations North
Paul Kelly (PK)	Public Governor, Buckinghamshire
Tariq Khan (TK)	Staff Governor, NHS 111
Nathan Mounsey (NM)	Public Governor, Hampshire
Huw Pateman (HP)	Public Governor, Buckinghamshire
Directors/Others in attendance	
Colin Dennis (CD)	Group Chair
Harbhajan Brar (HB)	Non-Executive Director
Les Broude (LB)	Non-Executive Director
Mike McEnaney (MM)	Non-Executive Director
Ruth Williams (RW)	Non-Executive Director

Danny Hariram (DH)	Chief People Officer & Deputy Chief Executive Officer
Stuart Rees (SR)	Acting Chief Executive Officer
Becky Murray (BM)	Chief Governance Officer
Margaret Eaglestone (ME)	Membership and Engagement Manager
Caroline Morris (CM)	Director of Transformation
Susan Wall (SW)	Corporate Governance & Compliance Manager (minutes)
Other apologies	
Professor Sir Keith Willett CBE (KW)	Non-Executive Director & Chair
Gary Ford (GF)	Non-Executive Director
Ian Green (IG)	Non-Executive Director
Katie Kapernaros (KK)	Non-Executive Director

Item No.	Agenda Item
1.	**Chairs welcome & apologies for absence**
1.1	Colin Dennis (CD), Group Chair welcomed all attendees and noted the apologies received.
2.	**Declarations of Interest**
2.1	No new interests were declared.
3.	**Review of Minutes**
3.1	The minutes of the 04 March 2026 Council of Governors (CoG) meeting were approved as an accurate record.
4.	**Action Log and Matters Arising**
4.1	The one action from the previous meeting was confirmed as completed and closed.
5.	**Fit for the Future Programme Update**
5.1	Danny Hariram (DH), Chief People Officer and Deputy Chief Executive Officer presented an update on the Trust's transformation programme, "Fit for the Future", which aligned to the Trust Strategy and NHS strategic priorities: analogue to digital; hospital to community; and sickness to prevention. The programme continued to be structured around five pillars: • Clinical Effectiveness. • Digital Transformation. • Enabling Services. • People and Culture. • Partnerships and Sustainability.
5.2	<u>Fit for the Future - Year 1 Achievements (2025/26)</u>

	DH advised that: • 86% of planned milestones had been delivered. • Governance, operational resilience and foundations for long-term change had been strengthened. • Some key performance indicators had not yet been achieved and this included the Category 2 response time target (missed by two seconds). However positive progress had been made for future delivery.
5.3	<u>Clinical Effectiveness</u> Progress included: • Improvements in patient access and care pathways. • Improved 999 call answering within the national 10-second standard. • Increased Hear-and-Treat activity. • Introduction of a Single Point of Access. • Completion of operational restructuring. • Development of a joint clinical operating model with South East Coastal Ambulance Trust (SECAmb).
5.4	<u>Digital Transformation</u> Achievements included: • Windows 11 rollout. • Improved cyber security and network resilience. • Artificial Intelligence (AI) training pilots and development of a data-driven approach. • Computer Aided Dispatch (CAD) replacement programme had been paused and rescoped to support joint procurement with SECAmb.
5.5	<u>Enabling Services</u> Progress included: • Delivery of 138 new ambulances. • Continued electric vehicle rollout and development of the new Aylesbury workshop. • Improvements in fleet performance. • Estate improvements were now supported by an approved implementation plan.
5.6	<u>People and Culture</u> Progress included: • Co-creation of new Organisational Values and Behaviours. • Launch of Leadership Development Programmes and strengthened staff engagement arrangements (listening forums). • Sexual safety training and policy development. • Improvements made around staff wellbeing were yet to show in the Staff Survey results.
5.7	<u>Partnerships and Sustainability</u> Achievements included: • Delivery of a break-even financial position in 2025/26. • Achievement of 94% of planned savings. • Securing £3.8m external funding.

