



# **NOT PROTECTIVELY MARKED**

# **Public Board Meeting**

30 July 2025 Item No 11

# THIS PAPER IS FOR DISCUSSION

# PERSON CENTRED CARE UPDATE

Lead Director	Emma Stirling, Director of Care Quality and Professional Development					
Author(s)	Marie Kennedy, Patient Experience Manager					
	Mark Hannan, Head of Corporate Affairs and Engagement					
Action required	The Board is asked to discuss and note the paper.					
Key points	<ul> <li>Compliment rate remains strong with East Region leading.</li> <li>Complaint rate is lowest in five years (39.9%).</li> <li>Stage 1 and 2 complaint response targets significantly exceeded.</li> <li>Public and youth engagement initiatives are expanding.</li> <li>There are currently 5 open cases with the SPSO</li> </ul>					
Timing	An update is presented bi-monthly to the Board.					
Associated Corporate	Risk ID 4638 – Hospital Handover Delays					
Risk Identification						
Link to Corporate	We will					
ambitions	Provide the people of Scotland with compassionate, safe and					
	effective care where and when they need it					
	Work collaboratively with citizens and our partners to create healthier and safer communities					
	Innovate to continually improve our care and enhance the					
	resilience and sustainability of our services					
Link to NHS Scotland's	Person-centred care is delivered when health and social care					
quality ambitions	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.					

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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 Equality Outcomes work.





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## SCOTTISH AMBULANCE SERVICE BOARD

## PERSON CENTRED CARE UPDATE

# EMMA STIRLING, DIRECTOR OF CARE QUALITY & PROFESSIONAL DEVELOPMENT

## **SECTION 1: PURPOSE**

This paper covers the period between 1 April and 7 July 2025. 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 so 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 In Phase system (this is a new system which replaced Datix in March 2025). As illustrated in Figure 1 below, between 1 April and 7 July 2025, a total of 339 compliments have been received. This represents 48% of the total contacts to the Scottish Ambulance Service Feedback team. East Region received the most compliments (43%), followed by West (39%). Figure 1 below shows the compliments received by region for the financial year so far.

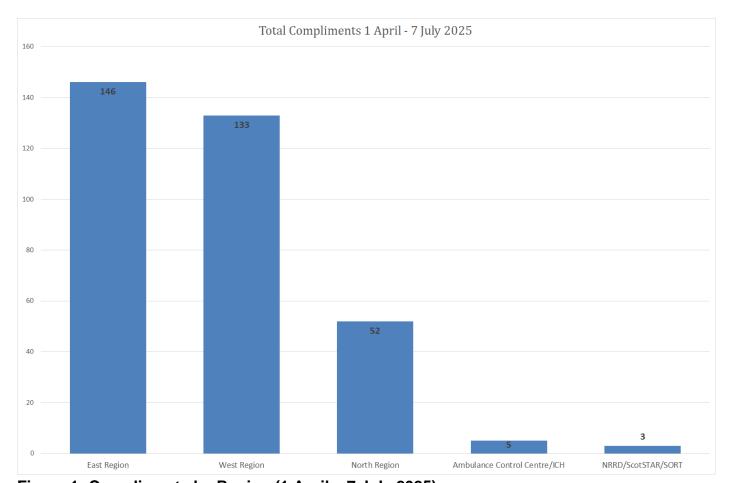


Figure 1: Compliments by Region (1 April – 7 July 2025)

## **Complaints Data**

Figure 2 below shows the total volume of complaints that have been received as a comparison over the previous five years. Between 1 April and 7 July 2025, a total of 280 complaints have been received. Please note these do not include mobile testing for years covering Covid.

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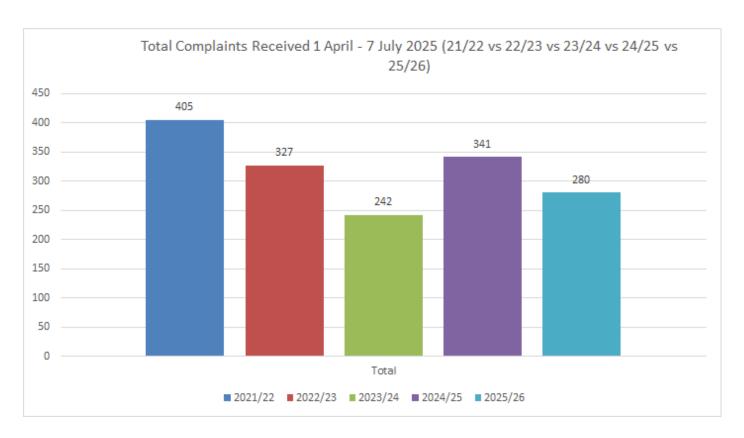


