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Public Board Meeting

September 2022 Item No 13

THIS PAPER IS FOR DISCUSSION

PERSON CENTRED CARE UPDATE

Lead Director	Professor Frances Dodd, Director of Care Quality and Professional
	Development
Author	Mark Hannan, Head of Corporate Affairs and Engagement
Author	Alan Martin, Patient Experience Manager
Action required	The Board is asked to discuss and note the paper.
Key points	This paper provides an update of our patient experience activity.
	The paper highlights our latest data on compliments, our Patient Focus Public Involvement work as well as complaints, their themes and actions to address them.
	An update is also provided on cases with the Scottish Public Services Ombudsman (SPSO).
Timing	An update is presented bi-monthly to the Board.
Associated Corporate	Risk 4638 – wider system changes and pressures
Risk Identification	
Link to Corporate	1.1 – Engage with partners, patients and the public to design and
Objectives	co-produce future service.
	1.2 - Engaging with patients, carers and other providers of health
	and care services to deliver outcomes that matter to people.
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.
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

PROFESSOR FRANCES DODD, DIRECTOR OF CARE QUALITY & PROFESSIONAL DEVELOPMENT

SECTION 1: PURPOSE

This paper covers the period between 1 April 2022 and 8 September 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

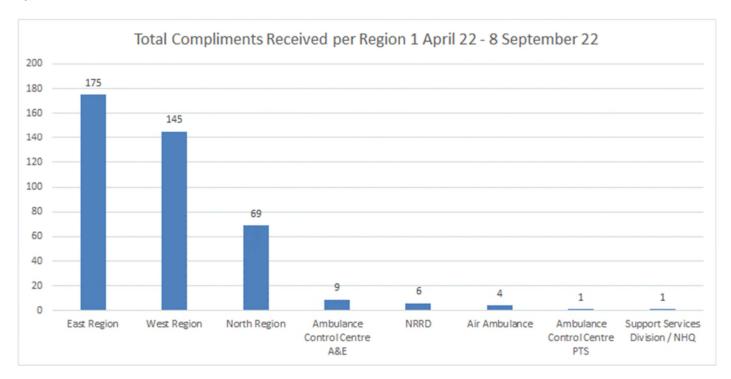
The Service actively seeks feedback on its services in order that it can continue to make improvements. We have many ways of gathering feedback – face to face, patient forums, online portals, complaint and concern channels.

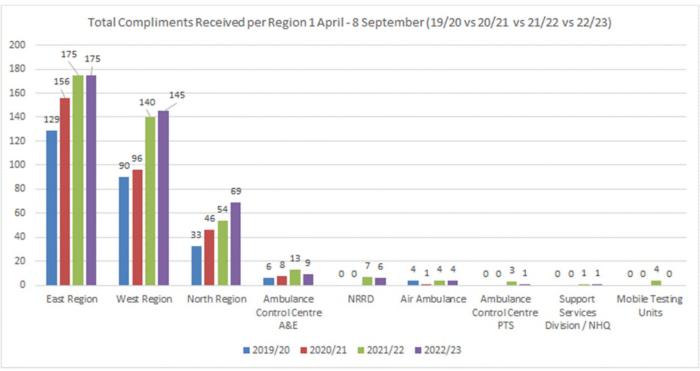
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Feedback analysis

Compliments

Compliments received from sources other than social media are logged and actioned on the DATIX system. Between 1 April 2022 and 8 September 2022, a total of 410 compliments have been received, an increase of 2.3% from last year. East Region received around 43% of these compliments. The graph below shows the compliments received by region for the financial year so far.



