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**Public Board Meeting**

**26 July 2023**

**Item No 10**

**THIS PAPER IS FOR DISCUSSION**

**PERSON CENTRED CARE UPDATE**

<b>Lead Director</b>	Emma Stirling, Director of Care Quality and Professional Development
<b>Author</b>	Mark Hannan, Head of Corporate Affairs and Engagement Alan Martin, Patient Experience Manager
<b>Action required</b>	The Board is asked to discuss and note the paper.
<b>Key points</b>	<p>This paper provides an update of our patient experience activity and highlights our latest data on compliments, our Patient Focus Public Involvement work as well as complaints, their themes and actions to address them.</p> <p>An update is also provided on cases with the Scottish Public Services Ombudsman (SPSO).</p>
<b>Timing</b>	An update is presented bi-monthly to the Board.
<b>Associated Corporate Risk Identification</b>	Risk 4638 – wider system changes and pressures
<b>Link to Corporate ambitions</b>	<p>We will</p> <ul style="list-style-type: none"><li>• Provide the people of Scotland with compassionate, safe and effective care where and when they need it</li><li>• Work collaboratively with citizens and our partners to create healthier and safer communities</li><li>• Innovate to continually improve our care and enhance the resilience and sustainability of our services</li></ul>
<b>Link to NHSScotland's quality ambitions</b>	Person centred care is delivered when health and social care professionals work together with people who use services, tailoring them to the needs of the individual and what matters to them. The Service's Person Centred Health and Care Plan promotes patient and staff participation in the development of services and continuous improvement of the experience of patients and of staff.

<b>Benefit to Patients</b>	Patient and carer feedback involvement in service development helps ensure services meet patient needs. Feedback helps drive continuous improvements to services and evidence that service developments are driving anticipated improvements.
<b>Equality and Diversity</b>	The Service works with a wide range of patient and community groups to help ensure that the feedback gathered is representative of communities across Scotland. Patient feedback is closely linked to the Service's Equality Outcomes work.



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**SCOTTISH AMBULANCE SERVICE BOARD**

**PATIENT EXPERIENCE**

**EMMA STIRLING, DIRECTOR OF CARE QUALITY & PROFESSIONAL  
DEVELOPMENT**

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## **SECTION 1: PURPOSE**

This paper covers the period between 1 April 2023 and 7 July 2023. It provides an update on trends, themes and mitigating actions from patient and carer feedback.

The paper also provides data on our performance against the complaints handling standard, cases which are being considered by the Scottish Public Service Ombudsman (SPSO) and the outcome of these cases.

## **SECTION 2: RECOMMENDATIONS**

The Board is asked to discuss and note the paper.

