



NOT PROTECTIVELY MARKED

Public Board Meeting

January 2021 Item No 09

THIS PAPER IS FOR DISCUSSION

PERSON CENTRED CARE UPDATE

essor Frances Dodd, Director of Care Quality and Professional
lopment
Hannan, Head of Corporate Affairs and Engagement
Martin, Patient Experience Manager
Board is asked to discuss the paper and provide feedback.
paper provides an update of our patient experience activity.
paper highlights our latest data on compliments, our Patient s Public Involvement work as well as complaints, their themes actions to address them.
odate is also provided on cases with the Scottish Public Services udsman (SPSO).
odate is presented bi-monthly to the Board.
Engage with partners, patients and the public to design and
oduce future service.
Engaging with patients, carers and other providers of health
care services to deliver outcomes that matter to people.
on centred care is delivered when health and social care
ssionals work together with people who use services, tailoring
to the needs of the individual and what matters to them. The
ce's Person Centred Health and Care Plan promotes patient and
participation in the development of services and continuous
ovement of the experience of patients and of staff.
nt and carer feedback involvement in service development helps
re services meet patient needs. Feedback helps drive continuous
ovements to services and evidence that service developments are
g anticipated improvements.
Service works with a wide range of patient and community groups
elp ensure that the feedback gathered is representative of
nunities across Scotland. Patient feedback is closely linked to the
ce's Equality Outcomes work.

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SCOTTISH AMBULANCE SERVICE BOARD

PATIENT EXPERIENCE

PROFESSOR FRANCES DODD, DIRECTOR OF CARE QUALITY & PROFESSIONAL DEVELOPMENT

SECTION 1: PURPOSE

This paper covers the period between 1 April 2020 and 31 December 2020. 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 this report and provide feedback.

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, complaints and concerns channels.

Latest data shows that 612 complaints have been received by the Service between 1 April 2020 and 31 December 2020.

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Feedback analysis

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 2020 and 31 December 2020, 98 stories were posted on Care Opinion relating to the Service. These have been viewed 24,150 times. NHS Greater Glasgow and Clyde and NHS Lanarkshire board areas currently make up around 37% of the stories posted.

Of the 98 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.

*There was 1 strongly critical story within these stories that was directed solely at the Service. The regional Deputy Director made contact through the channel of Care Opinion and the author replied. This feedback has now been taken through the NHS Complaints Handling procedure and the matter is now closed with the learning taken on board.

Social media

In addition to more traditional public engagement channels such as print and broadcast, the Service continues to utilise social media to engage with our audiences updating them on key developments, promoting positive patient and staff stories and participating in two way discussions with them.

Our most popular social media channels are Facebook and Twitter. Latest data relating to activity on these channels is outlined below.

'Reach' is the number of users who saw either a specific post or any content posted on our Facebook page.

'Impressions' is the total number of times a tweet has been seen.

The data also shows which types of content work for each channel.

The latest statistics show increased levels of engagement from our audiences in the content we created and we also gained over 500 new followers across our channels.

Facebook

- Posts reached on average 355,363 people between 17 December and 13 January (up by 368% from the previous 28 days)
- Videos reached 14,533 people over the same period (up by 46% on the previous month)
- An extra 386 followers during this period (38,731 followers)

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Largest posts

The top five posts between 17 December 2020 – 13 January 2021 were:

- COVID Tester Recruitment 213,333
- Retirement of Alan Neil 16,961
- Lifelines TV advert 13,795
- Paramedic on Scene 11,612
- Weather warning 7,588

Twitter

Between 17 December 2020 – 13 January 2021:

- 308,491 impressions (increase of 68% over previous 28 days)
- Followers up by 134 to 30,942

Top tweets

Top five tweets were:

- High Demand 51,238 impressions
- Queen's Ambulance Medal 37,888 impressions
- New year stay at home message 17,504 impressions
- Weather warning 17,104 impressions
- Lifelines TV Advert

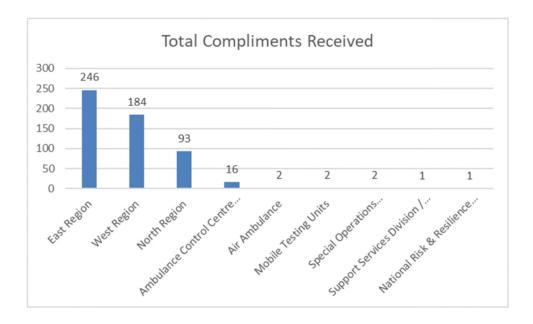
 16,057 Impressions



Compliments

Compliments received from sources other than Social Media are logged and actioned on the DATIX system. Between 1 April 2020 and 31 December 2020 a total of 547 compliments have been received. Approximately 45% of these compliments were received by East Region. The graph below shows the compliments received by each region.

