



PUBLIC BOARD MEETING

27 May 2026

Item No 15

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 Christopher Purnell, Public Involvement and Engagement Manager
Action required	The Board is asked to discuss the paper and note the emerging areas of focus for ongoing improvement.
Key points	<ul style="list-style-type: none"> • Between 1 April 2025 and 31 March 2026, a total of 1162 compliments were received, reflecting a strong overall rate. • Complaint rates remain steady with an overall total of 1,221 complaints for the same period. • Stage 1 and 2 complaint response targets have been exceeded. • There is currently one open case and twenty-four closed cases with the Scottish Public Services Ombudsman (SPSO). • We continue to strengthen our efforts to involve people and communities in the work we do. • Taken together, complaints, compliments, Care Opinion feedback and SPSO outcomes provide a consistent picture of patient experience across the Service.
Timing	An update is presented bi-monthly to the Board.
Associated Corporate Risk Identification	Risk ID 4638 – Hospital Handover Delays
Link to Corporate ambitions	<p>We will</p> <ul style="list-style-type: none"> • 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 quality ambitions	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 Equality Outcomes work.



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 2025 and 31 March 2026**. 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 gather feedback through various channels, including face-to-face interactions, patient forums, online portals, and complaint and concern channels.

SECTION 4: DISCUSSION

Feedback analysis

Compliments

Compliments received from sources other than social media are logged and actioned on the In Phase system. Between 1 April 2025 and **31 March 2026**, a total of **1,162** compliments have been received. This represents **42 per cent** of the total feedback to the Scottish Ambulance Service Feedback team.

An example of positive feedback received from a family member following end of life care is included below.

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“I would like to compliment the care and professionalism shown by all four members of your team when they attended my mum. They cared for both her and our family with kindness and compassion during a very difficult time. Because of their actions, nearly all of her children were able to be with her while she was awake and comfortable, and she passed peacefully with dignity. Although they told me they were only doing their job, they went above and beyond. Please pass on our heartfelt thanks to the whole crew.”

Complaints Data

Between 1 April 2025 and 31 March 2026, a total of 1,221 complaints have been received. The majority of complaints continue to be owned by National Operations (51 per cent) followed by West Region (22 per cent) and East Region (19 per cent).

Complaint Themes

The themes below remain consistent with previous reporting, with some shifts in proportion. Of the 1,221 complaints, the four most common themes are:

1. Attitude and Behaviour –31 per cent of the total, a slight increase since the last report (29%)
2. Delayed response due to no available resource accounts for 23 per cent (versus 19% in previous paper), continuing an upward trend and remains an area of operational focus.
3. Triage and referral to NHS 24 represents 20 per cent an increase from 16% since the last paper. Complaints in this area are being reviewed to ensure triage protocols are consistently applied and communicated.
4. Clinical Assessment – 11 per cent of the total which is a slight increase from 9 per cent from the previous paper.

Update: Joint Review of Attitude and Behaviour Complaints

Context and scope of the review

A joint review of attitude and behaviour complaints has been completed, led by the Engagement Manager and Patient Experience Manager. The review aims to ensure our approach aligns with the NHS Scotland Complaints Handling Procedure, Learning from Events Framework, Duty of Candour legislation and the Equality Act 2010. It also reflects the SAS 2030 Strategy and Realistic Medicine principles.

Attitude and behaviour complaints represent a significant and consistent proportion of overall complaint activity within the Scottish Ambulance Service. For the purposes of this review, complaints and compliments data were examined over a longer period than the main reporting cycle, covering 1 September 2024 to 12 January 2026. This broader timeframe was used to support more robust analysis and identify sustained patterns rather than short term variation.

Across the review period of 1 September 2024 to 12 January 2026, 462 attitude and behaviour complaints were recorded from a total of 1,535 complaints overall, meaning that concerns relating to staff conduct and communication accounted for approximately 31 per cent of all complaints. This proportion is consistent with findings from previous internal reviews and reflects a sustained pattern rather than a short term fluctuation.

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Of the 462 attitude and behaviour complaints recorded during the period, 270 were reviewed in depth as part of this analysis. This represents 58 per cent of all complaints within this category and provides a robust and representative sample from which to draw organisational learning.

What the data tells us

The review demonstrates that attitude and behaviour complaints do not cluster around specific locations, roles or short periods of time. Instead, they reflect a similar pattern across the Service.