## **SECTION 3: EXECUTIVE SUMMARY**

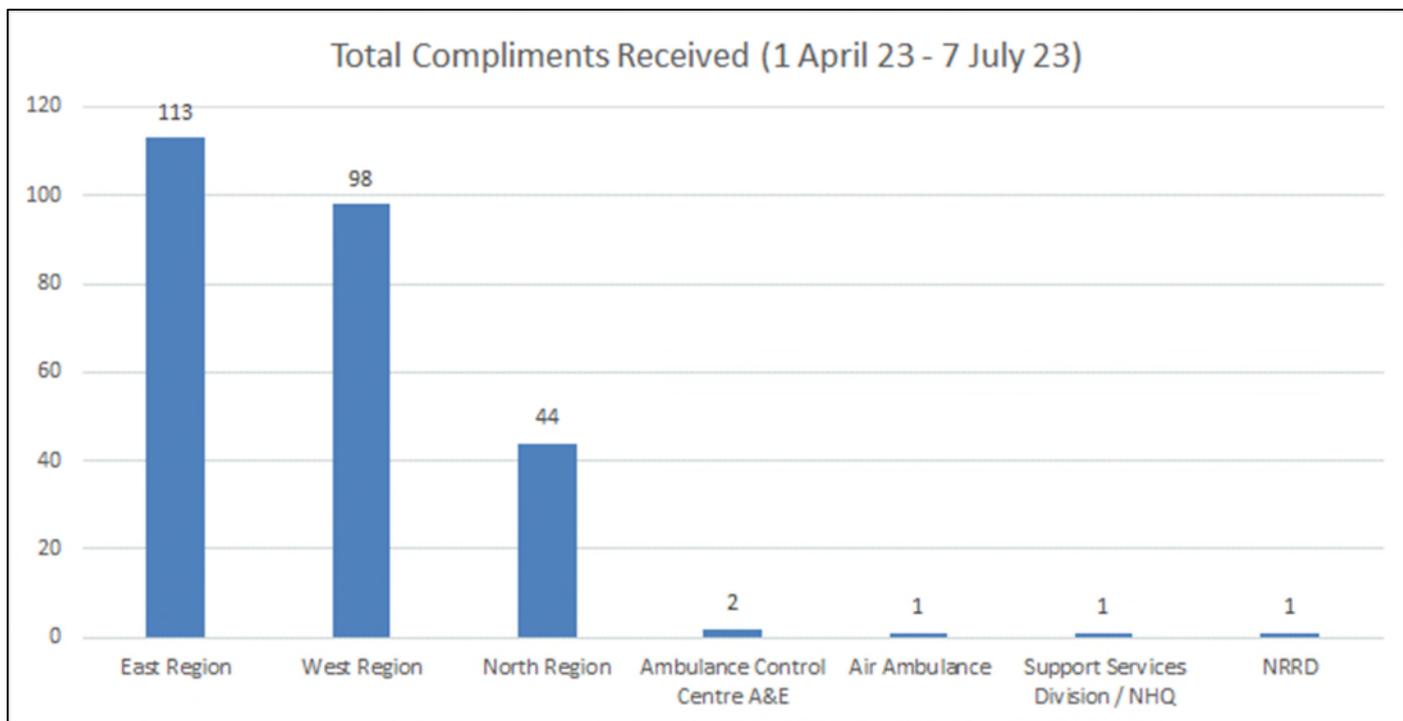
The Service actively seeks feedback on its services in order that it can continue to make improvements. We have many ways of gathering feedback – face to face, patient forums, online portals, complaint and concern channels.

Doc: 2023-07-26 Person Centred Care	Page 3	Author: Patient Experience Manager
Date 2023-07-26	Version 1.0	Review Date: September 2023

