

NOT PROTECTIVELY MARKED

Public Board Meeting

**May 2018
Item 12**

THIS PAPER IS FOR DISCUSSION

PERSON CENTRED CARE UPDATE

Lead Director Author	Dr Patricia O'Connor, Director of Care Quality and Strategic Development Mark Hannan, Head of Corporate Affairs and Engagement
Action required	The Board is asked to discuss the paper and provide feedback.
Key points	<p>This paper provides an update of our patient experience activity between 11 February 2018 and 13 May 2018.</p> <p>Care Opinion continues to provide valuable patient and carer feedback, with 30 stories posted during this period.</p> <p>The paper highlights our latest data on compliments, our Patient Focus Public Involvement work as well as complaints themes and actions to address these.</p> <p>An update has also been provided on cases with the Scottish Public Services Ombudsman (SPSO).</p>
Timing	An update is presented bi-monthly to the Board.
Link to Corporate Objectives	<p>1.1 – Engage with partners, patients and the public to design and co-produce future service.</p> <p>1.2 - Engaging with patients, carers and other providers of health and care services to deliver outcomes that matter to people.</p>
Contribution to the 2020 vision for Health and Social Care	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.
Benefit to Patients	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.
Equality and Diversity	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

Dr PATRICIA O'CONNOR, DIRECTOR OF CARE QUALITY AND STRATEGIC DEVELOPMENT

SECTION 1: PURPOSE

This paper covers the period between 11 February 2018 and 13 May 2018.

It provides an update on trends, themes and mitigating actions from patient and carer feedback. Monitoring of complaints and compliments helps identify areas for improvement and good practice and proactive patient and public involvement helps us work in partnership to develop changes in our services and to check that changes made are improving the patient experience.

The paper also provides data on our performance against the complaints handling standard, the number of cases which have gone to the Scottish Public Service Ombudsman (SPSO) and the outcome of these cases.

SECTION 2: RECOMMENDATIONS

The Board is asked to discuss this report and provide feedback.

SECTION 3: EXECUTIVE SUMMARY

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

Latest data shows that 292 compliments were received by the Service between 11 February 2018 and 13 May 2018.

Care Opinion

Care Opinion continues to provide the Service with valuable feedback and we have seen some good examples of direct engagement in recent months with positive outcomes. For example a patient who was refused transport because of the failure to meet the Patient Needs Assessment (PNA). Our General Manager of the Ambulance Control Centres

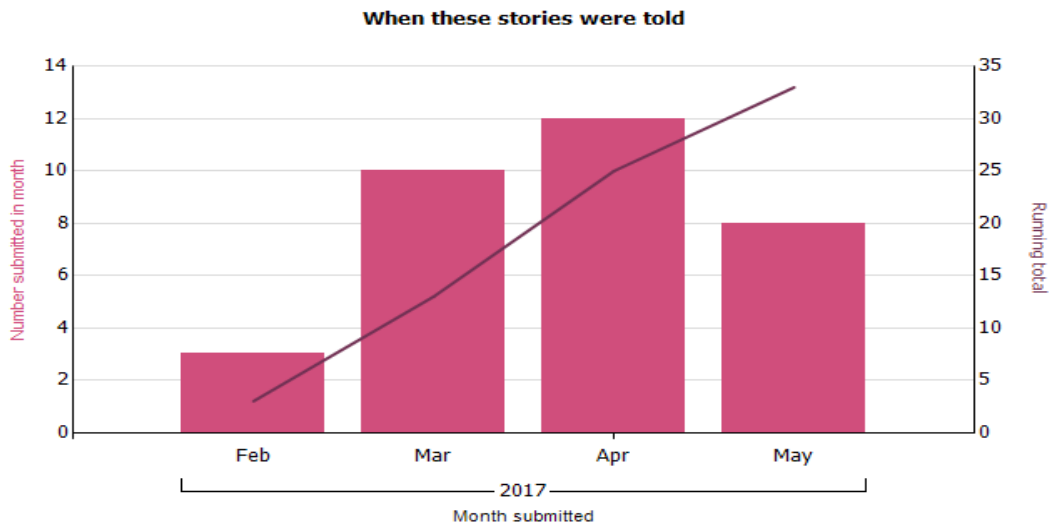
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responded and resolved the issue very quickly with a positive comment from the complainant in return.