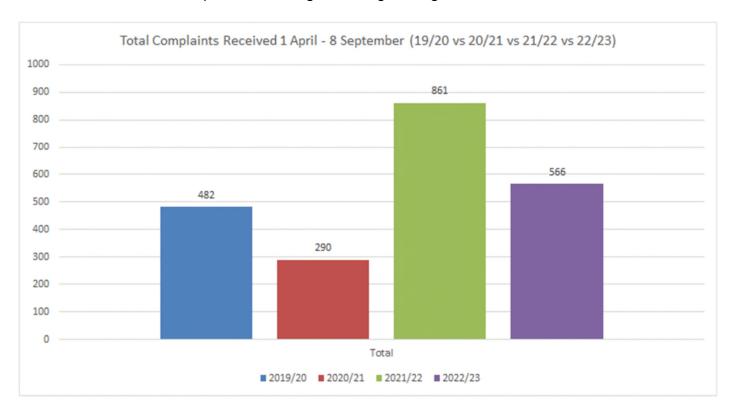


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Complaints Data

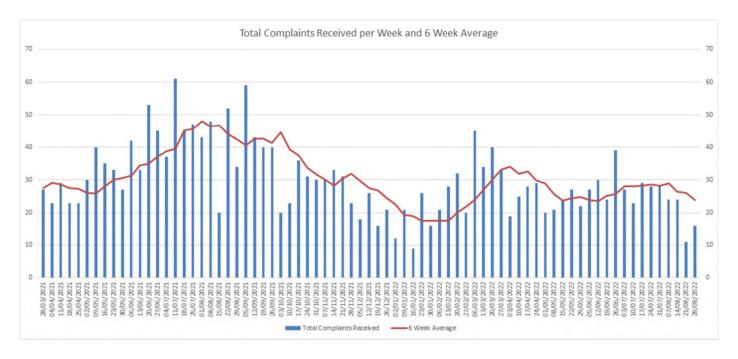
Between 1 April 2022 and 8 September 2022, 566 complaints have been received. This shows a decrease of 295 (34.3%) complaints in comparison to the previous financial year but an increase of 84 (17.4%) from 2019/20 (2019/20 data included due to the low levels seen through COVID).

Although the numbers are still higher that pre-COVID, this is to be expected given the continued system pressures. It is however positive to see the complaints numbers decrease from what was an exceptionally challenging year for the Service in all aspects. Credit should be given to all staff who have worked tirelessly to ensure that not only frontline operations remain functional, but that support mechanisms such as complaints handling are being managed.

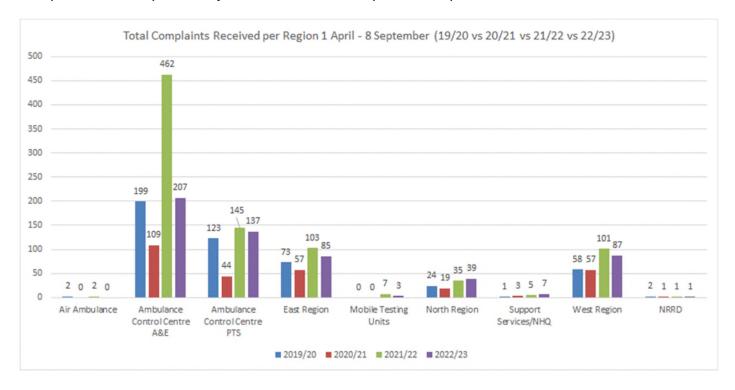


The chart above compares the volume of complaints received between 1 April and 8 September over the last four years and the chart below shows the number of complaints received per week from quarter 1 last year with a 6 week rolling average line to provide a clearer trend. What is clear from below is the number of complaints per week, whilst rising in February 2022 into March 2022, has declined gradually. This is evidenced in the section of compliance.

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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 566 received, the 3 most common themes for complaints are

- 1. Attitude and Behaviour 114 complaints (20.1% of the total, compared to 20.7% in the last paper)
- 2. Delayed Response 110 complaints (19.4% of the total, compared to 20.7% in the last paper)
- 3. Triage/Referral to NHS24 80 complaints (14.3% of the total, compared to 13.9% in the last paper)

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Actions from Complaints

As mentioned in the previous paper, we are keen to gain some insight into attitude and behaviour complaints. The Learning from Events Group has asked that a deep dive into a sample of these complaints be carried out. The Patient Experience Manager is leading this with support from a Clinical Governance Manager and a clinician. This piece of work seeks to understand if there are any trends in the working environment. It is anticipated that details of the early findings of this work will be reported through the next Learning from Events group to the Clinical Governance Group in due course.