## Feedback analysis

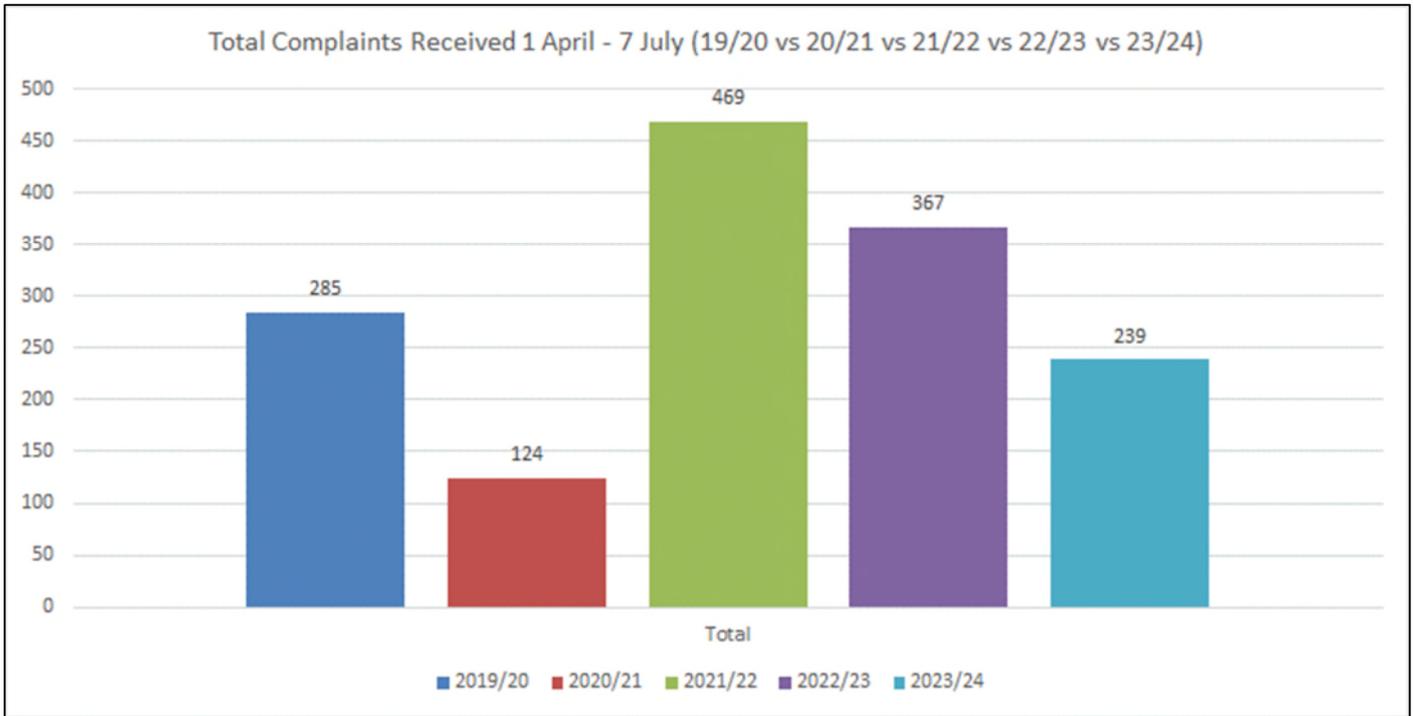
### Compliments

Compliments received from sources other than social media are logged and actioned on the DATIX system. Between 1 April 2023 and 7 July 2023, a total of 260 compliments have been received. East Region received around 43.5% of these compliments. The graph below shows the compliments received by region for the financial year so far.