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Patient Focused Public Involvement (PFPI)

Remobilisation Engagement

We have created a new Engagement Guide and Toolbox to aid in the remobilisation of services. This has been done to decentralise the process, empower project leads and to standardise our approach across the country. We are running two pilots with the Clinical Services Transformation (CST) team, one on alternate falls pathways and the other on alternate COPD pathways.

We have now completed a patient survey in to whether or not patients would like to be treated at home or in the community for a fall. This survey was disseminated with support from, Age Scotland, Alzheimer's Scotland, Stroke Scotland, The Carer's Trust, Capability Scotland and Spirit Advocacy. All of these Third-Sector organisations are entering into our formal organisational consultation process.

The feedback we receive from the organisational consultation process will allow us to benefit from the insight, research, themes and expertise held in the organisations. It also allows us to open the door to partnership and co-design.

We have also completed a patient survey into whether or not patients would like to be treated at home or in the community for COPD. This survey was disseminated with support from, Chest, Heart and Stroke Scotland and The British Lung Foundation, both are facilitating focus groups with us. Chest, Heart and Stroke Scotland, The British Lung Foundation and Action on Asbestos have entered into our formal organisational consultation process. We hope to present all data to our next planned PFPI meeting in February.

Volunteers

We continue to recruit patient representatives. We have new patient representatives starting with the Clinical Governance Committee and the National Operational Governance Group this term. This is to meet an Executive Team recommendation for two patient representatives to sit in governance groups to enable volunteers to share the workload and enable the committee to gain

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additional patient perspective. We also have a new patient representative starting with our Learning from Events group.

PFPI Strategy

Our new strategy will be presented for approval at the February 2021 Clinical Governance Committee meeting. This strategy has been developed by our National PFPI group. 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 OHCA strategy and the new Save-a-Life strategy.

Complaints Data

Between 1 April 2020 and 31 December 2020, a total of 612 complaints were received, with the Ambulance Control Centre (A&E) receiving slightly over 38% of these. This shows a 31.7% decrease from the same period last year where we had received 897 complaints.

In respect of themes

1 April 2019 - 31 December 2019	1 April 2020 - 1 December 2020
1. Delayed Response - 266 (29.7%)	1. Delayed Response - 140 (22.9%)
2. Attitude and Behaviour - 141 (15.7%)	2. Attitude and Behaviour - 129 (21.1%)
3. Triage/Referral to NHS24 - 96 (10.7%)	3. Triage/Referral to NHS24 – 57 (9.3%)

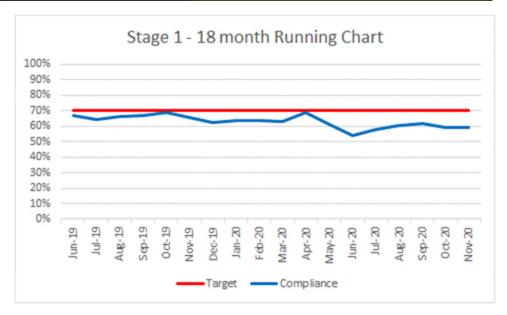
Data shows that 64.2% of the total complaints received this year are Stage 1 – Early Resolution Complaints (5-day target). This is an increase from last year where 54.8% of the total complaints received during this period were handled as Stage 1 Complaints.

Stage 1 - (1 April 2020 – 31 December 2020)

Latest results indicate that Stage 1 complaints compliance is at 59.6%, which is the same as the previous reporting period. There is focused work in both the West and the ACC to improve this performance where the biggest volumes are.

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Stage 1				
		Closed w	ithin target	
	No	Yes	Total	Compliance
Ambulance Control Centre A&E	71	50	121	41.3%
Ambulance Control Centre PTS	18	63	81	77.8%
East Region	14	54	68	79.4%
Mobile Testing Units	1	1	2	50.0%
North Region	9	7	16	43.8%
West Region	32	39	71	54.9%
Total	145	214	359	
Compliance		59	.6%	

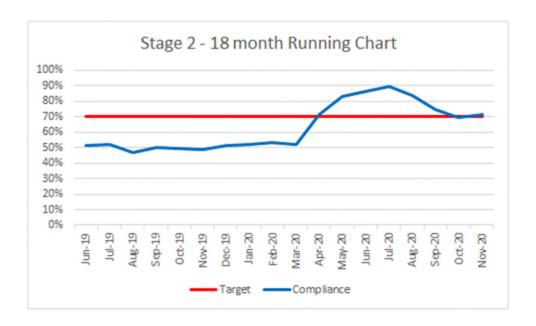


<u>Stage 2</u> – (1 April 2020 –7 December 2020)

Latest results indicate that Stage 2 complaints compliance is currently 70.2%. This compares to 74.8% in the last Board paper update.

