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Public Board Meeting

30 September 2020 Item No 07

THIS PAPER IS FOR APPROVAL

PATIENT EXPERIENCE ANNUAL REPORT 2019/20

Lead Director	Professor Frances Dodd, Director of Care Quality and Professional		
Author	Development		
Addio	Mark Hannan, Head of Corporate Affairs and Engagement		
	Alan Martin, Patient Experience Manager		
Action required	The Board is asked to review and approve the Annual Report.		
Trainer requires	The Beard is deficed to review and approve the familian respons		
Key points	This paper provides an update of our patient experience activity from		
	1 April 2019 to 31 March 2020.		
	The paper highlights our data on compliments, our Patient Focus		
	Public Involvement work as well as complaints, their themes and		
	actions to address them.		
Timing	An update is presented annually to the Board. The Annual Report was		
· · · · · · · · · · · ·	approved by the Clinical Governance Committee at its meeting on 17		
	August 2020.		
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.		
Contribution to the	Person centred care is delivered when health and social care		
2020 vision for Health	professionals work together with people who use services, tailoring		
and Social Care	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		
Benefit to Patients	improvement of the experience of patients and of staff.		
Denemit 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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Doc: Patient Experience Annual Report 2019/20	Page 1	Author: Patient Experience Manager
Date: 2020-09-30	Version 1.0	Review Date: N/A





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SCOTTISH AMBULANCE SERVICE BOARD

PATIENT EXPERIENCE ANNUAL REPORT

PROFESSOR FRANCES DODD, DIRECTOR OF CARE QUALITY & PROFESSIONAL DEVELOPMENT

SECTION 1: PURPOSE

This annual report covers the period between 1 April 2019 to 31 March 2020. It provides an update on trends, themes and mitigating actions from patient and carer feedback.

SECTION 2: RECOMMENDATIONS

The Board is asked to approve the report. It was approved by the Clinical Governance Committee on 17 August 2020.

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.

Annual data shows that over 1000 compliments were received about the care provided by our staff.

In 2019/20, 1161 complaints were received. This was a small increase from last year, up 4%. A total of 636 complaints were Stage 1 and 525 were Stage 2 complaints.

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Feedback, Comments, Concerns and Complaints Annual report

2019/20



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1. Introduction

As the new decade gathers pace, the Scottish Ambulance Service is faced with new challenges, but also new opportunities. Our remit remains the same – to save more lives and to give patients across Scotland the very best services – but we need to be prepared for what we know is on the horizon; and for what we cannot predict.

We know, for example, that demand for services is only likely to increase. Scotland's population has grown by five per cent in the previous decade. There are now around 250,000 more people living in Scotland than there were in 2010. We also know that, as people live longer, we are dealing with an increasingly older population.

On the other hand, there are unpredicted events which we must try to anticipate by having in place, robust escalation procedures and resilience plans; for example, the bad weather from the beast from the east that hit us in the early part of 2019 and, of course, the vastly bigger challenge of dealing with the Coronavirus and our contribution to Scotland's Recovery and Renewal.

Our staff, volunteers and partners have responded fantastically to the Covid-19 pandemic, rapidly developing innovative solutions to ensure we can effectively help patients and communities safely.

Frontline staff have learned new skills in treating patients wearing protective PPE kit that was previously not necessary; Critical Care Advanced Practitioners are providing enhanced triage support on critically unwell 999 calls; meanwhile, Advanced Urgent Care Practitioners, are utilising the instant video capabilities of the GOODSAM App to consult patients online, helping to guide clinical decision making about the most effective care with patients.

In addition, all our staff have found new ways of working which reduces their amount of physical contact, by maximising the use of online software such as Microsoft Teams and using remote telephone meeting technology to conduct business meetings.

This really has been one of the most challenging times for the Service. However, these new ways of working are helping us to find new ways of providing good patient care. Meanwhile, new resources are being utilised out of necessity during the pandemic, that could forever change the way we operate. As we move to the next stage of the pandemic, we will continuously assess the worth of all the changes implemented, building on our learning to ensure we give patients the best care possible.