	• Development of the Business Case for creation of a group model with SECAmb.
5.8	DH outlined 2026/27 Fit for the Future programme priorities for Year 2.
5.9	<u>Clinical Effectiveness</u> • Joint clinical operating model. • Expanded virtual care. • Enhanced pathways and neighbourhood healthcare integration.
5.10	<u>Digital Transformation</u> • Joint CAD procurement. • Further development of data analytics capability and AI deployment.
5.11	<u>Enabling Services</u> • Fleet optimisation. • Estate strategy implementation and continued investment in sustainability infrastructure.
5.12	<u>People and Culture</u> • Cultural Leadership Building Trust Together programme. • Leadership development. • Recruitment and retention. • Wellbeing improvements, £250k NHS England wellbeing funding had been secured for newly qualified paramedics, students and volunteers.
5.13	<u>Partnerships and Sustainability</u> • Continued development of the group model and shared services opportunities.
5.14	The following points were raised by Governors and discussed: • The relationship of patient clinical outcomes alongside response time targets and measures to assess clinical effectiveness. • Cost benefits assessments and expected return on investment from transformation projects and programme initiatives. • Operational pressures, including increased low-acuity demand, external system pressures and the impact of hospital handover delays. • Wellbeing support available to staff, together with opportunities to strengthen preventative wellbeing initiatives. • The role of leadership development, recruitment, retention and organisational culture in supporting organisational performance and sustainability.
5.15	The Council **NOTED** the update.
6.	**Governor priorities and areas of interest**
6.1	Governors' priority questions submitted in advance of the meeting would be addressed under Item 8.

7.	**Chief Executive's Report (CEO)**
7.1	Stuart Rees (SR), Acting Chief Executive Officer, provided an update on the NHS Oversight Framework and Financial Recovery, highlighting: • Evidence was due for submission by 17 July 2026 relating to the Trust's financial recovery position and remaining Recovery Support Programme requirements to enable exit from the recovery support process. • National Oversight Framework Quarter 4 ratings were expected to be published shortly. • Continued improvements had been achieved, although Staff Survey results and financial regulator measures continued to influence ratings. • The Trust achieved a break-even position during 2025/26.
7.2	The Council **NOTED** the update.
8.	**Area of assurance:** • **Governor priorities and areas of interest** • **Integrated Performance Report** • **Board Committee Escalation Reports**
8.1	Non-Executive Directors provided responses and assurance to the Governor priorities and areas of interest questions.
8.2	<u>Fuel Costs and Supply Resilience</u> Assurance was provided that fuel costs continued to be actively monitored through the Finance and Performance Committee. Fuel supply resilience formed part of the Trust's business continuity planning and priority fuel access arrangements were in place.
8.3	<u>Alternative Fuels and Electric Vehicles</u> Governors were advised that the Trust continued to progress electric vehicle adoption (8 vehicles being trialled) and charging infrastructure. Funding had been secured for electric vehicle infrastructure development, although significant further investment would be required across the estate.
8.4	<u>Group Model and Senior Leadership Changes</u> Assurance was provided that both SCAS and SECAmb would continue to operate independently whilst collaborative opportunities were developed through the emerging group model. The anticipated benefits included shared leadership expertise and joint strategic initiatives.
8.5	<u>Community First Responders (CFRs)</u> Discussion focused on opportunities to maximise the contribution of CFRs and strengthen the Operational Strategy supporting volunteer deployment. It was confirmed that this area would continue to be developed within the Operations Directorate. SR advised that recent operational restructures and leadership changes would support the further development of this area.
8.6	<u>Vehicle Procurement and Fleet Evaluation</u>