Figure 2. Total complaints received per year for period 1st April – 7th July

Table 1: Complaints and Total Contacts for period 1st April - 7th July

Year	Complaints	Total Contacts to Patient Experience Team	Complaint Rate (%)
2021/22	405	857	47.2%
2022/23	327	722	45.3%
2023/24	242	558	43.4%
2024/25	341	715	47.7%
2025/26	280	702	39.9%

As illustrated by Table 1, over the five-year period from 2021/22 to 2025/26, both the number of complaints and total contacts to the Patient Experience Team have fluctuated. While there was a downward trend in both complaints and contacts from 2021/22 to 2023/24, 2024/25 saw a notable increase. However, so far in 2025/26, the complaint rate has dropped to its lowest level in five years, suggesting potential improvements in service delivery or complaint handling.

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Figure 3. below shows the distribution of complaints throughout the Service. As can be seen, the majority of complaints continue to be owned by the Ambulance Control Centre and the Integrated Clinical Hub.

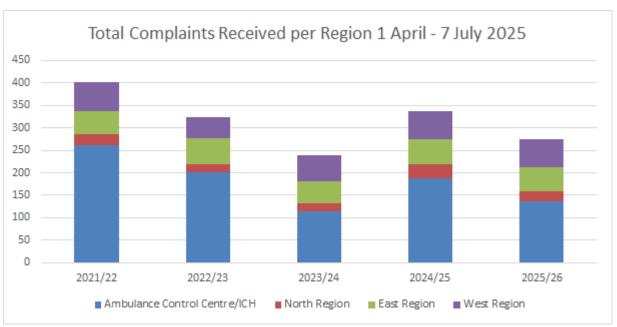


Figure 3. Complaints received per Region

## **Complaint Themes**

Of the 280 received, the 5 most common themes for complaints are:

- 1. Attitude and Behaviour 98 complaints (35% of the total, compared to 31% for the same period last year)
- 2. Triage/Referral to NHS24 63 complaints (23% of the total, compared to 12% for the same period last year)
- 3. Clinical Assessment- 25 complaints (9% of the total, compared to 10% for the same period last year)
- 4. Delayed Response 23 complaints (8% of the total, compared to 13% for the same period last year)
- 5. Lack of communication/co-ordination 14 complaints (5% of the total, compared to 3% for the same period last year)

Note: A word of caution when interpreting complaint theme data or complaints received per region. Since the introduction of In Phase in March 2025 we have been unable to log complaints under multiple themes or regions. This may cause under-reporting of certain themes or regions.

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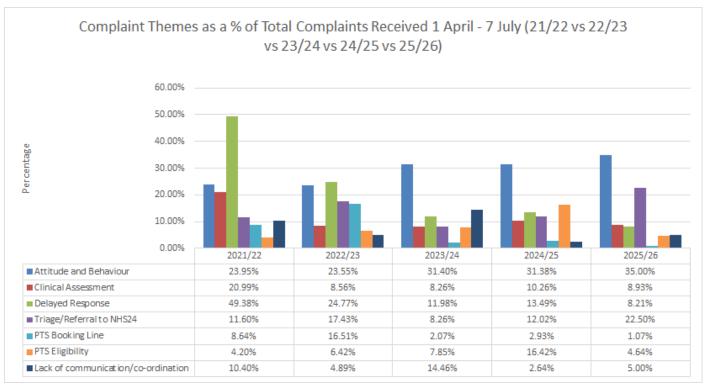


Figure 4. Complaint themes as a % of total complaints per year

# Complaint Themes Analysis – 1 April to 7 July (2021/22 to 2025/26)

Figure 4 highlights the percentage distribution of complaint themes received by the Scottish Ambulance Service between 1 April and 7 July, across five reporting years (2021/22 to 2025/26). The data provides insights into evolving trends and areas requiring targeted quality improvement.

#### **Key Observations:**

Complaints related to **Attitude and Behaviour** have shown a consistent year-on-year increase, rising from 23.95% in 2021/22 to 35.00% in 2025/26. There is work underway to investigate this in further detail to understand the key drivers and follow through with any supportive measures required.

On the other hand, complaints relating to **Delayed Response** has seen a significant reduction, from a peak of 49.38% in 2021/22 to 8.21% in 2025/26. The year-on-year decrease suggests that operational changes, potentially including the implementation of the Integrated Clinical Hub and Pathways, have had a measurable impact. Continued monitoring is recommended to ensure these improvements are sustained.