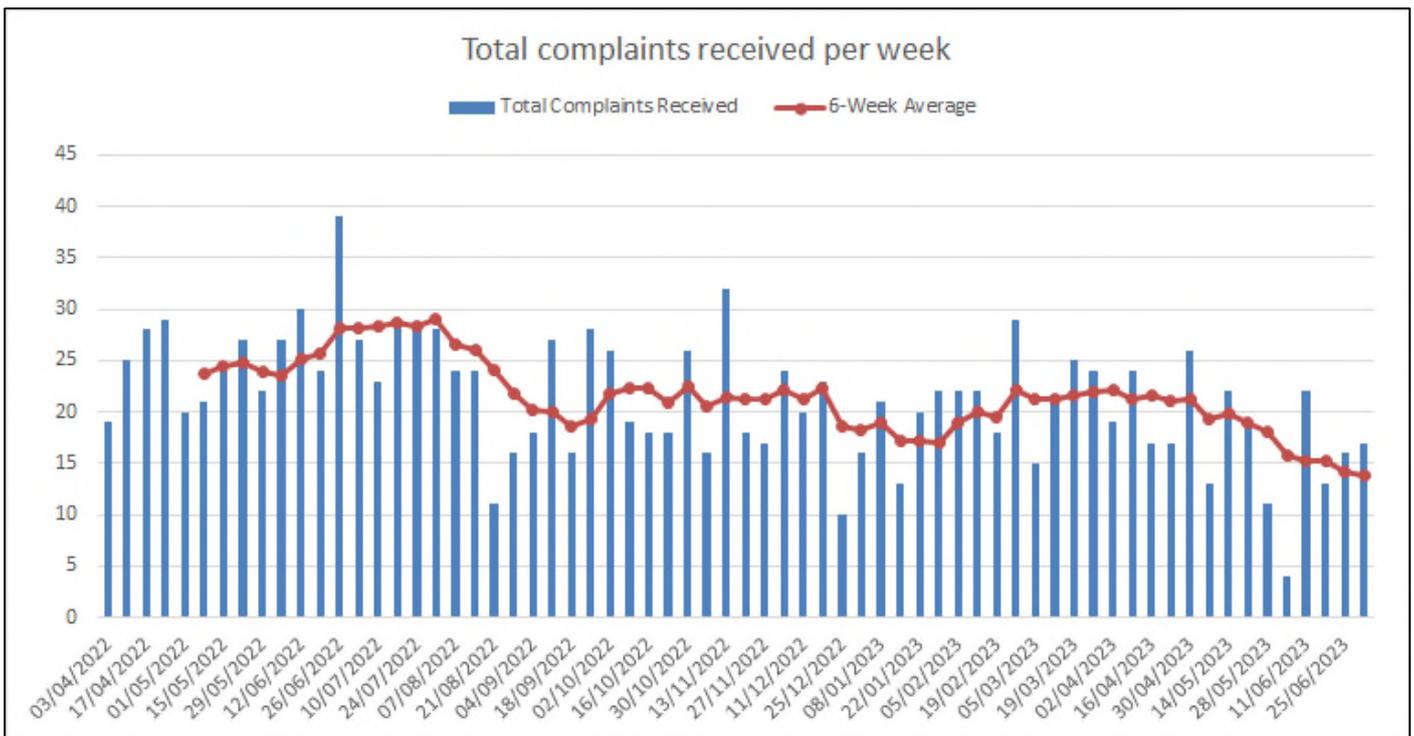
### Complaints Data

Between 1 April 2023 and 7 July 2023, a total of 239 complaints have been received. This shows a decrease of 128 (34.9%) complaints in comparison to 2022 and a reduction of 230 (49%) in comparison to 2021. In comparison to the pre-pandemic year of 2019, it is also positive to see that there has been a reduction of 46 (16.1%).