Whilst the reduction in Clinical Assessment complaints should be taken as a positive, work will always be ongoing to learn from these incidents. An example of learning is from feedback around obstetric care that has resulted in work being carried out to improve guidelines. Supported by medical experts and feeding into a UK group, it is hoped that this will inform the JRCALC updates in the future.

The majority of delayed response complaints continue to be identified as demand and capacity related. The Service continues to recruit frontline operational posts in line with the Demand and Capacity workstream, as well as recruiting to posts within the clinical hub in ACC to improve patient safety through enhanced management of the waiting calls. The Service continues the work to improve Hospital Turnaround delays, including daily engagement between territorial boards and the Service, the implementation of hospital arrival screens, the dispatch of managers to hospital sites at trigger points and guidance on escalation that has been issued from the Chief Operating Officer and Medical Director.

Stage 1 Complaints (1 April 21 – 1 September 22)

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.

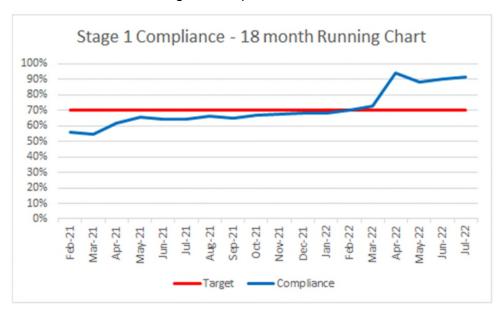
Stage 1								
		Closed wi	thin target		Still Open and			
	No	Yes	Total	Compliance	now overdue			
Ambulance Control Centre A&E	3	126	129	97.7%	0			
Ambulance Control Centre PTS	2	116	118	98.3%	0			
East Region	3	50	53	94.3%	1			
Mobile Testing Units	3	0	3	0.0%	1			
North Region	12	18	30	60.0%	0			
Support Services/NHQ	1	2	3	66.7%	1			
West Region	8	56	64	87.5%	1			
NRRD	1	0	1	0.0%	1			
Total	33	368	401		5			
) ·			
Compliance			91.8%					

Latest figures show the Service is sitting at a compliance rate of 91.8%, a slight increase from 90.2% in the previous paper. The government target is 70% of complaints to be dealt with by the target

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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 – 11 August 22)

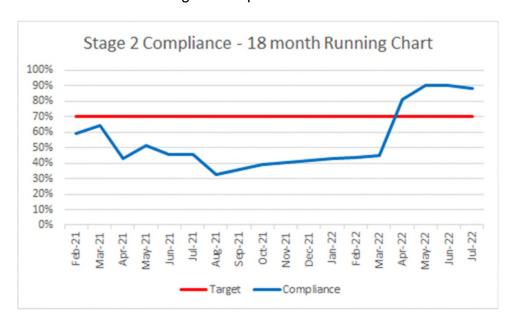
Stage 2 complaints have a 20-day target to be closed and all stage 2 complaints should be closed with a final response letter from a Director. A full investigation is also required, and all evidence collated to ensure the investigation will stand up to scrutiny from the SPSO, other auditors and legal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

Stage 2										
		Closed within target								
	No	Yes	Total	Compliance	now overdue					
Ambulance Control Centre A&E	4	65	69	94.2%	0					
Ambulance Control Centre PTS	0	15	15	100.0%	0					
East Region	2	23	25	92.0%	0					
North Region	3	4	7	57.1%	0					
Support Services/NHQ	2	2	4	50.0%	1					
West Region	4	11	15	73.3%	0					
Total	15	120	135		1					
Compliance			88.9%							

Latest figures show the Service is sitting at a compliance rate of 88.9%, a slight increase from 88.6% 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.

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



Compliance Comments

The Service continues to perform strongly against the compliance target with a clear focus on providing a thorough investigation and quality response to complaints within the compliance periods.

