

## NOT PROTECTIVELY MARKED

**Public Board Meeting**

**30 November 2022**

**Item No 13**

**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 NHS Scotland'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 2022 and 28 October 2022. 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**

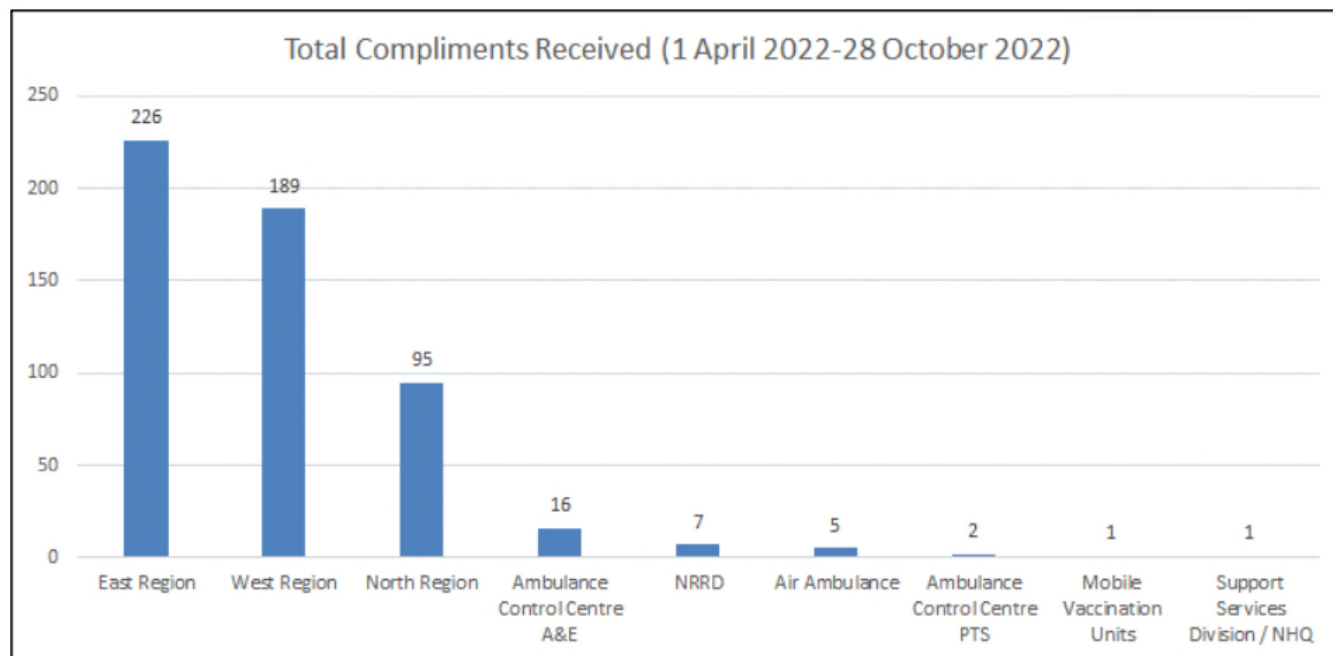
The Service actively seeks feedback on its services in order that it can continue to make improvements. We have many ways of gathering feedback – face to face, patient forums, online portals, complaint and concern channels.