	Assurance was provided that operational staff were involved in evaluation and feedback regarding vehicles and equipment. There is a national procurement route for vehicles. However, due to concerns regarding the performance of the current recommended vehicle, future procurement arrangements would seek to avoid reliance on a single supplier.
8.7	<u>Fleet Availability and Vehicle Off Road (VOR) Performance</u> The Finance and Performance Committee received regular scrutiny reports on fleet performance. It was noted that vehicle availability rather than VOR percentage alone would become a more meaningful performance measure and additional indicators were being developed which would be reported through the Finance and Performance Committee. The new Aylesbury workshop would improve maintenance capacity and reduce downtime.
8.8	<u>Auxiliary Vehicle Charging</u> Progress had been made, and work was ongoing, in compliance with vehicle charging procedures improving issues related to vehicles not being connected to charging systems when not operational.
8.9	<u>Electric Vehicle Infrastructure</u> Governors were advised that the Trust's plans to expand electric vehicle charging infrastructure across its estate had been supported by £2 million of NHS funding secured during the previous financial year. The estimated cost of delivering charging infrastructure across the entire Trust estate was approximately £20 million. It was also noted that funding had already been secured for initial charging infrastructure developments.
8.10	The Council **NOTED** the responses and assurance provided.
9.	**Membership and Engagement Committee (MEC) update**
9.1	The Council received the MEC update report, discussion included: • Ensuring balanced governor representation across constituencies and committee membership arrangements. • It was confirmed that efforts were made to achieve broad geographical representation from across the Trust footprint.
9.2	The revised Membership and Engagement Committee Terms of Reference were presented and following consideration approved by the Council.
9.3	The Council **APPROVED** the Membership and Engagement Committee Terms of Reference and **NOTED** the update.
10.	**Any Other Business**
10.1	No additional items of business were raised or discussed.
11.	**Questions from Members/Observers**
11.1	There were no questions from members/observers.

12.	**Review of meeting effectiveness**
12.1	CD thanked members for their contributions and encouraged continued focus on strategic assurance rather than operational detail within Council meetings.
13.	**Date, Time, and Venue of next Meeting**
13.1	26 October 2026 Newbury Education & Training Centre, Bone Lane, Newbury RG14 5UE / Teams 18:30 – 21:00

South Central Ambulance Service NHS Foundation Trust

Council of Governors ACTION LOG						Status
Minute Ref:	**Agenda Item**	**Action**	**Owner**	**Due Date**	**Update**	
Meeting date: 10 June 2026						
		No actions arising				

Council of Governors 26 October 2026	
Title	**Chief Executive Officer's Report**
Report Author	**Stuart Rees, Acting Chief Executive Officer**
Executive Owner	**Stuart Rees, Acting Chief Executive Officer**
Agenda Item	**6**
Governance Pathway: Previous	Trust Board 03.09.26
Governance Pathway Next Steps	n/a

1. Purpose

The CEO report provides an update on internal trust matters, including organisational performance and seeks to bring to the attention of the Board areas to note relating to system-wide and national developments.

2. Executive Summary

National Context

NHS England NHS Oversight Framework (NOF).

The 2026/27 NOF has been published since my last report to the Board. The framework sets out a number of performance measures that alongside the Provider Capability Assessment, which is the subject of a separate item on the board agenda, informs the segmentation for each Trust and the level of oversight from NHS England (NHSE).

The NOF metrics that apply to ambulance services are regularly reported to the Board in the Integrated Performance Report (IPR), via the Fit for the Future reporting framework and the suite of other regular reports that the Board receives. As at quarter 4 of 2026/27 the Trust is in segment 3, largely attributable to metrics derived from the annual Staff Survey.

Trust Performance

Since my last report, the Trust has been operating under sustained operational pressure, in the main due to the heatwaves that resulted in unprecedented demand both on our

services and those of our partner acute hospitals. Our ability to respond to Category 2 calls was severely impacted by the increase in demand and the acuity of patients in need of our services, coupled with staff sickness, to such an extent that we called a Critical Incident and a Major Incident, as did many of our partner organisations cross the region.

These are not steps that we take lightly as they require diversion of resource to enable frontline services to meet demand, which detracts from other necessary activity across the Trust and negatively impacts our financial position. The safety of patients was however at the forefront of our decision taking.

As a result of the deterioration in our Cat2 response times, we have now been placed in escalation level 1 for Quarter 2 following NHSE's Operational Performance Review, as confirmed by the attached correspondence. We have developed a Recovery Plan to return our Cat2 performance to planned levels, which has required investment and whilst this was approved by the Board, there is a consequent impact on our financial performance creating additional savings requirements. The Board will continue to monitor performance against our Recovery Plan, and we report on a fortnightly basis to NHSE. Our Cat2 mean response time in July was 31.15 against a target of 27.30. Further detail is contained within the IPR.