There continues to be an encouraging ratio of Stage 1 to Stage 2 complaints with the ratio currently sitting just above 3:1. The desire of managing more complaints at the early resolution stage of the Complaints Handling Procedure is being actioned within the regions and national operations. This is positive in that, not only does it align with the SPSO guidance of seeking early resolution, it also affords time to focus on complex complaints. This is evidenced in the table below which shows the total complaints received in the first two months of the financial year for the previous four years. The ratio of Stage 1 to Stage 2 complaints, 3:1 when compared across the health boards is in the midrange.

Total Complaints between 1 April - 8 September (19/20 vs 20/21 vs 21/22 vs 22/23)												
	1	2019/20		1	2020/21		7	2021/22		1	2022/23	
	Stage 1	Stage 2	Total									
Air Ambulance	0	2	2	0	0	0	0	2	2	0	0	0
Ambulance Control Centre A&E	53	146	199	61	48	109	232	230	462	134	73	207
Ambulance Control Centre PTS	94	29	123	38	6	44	126	19	145	121	16	137
East Region	40	33	73	37	20	57	54	49	103	54	31	85
Mobile Testing Units	0	0	0	0	0	0	7	0	7	3	0	3
North Region	14	10	24	11	8	19	27	8	35	31	8	39
Support Services/NHQ	0	1	1	0	3	3	2	3	5	3	4	7
West Region	32	26	58	41	16	57	70	31	101	69	18	87
NRRD	1	1	2	0	1	1	1	0	1	1	0	1
Total	234	248	482	188	102	290	519	342	861	416	150	566
Percenatge Ratio	48.55%	51.45%		64.83%	35,17%		60.28%	39.72%		73.50%	26.50%	

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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 2022 and 8 September 2022, 76 stories were posted on Care Opinion relating to the Service. These have been viewed 15,052 times

Of the 76 posts, 67% 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)

2030 Meeting

We held a positive meeting with 10 of our patient representatives from our Involving People Network and members of the Strategy and Planning Team to discuss the implementation and delivery of our 2030 Service Strategy.

The Strategy and Planning Team were able to present on the main aims of the strategy, including continuing to provide people with the right care, at the right time and in the right place. They highlighted our work on prevention to improve the health and wellbeing of our population, and the investment in the education and wellbeing of our staff. We also discussed utilising new technology to meet the growing needs for our service.

A widely debated topic was our mental health response, and how it is one that is constantly learning from lived-experience and through our partnerships with Third-Sector organisations.

The participating Patient Representatives were located throughout Scotland, from the Highlands to the Borders, and were able to bring their own unique experiences based on their location to the discussion. This meeting was also the first meeting for our newly recruited patient representative from the Western Isles.

We will soon be holding similar meetings in partnership with patient representatives from NHS 24, Healthcare Improvement Scotland, members of Alzheimer's Scotland and members from the Glasgow Disability Alliance.

Air ambulance re-procurement discussion groups

We continue to arrange discussion groups for the air ambulance team as part of our engagement on air ambulance re-procurement. Patient and community groups throughout the north of the country have been keen to hear what themes have come out of the engagement work.

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We will discuss the answers to these questions with communities during our planned engagement sessions.

- To highlight some of the work we have been doing:
- Meetings in Orkney with the help of third sector partners, Age Scotland.
- Discussion groups throughout the country with members of the Royal National Institute of the Blind (RNIB), to listen to and learn from the experiences of our partially sighted and blind patients.
- We will soon be running a discussion group in Argyll and Bute with the Medcats, which is the oldest and longest running patient group in Scotland.
- We are attending the NHS Western Isles lived experience forum.

Mental health lived experience forum

With the advice and guidance of third sector partners in See Me, the Mental Health Foundation and the Samaritans, we are putting together a proposal to the mental health and dementia team, to create a lived experience forum consisting of patients and service users.

The creation of this forum will give insight and guidance on lived experience and help us incorporate these experiences and learning into the delivery of our Mental Health strategy and associated strategic work. 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 developing a training schedule to trial the use of the new mental health training package designed by the mental health and dementia team, guidance and expertise from See Me, with the insights from volunteers and patients. We believe this will be of great assistance to scheduled care call handlers in dealing with patients experiencing mental ill-health.