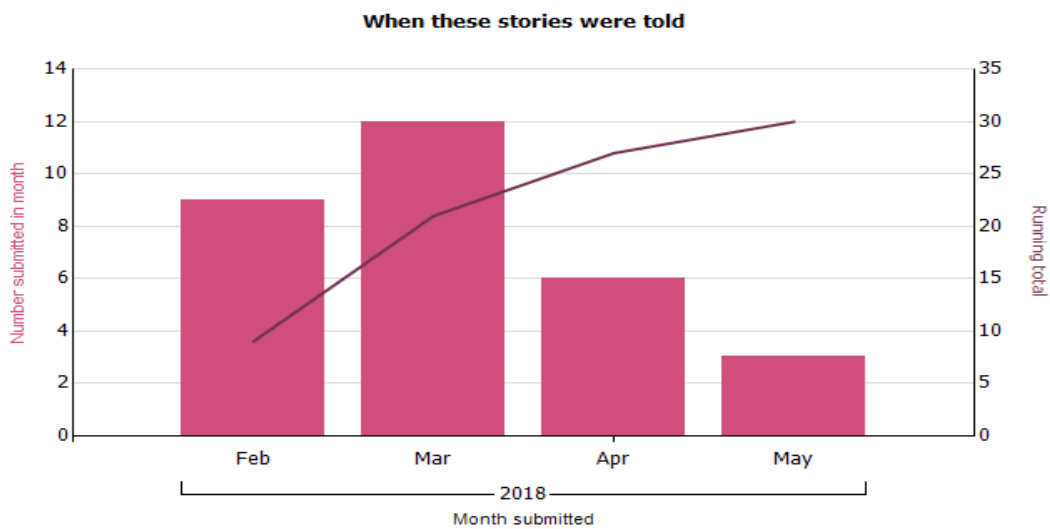
There were 30 posts on the Care Opinion website about care from the Service between 11 February and 13 May 2018. These were viewed 14,777 times.