This has been a difficult period for the organisation, and I would like to place on record my thanks to our frontline teams for their hard work and dedication during the extreme heat and to corporate teams and departments who have provided support to enable our crews to respond to patient need. On behalf of the Board, I would also extend our thanks to Yorkshire Ambulance Service who provided us with support during this period in the form of ambulances and crews.

The financial position at the start of 2026/27 was a challenging one and our Operational Plan was finely and carefully balanced to deliver the best performance and service quality we could within our budgets. As referenced above, the sustained operational pressure has driven the need for additional investment, which will mean that we will need to continue to make difficult decisions with regards to how we deploy our resources. Further detail is provided in the finance report which is on the agenda.

Fleet

We continue to take delivery of new fleet and July also saw the opening of our 3rd workshop in Aylesbury. This is an important milestone in our Fleet Improvement Plan as it will enable us to undertake more preventative maintenance as well as increasing our capacity to repair vehicles when faults develop. Although we are not yet meeting our Vehicles Off the Road Target (VOR), Fleet availability is less challenging, and we are developing more sophisticated measures to monitor the availability of vehicles to meet demand.

Thanks are extended to our Director of Fleet and his team and to colleagues in estates for their hard work and efforts to mobilise the workshop.

Collaborative Working

Alongside addressing immediate operational and financial pressures, the Trust continues to progress discussions regarding the development of collaborative working. The rationale for exploring this approach is to strengthen resilience, improve operational effectiveness, share scarce expertise and support greater efficiency across participating organisations whilst maintaining local accountability and service delivery.

Over recent months, work has focused on identifying opportunities with these collaboratives. Whilst this work remains at an early stage, it aligns with the wider NHS direction of travel towards greater provider collaboration and supports our ambitions within Fit for the Future.

The Board will receive further updates as the programme develops, including consideration of benefits, risks, governance arrangements and implications for our people and stakeholders.

People & Culture

NHSE has published NHS Staff Standards which set national minimum employment requirements to improve staff experience and outlines actions that employers must take and what staff can expect. Much of the content already forms part of our People & Culture workstreams within our Fit for the Future Improvement Plan and within our refreshed values and behaviours framework, but we have taken a baseline assessment of our current position against the standards and we will monitor our progress at the Board via the People & Culture Committee.

- **Sickness Absence**

As referenced in the Operational Performance section of this report, we continue to see sickness absence exceed our target; sickness absence in July was 6.7% against a target of 6.2%. We continue to focus on effective management of sickness absence and to provide our managers with the tools they need to support our people back to work as part of our People & Culture workstream.

3. Areas of Risk

Areas of risk have been highlighted throughout this paper and the risks around our financial position, operational performance and people and culture are linked to our strategic themes and the corresponding Board Assurance Framework (BAF) risks.

4. Link to Strategic Theme

As indicated above, this paper links to all our strategic themes.

5. Link to Board Assurance Framework Risk(s)

This paper links to the following BAF risks:

- (14) Quality performance
- (19) Efficiency and productivity
- (24) Finance
- (22) Staff Engagement
- (25) Collaboration

6. Quality/Equality Impact Assessment

Not required for this paper but elements of the work referred to will be subject to QIA/EIA as appropriate.

7. Recommendations

The board is asked to **NOTE** the update and to **RAISE** any questions arising.

For Assurance		**For decision**		**For discussion**		**To note**	**x**

NHS England

To: Stuart Rees
Interim Chief Executive
South Central Ambulance Service

CC: Mark Ainsworth
Executive Director of Operations
Anne Eden
Regional Director (South East)
Maggie MacIsaac
Chief Executive
Hampshire and Isle of Wight ICB

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10 July 2026

Dear Stuart

Thank you to you and your teams for your continued commitment to improving operational performance across your organisation. We recognise the sustained pressures facing ambulance services, including increasing demand, response performance, ambulance handover delays and wider system pressures, alongside the continued focus on delivering safe, timely and high-quality care for patients.