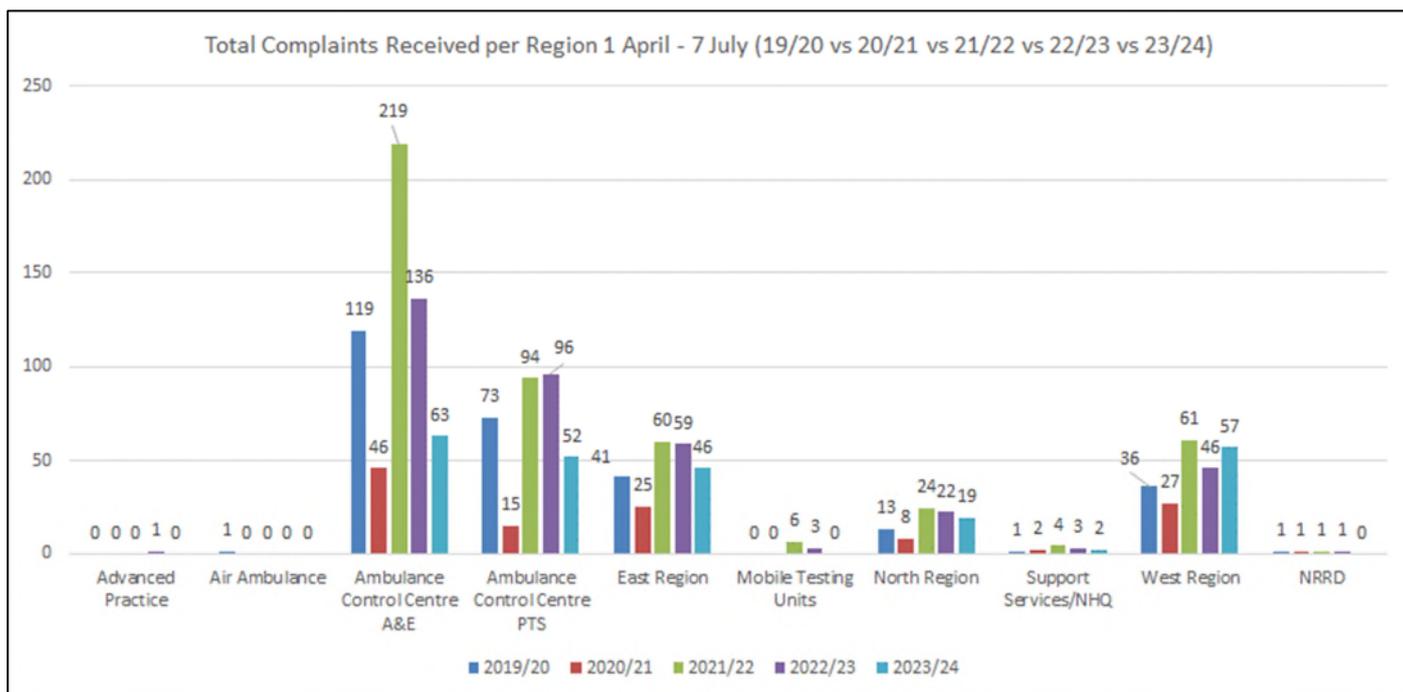


As previously stated, the challenges the Service has faced since the beginning of the pandemic have been significant and this is reflected in the above data. Whilst there continues to be system-wide challenges, the volume of complaints being received is now even lower than it was pre-pandemic. This underlines the efforts made by staff across the Service to continuously deliver the highest quality of care for the people of Scotland.

The chart below illustrates the weekly volume of complaints being received. As is illustrated, data shows the lowest 6-week average for complaints over the last 14 months.



The chart below shows the distribution of complaints throughout the Service. In recent years, the majority of complaints have been owned by the Ambulance Control Centre (A&E and PTS) but these figures are now levelling off, with the gap reducing in comparison to the previous year.



## Complaint Themes

Of the 239 complaints received, the 3 most common themes are:

1. Attitude and Behaviour – 72 complaints (30.13% of the total, compared to 22.3% in the last paper)
2. Delayed Response – 27 complaints (11.3% of the total, compared to 18.6% in the last paper)
3. Triage/Referral to NHS 24 – 25 complaints (10.5% of the total, compared to 14.1% in the last paper)

## Actions from Complaints

The top 5 themes from complaints have remained consistent over the last 3 years. As is shown, there has been a reduction in the total volume of complaints this year, as well as a decrease in complaints related to both Delayed Response and Clinical Assessment.

The increase in the percentage of complaints related to Attitude and Behaviour has been noted and discussed previously. This is a complex issue and requires a deeper investigation into the factors surrounding this data. As previously reported, a paper was delivered to the April 2023 Research and Development Group proposing that a piece of research be commissioned, in partnership with the University of Stirling, to better understand the potential causes of these complaints, including any systemic causes, and how the Service can improve the system to reduce the likelihood of these complaints being received. The proposal was positively received by members of the group and work is now underway to initiate a research project into attitude and behaviour feedback.

It is important to note that over the last 3 years, there has not been any real increase during this time period of the volume of Attitude and Behaviour complaints but in turn, a significant reduction of complaints in relation to Delayed Response and Clinical Assessment – so caution is urged in the interpretation of the data.

Doc: 2023-07-26 Person Centred Care	Page 6	Author: Patient Experience Manager
Date 2023-07-26	Version 1.0	Review Date: September 2023

## Stage 1 Complaints (1 April 2023 – 30 June 2023)

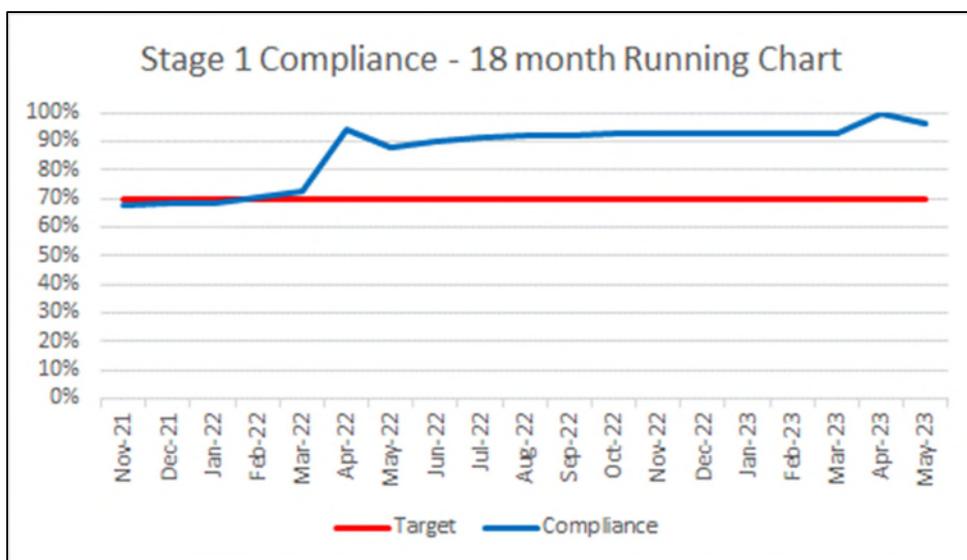
Stage 1 complaints have a 5-day target to be closed. These can often be resolved through direct contact with the complainant at supervisor level. This may be by phone, email or a face-to-face contact.