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## Feedback analysis

### Compliments

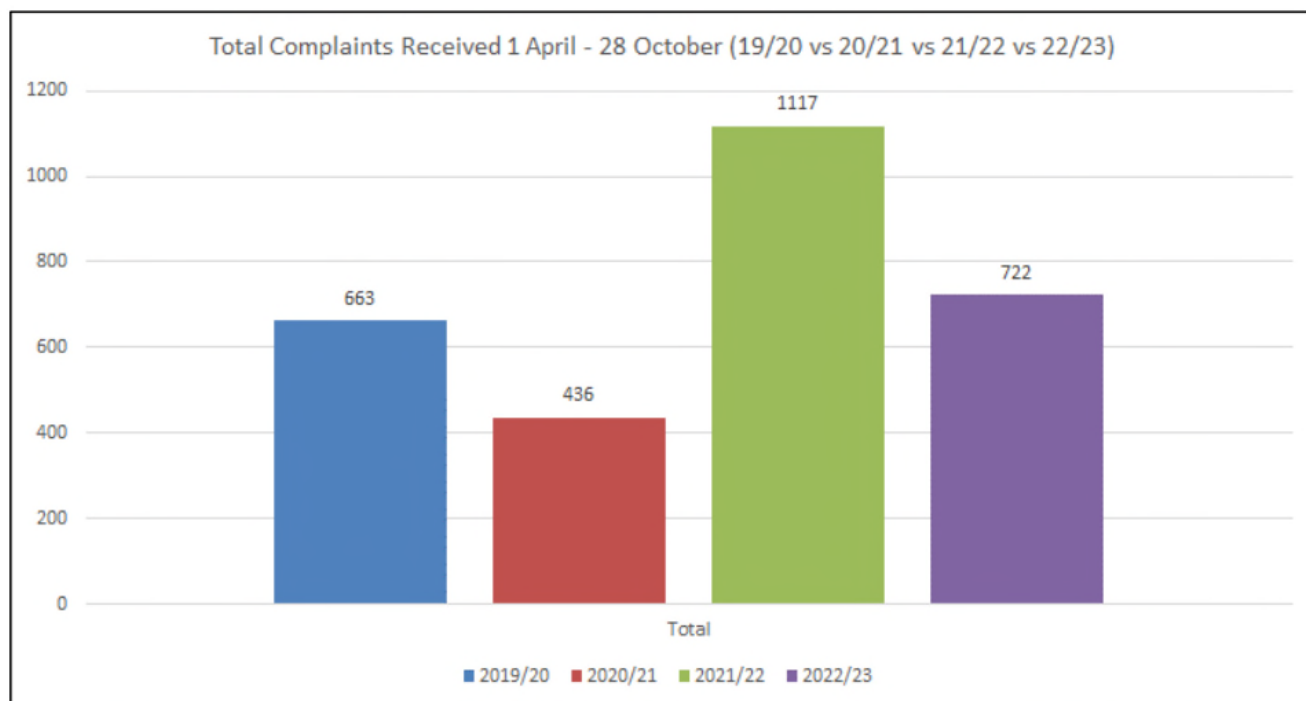
Compliments received from sources other than Social Media are logged and actioned on the DATIX system. Between 1 April 2022 and 28 October 2022, a total of 542 compliments have been received. East Region received around 42% of these compliments. The graph below shows the compliments received by region for the financial year.