During 2026/27, Operational Performance Reviews (OPRs) continue to provide the regional framework for operational oversight, supporting earlier identification of delivery risk, proportionate escalation and targeted improvement support. The previous national tiering framework has now been replaced by the revised Providers of Concern process, with Operational Performance Reviews established for all acute and ambulance providers.

OPRs provide a structured mechanism for assessing provider-level delivery against agreed operational plans, with a particular focus on pace, trajectory and emerging risk. The reviews are intended to move beyond retrospective performance reporting and support earlier intervention where risks to delivery emerge. OPRs bring together operational performance, improvement activity and forward-looking risk assessment into a single oversight process, enabling proportionate escalation and targeted support where required.

Providers are assigned to escalation Levels 1–3, where:

- Level 1 represents the highest level of operational performance risk
- Level 3 represents the lowest level of operational performance risk

Assessments remain dynamic and may change should operational concerns escalate during the quarter. Formal review of escalation status will take place in September to inform Q3 arrangements. It is anticipated that community and mental health providers will be incorporated into this process as Q2 progresses.

Supporting guidance outlining the OPR process, escalation framework and submission requirements will be issued alongside this letter.

This letter confirms that following regional review of operational performance and delivery risk, **South Central Ambulance Service** has been assigned to **Escalation Level 1** for Quarter 2 of 2026/27.

OPRs will cover all core operational delivery areas, as part of this process providers will be expected to demonstrate:

- Delivery against agreed operational trajectories and improvement plans.
- Progress against agreed improvement actions and milestones.
- Clear oversight of emerging risks and early warning signals.
- Confidence in delivery over the coming 4–8 weeks.
- Support required from system, regional or national colleagues to mitigate operational risks.
- Responses to the Key Lines of Enquiry (KLOEs) set out in the national UEC meeting packs.

Please ensure this letter is shared with your Trust Board and relevant governance forums. Should you have any questions regarding the OPR arrangements or escalation framework, please do not hesitate to contact the regional team.

Yours sincerely



Dan Bradbury
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Council of Governors 26 October 2026

Title	**Governor Priorities and Areas of Interest**
Report Author	**David Wesson, Lead Governor**
Executive Owner	**Becky Murray, Chief Governance Officer**
Agenda Item	**7**
Governance Pathway: Previous	n/a
Governance Pathway Next Steps	n/a

1. Purpose

This report outlines the current Governors' priorities and areas of interest for Non-Executive (NED) response.

2. Executive Summary

Following a pre-meeting of the Council of Governors, the Governors established questions and areas of priority they would like to seek assurance. The questions are aligned with the Trust Strategic Themes:

	Clinical Effectiveness
1	**Community First Responder (CFR) Strategy** We commend the development of the three year CFR strategy - are the NEDs confident that the plan is deliverable in terms of both volunteer numbers and the 24/7 function of the Indirect Resource Desk to give the best impact for patient care and cost effectiveness of these resources?
2	**GoodSAM Service** Are the NEDs adequately sighted on the costs and benefits of the implementation and operation of the GoodSAM app, in terms of Potential positive patient outcomes but also for the monitoring of safety of volunteers and members of the public alerted to incidents by the system and have there been any significant incidents as a result of the dispatch of GoodSAM responders?

3	**Safeguarding Arrangements** Can we have assurance from the NEDs that the processes around safeguarding interviews meet current best practice guidelines?
4	**Thirlwall Report** Can the NEDs confirm that they have assurance that the Trust has received, understood and has measures in place to mitigate all of the actions raised in the Thirlwall Report?
	People and Culture
5	**Workforce Development and Career Progression** Are the NEDs assured that the current workforce plan and strategy reflects our ambition to be an employer of choice, particularly for internal candidates wishing to progress, particularly those looking to access pathways to paramedic development?
	Enabling Services
6	**Estates Strategy and Value for Money** Are the NEDs assured that the Trust is getting best value from the estate's portfolio and whether the proposed strategy adequately reflects the needs of future service delivery?
7	**Fleet Availability Performance** Are the NEDs now sighted of the new fleet availability measure? At the June CoG we were told that the new fleet availability measures would come to the next meeting. The September Board papers say the Fleet Availability metric is now in the process of being introduced. Could we seek assurance that it will be included in the October CoG papers, with the trend, target and threshold needed to interpret it?
	Partnerships and Sustainability
	Aspects of the CFR Strategy and GoodSAM Service contribute to partnership working and community engagement.

