



**Scottish
Ambulance
Service**

Taking Care to the Patient



At a Glance

Annual Review 2016/2017

Saving More Lives, Improving Patient Outcomes

➔ During 2016/17, we continued to put the patient and the delivery of high quality clinical care by our staff at the heart of our work. Good progress is being made: we are saving more lives than ever before, treating more patients at home where they want to be cared for, and improving staff experience, in the context of rising demand and patient expectations, and budget pressures.



In November, we began piloting the first phase of a new response system which aims to save more lives and improve the quality of care for our patients. The new model has been developed following the most extensive clinically-evidenced review of its kind ever undertaken in the UK, with nearly half a million calls examined, and is the first major change to the time-based targets system since 1974. Patients with immediately life-threatening conditions, such as cardiac arrest, are prioritised and receive the fastest response. In less urgent cases, our call handlers may spend more time with patients to better understand their health needs and ensure they are sent the most appropriate resource for their condition.

While the introduction of the new clinical response model in November coincided with a period of high demand during winter, the percentage of

patients resuscitated following an out-of-hospital cardiac arrest is increasing and conveying resources are now being sent more frequently to patients likely to need to be taken to definitive care. It is anticipated that the model will deliver further improvements in responses to patients.

We have more to do and are implementing further phases of the model. We recognise that we cannot achieve our objectives in isolation and are working more closely with our patients, carers, communities, public and voluntary agencies, other NHS boards, with health and social care partnerships and, of course, with our staff to keep improving the care experience of our patients. All of these achievements are against a backdrop of sound financial planning, management and performance, with all of our financial targets being achieved.

Our 2016/17 Activity



Calls received:

over 1.4 million



SCOTSTAR retrievals undertaken:

1,653



A&E incidents responded to:

740,637



Air ambulance service missions flown:

3,543



Planned patient journeys delivered:

778,070



Specialist operations responses:

7,784

Progress Towards Strategic Objectives

Our Clinical Services Transformation Programme



New Clinical Response Model launched in **November 2016**



70.4% of patients in cardiac arrest received a response within 8 minutes



95% of patients likely to need hospital care are being sent the correct response first time

Scheduled Care Service



Punctuality standards continue to be maintained



Continually reviewing Patient Needs Assessment processes with input from patient and public representation



Reviewing shift patterns to better align to the needs of patients

Our Patient Experience



Decrease in complaints and increase in concerns in 2016/17, following active work in seeking feedback



Framework created to address themes of patient feedback



Complaints handling compliance improved to **70%**



33% reduction in complaints or concerns regarding clinical assessment

Our Technology



£78.2 million investment committed to our fleet by 2020, with **76** new Accident and Emergency ambulances, **50** new Patient Transport ambulances and **22** new Paramedic Response Vehicles responding to our patients in 2016/17



Ambulance in-cab technology replaced in over **500** vehicles



Specification and **procurement complete** for phase 2 development of paramedic patient app

Our Workforce

8%

increase in iMatter staff engagement survey completion rate

68%

overall 2016/17 staff engagement score

254

Technicians recruited

193

Paramedics trained

82

Specialist Paramedics recruited with **51** in training

Hear, See Treat and Refer



Rates of 'See and Treat' and 'Hear and Treat' increased to **31.2%** against a standard of 28%, meaning more people who called 999 received a more tailored response to their health needs within their own communities, thereby avoiding an unnecessary trip to hospital



Over **100,000** patients were safely treated in their community or referred to a more appropriate service for their needs



Working with partners to develop, establish and improve local treatment pathways, with particular focus on falls, respiratory conditions and mental ill health

Out of Hospital Cardiac Arrest

10% increase in patients arriving at hospital with a pulse following a cardiac arrest (ROSC)

Community First Responder schemes increased to **138**, with more than **1,500** volunteers retrained with up to date developments

'Registration to Resuscitation' campaign launched in March 2017 – **1,108** publically accessible defibrillators are registered with the Scottish Ambulance Service so far

Improvements to Major Trauma

Trauma Desk established as part of Specialist Services in Ambulance Control Centre (ACC) to facilitate effective trauma support 24/7

New trauma kit rolled out to all frontline staff

Working with partners to support the development of the Scottish Trauma Network

Performance Against Standards

H1: Achieve a return of spontaneous circulation for VF/VT patients on arrival at hospital

Standard: >35% 2016/17: 40.3%

10% improvement year on year on patients arriving at hospital with a pulse.

H2: % of cardiac arrest patients responded to within 8 minutes

Standard: 80% 2016/17: 70.4%

We saw a slight reduction in performance year on year, reflecting an increase in demand and pressures on the wider system. While the ROSC figure above demonstrates that we conveyed more patients in cardiac arrest to hospital with a pulse, thereby improving patient outcomes, we reviewed nearly half a million calls and subsequently introduced a new response model in November 2016 to help ensure we meet the needs of all patients with the right response within a timeframe appropriate to their clinical presentation.

H3A: % of Category A incidents responded to within 8 minutes (1 April to 20 November 2016 – prior to introduction of new response model pilot)

Standard: 75% 2016/17: 66.6%

H3B: % of immediately life threatening incidents responded to within 8 minutes (21 November to 31 March 2017 - post introduction of new model response pilot)

Standard: 75% 2016/17: 63.8%

The introduction of the new clinical response model in November coincided with a period of high demand during winter, a period when the whole healthcare system was experiencing ongoing and significant pressures. The percentage of patients resuscitated following an out-of-hospital cardiac arrest since November is increasing and conveying resources are now being sent more frequently to patients likely to need to be taken to definitive care. It is anticipated that the model will deliver further improvements in responses to patients.

H4: % of Category B incidents responded to within 19 minutes (1 April to 23 November 2016)

Standard: 95% 2016/17: 79.3%

Since the introduction of the new response model pilot, there are a range of care bundles for incidents which are not immediately life-threatening. For performance standards H1, 2, 3A, 3B and H4, the response model introduced in November 2016 will help ensure patients with immediately life-threatening conditions, such as cardiac arrest, are prioritised and receive the fastest response.

T3: % of recorded use of Peripheral Vascular Cannula (PVC) insertion care bundle

Standard: 78% 2016/17: 82.5%

Standards were exceeded for hand hygiene and National Cleaning Services Specification and an Improvement Action Plan has been developed to support 2017/18 compliance.

E2: Reduce sickness absence to a target of 5%

Standard: <5% 2016/17: 7.6%

Sickness absence remains at same level as previous year. Promoting attendance remains a priority and is supported through the delivery of our Employee Wellbeing Delivery Plan.

Finance

All three 2016/17 obligatory financial targets met
2016/17 savings of

£9,897,000
delivered.