Number of posts per month

2017

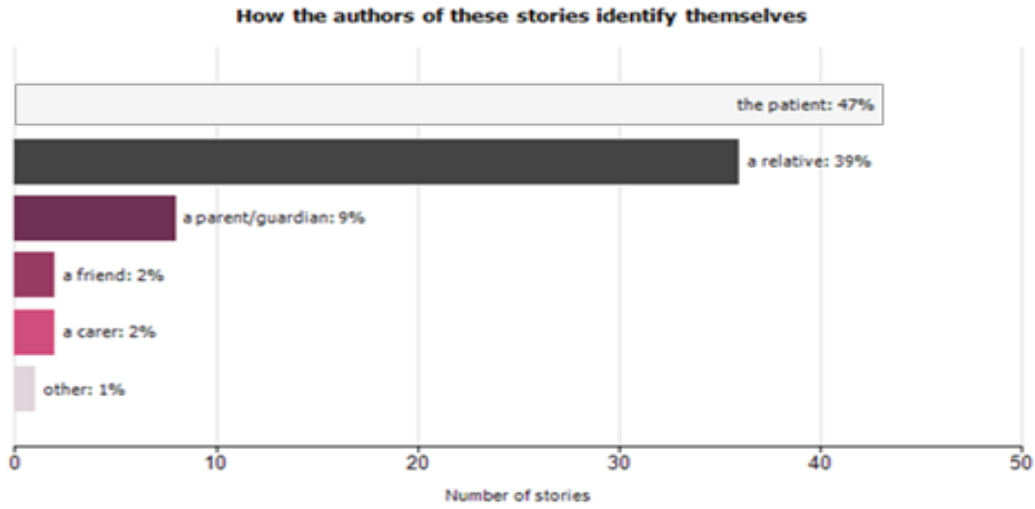


2018

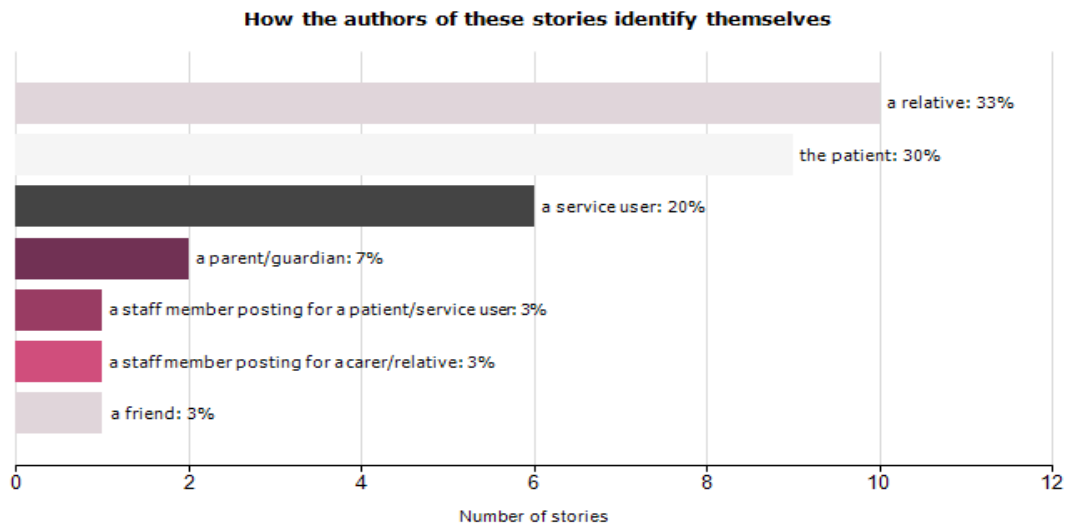


How the author of these posts identify themselves

2017

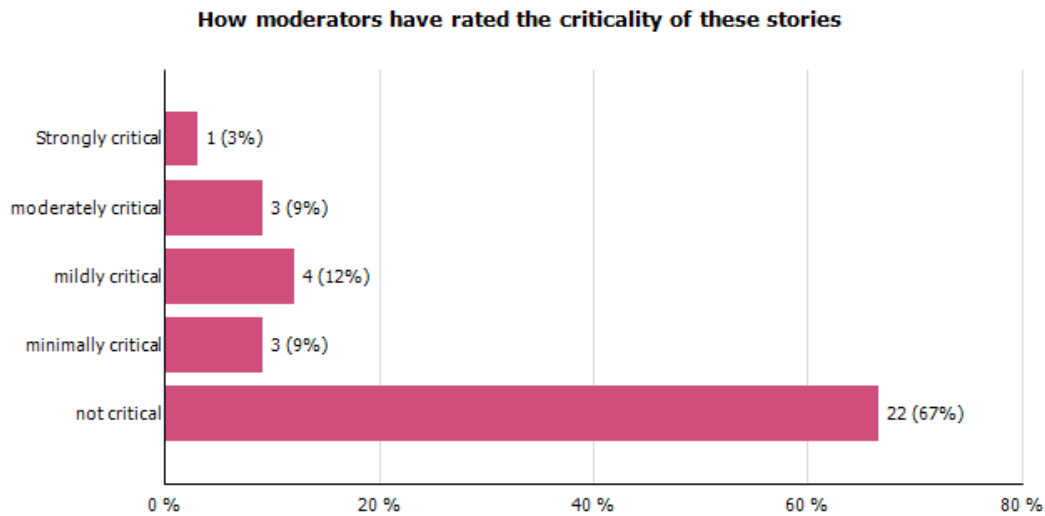


2018

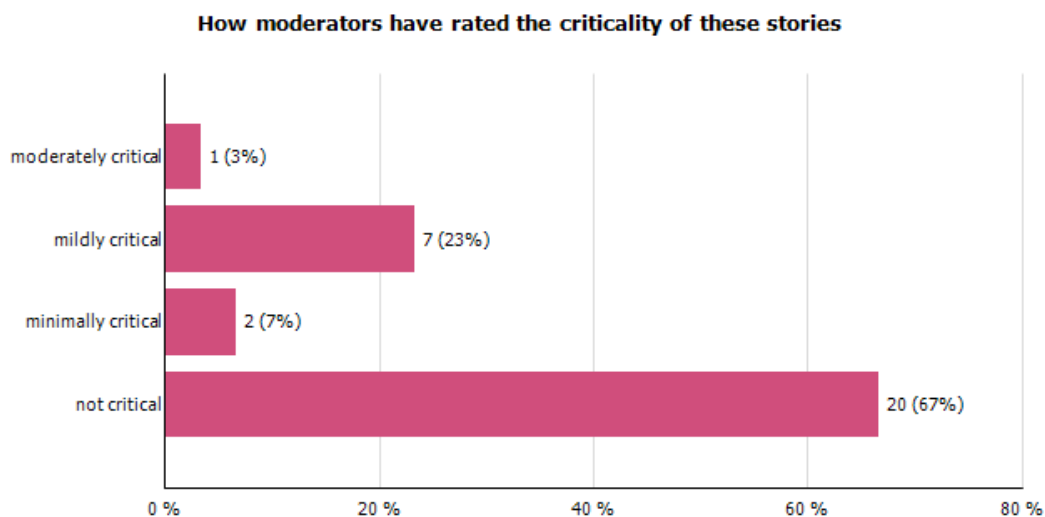


How moderators have rated the criticality of these stories

2017



2018



Of the posts on Care Opinion, 25 related to Accident and Emergency services, with 3 relating to the Patient Transport Service.

The majority of compliments related to the clinical care of the patient and the care and compassion of our staff. The one moderately critical post related to care provided by another Board, rather than the Scottish Ambulance Service itself.

Compliments

The Service recorded 292 compliments between 11 February and 13 May 2018 across all social media channels. The number of compliments received via digital channels continues to increase, particularly on Facebook, Twitter and Care Opinion. Some examples of these, and other compliments, can be found in **Annexes A**.

Patient Focus Public Involvement (PFPI)

The Service is continuing to develop a new, improved approach to our PFPI arrangements. Our Community Engagement Officer is expanding our outreach and engagement to new community groups within the third sector, including mental health charities. Five new PFPI representatives have been recruited from a wide range of backgrounds, with more on the way, and these new members will be present at our national PFPI meeting on the 24th May.

Feedback was sought on latest developments within the Service, such as Patient Transport, Major Trauma Improvements and the Direct Paramedic Admission Scheme which has been trialled in Dundee and Angus. Feedback and suggestions were also sought on our strategic work to align our patient engagement work with NHS 24.

Feedback will be integrated into a detailed plan for partnership working which is being developed by the Service and NHS24 and due for completion this month.

Introduction of the new Model Complaints Handling Procedure (MCHP)

As highlighted previously to the Board, a new NHS Scotland Model Complaints Handling Procedure was introduced last year, in order to standardise the way in which NHS Boards handle complaints.