3. Areas of Risk

The purpose of the report is to seek assurance on the topics raised and that there is no risk and compliance impact.

4. Link to Strategic Themes

As detailed above.

5. Link to Board Assurance Framework Risk(s)

The purpose of the report is to seek assurance on the topics raised and that there is no risk and compliance impact.

6. Quality/Equality Impact Assessment

The purpose of the report is to seek assurance on the topics raised and that there is no impact on any groups of individuals.

7. Recommendations

NEDs to respond to the assurance topics raised by the governors.

For Assurance		**For decision**		**For discussion**	**x**	**To note**	

Council of Governors 26 October 2026

Title	**Membership and Engagement Committee Update**
Report Author	**Margaret Eaglestone, Stakeholder and Engagement Manager**
Executive Owner	**Gillian Hodgetts, Director of Communications, Marketing and Communications**
Agenda Item	**9**
Governance Pathway: Previous	
Governance Pathway Next Steps	Council of Governors - for discussion and to note

1. Purpose

This report provides an update on the Membership and Engagement Committee (MEC), including its refreshed membership, the key items considered at the meeting on 14 October 2026, and current membership and public engagement activity.

2. Executive Summary

The Membership and Engagement Committee met on 14 October 2026 with a refreshed membership drawn from Public, Staff, PTS and Logistics, Community First Responder and Partner Governors. The meeting considered neighbourhood health, upcoming public engagement activity, and the principles and future direction of engagement.

Engagement activity has remained busy across the South Central area. Governors have continued to support events where available, while targeted work is focusing on communities experiencing deprivation, groups that are underserved, and areas with high demand for our services. Community Resilience Grant funding is supporting additional engagement and resources.

The Committee will continue to support the Trust's approach to meaningful membership and public engagement, including consideration of how engagement should develop in response to the NHS long-term direction and the increasing focus on neighbourhood health and reducing health inequalities.

The current Membership and Engagement Committee membership is set out below. A Deputy Chair will be appointed from the members below.

Governor	Role / constituency
Alan Weir	MEC Chair, Staff Governor
Marina Bang	Public Governor
David Drew	Public Governor
Mike Appleyard	Public Governor
Chris Jenner	PTS and Logistics Governor
Jeremy Green	CFR Governor
Nathan Mounsey	Public Governor
Lynn Dove-Dixon	Public Governor
Sandra Treacher	Public Governor, Rest of England
Becca Brackwell-Slade	Partner Governor

The Committee considered the following items:

- **Neighbourhood Health** – James Roach, Director of Neighbourhood Health, NHS Hampshire and Isle of Wight, presented an overview of emerging neighbourhood health plans and the shift towards more community-based care under the NHS 10-Year Health Plan. The Committee discussed opportunities for SCAS to contribute to these developments and strengthen partnership working, including participation in the Neighbourhood Health Knowledge Hub.

- **Governor Engagement Update** – The Committee received updates on recent governor engagement activities, including community events, CPR and defibrillator awareness initiatives. Members discussed public confidence in using defibrillators and the importance of increasing awareness through community engagement.

- **Deputy Chair Appointment** – The Committee discussed the appointment of a Deputy Chair to support the Chair and provide cover when required. Expressions of interest will be invited from Committee members.

- **Your Health Matters – Public Talk** – The Committee received an update on the forthcoming online public talk on 20 October, 6:30–8:00 pm, covering how to access the right care through 999 and NHS 111, what happens when contacting ambulance services, and practical lifesaving skills, including CPR and defibrillator awareness. Governors were encouraged to promote the event through their networks.
  Public Talk – Right Care, first time, for our patients: What to do in an emergency | South Central Ambulance Service

- **The Future of Engagement** – The Committee considered the principles of public engagement and the implications of the NHS 10-Year Health Plan for the Trust's future approach. Members discussed the importance of ensuring that patient, member and community voices inform service development, particularly in addressing health inequalities. A working group will be established to consider future engagement options to contribute to the development of a new SCAS engagement strategy, with expressions of interest invited from Committee members. Governors were also encouraged to consider questions for the Council of Governors on the future of engagement and how the Trust can ensure meaningful public involvement in its plans.