Projects for young people

With the support of Young Scot, we are exploring further ways to engage young people in our service, including work experience and the development of our mentorship program. This will be a cross-directorate plan with the support and knowledge of colleagues in workforce development and education.

SPSO

The Service currently has 7 open cases from the SPSO and has closed 8 since the previous paper. Following engagement with the SPSO, in Q1 this year there were 20 open cases with the SPSO compared to only 9 the previous year. However, it should be noted that the SPSO is working through a significant backlog with some of the cases dating back to 2019/20.

In terms of cases referred to the SPSO, 6 were referred during Q1 in 2021/22 compared to 10 this year. Whilst there is an increase in cases referred, this is not necessarily unexpected, given the higher volume of complaints received last year. If this is analysed as referrals per complaints, last year was 1 referral per 48.3 complaints and this year is 1 referral per 86.1 complaints. This is a reassuring measure and one that we will continue to track.

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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/Close
OATIX 7732	202105253	06/07/2022	unknown vet	Part Upheld	SPSO Considering whether to review or not	N/A	N/A	N/A	Open
DATIX 9493	202111671	31/08/2022	Scottish Ambulance Service treatd patient in an inappropriate and unprofessional manner 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	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	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	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	The care that Patient A received from the Scottish Ambulance Service was unreasonable; 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 aruond 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 bystanderds 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 2 completed, awaiting sign off from SPSO Recommendation 3 completed, awaiting sign off from SPSO Recommendation 4 completed, awaiting sign off from SPSO	Open
DATIX 7795	202103065	15/10/2021	Ambulance Crew unreasonably failed to take Patient to hospital	Part Upheld	SPSO Reviewing	N/A	N/A	N/A	Open
DATIX 8034	202102373	04/07/2022	Scottish Ambulance Service failed to respond within a reasonable time to the patient	Upheld	SPSO have not upheld	15/06/2022	N/A	N/A	Closed
DATIX 9660	202201056	20/05/2022	Scottish Ambulance Service failed to send an ambulance in a reasonable time	Upheld	SPSO have not taken forward	24/08/2022	N/A	N/A	Closed
DATIX 5599	202007604	30/11/2021	Scottish Ambulance Service failed to provide appropriae care to patient with SEPSIS Scottish Ambulance Service failed to document the events accurately	Not Upheld	SPSO have not upheld	10/08/2022	N/A	N/A	Closed
DATIX 7820	202103662	16/06/2022	Scottish Ambulance Service railed to document the events accurately Scottish Ambulance Service crew attitude and Behaviour complaint	Not Upheld	SPSO have not taken forward	21/07/2022	N/A	N/A	Closed
DATIX 9060	202103002	31/03/2022	Scottish Ambulance Service handover included innacurate information	Not Upheld	SPSO have not taken forward	31/03/2022	N/A	N/A	Closed
DATIX 7120	202109170	18/05/2022	Scottish Ambulance Service nandover included inhactifate information Scottish Ambulance Service unreasonably left patient at home	Not Upheld	SPSO have not taken forward	16/08/2022	N/A	N/A	Closed
DATIX 3850	201903984	16/03/2021	Scottish Ambulance Service diffeasonably feit patient at nome Scottish Ambulance Service failed to reasonably assess patients condition and; Scottish Ambulance Service failed to reasonably assess the complaint	Upheld	SPSO have not upheld part 1 but upheld part 2	15/03/2022	1. Letter of Apology to complainant 2. Share the review with Investigating Officer	1. Complete 2. Complete	Closed
DATIX 6701	202007781	28/04/2021	Scottish Ambulance Service failed to respond reasonably to a request for an ambulance from NHS24 and; Scottish Ambulance Service failed to respond reasonably to a 999 call	Upheld	SPSO have not upheld	29/03/2022	SPSO conclude that SAS complaints process was adequate, highlighting high standards and professionalism by call taker	N/A	Closed

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