**Clinical Assessment** complaints decreased markedly from 20.99% in 2021/22 to around 8–10% in recent years. The relatively stable trend over the last three years (8.26%–10.26%) may suggest a plateau, although the upcoming clinical governance review could identify areas for further refinement.

After fluctuating in previous years, complaints relating to **Triage/Referral to NHS24** saw a sharp rise to 22.50% in 2025/26. This spike may reflect recent pathway changes, increasing public

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awareness, or referral dissatisfaction. A focused analysis of this category is required to determine the underlying drivers.

Complaints about the **PTS Booking Line** have significantly decreased from 8.64% in 2021/22 to 1.07% in 2025/26, suggesting improved accessibility or communication.

**PTS Eligibility** complaints have fluctuated, peaking at 16.42% in 2024/25 before falling to 4.64% so far in 2025/26.

Complaints regarding **Lack of Communication/Coordination** have remained relatively stable but low, with a small increase in 2023/24 (14.46%) before returning to 5.00% in 2025/26. Continued focus on internal handover procedures and communication strategies will support further improvement.

# Stage 1 Complaints (1 April – 7 July 2025)

Stage 1 complaints have a 5-day target to be closed. This can be affected 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				
	No	Yes	Total	Compliance	now overdue	
Advanced Practice	0	0	0	NA	0	
Air Ambulance	0	0	0	NA	0	
Ambulance Control Centre/ICH	1	74	75	98.7%	0	
East Region	0	35	35	100.0%	0	
Support Services/NHQ	1	4	5	80.0%	0	
North Region	2	10	12	83.3%	0	
NRRD/SORT/SCOTSTAR	0	0	0	NA	0	
West Region	4	40	44	90.9%	0	
Total	11	162	173		0	
Compliance	mpliance 93.6%					

#### Table 2.

Table 2 demonstrates that Stage 1 complaints compliance is at 93.6% which is well above the government target of 70%.

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## Stage 2 Complaints (1 April – 17 June 2025)

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 Service Director. A full investigation is also required, and all evidence collated.

Stage 2						
	Closed within target				Still Open and	
	No	Yes	Total	Compliance	now overdue	
Advanced Practice	0	0	0	NA	0	
Air Ambulance	0	0	0	NA	0	
Ambulance Control Centre/ICH	1	37	38	97.4%	0	
East Region	1	21	22	95.5%	0	
North Region	1	7	8	87.5%	0	
NRRD/SORT/SCOTSTAR	0	0	0	NA	0	
Support Services/NHQ	0	2	2	100.0%	0	
West Region	6	11	17	64.7%	4	
Total	8	80	87		4	
Compliance				92.0%		

#### Table 3.

Table 3 shows the Service is sitting at a compliance rate of 92% which again is well above the government target of 70%.

## **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 and 7 July 2025, 98 stories were posted on Care Opinion relating to the Service. These have been viewed 13,760 times.

Of the 98 posts, 81% were uncritical in tone. It should be noted that whilst the remaining 19% 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.

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## **Involving People**

## **Volunteer Structures & Representation**

In support of the Involving People Strategy and The Anchor Plan, and building on feedback from volunteers, NHS partners, and our benchmarking activity with ambulance trusts across the UK, we're continuing work to enhance our support for Public Focused Public Involvement volunteers. A new portal has recently been launched on our website for volunteers containing helpful guidance and resources to support them in their role. For example, it provides a breakdown of the PFPI role, insights into how SAS works, including the frontline response, clinical handling, a clear explanation on service pathways, as well as providing 'the bigger picture' of how volunteers can contribute meaningfully. The site has received extremely positive feedback from volunteers.

Work continues on strengthening the recruitment process for PFPI (Public Focused Public Involvement) volunteers. This now includes best practice methods from Healthcare Improvement Scotland and the dynamic outreach approach of London Ambulance Service.

Further aligning with our Equality Outcomes and NHS Scotland's Participation Standard, we are continuing active recruitment of patient representatives for key governance areas and committees.

## **Promoting Community Engagement and Reporting**

As part of our ongoing work with the Community Resilience Team and guided by the principles in the National Standards for Community Engagement, we are now encouraging staff to report and celebrate engagement activities undertaken by staff in communities, such as school visits and public events - this includes regional directors writing to staff thanking them for their efforts and encouraging them to continue to ensure their visits are both co-ordinated and utilise latest guidance. This helps recognise best practice, improve visibility of local engagement and strengthens our accountability to communities.

We are also exploring the availability and sharing of community engagement resources, including equipment, in partnership with other local public sector organisations. This supports our goals within The Anchor Plan and the wider ambitions of Community Empowerment (Scotland) Act 2015.