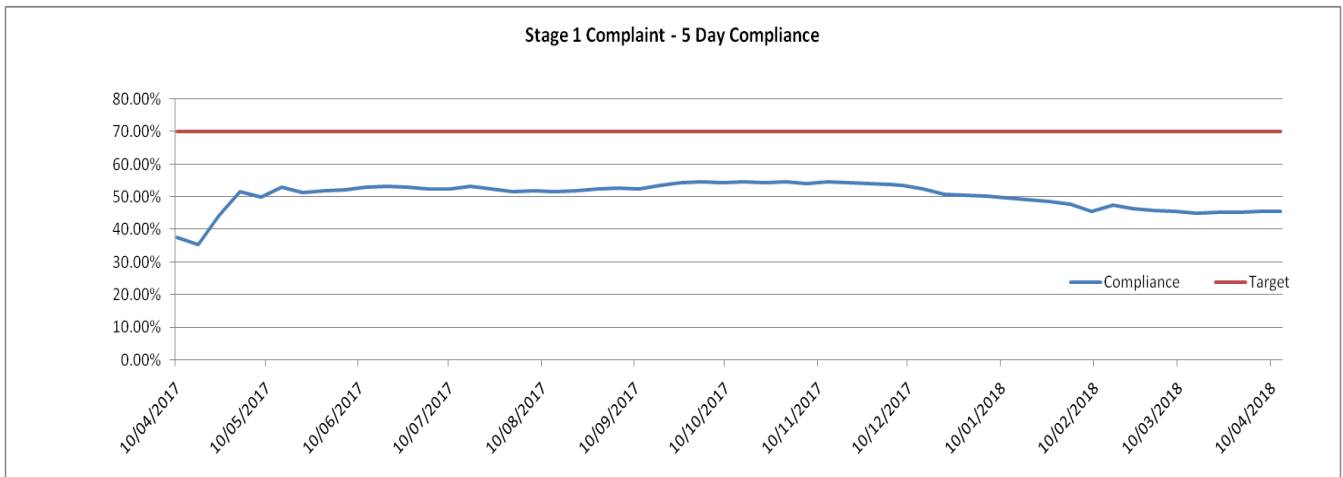
The Service is currently developing the complaints module of DATIX, which is widely used across NHS Scotland Boards for complaints handling. NHS Fife colleagues have worked in partnership with DATIX to ensure that the measurement framework within the system is fit for purpose for the new procedure. The Patient Experience team is currently working with internal and external users of the DATIX system adapting the specifications to match the Service's requirements.