Prior to the pandemic we were in the advanced stages of developing our forward strategy. These longer-term plans - though now on temporary hold until the pandemic abates - are designed to help us plan for the future, so that we can meet both those changes we are pretty sure about and those we can only anticipate.

Our 2020 'Taking Care to the Patient' strategy was developed in 2015 and enabled the Service to improve survival rates, clinical safety and effectiveness and shift the balance of care through a programme of clinical service transformation, workforce development and investment in new technology, equipment and vehicles.

Our longer-term plans now are centred around our 2030 strategy. Our focus is to imagine what Scotland, and the world, could look like ten years from now and use that information to design and develop our services whilst maintaining high quality, patient-focused care.

Our prime focus will be aligning our work over the next decade to deliver national outcomes as one of Scotland's key national assets. Besides maintaining and improving our services, we will be developing closer collaborative working with other health and care partners, volunteers and voluntary groups, other statutory bodies and partners in innovation and research.

Our strategy is being co-designed with staff, our key stakeholders and, most importantly, our patient users - essentially anyone and everyone who has the potential to be one of our patients. We want it to be based on the best evidence we can source and driven by feedback from those sources so that we can drive change and improvement.

The current COVID-19 pandemic brings with it much uncertainty, however we have a strong level of preparedness and resilience in place. Overall, we are looking towards the new decade with confidence in our staff, the work we are doing, the plans we are making and the leadership development we are investing in; all of which will ensure a successful coming year and decade.

2. Encouraging and Gathering Feedback

We actively promote a range of methods by which members of the public can feedback their experiences of the Scottish Ambulance Service. Email and telephone continue to be the primary method of contacting us, but the public are increasingly utilising online channels such as Facebook, Twitter, the Scottish Ambulance Service website and Care Opinion. We also encourage feedback through the Citizens Advice Scotland 'Patient Advice and Support Service'.

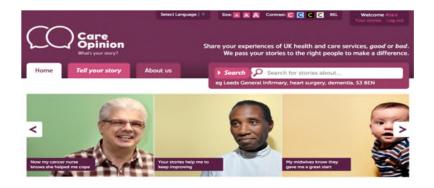


The vast majority of our feedback is positive and any comments from patients, their families, carers or members of the public are fed back directly to the staff involved and their manager.

Where negative feedback is involved, a thorough investigation is undertaken and we engage with complainants throughout the process to explain why certain actions were taken, where any lessons have been learned or where remedial action may have been taken. In certain cases, formal face to face meetings are offered and, where appropriate, a sincere apology offered.

Care Opinion

We continue to promote Care Opinion as a valuable channel for feedback from patients, families and carers who would rather express their views anonymously or indirectly to the Service. The website allows their voice to be heard on a national forum and gives us a great opportunity to engage with them about the care they received or assist them with any ongoing issues.





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How did you feel?



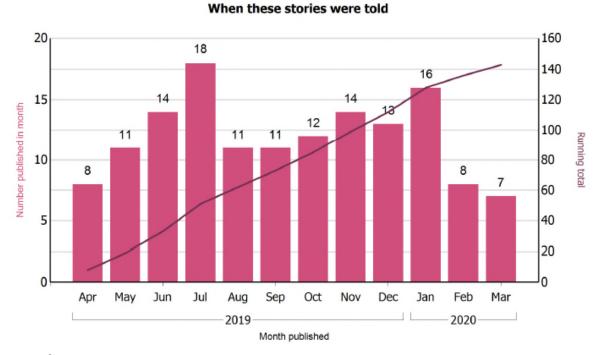
Care Opinion engagement

The Service continues to focus on providing swift and high quality responses to the feedback we receive and this year we responded to 96% of stories within the 5-day target.

In 2019/20, there were 143 posts on Care opinion about the Scottish Ambulance Service, which were viewed 39,986 times. This is an 8% decrease compared to the previous year.

Of the 143 posts, 75% were uncritical in tone. *NB criticality scores are assigned by moderators* (not the public) to stories. They are assigned **per story** as opposed to **per service**. What this means is that whilst a story may have some form of criticality, this does not necessarily mean it is towards all services mentioned.