#### **Youth Engagement & Dramatised Insight Projects**

In line with the UNCRC and the 2030 Strategy commitment to involving young people, we're continuing to collaborate with Ambulance Control Centre teams to dramatise a real-life call involving a call handler guiding someone through the home birth of his child. This engaging case study will offer students an authentic insight into the skills and challenges of emergency call handling.

It will serve as a key feature within a new programme we are co-designing with students from Queen Margaret University's Paramedic Science course. The aim is to create a more compelling entry point for young people exploring healthcare careers and to align our engagement with curriculum development in further and higher education.

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## **Scheduled Care & Mental Health Peer Support**

In collaboration with the Scottish Recovery Network, we continue to advance our Scheduled Care mental health training programme. Rooted in the values of Realistic Medicine, we're developing an education package to empower Scheduled Care Coordinators to better manage their own mental health and support their peers.

Workshops and co-production sessions across our ambulance control centres have provided rich insight, and peer-led networks are now taking shape. This supports the wider workforce resilience agenda outlined in NHS Scotland's Workforce Strategy 2031.

## **Ongoing Youth and Community Partnerships**

In collaboration with NHS 24 and NHS Lothian, our planned work experience initiatives will offer students a full view of emergency care - from a 999 call to hospital discharge. A mentorship scheme is in early development and work is progressing well on this. The aim is to foster greater leadership and interpersonal skills in young people through guidance from SAS staff.

## **Scottish Public Services Ombudsman (SPSO)**

The Service has a positive working relationship with the SPSO for several years now and prides itself in being open, honest and timeous in its interactions.

The below table illustrates the cases currently being reviewed by the SPSO. The Service currently has 5 open cases and 5 closed cases.

Of the 10 that have been assessed by the SPSO, 5 cases have not been upheld, 3 cases are still being reviewed and two cases have been upheld.

We continue to work closely with the SPSO on any ongoing cases and ensure that all the relevant information is shared in a timely manner. For any cases that have been upheld we will prioritise any agreed recommendations for action.

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# **SPSO Tracker**

		Data CDCO haras					SPSO	SPSO	
InPhase/Datix Ref	f SPSO Reference	Date SPSO began their review	Complaint Theme	SAS Decision	SPSO Decision	SPSO Recommendations	Recommendations Target Date	Recommendations Completed Date	SPSO Status
			Lack of Co-ordination /				Target Date		
16595	202500508	25-Jun-25	Communication  Lack of Co-ordination /	Not upheld	Not Upheld	n/a	n/a	n/a	Closed
14448	202401264	11 Jun 2025	Communication	Not upheld	Still investigating	na	na	na	Open
16329	202410160	14 May 2025	Triage / Referral to NHS 24	Not upheld	Not Upheld	na	n/a	n/a	Closed
16084	202408310	24 Apr 2025	Delayed Responses & Triage/Referral to NHS 24	Upheld	Not Upheld	SAS' investigation did not identify that a main aspect of the complaint was about the time taken for a conveyancing resource to attend, and did not speak to the paramedic to determine what happened between their arrival and them calling for a conveyancing resource. SAS may wish to reflect upon this and their procedures for speaking with staff during complaint investigations.	10 Jul 2025	18 Jun 2025	Closed
				•					
DATIX 16400	202411850	29/04/2025	Delayed response	Upheld	SPSO Reviewing	N/A	N/A	N/A	Open
DATIX 16598	202407561	04/03/2025	PTS Eligibility	Not Upheld	SPSO Reviewing	N/A	N/A	N/A	Open
15534	202410738	20 Mar 2025	PTS Cancellation	Upheld	Not Upheld	To write to apologise to complainant, reissue Practice Guidelines for outbound calls to all Scheduled Care Staff as soon as possible and the process monitored by the Scheduled Care Supervisors going forward.	18 Jun 2025	18 Jun 2025	Closed
14190	202309999	21 May 2024	Delayed Responses	Upheld	Upheld	Public report with number of recommendations.	04-Aug-25	Still open	Open
13727	202304529	16 Jan 2024	Triage / Referral to NHS 24	Not upheld	Not Upheld	When responding to a complaint, where possible, it would be helpful if the SAS provided the complainant with information and explanation of any improvement initiatives they are taking to address issues raised within the complaint.	01 Jul 2025	16 Jun 2025	Closed
							Letter of Apology to complainant	1. Recommendation 1 completed and signed off (23/01/2024)	
DATIX 6473	202110696	18/05/2022	Failed to take patient to hospital	Part Upheld	SPSO have upheld	15/12/2023	Review policy on documentation standards	2. Recommendation remains open	Open
							Share report with attending crew in a supportive manner for their own learning	3. Recommendation completed and signed off (29/02/2024)	

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