Complaints Data

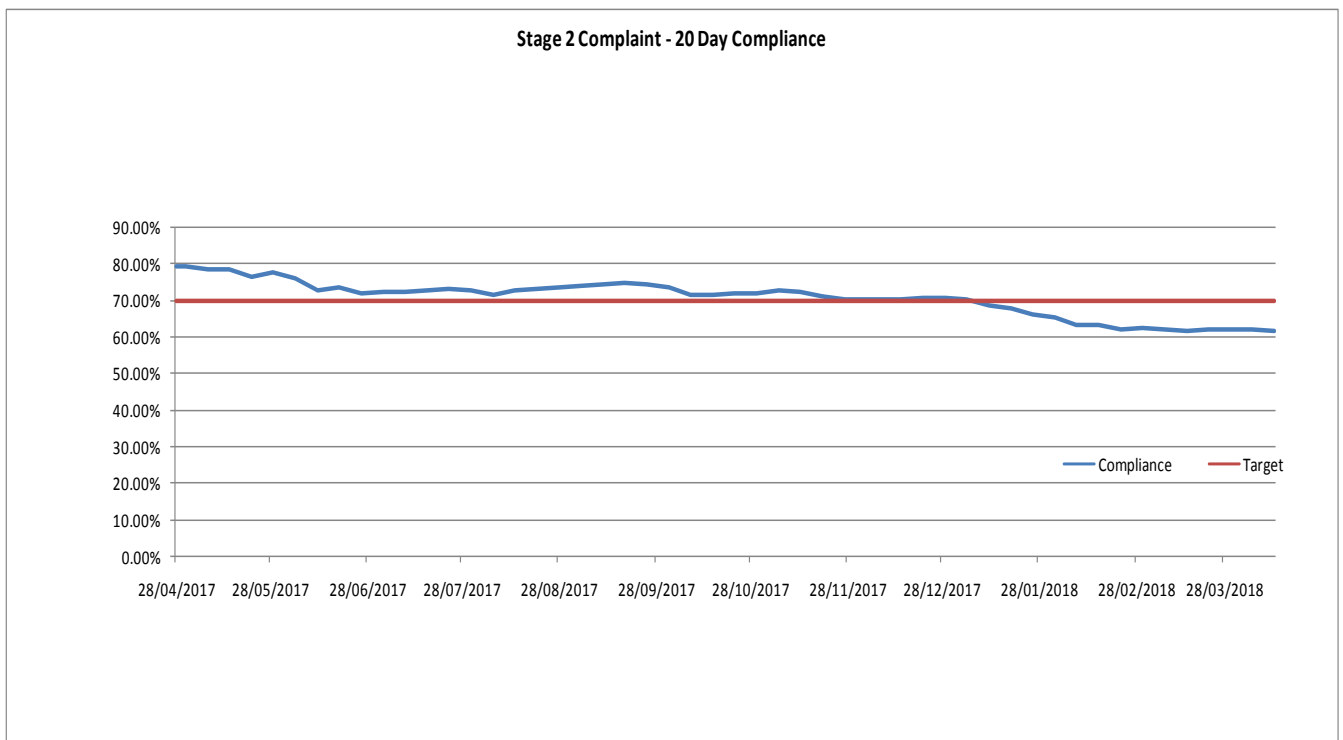
The complaints handling standard for Stage 1 complaints is five working days and for Stage 2 complaints it is 20 working days.

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Stage 1



Stage 2



Latest figures show that Stage 1 complaints compliance is currently at 45.5%, down from 48% in the previous time period. Stage 2 complaints compliance is currently 61.8%, down from 64.4% in the previous Board report. It was anticipated that there would be a dip in complaints compliance given the exceptional pressures faced over the winter period, which was then exacerbated by the red weather warning in March. However, urgent work is being undertaken by regions to improve our responses.

Latest actions from Scottish Ambulance Service to improve complaints handling

It was acknowledged that handling stage 1 complaints within five days would be challenging for most NHS Boards, since there is little opportunity or capacity for frontline staff to both manage an issue brought to their attention whilst providing care and recording data. Stage 1 complaints are proving to be very challenging and our Quality Improvement teams are working within regions with the operational directors and managers to try and address and identify options for improvement and take urgent action.

QI manager Ms Elaine Jamieson and Ms Lorraine Tough, have been testing Quality Improvement work in the East (Central) Region focusing on Stage 1 complaint handling. So far this has been very productive and should help improve the compliance rates going forward. The testing of a new approach is now underway and the results should be available by the next reporting period.

Stage 2 complaints response compliance has deteriorated as we continue to see the knock-on effects of winter and the red weather warning in March. Whilst this was to be expected, we are keen to take some learning from this and are undertaking a review to allow the Service to be better prepared for this in the future. The whole system review of our high level data has identified regions and departments with best practice and areas for improvement. Each Regional Director will require an improvement plan locally. In addition, Alan Martin our Patient Experience Manager is undertaking Quality Improvement work for Stage 2 responses. Two QI sessions have already been held over the last three weeks with key staff from the regions and our ambulance control centre. Feedback from these sessions has been positive.

We commissioned the SPSO to provide an in-house training session for key representatives from each of the regions and the Ambulance Control Centre. This took place on 28 March and was attended by over 20 of our staff to improve the handling of all complaints received by the Service.

The top five complaint themes, in order, between April 2017 and March 2018 were delayed response, attitude and behaviour, clinical assessment, triage and eligibility. These are detailed in the table below.