Stage 1					
	Closed within target				Still Open and now overdue
	No	Yes	Total	Compliance	
Ambulance Control Centre A&E	1	30	31	96.8%	0
Ambulance Control Centre PTS	0	34	34	100.0%	0
East Region	0	26	26	100.0%	0
North Region	5	9	14	64.3%	1
Support Services/NHQ	0	1	1	100.0%	0
West Region	0	44	44	100.0%	0
<b>Total</b>	<b>6</b>	<b>144</b>	<b>150</b>		<b>1</b>
<b>Compliance</b>	<b>96.0%</b>				

Latest results indicate that Stage 1 complaints compliance is at 96%, compared to 92.5% in the last Board report.

The government target is 70% of complaints to be dealt with by the target day. Focus is being targeted in the North region to improve compliance in this area, although the numbers are small, the compliance is below the target.

Below is the 18-month run chart of Stage 1 compliance.



## Stage 2 Complaints (1 April 2023 – 9 June 2023)

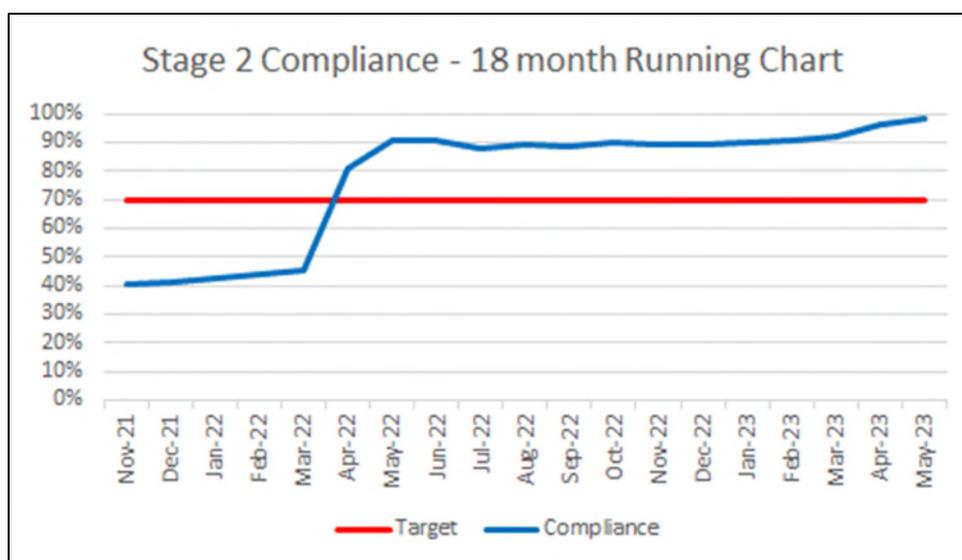
Stage 2 complaints have a 20-day target to be closed and all Stage 2 complaints should involve a full investigation and be closed with a final response letter from a Service Director. All evidence should also be collated, should it be needed by the SPSO, auditors or legal personnel.

Stage 2					
	Closed within target				Still Open and now overdue
	No	Yes	Total	Compliance	
Ambulance Control Centre A&E	0	20	20	100.0%	0
Ambulance Control Centre PTS	0	11	11	100.0%	0
East Region	0	12	12	100.0%	0
North Region	0	3	3	100.0%	0
Support Services/NHQ	0	1	1	100.0%	0
West Region	1	9	10	90.0%	0
<b>Total</b>	<b>1</b>	<b>56</b>	<b>57</b>		<b>0</b>
<b>Compliance</b>	<b>98.2%</b>				

Latest figures show the Service is sitting at a compliance rate of 98.2%, compared to 91.8% in the last Board report.