There has been a relatively stable rate of posts about the Scottish Ambulance Service over the course of the year, with the busiest month being July 2019 with 18 posts.



Compliments

The Service continues to receive fantastic support from patients, carers and their families and our staff received over 1000 compliments in 2019/20 about the fantastic care they provided.

What do we do well?

According to the positive feedback received, the following 5 actions and behaviours were most valued by patients:

- Clinical skill and quality of care
- Positive attitude of staff
- Providing reassurance and explaining what was happening
- Response time to scene
- Compassion

At every Board meeting, we focus on a patient and carer story, giving members of the public and board members the opportunity to engage and share examples of excellence in care or identify areas for improvement where things may have gone wrong.

Patient Experience Story - 2020



Social media engagement

Scottish Ambulance Service

We receive the vast majority of our compliments via digital media channels such as Facebook, Twitter and our website – and this positive feedback continues to grow.

The majority of stories shared with our Board in 2019/20 also came directly from digital feedback received by our Patient Experience Team.





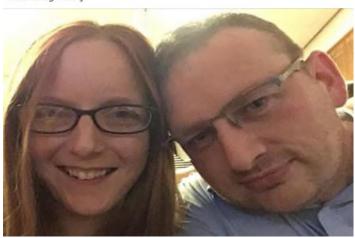
Lovely compliment we received for James Mitchell and Paul Stammers of Ellon Station 75 6

Terri, of Tarves, Aberdeenshire, thanked the crew for saving her husband's life

"They were both absolutely incredible. My husband had collapsed at home and was in a bad way. The patience and understanding they showed really helped us to keep calm and stay positive despite me thinking my husband was about to die

"I cannot put into words how grateful I am for what they did for us. I know for a fact they saved my husband's life getting to us so quickly, getting him stable and to hospital quickly."

Great work by the Ellon crew and amazing to hear that Alex is at home recovering slowly





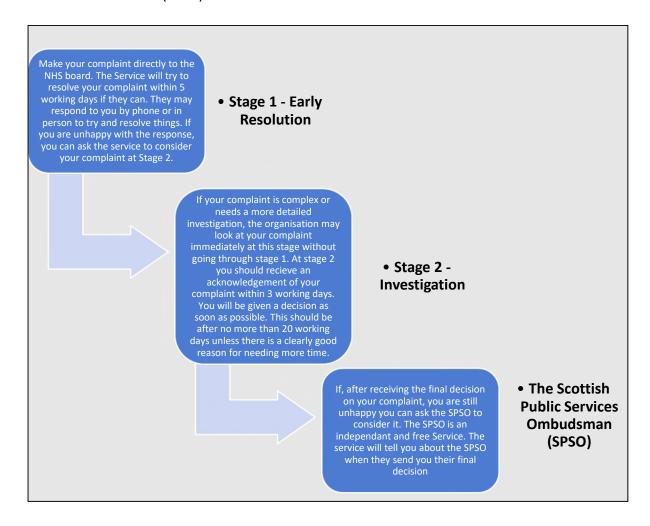
Darren Jack, Debbie Anderson and Mat Stephenson, of Edinburgh City, were dispatched by Kris Glen.

▶ Read more at bit.ly/2UY7iFc



3. Encouraging and Handling Complaints

On the 1st of April 2017, NHS Scotland implemented a new NHS Complaints Handling Procedure (CHP). This was put in place in an effort to improve and standardise how all NHS Boards handle complaints. There is now a two stage process in place. If at the end of this process, the complainant is not satisfied with the outcome, they are sign posted to the Scottish Public Services Ombudsman (SPSO).



This new process has required a period of transition for the Service, but it has been a positive development. The new Complaints Handling Procedure has led to a more robust system which allows internal investigations to be handled in a more standardised manner. We have also seen improvements in the way in which we are working together with other NHS Boards to respond to complaints which involve multiple departments or agencies.

During 2019/20, 1161 complaints were received. This was a small increase from last year, up 4% from 1113.