Complaint Theme	Complaint Stage 1&2
Delayed Response	316
Attitude & Behaviour	270
Clinical Assessment	58
AMPDS – Not Triage Appropriately	68
Patient not Conveyed	21

Mitigating Actions

The Patient Experience Manager delivered a presentation to the SAS 2020 steering group on the 14th May outlining suggestions and options for improvement to enable the Service's managers to capture, record, and analyse the patient experience, as well as identifying learning which could be implemented to improve patient care. It was noted that there has been very little academic work carried out on how best to measure patient experience in a pre-hospital environment. This is an opportunity for the Service to lead on the

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development of this evidence base for other ambulance services and boards across the UK.

Attitude and Behaviour:

A new questionnaire has been designed for testing in the Service which will be utilised as part of the formal investigation process for every attitude and behaviour complaint. Tests are underway before the final version is used.

This questionnaire will allow the Service to identify and measure possible contributory factors more effectively such as time on shift, incidents which occur near end of shift, length of service, meal break data and last known CPD training sessions. This will allow us to identify areas for improvement and any additional support required.

Work is continuing to promote positive patient experiences through sharing patient and carer stories.

Patient experience is also embedded in our Organisational Development work programme focussing on change, values and culture.

Delayed Response:

The end of 2017 saw an unprecedented increase in demand for our services, including a large rise in Immediately Life Threatening incidents, which put pressure on our responses to lower category calls. As a result, there were a number of complaints received in the category of delayed response. Our whole systems approach and improvement focus on the regions and the Ambulance Control Centres are addressing the complaints individually.

More widely, the Service is undertaking a review of the busy festive period to ascertain if any lessons can be learned. The Service is also currently recruiting extra staff and aligning shift patterns to this busy time of the day. A roster review is underway in the Ambulance Control Centres to determine the optimal shift coverage for Clinical Advisers to ensure that the necessary cover is in the right place at the right time to provide enhanced clinical triage for patients.

Triage and Clinical Assessment:

The new response model is helping to get the right resource to patients within the appropriate timeframe to meet their needs. Ongoing investment in additional staff, along with the training and development of existing staff, is also helping improve the patient experience.

Eligibility:

Over the last year, a sub group of the Scheduled Care Advisory Group has been reviewing the Patient Needs Assessment (PNA). This Group has included patients, road staff and members of the Ambulance Control Centre. As part of their work, the Group has been testing a number of changes to the PNA which have demonstrated improvements and these changes went live on 5 December 2017. The improved version of the PNA should give us a better understanding of patients' needs and make sure that the most appropriate resource is sent in response to a request.

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Current SPSO cases

SPSO Tracker					
SAS Ref/Decision	SAS Decision	SPSO Ref	Complaint Overview	Recommendation	Status
SW/32/9889/17	Not upheld	201702685	1.The Scottish Ambulance Service unreasonably took patient to University Hospital, Ayr, rather than University Hospital Crosshouse	<p>SAS recommendation: Clinical review to be undertaken with crew involved to allow for reflection, learning and the identification of any further training needs.</p> <p>SPSO recommendations:</p> <p>1) Apologise to the patient for unreasonably taking them to University Hospital Ayr. Deadline: 4th April 2018.</p> <p>2) Tests carried out by crews should be documented. Evidence that this has been fed back to relevant staff in a supportive way that encourages learning. Deadline: 18th April 2018.</p> <p>3) Evidence of an audit carried out to confirm that suspected stroke patients are appropriately taken to the Hyper Acute Stroke Unit, as opposed to the local emergency department in line with protocol. Deadline: 30 May 2018.</p>	<p>SPSO <u>upheld</u> the complaint.</p> <p>Evidence sent to SPSO that we had implemented their recommendations.</p> <p>However, SPSO have come back to say that they would like more work undertaken on 2) and 3). SAS work nearing completion.</p>
WEMDC/31/8691/17	Upheld	201703342	<p>1. There was an unreasonable delay in an ambulance attending to the patient after he suffered an accident (upheld).</p> <p>2. Unreasonable delay in transferring the patient from local hospital to trauma centre (partial).</p>	<p>SAS recommendation: Review to be undertaken with the dispatcher in question to allow for reflection and learning.</p> <p>SAS recommendation: None. Unfortunately, the delay was unavoidable due to increased demand at the time of the call.</p>	<p>Final SAS response issued to SPSO.</p> <p>SPSO decision pending.</p>