The government target is 70% of complaints to be dealt with by the target day.

Below is the 18-month run chart of Stage 2 compliance.



## Compliance Comments

Final year figures are being audited and show that the Service is on course to finish in the strongest position that it has achieved since the inception of the Model Complaints Handling Procedure (MCHP). The Patient Experience Team would like to once again extend their thanks to all complaints handling staff across the Service who have worked so hard to resolve complaints in such a diligent, efficient and professional manner.

## Care Opinion

The online platform, Care Opinion, continues to provide the public with the opportunity to share their experiences of health and care. The Service is dedicated to reviewing and responding to every post to support patients and their families. The Service is also keen to identify learning from the feedback we receive.

Between 1 April 2023 and 7 July 2023, 96 stories were posted on Care Opinion relating to the Service. These have been viewed 10,569 times.

Doc: 2023-07-26 Person Centred Care	Page 8	Author: Patient Experience Manager
Date 2023-07-26	Version 1.0	Review Date: September 2023

Of the 96 posts, 79% were uncritical in tone. It should be noted that whilst the remaining 21% will have some form of criticality, this is not necessarily directed towards the Service, with the feedback often involving multiple NHS boards.

Each of the concerns raised was responded to and where actions were required to be taken, these were followed up with the teams involved. All positive feedback where identifiable is shared with the teams involved.

## **Patient Focused Public Involvement (PFPI)**

### **Patient representation**

We currently have around 40 active members of our Involving People Network and are continuously recruiting more. Our network consists of previous patients, third sector organisations and interested members of the public.

We continue to encourage teams within the Service to ensure they gain patient feedback when developing services. To simplify this process, we have created a tool kit for staff on how to utilise consenting volunteers wishing to give their views on our intranet page. The research and development team were the first to use this new engagement system to gather patient feedback on a range of their projects.

With feedback from the research and development team, we are refining this system and revising the Engagement Guide to include new engagement guidance from Healthcare Improvement Scotland. It is important that teams feel empowered to carry out their own patient engagement as part of normal routine business and are aware that help and advice is available as and when they need it.

We are continuing to promote the importance and value of patient engagement across the Service.

### **Scheduled Care Engagement**

We continue improvement work with Scheduled Care to ensure the evolving Patient Needs Assessment (PNA) remains accessible, equitable and fit for purpose.

The mobility section has been highlighted by some patients as an area of concern. Working with disabled people's organisations and local Access Panels, we hope to identify and resolve any issue. We are working with Third-Sector organisations, the Glasgow Disability Alliance (GDA), Disability Equality Scotland (DES) and Inclusion Scotland, to speak to their members, and patients of the ambulance service, to seek their views on the PNA and Scheduled Care Service. A follow-up on the results from a nationwide survey is also planned. This is a similar technique to the one that we used when working on the mental health section of the PNA last year.

We will also ask the Glasgow Disability Alliance, Disability Equality Scotland and Inclusion Scotland to help us complete a consultation document on accessing Scheduled Care, the PNA and ways we can continue to improve our services for disabled patients.

We plan to continue to build a strong evidence-base of patient feedback to help inform ongoing improvement. This work will also feed into the new Strategy for Scheduled Care.

Doc: 2023-07-26 Person Centred Care	Page 9	Author: Patient Experience Manager
Date 2023-07-26	Version 1.0	Review Date: September 2023

## Scheduled Care Mental Health training for Call Handlers

We are designing a new training programme for existing Call Handlers, based on the newly designed mental health training delivered to new-starts during their induction. This training is based on the feedback from Call Handlers and will focus on compassionate communication and building resilience.

The roll-out of the mental health training for new-starts will begin in October 2023.

## Young People

Working with Third-Sector organisations, Young Scot, Carer's Trust, and the Who Cares? organisation, we have been able to engage with a traditionally hard-to-reach demographic of young people, young carers and those with care experience.