3. Areas of Risk

No new specific risks are identified through this update. Continued effective membership and engagement supports the Trust to understand community needs, maintain relationships and reduce the risk of engagement activity not reaching underserved communities.

4. Link to Strategic Theme

Enabling Services

5. Link to Board Assurance Framework Risk(s)

SR25 - Collaboration

6. Quality/Equality Impact Assessment

A separate Quality/Equality Impact Assessment is not required for this update. The activity described supports equality objectives by targeting engagement towards communities experiencing deprivation and groups that may be underserved.

7. Recommendations

The Council of Governors is asked to discuss and note the Membership and Engagement Committee update, including the refreshed committee membership and current engagement activity.

- Discuss a report/paper and establish what further action is required

For Assurance		**For decision**		**For discussion**	**x**	**To note**	**x**

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Council of Governors Meeting 26 October 2026

Title	**Appointment of Trust External Auditor**
Report Author	**Becky Murray, Chief Governance Officer**
Executive Owner	**Becky Murray, Chief Governance Officer**
Agenda Item	**10**
Governance Pathway: Previous	Business Sub-Committee - 10/08/26 EMC 25/08/2025 and 01/09/2026 Audit Committee – 10.09.26
Governance Pathway Next Steps	None – Council of Governors approval

1. Purpose

To present a proposal to appoint the Trust's External Auditor, which is the responsibility of the Council of Governors.

2. Executive Summary

In line with the Foundation Trust Constitution, appointment of the Trust's External Auditor is subject to the approval of the Council of Governors.

This paper seeks the approval of the Council of Governors to make a direct award of a 2-year contract, to the Trust's existing external auditors, Azets. A competitive procurement exercise will then be undertaken for future audit services. The rationale for this is twofold, as it allows the Trust to:

- (a) Align with the SECAmb external audit contract and undertake a joint procurement exercise
- (b) Implement the Trust's new financial ledger system which is currently underway

Whilst the alignment with SECAmb reflects the move to a Group Model and could result in cost savings, the implementation of the finance ledger is a significant transformation programme that will require substantial finance team resources and introduce changes to financial reporting processes, controls and audit requirements. The proposed two-year contract award is intended to provide continuity and minimise operational risks during this period of change, and also represents the best value for money.

The Trust has a statutory obligation to appoint external auditors to provide independent assurance over its annual financial statements and governance arrangements. Azets, the incumbent auditor, has developed extensive knowledge of the Trust's financial systems, governance framework and control environment, including its existing GP Dynamics ledger. Retaining the current auditor during the ledger transition would reduce the disruption

associated with onboarding a new provider, support timely completion of statutory audits and help maintain stability in financial reporting and assurance processes.

A number of options were considered and for the reasons outlined above, the preferred option, which was supported by the Executive Management Committee and the Audit Committee, is a two-year contract award to Azets. The cost of the two-year award is a saving of £9k per annum on the current budget.

3. Areas of Risk

There are no risks associated with making a direct award to the current supplier as this is permissible within procurement legislation, represents good value for money and mitigates the risks outlined around finance team capacity during the finance ledger implementation. The risk arises from not having an External Audit function appointed and Council of Governors' support of the 2-year contract proposal outlined in this paper mitigates this risk**.**

4. Link to Strategic Theme

This paper links to our Partnerships and Sustainability strategic theme.

5. Link to Board Assurance Framework Risk(s)

This paper links to our SR7- Sustainability risk

6. Quality/Equality Impact Assessment

Not required for this paper

7. Recommendations

The Council of Governors is asked to APPROVE the direct award of a 2-year contract to Azets.

For Assurance		**For decision**	**x**	**For discussion**		**To note**	