WC/24/8529/17	Not upheld	201703141	1.The Scottish Ambulance Service's actions in relation to patient assessment and transfer to hospital were unreasonable.	SAS recommendation: Review to be undertaken with both crew members as an opportunity for reflection and learning, highlighting the Service values and the constant need for positive communication with patients and their families.	Final SAS response issued to SPSO. SPSO decision pending.
SE/25/8150/16	Upheld	201701591	1. The ambulance crew failed to transfer the patient to hospital in an appropriately safe manner. <i>2.The Scottish Ambulance Service handling of the complaint was unreasonable</i>	SAS recommendation: Undertake a full clinical review into the case. SAS recommendation: Review to be undertaken with both crew members as an opportunity for reflection, learning and identify any further training required. SAS recommendation: Direct feedback to staff involved in handling the complaint to pass on the frustrations of the family and highlight where processes could have been followed more effectively.	Final SAS response issued to SPSO. SPSO decision pending.
WEMDC/33/10008 /17	Not upheld	201705035	1. <i>The Scottish Ambulance Service unreasonably failed to dispatch an ambulance.</i> 2.The Scottish Ambulance Service did not investigate and respond to complaint reasonably.	SAS recommendation: Review to be undertaken between the Supervisor and call handler to allow for reflection, learning and identify any further training required. SAS recommendation: None. In our view, complaint was dealt with in an efficient, professional and timely manner.	Final SAS response issued to SPSO. SPSO decision pending.

Social media – examples of compliments received this month

‘Back in January of this year I gave birth prematurely to my beautiful baby girl at 32 weeks at home in my bathroom, she had already arrived before my husband was able to call 999

I can’t thank the ambulance service enough for the support they gave to myself and my husband, from the call handler explaining to my husband what to do until the paramedics arrived (my son who was 20 months old at the time was screaming the house down so as you can imagine was very stressful) I don’t know her name but she made a very stressful situation that little bit calmer and the amazing paramedics who cared for us and got us to the Victoria hospital in Kirkcaldy very quickly!

All your actions ensured that my little girl survived and I can never thank you enough!

Little Emilie spent only 2 weeks in SCBU in Kirkcaldy and is now 14 weeks old and thriving and has a very doting little brother who adores her very much. Again thank you, thank you, thank you’

‘Had the ambulance out to my mother today who fell. The 2 gentlemen who came from Fraserburgh were absolute stars. One was Alex and the other one with beard and glasses was just brilliant with my mother. He had her laughing in no time at all. What a credit he is to the ambulance services .can you make sure he gets a massive thank you from the Fraser's . Honestly can't thank them enough’

‘Would like to thank the ambulance crew who came tonight and helped with our elderly neighbour. They were amazing and were there well after their finishing times and went above and beyond. You guys do an amazing job.’

‘First time ever I had an Ambo last night (called by NHS24). The two paramedics were absolutely excellent and were so lovely. Thankfully it turned out not to require me to go to hospital but I was nebulised and recovered enough to stay home. I cannot thank them enough - absolutely wonderful work you all do - although I do hope we don't need to meet again!’

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‘@Scotambservice You have some wonderful staff. My gran was ill on Thursday and needed hospital. Staff were amazing - kind, caring and compassionate - in a difficult situation. Wish I’d got their names! #lovethenhs’



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