We have an active on-line survey to issue to the young people, which covers areas such as what it is like to call 999, recruitment, and where they get information from regarding the Service. Results are coming in every day, but it is interesting to note that 30% of respondents have considered working as a paramedic or technician. Interest in joining our Service doubles to 60% when those same young people are made aware that the Service has many non-healthcare related careers. It is also interesting to note that many young respondents are only aware of the Service through 999-contact.

## Community-Based Visits

There is a huge appetite from members of the public across the country to learn more about the Service. We have received large numbers of requests from head teachers and community leaders asking if we can visit and explain what we do. There is currently limited capacity to deliver this and limited information available on staff within the Service who are undertaking outreach work.

We want to formalise and standardise this process and work towards a Service-wide approach to community based visits, including schools, and are working with colleagues in Human Resources, Recruitment, Resilience, Public Protection, Education and our Community First Responders (CFRs) to explore how the Service can improve our work with communities and young people.

## SPSO

The Service currently has 7 open cases from the SPSO.

Doc: 2023-07-26 Person Centred Care	Page 10	Author: Patient Experience Manager
Date 2023-07-26	Version 1.0	Review Date: September 2023

SAS Reference	SPSO Reference	Date SPSO began their review	Complaint Overview	SAS Decision	SPSO Stage and Outcome	Date SPSO completed their review	Recommendations	Status of Recommendations	Open/Closed
DATIX 10967	202202435	09/11/2022	1. Scottish Ambulance Service unreasonably failed to send an ambulance to patient	Not Upheld	SPSO Reviewing	N/A	N/A	N/A	Open
DATIX 6473	202110696	18/05/2022	1. Scottish Ambulance failed to take patient to hospital	Part Upheld	SPSO reviewing comments of draft response	N/A	N/A	N/A	Open
DATIX 8570	202105207	05/07/2022	1. Scottish Ambulance Service failed to reasonably send an Ambulance to patient	Not Upheld	SPSO Reviewing	N/A	N/A	N/A	Open
DATIX 5661	202006236	31/08/2021	1. Scottish Ambulance Service unreasonably failed to send an ambulance to patient	Not Upheld	SPSO Reviewing	N/A	N/A	N/A	Open
DATIX 10125	202203262	12/12/2022	1. Scottish Ambulance Service failed to take patient to hospital	Not Upheld	SPSO Reviewing	N/A	N/A	N/A	Open
DATIX 5488	202000766	10/02/2021	1. The care that Patient A received from the Scottish Ambulance Service was unreasonable; 2. The handling of the complaint was unreasonable	Upheld	SPSO have upheld both parts	25/04/2022	1. Letter of apology to complainant 2. Share review with the involved operational staff for feedback and learning around patient assessment and dispatch processes 3. Share the review with the involved operational staff around the management of cardiac arrest and for SAS to consider two points: how it can evidence that treatments have been performed on a patient and also; for SAS to consider issuing guidance around the management of cardiac arrest in a moving vehicle 4. Share the review with the involved Complaints handling staff for reflection and learning 5. Provide further training on complaints handling and evidence of how this learning is being monitored to ensure that the complaints handling process is being followed and applied appropriately 6. Share the review with the involved operational staff for reflection and learning on asking bystanders to do CPR 7. Evidence that relevant staff have undertaken complaints handling training and evidence that quality assurance is in place to ensure complaints investigations are monitored to ensure they meet required expectations	Recommendation 1 closed and signed off (23/05/2022) Recommendation 2 completed, awaiting sign off from SPSO Recommendation 3 completed, awaiting sign off from SPSO Recommendation 4 completed, awaiting sign off from SPSO Recommendation 5 completed, awaiting sign off from SPSO Recommendation 6 completed, awaiting sign off from SPSO Recommendation 7 completed, awaiting sign off from SPSO	Open
DATIX 7795	202103065	15/10/2021	1. Ambulance Crew unreasonably failed to take Patient to hospital	Part Upheld	SPSO Reviewing	N/A	N/A	N/A	Open