Alongside complaint data, the review also considered compliments recorded within the review period of 1 September 2024 to 12 January 2026. There were 1,502 compliments recorded during this time period. These compliments reflect many of the same themes present in attitude and behaviour complaints, particularly communication, empathy, professionalism, reassurance and dignity. The compliments data demonstrates that the capability for excellent communication and compassionate care already exists widely across the workforce. Staff who receive positive feedback are praised specifically for calmness, clear explanation, empathy and dignified interaction.

In one anonymised case reviewed as part of this work, a patient described feeling dismissed during a highly stressful call. While the clinical outcome was appropriate, the family reported that the tone and lack of explanation significantly shaped their overall experience. This type of feedback mirrors the wider themes identified across complaints and compliments data.

Next steps

Anonymised case studies have been developed from this work to support staff learning and reflective practice, helping to strengthen communication, empathy and appropriate closure following difficult interactions. Work is also underway to explore how changes in feedback trends can be tracked over time alongside staff support and development activity, recognising the limitations of direct attribution.

The findings and proposed actions have been shared with the Quality, Safety and Learning Forum and will inform the next phase of support activity. This ensures that learning from patient feedback is translated into practical and sustainable improvement. This work will also be shared at the next Board meeting once finalised, with a more detailed paper building on this analysis currently being developed for consideration by the Executive Team.

Complaints Compliance

Stage 1 Complaints (1 April 2025 – 31 March 2026)

Stage 1 complaints have a 5-day target to be closed. This can be achieved through direct contact with the complainant at supervisor level, either by phone, email or face-to-face. **There was a total of 591 Stage 1 complaints during this period. Of these, 548 have been closed with a compliance rate 93%, which is well above the government target of 70%.**

Stage 2 Complaints (1 April 2025 – 31 March 2026)

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. **There was a total of 582 Stage 2 complaints during this period. Of these, 512 have been closed with a compliance rate of 88%, which is well above the government**

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target of 70%. Staff have made considerable efforts to achieve a very strong performance for the year as demonstrated in the compliance figures being reported consistently throughout the period.

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 2025 and 31 March 2026, 386 stories were posted on Care Opinion relating to the Service with a 96 per cent responsiveness rating. These stories have been viewed 66,021 times.

Of the 386 posts, 75 per cent were positive or neutral in tone and 16 per cent were minimally/mildly critical. It should be noted that whilst the remaining 7% were moderately or 2% strongly critical, 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.

Below is an example of Care opinion feedback submitted by a patient;

The screenshot shows the Care Opinion website interface. At the top, there is a navigation bar with 'Home', 'Tell your story', and 'About us' buttons. A search bar is also present with the text 'Search for stories about...' and a search icon. The main content area features a story titled '" Exceptional care "' with a bookmark icon. The story text reads: 'Husband had seizure and collapsed out back door. From the 999 call handler who was great, paramedics and staff in A&E his care was exceptional. From his fall he broke his shoulder and fractured ribs, in A&E S/N Cara and Dr Micheal Ferguson care was exceptional and my husband was so well looked after. I would just like to say a huge thanks and you are not paid enough.' The story is categorized under 'About: Scottish Ambulance Service / Ambulance Control Centre' and 'Emergency Ambulance / University Hospital Ayr / Accident & Emergency'. A 'Story summary' section on the right lists 'What was good?' (call handler, care, communication, compassion, doctor, knowledge, paramedics, quick treatment, staff) and 'How did you feel?' (safe, thankful, well looked after). A 'STORY HAS A RESPONSE' banner indicates 'This story has had 2 responses'.

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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 1 open cases and 24 closed cases.

Of the 24 that have been assessed by the SPSO, 21 cases have not been upheld, 2 cases have been dealt with through early resolution and 1 case has been upheld. This continues a stable pattern of SPSO activity for the Service with no significant increase in upheld complaints.