### Complaints Data

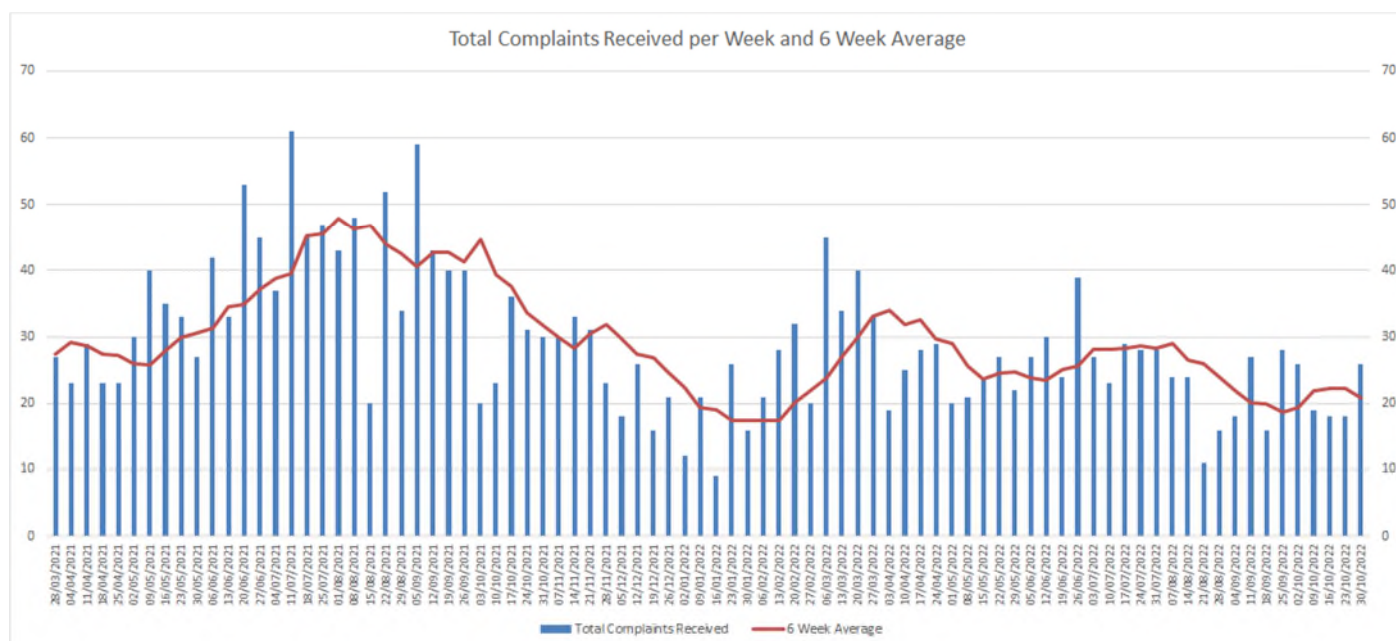
Between 1 April 2022 and 28 October 2022, a total of 722 complaints have been received. This shows a decrease of 395 (35.4%) complaints in comparison to 2021, but is similar to the number of complaints received during this time period in 2019/20 where we had 663 complaints.

What the data shows is that in 2020, during covid, there was a substantial decrease in the number of complaints received. In 2021, there was then an increase in complaints as restrictions eased across Scotland. This latest data shows that the number of complaints appear to have stabilised back to the pre-covid levels seen in 2019/20.

