



# **The Dispatch**

## The Scottish Ambulance Newsletter for patients and carers



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# **Alternative Pathways/National Meeting**

As you will read in our news item, 'Remobilisation Engagement' we are looking to re-start National Meetings. The first meeting will be an opportunity for the leads of our falls pathways and COPD pathways to share the engagement work they have done and the conclusions they have reached.

To let you understand, this work has been done to trial the effectiveness of project teams carrying out their own engagement and if this increase the benefits to the project. If successful, this will become the new way in which engagement will be carried out across our service.

This is an interesting time, as The Scottish Ambulance Service in-line with NHS Scotland and the Scottish government are redesigning how care is delivered to our nation. The aim is to get people like yourself to the right care, at the right time, in the right place, first time, optimising self care and care closer to home whenever safe to do so.

COPD is an interesting one for a trial, as it is a leading cause of ambulance calls, A&E visits and hospital bed occupancy. The ambulance service often takes these patients directly to hospital. Often this is absolutely necessary and you should always consider a paramedics advice if they recommend hospital care, yet the Scottish Governments guidelines for COPD suggests that between 30 and 50% of COPD patients would be suitable for treatment in the community.

Falls are another major reason to call our service, and we wonder if there are alternatives we can explore.

As we face uncertain times and increased risk with the Covid outbreak, we are keen to understand people's thoughts on the provision of care closer to home wherever safe to do so.

We envision the National Meeting to aid the process by being able to advise the Board and Executive Team on the effectiveness of the engagement, and views on when and how the model could be rolledout for other projects.

Please let me know if you would be willing to attend such a meeting.



# Volunteers

We have new patient representatives starting with the Clinical Governance group and the National Operational Governance Group this term. This is to meet an Executive Teams recommendation for two patient representatives to sit in governance groups to enable volunteers to share the workload and enable the committee to gain from an additional and broader patient perspective. We also have a new patient representative starting with our Learning from Events group.

# Vaccination Fraud

Sadly, criminals are using the roll out of the COVID vaccination programme as a way to exploit the public. Reports are coming in highlighting a variety of techniques and we would ask all of you be vigilant. The scam consists of:

- Text messages asking people to book their vaccine through a link which then asks for personal / financial details.
- Phone calls are targeting vulnerable and elderly people, playing a recorded message, telling them they've now qualified for the vaccine.

Victims are then being asked to input their bank details to register for a vaccine and to arrange their booking. Suspicious text messages should be forwarded to 7726. This free-of-charge short code enables your provider to investigate the origin of the text and take action, if found to be malicious'. You may get an automated response thanking you for the report and giving you further instructions if needed. You will not be charged for sending texts to 7726.

#### **Demand and Capacity Programme**

Last month, James Wilkie, Programme Manager and Lewis Campbell, the programme's Executive Sponsor spoke on the Demand and Capacity programme, giving an overview of this key programme which is about aligning 999 resources across Scotland to meet demand both now and into the future. Additional staffing and vehicles have been introduced in the last few weeks and recruitment, training and procurement plans are in place for this to continue.

They spoke on the planned benefits, which include supporting rest break compliance, reducing the frequency of shift overruns and reducing delayed responses for patients.

#### Patient Focus Public Involvement (PFPI) Strategy

Our new strategy is hoping to be approved at the February 2021 Clinical Governance Committee meeting. It includes a timeline as an appendix, which lays out how and when we will meet our ambitious, but achievable, PFPI goals.

#### **Disabled CPR Course**

We created a CPR course for disabled people, which is the first of its kind in the UK. We are working with Save-a-Life for Scotland to roll it out in the Spring. This contributes to our out of Hospital Cardiac Arrest (OHCA strategy and the new Save-a-Life strategy.

#### **Criminal Incidents**

The National Cyber Security Centre (NCSC) reported last month that they have dealt with almost 200 Coronavirus-related incidents involving hostile states and criminal gangs, with serious hacker attacks reaching an all-time record over the past year as a result. Criminal groups have targeted the NHS, offering to supply PPE in the hope of persuading a busy purchaser to hand over money to a company that did not exist. Hostile states have also targeted British vaccine research and maintain a high level of interest in understanding what our response to Covid-19 looks like.

## Mental Health within the Service

Along with NHS24 and Police Scotland, we have recently undertaken some exciting work with the Mental Health Collaborative. The Mental Health Hub is designed to provide support for service users that present to any of the services and who would benefit from support from Mental Health Practitioners and/ or direct referral into a Mental Health Service. It is widely understood that taking a mental health patient to the closest Emergency Department (ED) as a place of safety is not gold standard patient care and may not benefit the patient. Establishing alternative mental health care for suitable patients with NHS24 is part of a wider Redesign of Urgent Care programme, which looks to provide alternatives to ED through the introduction of pathways.

Types of calls received by the Service generally fall into the three categories:

1. Service users requiring an emergency response for a serious or immediately life-threatening mental health condition

- 2. Service users that may be suitable for the Mental Health Hub after face-to-face assessment.
- 3. Service users suitable for the Mental Health Hub after call handler triage

From Tuesday 24 November, we will signpost patients within Category 3 to the mental health hub from the point of initial 999 call. Call Handlers will give appropriate advice, information and scripting for these patients to access the Mental Health Hub 24/7. Further to this, from Monday 30 November crews will be able to signpost from scene into the Mental Health Hub as an alternative to ED transport for suitable patients 24/7.

This will complement regional Mental Health Pathways and will not replace the existing pathways.

## Voice Recording

A project to upgrade the voice recording solution within the ACC's has recently been completed by the ICT Telecoms Team, the supplier (SVL) and supported by the Enabling Technology Programme.

The Service has a legal obligation to provide a call recording facility for all 999 emergency telephone and radio communications. Call recordings are routinely requested for police investigations, Fatal Accident Inquiries, complaints investigations and ACC call auditing.

The legacy system was no longer supported by the manufacturer, leaving the Service at risk if any security patches or hot fixes were needed. It was also unable to support voice recording of the new Frequentis ICCS system being implemented in 2021. The project included installation of new hardware and software across five sites (Cardonald, Norseman, Inverness, Paisley and Oxgangs), providing a more resilient solution with a full failover capability between Cardonald and Norseman house to match the setup of other core systems as well as a new user interface for searching and playback of calls.

Work is now underway to extend our call recording capability to include some non-ACC sites, currently being used for PTS Day Control & Planning and Advanced Practitioners.



### So Compassionate and Understanding

We'd like to share a compliment we received on social media from the sister of a patient who has severe learning disabilities and Autism, thanking Richard Kerr and Danielle Gillan (both Hamilton Ambulance Station) for the care they gave her when she was admitted to hospital. In the tweet she says "cannot praise your ambulance crew enough for supporting my severely disabled sisters' admission to Wishaw general hospital. 2 separate crews supported and they were both outstanding. So compassionate and understanding of my sister's needs."

# Great Credit to the Scottish Ambulance Service

We'd like to share an email we received from a patient thanking Iain Ferguson and Chloe Brown (both from Dundee Ambulance Station) for the care they gave him when he was knocked off his bicycle. In the email he says "The first thing I recall about the accident is waking up in an ambulance and being tended to by two paramedics. They were both very professional but still found time to be cheery and friendly, putting me at ease. En-route to the hospital, I felt sick and they stopped and administered an anti-emetic which settled me. At the hospital, they handed me over to A&E, ensuring I was comfortable before saying their goodbyes. I cannot praise these two paramedics highly enough and they are a great credit to the Scottish Ambulance Service."