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

InPhase/Datix Ref	SPSO Reference	Date SPSO began their review	Complaint Theme	SAS Decision	SPSO Decision	SPSO Recommendations	SPSO Recommendations Target Date	SPSO Recommendations Completed Date	SPSO Status
16595	202500508	25-Jun-25	Lack of Co-ordination / Communication	Not upheld	Not Upheld	n/a	n/a	n/a	Closed
14448	202401264	11 Jun 2025	Lack of Co-ordination / Communication	Not upheld	Not Upheld	na	na	na	Closed
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 did not address the delay in conveyancing support or consult the paramedic involved. They may wish to review staff engagement during complaint investigations.	10 Jul 2025	18 Jun 2025	Closed
DATIX 16400	202411850	29/04/2025	Delayed response	Upheld	Not Upheld	N/A	N/A	N/A	Closed
17941	202503949	01/09/2025	Attitude and Behaviour	not upheld	Eary resolution	To send an additioinal reseponse to the complainant	29.10.25	07.11.25	Closed
18749	202500610	25/07/2025	Lack of Co-ordination / Communication	Part Upheld	Early resolution	Stage 2 letter to complainant	27/08/2025	05/09/2025	Closed
17509	202500310	15/05/2025	Attitude and Behaviour	Not upheld	Not Upheld	na	na	na	Closed
18690	202504575	01/09/2025	Triage	Not upheld	Not Upheld	na	na	na	Closed
16557	202410343	16/07/2025	Delayed Response	Upheld	Upheld	Letter of apology, share findings with complaints reviewer and work underway on HCP booking line	26th Jan 2026	Letter of apology sent and findings shared with complaints reviewer . Work underway on HCP booking line with new workstream ongoing. Meeting on workstream took place on 26th Jan commencing this piece of work.	Closed
17766	202503379	01/07/2025	Patient not conveyed to hospital	Not upheld	Not Upheld	na	na	na	Closed
18596	202504066	07/08/2025	PTS Eligibility	Not upheld	Not Upheld	na	na	na	Closed
17732	202503845	15/08/2025	Delayed Response	Upheld	Not upheld	na	na	na	Closed
17874	202506572	01/10/2025	Staff conduct	Part Upheld	Not upheld	na	na	na	Closed
18901	202506933	01/10/2025	PTS Eligibility	Not upheld	Not Upheld	na	na	na	Closed
Datix 14232	202403835	01/10/2025	Clinical Assessment/Triage	Withdrawn	Not Upheld	na	na	na	Closed
DATIX 17853	202504623	20/10/2025	PTS Eligibility	Not Upheld	Not upheld	na	na	na	Closed
18096	202503620	19.12.25	Triage and categorisation	Upheld	Not upheld	na	na	na	Closed
17849	202509459	13.01.26	Attitude and Behaviour	Not upheld	Not upheld	na	na	na	Closed
18228	202507036	02.12.26	Patient not conveyed to hospital	Not upheld	Not Upheld	na	na	na	Closed
17934	202505304	20.01.26	Clinical Assessment	Upheld	Not Upheld	na	na	na	Closed
18039	202504203	23.01.26	Clinical Assessment	Upheld	Still under review	na	na	na	Open
19412	202513372	12 Mar 2026	Triage/moving and handling	Not upheld	Not Upheld	na	na	na	Closed
19861	202511916	05 Mar 2026	Delayed Response - no available resource	Upheld	Not Upheld	na	na	na	Closed
19041	202509376	16 Mar 2026	Triage	Not upheld	Not upheld	na	na	na	Closed

Involving People

Work continues to strengthen how we involve patients, the public and communities in shaping the work of the Service in line with our commitments under the Patient Focus and Public Involvement (PFPI) agenda, the NHS Scotland Participation Standard and the SAS 2030 Strategy.

Patient representative guidance for managers

We're developing a practical guide to help senior managers involve patient representatives in a clearer and more consistent way. It's being shaped with input from experienced public partners and focuses on making involvement more purposeful and part of day-to-day work, rather than something that happens occasionally. The aim is to close the gap in how involvement is currently understood and delivered, and to support more meaningful collaboration. This links directly to the 2030 Strategy by strengthening person-centred care, improving quality through lived experience, and building trust.

Trust in feedback

We're exploring how we strengthen public confidence in the way we listen to and act on feedback. This is about creating a more consistent approach across all types of feedback, not just complaints, so people feel heard and can see how their input leads to change. It's an important part of building a more open, responsive culture and supports our wider ambitions around experience and learning.

Internship and pathways

Our intern has now started and is supporting early work on the disability inclusion agenda, particularly around staff disclosure pathways and guidance. It's early days, but it's a positive step in creating more meaningful opportunities for people with lived experience to contribute. It's also opening up conversations about how we build this further, including internships and work experience with third sector partners. This supports our commitments around inclusion, access, and building a more representative workforce.

Onboarding and supporting public partners

We've reconnected with a public partner to support Infection Prevention and Control work, and the team are now taking this forward. More broadly, this is helping us think about how we bring people into the organisation in a more structured way and, just as importantly, how we support them once they're involved. That includes clearer communication, named contacts, and making sure they feel part of the work rather than on the edges of it.

Inclusive recruitment

We've resumed the inclusive recruitment work again following strong interest from third sector organisations, who have asked us to take this forward. We're now speaking to several partners to shape the approach and understand how it can work in practice. There's a clear sense that this could make a real difference for the communities they support. It aligns closely with both NHS Scotland and SAS priorities around equality, fair access, and building a workforce that better reflects the people we serve.