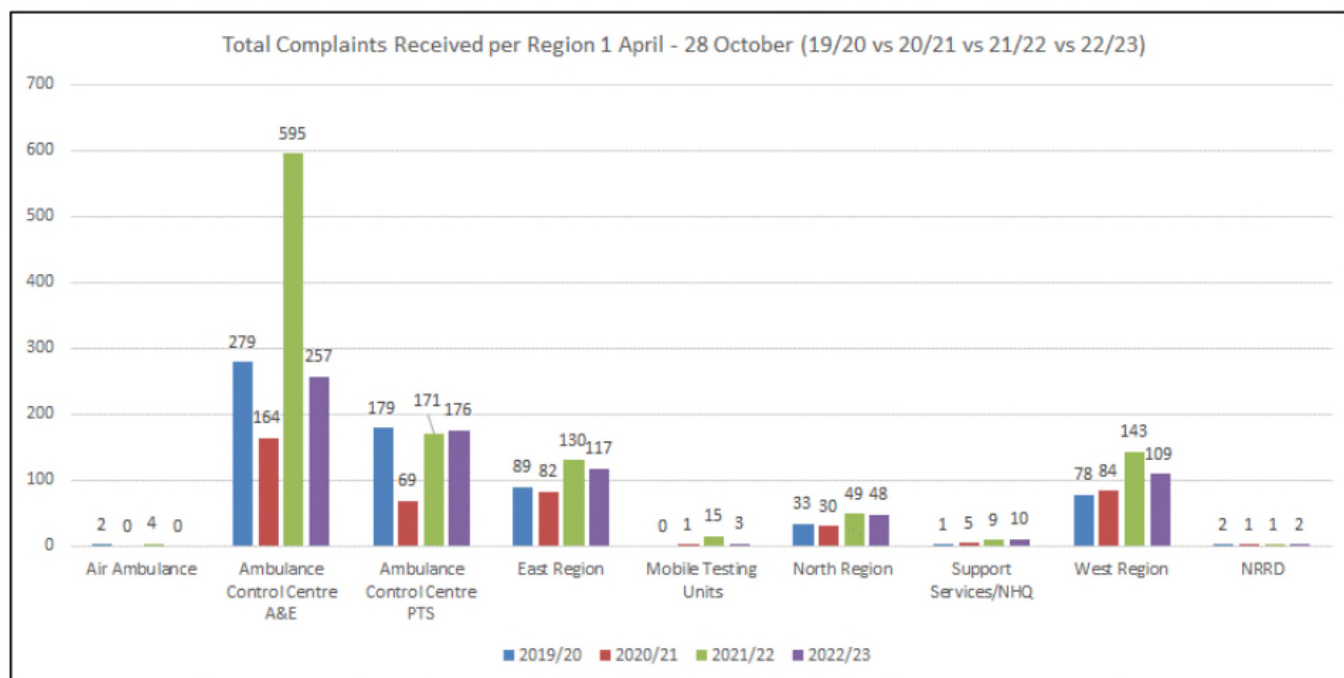


**Figure 1a – Total Complaints Received between 1 April – 28 October (19/20 vs 20/21 vs 21/22 vs 22/23)**

The challenges the Service has faced since the beginning of the pandemic have been significant and this has been reflected in the above data. Last year saw the highest volume of complaints that the Service has received in a year that included challenges such as rising staff absences, increased hospital turnaround times as well as the continuing pandemic and its recovery. The increase in complaints last year has been reflected across the country in most other health boards.



The chart below shows that the majority of complaints continue to be owned by the Ambulance Control Centre, A&E and PTS, but these figures are now balancing with the gap reducing in comparison to the previous year back to a similar position to pre-COVID.



## Complaint Themes

Of the 722 received, the 3 most common themes for complaints are

1. Attitude and Behaviour – 150 complaints (20.8% of the total, compared to 20.1% in the last paper)
2. Delayed Response – 139 complaints (19.3% of the total, compared to 19.4% in the last paper)
3. Triage/Referral to NHS24 – 98 complaints (13.6% of the total, compared to 14.3% in the last paper)

## Actions from Complaints

The volumes of complaints relating to Attitude and Behaviour has been noted and discussed previously and work is progressing to better understand this complex issue. Among potential current contributory factors are abstractions resulting in increased overtime, delayed and missed rest breaks, more complex patient presentations and challenges with hospital turnaround times and pathways.

The majority of delayed response complaints continue to be identified as demand and capacity related with the Service continuing to recruit frontline operational posts in line with the Demand and Capacity work stream. The Service has also been continuing its recruitment, investment and strengthening of the ACC Clinical Hub through 2022 to improve patient safety through enhanced management and clinical oversight of waiting calls. Hospital turnaround delays continue to challenge the Service. There is significant ongoing operational focus with tactical and strategic dialogue on managing these as well as associated guidance for our clinicians. As well as this, the Service continues clinical efforts to reduce pressures on Emergency Departments.

## Stage 1 Complaints (1 April 2021 – 21 October 2022)

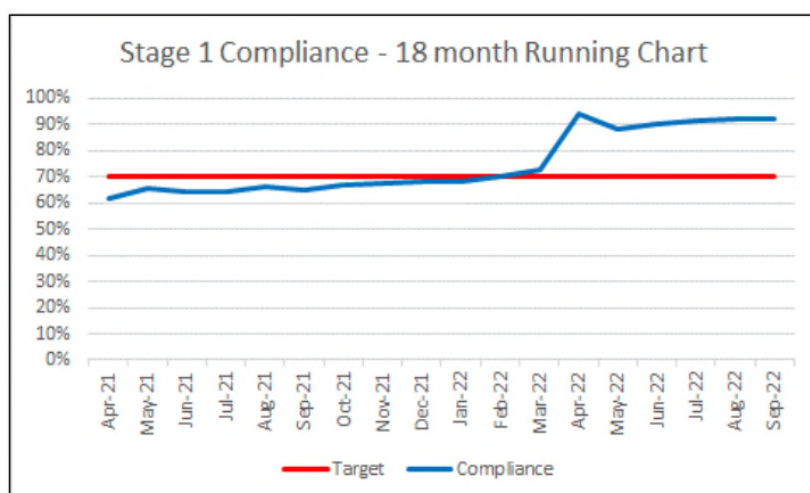
Stage 1 complaints have a 5-day target to be closed. This can be effected through direct contact with the complainant at supervisor level. This may be by phone, email or a face-to-face contact. There should be no complaints where a patient has come to harm or there is a clinical challenge completed as a stage 1.