636 were 'Stage 1' complaints and 525 were 'Stage 2' complaints.

To provide some context, the number of complaints received by the Scottish Ambulance Service in 2019/20 represents around 0.07% of all the calls we received asking for our assistance.

While complaints handling is co-ordinated and quality assured by the Patient Experience Team, the complaints investigation is handled locally by operational colleagues, who will contact the complainant and staff members about the issues raised in order to promote early resolution.

Early conversations with the complainant also help to put in place a proportionate review or investigation into the circumstances which led to the complaint. Local managers have access to report functions in order to understand what is working well and to identify areas for improvement. The Patient Experience Team reviews feedback data at a national level to identify any emerging trends which might relate to systemic issues.

The Patient Experience Manager also sits on the National Clinical Operational Governance Group (NCOGG) to ensure complaints themes are cross-referenced against Significant Adverse Event Reviews. He is also a member of the UK National Ambulance Service Patient Experience Group (NASPEG) which enables us to look at the patient feedback we receive in the context of other UK ambulance services and trusts.

4. Accountability and Governance

We ensure patients and carers continue to have access to a range of feedback options for providing feedback to the Service.

Complaints handling is co-ordinated by the Patient Experience Team, with each complaint looked into at local level to drive improvement, while identifying any issues which require national consideration. Our Patient Experience Manager is also a practising paramedic and thus is able to identify any potentially serious clinical complaints quickly.

Complaints trends and themes are shared in a patient experience paper which is a standing item at our Clinical Governance Committee meetings and our Public Board meetings. This enables members of our Clinical Governance Committee and our Board to review emerging feedback and complaints trends and ensure individuals and groups of staff are given responsibility for addressing areas for improvement and embedding good practice.

Complaints Compliance

Guidance states that all NHS Boards in Scotland should aim to respond to 70% of 'stage 1' complaints within five working days and 70% of 'stage 2' complaints within 20 working days.

Unfortunately, the Scottish Ambulance Services did not meet the compliance rate target this year. There have been a variety of challenges and pressures on staff within the Service which have made it difficult to turn around some complaints within 20 working days. The implementation of new software at the beginning of the financial year also took some time to bed in, but this software is vital to improving efficiency in the years ahead.

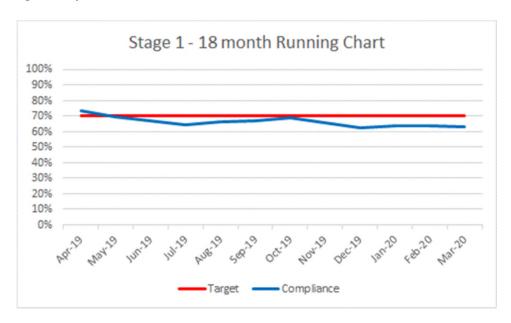
Whilst it is disappointing that we were unable to meet the 20 working day target, we have worked hard to put in place new processes to facilitate a quicker turn-around of complaints

within the 20 working days' timeline whilst at the same time making sure that the quality of our investigations and our engagement with patients takes precedence over speed of response.

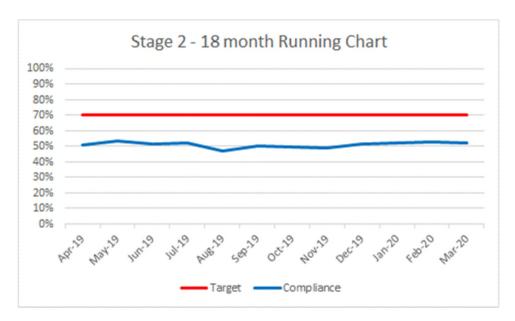
The further improvements we have made to our procedures across Scotland are beginning to show results, with quarter 1 of the new financial year indicating compliance at over 80%. We are keen to build on this positive start in the year ahead.

In 2019/20, Stage 1 compliance was 63.1%, up from 62.8% last year. Stage 2 compliance was 52%, down from 73.4% last year.