Stage 2				
		Closed w	ithin target	
	No	Yes	Total	Compliance
Ambulance Control Centre A&E	31	40	71	56.3%
Ambulance Control Centre PTS	5	4	9	44.4%
East Region	1	37	38	97.4%
North Region	2	11	13	84.6%
NHQ/Support Services	5	0	5	0.0%
Special Operations Response Division	1	1	2	50.0%
West Region	6	27	33	81.8%
Total	51	120	171	
Compliance		70	.2%	

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Compliance Comments

Although we are still exceeding the 70% target for compliance on Stage 2, it is clear from the above dip that turn-around times for Stage 2 complaints are beginning to increase. This is likely due to the number of complaints beginning to increase and mounting operational pressures on the Service during the winter months. The Service continues to do its best to manage the competing demands of day-to-day operations, complaints handling and the response to the pandemic.

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SPSO

Date SPSO began their review	Complaint Overview	SAS Decision	SPSO Stage and Outcome	Date SPSO completed their review	Recommendations	Status of Recommendations
01/05/2019	Scottish Ambulance Service failed to respond reasonably to the request for an emergency ambulance to attend patient. Scottish Ambulance Service failed to respond reasonably to complaint of November 2018	Upheid	SPSO Have upheld part 1 and not upheld part 2	23/04/2020	SAS to send apology letter for issues identified Feedback to Clinical Advisor the findings of this report and evidence adequate processes are in place to ensure CA callbacks are made Seedback to crew the findings of this report	Complete and signed off by SPSO Complete and signed off by SPSO Complete and signed off by SPSO
02/05/2019	Scottish Ambulance Service's response to an emergency call on specific date was urreasonable	Upheld	SPSO have upheld	07/11/2019	SAS to send apology letter for issues identified Further evidence of reflection from Call Handler Update SPSO on system changes to mitigate risk of CFR's not being dispatched Confirm a suitable protocol for when Satelite Navigation fails on vehicles Evidence this review has been fed back to the crew involved Consideration for aide memoirs for cease of resuscitation	the changes.
30/10/2018	Scottish Ambulance Service's response to the emergency call was unreasonable Scottish Ambulance Service failed to conduct a reasonable investigation around complaint of response	Upheld	SPSO have upheld part 1 and part 2	28/07/2020	SAS to send apology letter for failing to keep reasonable contact with complainant and for failing to handle the complaint reasonably SAS to consider and where appropriate take action to improve identified areas of error	Complete and signed off by SPSO Complete and signed off by SPSO
03/07/2020	Scottish Ambulance Service failed to provide patient with a response within a reasonable timeframe.	Upheld	SPSO Sent information as requested - 06/07/2020 SPSO Have decided not to take this forward as nothing to add to SAS review - 07/07/2020	07/07/2020	SPSO not taking on	N/A
07/07/2020	Scottish Ambulance Service failed to provide patient with appropriate care and treatment on 20 March 2019 (Joint review where NHSD&G led)	Not Upheld	SPSO have not upheld	17/08/2020	Appropriate Care Given - High standard of Review carried out	N/A
29/06/2020	Scottish Ambulance Service failed to provide patient with appropriate care and treatment on 31 January 2018	Upheld	With SPSO Advisors	N/A	With SPSO advisors	N/A
31/08/2020	Scottish Ambulance Service failed to provide patient with reasonable care and treatment on 1 June 2019	Not Upheld	SPSO have not upheld	12/10/2020	Evidence in favour of appropriate care given and allegations unsubstantiated	N/A
25/08/2020	Scottish Ambulance Service failed to provide a reasonable resaponse to the 999 call	Upheld	SPSO not taking any further as satisfied with SAS response and actions	02/09/2020	SPSO not taking any further as satisfied with SAS response and actions	N/A
13/11/2019	Scottish Ambulance Service unreasonably failed to respond to calls for ambulance in accordance with their procedures Scottish Ambulance Serfvice unreasonably failed to properly investigate the complaint and provide an appropriate response	Upheid	SPSO have upheld part 1 but not part 2	01/10/2020	Letter of apology to be written to complainant for failing to confirm whether or not ther patients condition had worsened before continuing the call. Remind relevant staff to clarify whether or not a patient has deteriorated when making calls through the wefare call back process.	Complete and signed off by SPSO This recommendation is sitting with ACC senior Management with a due date of November 2020
17/11/2020	Scottish Ambulance Service staff failed to transfer patient in a safe manner Scottish Ambulance Service staff failed to carry out a reasonable clinical assessment of patient's condition	Not Upheld	With SPSO Advisers	N/A	N/A	N/A
18/11/2020	Scottish Ambulance Service staff failed to provide patient with reasonable care and treatment	Upheid	SPSO not taking any further as satisfied with SAS response and actions	10/12/2020	SPSO not taking any further as satisfied with SAS response and actions	N/A

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