Stage 1					
	Closed within target				Still Open and now overdue
	No	Yes	Total	Compliance	
Ambulance Control Centre A&E	3	154	157	98.1%	0
Ambulance Control Centre PTS	2	145	147	98.6%	0
East Region	3	69	72	95.8%	0
Mobile Testing Units	3	0	3	0.0%	0
North Region	13	23	36	63.9%	0
Support Services/NHQ	2	2	4	50.0%	0
West Region	11	68	79	86.1%	1
NRRD	2	0	2	0.0%	1
Total	39	461	500		2
Compliance	92.2%				

Latest results indicate that Stage 1 complaints compliance is at 92.2%, a slight increase from 91.8% in the previous paper.

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.





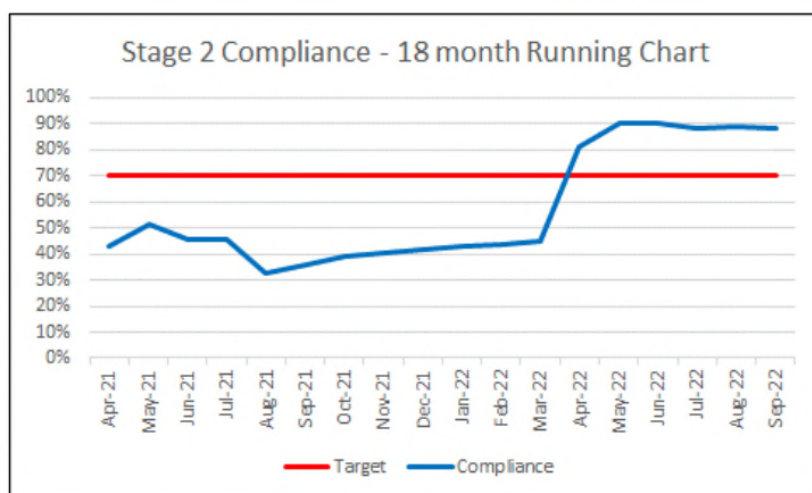
## Stage 2 Complaints (1 April 22 – 30 September 22)

Stage 2 complaints have a 20-day target to be closed and all stage 2 complaints should be closed with a final response letter from a Director. A full investigation is also required, and all evidence collated to ensure the investigation will stand up to scrutiny from the SPSO, other auditors and legal personnel.

Latest figures show SAS is sitting at a compliance rate of 88.4%, compared to 88.9% in the previous paper. There is a 70% target for such complaints. Focus is targeted in the North and West regions to improve compliance in these areas, although the numbers are small, the compliance remains below the target.

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

Stage 2					
	Closed within target				Still Open and now overdue
	No	Yes	Total	Compliance	
Ambulance Control Centre A&E	4	77	81	95.1%	0
Ambulance Control Centre PTS	1	23	24	95.8%	1
East Region	3	36	39	92.3%	1
North Region	3	7	10	70.0%	0
Support Services/NHQ	3	2	5	40.0%	0
West Region	7	15	22	68.2%	2
Total	21	160	181		4
Compliance	88.4%				



## Compliance Comments

The Services staff have made considerable efforts to achieve a very strong start to performance for the beginning of the year as demonstrated above. The focus will not be to continue this performance through what will likely be a very challenging winter.