Stage 1 target compliance rates 2019/20



Stage 2 target compliance rates 2019/20



Scottish Public Services Ombudsman

The Scottish Ambulance Service continues to have a positive and co-operative relationship with the Scottish Public Services Ombudsman (SPSO).

In 2019/20 there were 6 SPSO cases fully investigated, this is a reduction of 7 from the previous financial year. The SPSO upheld 4 and did not uphold 2. Where cases are upheld, the Service may already have undertaken much of the improvement work and any remedial action suggested by the SPSO in advance of the findings being formally issued. Where this isn't the case, the Service will put in place a plan to complete the recommendations.

5. Our Culture of Learning from Feedback, Comments, Concerns and Complaints

We have made a clear commitment to ensuring the voice of our patients, their carers and the public have a say in how our services are delivered. This explicit commitment featured prominently in our corporate objectives. The first goal of our 2020 Strategy: "Taking Care to the Patient" commits to ensuring our patients, our staff and the people who use our services have a voice and can contribute to service design, with people at the heart of everything we do.



The goal is translated into action in many ways. For example, our project governance documents require project boards to review patient and public involvement requirements in relation to every project to be delivered. Consideration of patient and public involvement at the earliest stages of scoping our projects enables us to build involvement into our projects from the start.

Another example of how seriously we take our responsibilities to involving patients and members of the public is illustrated by how we share patient and carer films across different parts of the Service so that our staff can hear real examples of what went well and what could have been done better in incidents taking place across the country.

The experience of our patients also features strongly in chief executive communications with our staff, where good practice is highlighted in the weekly staff update. Developments in patient care are a regular topic in a quarterly webcast, where staff from across the Service can discuss their recent experiences and any aspects of patient care.

The Service also proactively gathers patient and carer feedback on how we deliver services at a local and national level. The role of the Scottish Ambulance Service is integral to the entire healthcare system in Scotland and our Patient Focused Public Involvement (PFPI) Group has allowed us to share and receive ideas on future development and improvement. The group has recently been integral in shaping our new Involving People Strategy, and as a critical friend when developing and delivering new engagement approaches.

We have held a number of meetings in 2019/20 with our PFPI Group seeking their input and feedback on a range of new developments within the Scottish Ambulance Service. Topics discussed have ranged from digital engagement, improving the support we provide to members of the public experiencing mental health difficulties, to how we can better assist patients in their home. We will soon be trialling a new co-design approach with our PFPI Group to create and develop services for patients across Scotland.

Through this work, we are creating a space for open dialogue where people can give us direct feedback and based on their insights, we can implement change. This is valuable feedback we would not otherwise be able to access through our formal channels or through a more passive approach.

Our Engagement Manager has been growing and maintaining our relationships with our local communities. We are proud of our partnership working with Third-Sector organisations and community groups. When rolling out our New Clinical Response Model, feedback from our consultation work with community groups across Scotland supported us in finding new channels and methods to actively seek feedback. Partnership working has led to a large-scale engagement programme with the mental health charity See Me to aid in the development of our Mental Health Strategy. Our partnership continues to aid our staff Wellbeing Strategy, and in the co-design of our Patient Needs Assessment – the criteria used when arranging Patient Transport.

We continue to grow our network of individual, public sector and third sector organisations to act as Patient Representatives. Patient Representatives sit on our Strategic and Governance steering groups to provide the public/patient voice into the forming and exploring of key decisions. Stroke Scotland, the MS Society and the Scottish Older People's Assembly (SOPA) have been working with us this year to support and inform the Patient Representatives we have representing their organisations in our Clinical Services Transformation (CST) Programme Board, Clinical Governance Group, National Clinical Operational Governance Group (NCOGG) and our Scheduled Care Group. This vital input at the heart of our Service means that we are getting more meaningful and substantive public feedback than ever before.

We continue to actively recruit Patient Representatives and members for our PFPI Group. We pride ourselves on have a diverse range of volunteers from across Scotland. We continue to increase the number and level of supports we offer our volunteers, to ensure a mutually beneficial relationship.



Patient Experience

Tell us about your experience ...

We are working in tandem with regional health boards to engage with their pre-existing community networks, as well creating our own new regional groups, alongside partners such as Healthcare Improvement Scotland: Community Engagement. Through this and other work, we are promoting a culture of learning from feedback such as compliments, comments, concerns and complaints.

6. Improvements to Services

Complaint and concern themes and trends

The top three complaint themes in 2019/20 were Delayed Response, Attitude & Behaviour, and Triage/Referral to NHS24.

Feedback data received by the patient experience team is shared widely across key staff and business areas in the Scottish Ambulance Service on a quarterly basis to allow them to identify learning and actions.

Delayed Response:

The Service does experience periods of excessive demand, particularly in cases where there have been a large number of call outs to help patients who are in an Immediately Life Threatening Situations, such as a cardiac arrest, or there has been very poor weather which results in delays around the workflow. As a result, some less ill patients sometimes have to wait longer and this can understandably lead to complaints about why there was a delay in getting to a patient.

All delayed response complaints are examined individually and a root cause analysis is carried out via call audits and an examination of the Sequence of Events to identify if correct

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procedures were followed or if there were any missed opportunities to send a resource. As part of this work, the Service actively contacts and meets with patients to apologise and explain why a delay may have occurred. We also explain what we are doing to improve the situation.

The Service is continuing to recruit extra staff and invest in our fleet and is aligning shift patterns to busy times of the day. For example, we are making good progress in our commitment to train an additional 1,000 paramedics to 2021 and are implementing a £78 million investment plan for our fleet of vehicles. An evaluation of our New Clinical Response model published last year also showed a 43% increase in survival for our sickest, most seriously ill patients. This demonstrates that we are getting it right when it comes to our highest priority cases and is a positive platform to build upon. Work continues to look at how we can improve response times for less ill patients.

A strategic demand and capacity review is continuing to be undertaken to identify current and predicted future demand across the country and this exciting piece of work will allow us to strategically align resources with demand. The aim is to significantly reduce delayed responses by ensuring we have the right resources, in the right place, at the right time.

Attitude and Behaviour

We continue to promote positive patient experiences and the importance of positive attitude and behaviour through sharing patient and carer stories with all our staff and linking with our education department to ensure best practice is highlighted.

It is encouraging that the number of compliments the Service receives about the positive attitude and behaviour of our staff far outweighs the number of complaints received about the same issue. However, we are keen to know more about the drivers for these complaints in order to learn from them. We are working alongside patients in each and every case to better understand what may have gone wrong — and taking action as a result of this feedback with the staff members involved to identify any individual or organisational learning.

Triage/Referral to NHS24

When someone phones 999 they are taken through a number of questions that determine the most appropriate resource for the patient. This system is called MPDS (Medical Priority Dispatch System) and is a licenced product which is used throughout the world by many ambulances.

Not every 999 call results in a physical resource being dispatched and there are occasions where it is more appropriate to request that one of our, or one of NHS24's highly qualified clinicians call the patient back for a more in depth clinical triage. This will often result in the right care being provided to the patient which doesn't always require transport to an Accident and Emergency department.

Understandably, there are occasions where this is not a satisfactory outcome given the number 999 has been called and an ambulance has been requested. On every occasion where this decision is disputed the Service carry out a thorough investigation to determine whether or not there is any learning to be identified and if not, engage with the complainant to try and better understand why it is that they remain dissatisfied.

Conclusion

Reflecting on the year, it has been a busy and challenging one. We have worked hard to put in place new processes to facilitate a quicker turn-around of complaints within the 20 working days' timeline, whilst at the same time making sure that the quality of our investigations and our engagement with patients takes precedence over speed of response.

Quality and the importance of patient outcomes are key drivers for our work right across the organisation and learning from feedback from those who use our services, whether positive or negative, is vital to delivering high quality care.

We'd like to say thanks to all the patients and the people who have given us feedback and we hope that this report highlights some of the ways in which this important feedback is helping to shape improvements to our services in response. We would also like to say thank you to our staff who work so hard each day to deliver care which is safe, effective and person centred.

Contact us

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