## 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.

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Between 1 April 2022 and 28 October 2022, 102 stories were posted on Care Opinion relating to the Service. These have been viewed 24,030 times

Of the 102 posts, 66% were uncritical in tone. It should be noted that whilst the remaining 33% 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 Representative Recruitment**

We have a growing network of 25 volunteers that want to give up their time to help us to increase lived experience in the services we provide. We are actively recruiting Patient Representatives with the help of Third-Sector partners, Age Scotland and the Glasgow Disability Alliance (GDA), for roles on the Air Ambulance Re-procurement Board and our Infection Control Board.

### **2030 Delivery Meetings**

The Strategy and Planning Team met with Patient Representatives from NHS 24 and Healthcare Improvement Scotland. The team discussed our 2030 Service Strategy and our want to continue to provide people with the right care, at the right time and in the right place. Highlighted was our work on prevention to better the health and wellbeing of our population, and how through investing in the education and wellbeing of our staff and by utilising new technology we can meet the growing need for our service.

The team then questioned participants on how we can best deliver this Strategy with our communities. The participating Patient Representatives were located throughout Scotland, from the Highlands to the Borders, and had many ideas involving capacity-building in rural communities and public education of alternates to Service interventions. We will soon be holding similar meetings in partnership with the Royal National Institute of the Blind (RNIB), and members from the GDA.

### **Air Ambulance Re-procurement Engagement Sessions**

We have held multiple engagement sessions with patient and Third-Sector groups to aid in the procurement of new air ambulance provision. Patient and Third-Sector groups throughout the North of the country have been keen to hear what themes have come out of the engagement work that has been done, and to hear the direction this work is sending the team on. We held a successful meeting with an Age Scotland dementia and carer group in Orkney. We held a group with RNIB members from throughout the country, to listen to and learn from the experiences of our partially sighted and blind patients. The feedback from this session was supplemented by a survey we designed for partially sighted and blind people unable to access an online meeting. We ran a discussion group in Argyll and Bute with the Medcats, which is the oldest and longest running patient group in Scotland, and we ran a successful meeting with Patient Representatives from the NHS Western Isles lived experience forum.

### **BAME Engagement**

We are actively working with our BAME staff forum to look at ways of increasing our engagement with Scotland's BAME communities. Through a fact-finding process with help from Third-Sector partners CEMVO Scotland, The Scottish Refugee Council, BEMIS and Refugee, we will be developing an Engagement Strategy to help us involve and communicate with people and patients from BAME and New Scot communities.

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## **Mental Health Lived Experience Forum**

With the advice and guidance of third sector partners, we are developing a lived experience forum. The creation of this forum is to fill a gap the team has in gaining lived experience, insight and guidance into strategic decisions they are making. It is hoped that this forum will be a model for other teams in the Service to adopt.

Schedule care mental health training. We are setting up a training schedule to trial the use of the new mental health training package put together by the mental health and dementia team, guidance and expertise from See Me, and with the insights from volunteers and patients. We believe this will greatly help scheduled care call handlers in dealing with people in mental health distress and improve communication between both parties.

## **SPSO**

The Service currently has 7 open cases from the SPSO and has closed 1 since the previous paper.

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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 7643	202110134	29/09/2022	1. Scottish Ambulance Service failed to appropriately triage patient on 999 call	Not Upheld	SPSO have not taken forward	29/09/2022	N/A	N/A	Closed
DATIX 7732	202105253	06/07/2022	unknown yet	Part Upheld	SPSO Considering whether to review or not	N/A	N/A	N/A	Open
DATIX 9493	202111671	31/08/2022	1. Scottish Ambulance Service treatd patient in an inappropriate and unprofessional manner 2. The treatment the patient received was not appropriate for their condition	Not Upheld	SPSO considering whether to review or not	N/A	N/A	N/A	Open
DATIX 7895	202200270	09/08/2022	1. Scottish Ambulance Service failed to reasonably carry out a clinical assessment of patient which resulted in a discharge	Part Upheld	SPSO Reviewing	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 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 treatements 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 relevent 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