



NOT PROTECTIVELY MARKED

Public Board Meeting		September 2018 Item 10
THIS PAPER IS FOR DISCUSSION		
PERSON CENTRED CARE UPDATE		
Lead Director Author	Dr Patricia O'Connor, Director of Care Quality and Strategic Development. Mark Hannan, Head of Corporate Affairs and Engagement.	
Action required	The Board is asked to discuss the paper and provide feedback.	
Key points	<p>This paper provides an update of our patient experience activity.</p> <p>Care Opinion continues to provide valuable patient and carer feedback, with 45 stories posted during this period.</p> <p>The paper highlights our latest data on compliments, our Patient Focus Public Involvement work as well as complaints themes and actions to address these.</p> <p>An update has also been provided on cases with the Scottish Public Services Ombudsman (SPSO).</p>	
Timing	An update is presented bi-monthly to the Board.	
Link to Corporate Objectives	1.1 – Engage with partners, patients and the public to design and 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 2020 vision for Health and Social Care	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 Service's Equality Outcomes work.	



**Scottish
Ambulance
Service**
Taking Care to the Patient



NOT PROTECTIVELY MARKED

SCOTTISH AMBULANCE SERVICE BOARD

PATIENT EXPERIENCE

**DR PATRICIA O'CONNOR, DIRECTOR OF CARE QUALITY AND
STRATEGIC DEVELOPMENT**

SECTION 1: PURPOSE

This paper covers the period between 1 June 2018 to 31 August 2018.

It provides an update on trends, themes and mitigating actions from patient and carer feedback. Monitoring of complaints and compliments helps identify areas for improvement. Proactive patient and public engagement helps us to work in partnership to develop improvements to our services and to ensure that any service change is improving the patient experience.

The paper also provides data on our performance against the complaints handling standard, the number of cases which have gone to 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 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.

Latest data shows that 323 compliments were received by the Service between 1 June 2018 and 31 August 2018.

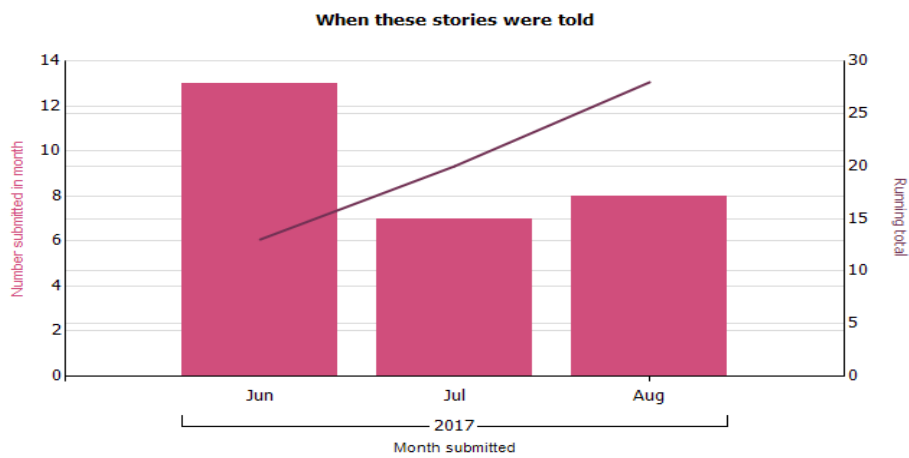
Care Opinion

Care Opinion continues to provide the Service with valuable feedback and we have seen some good examples of direct engagement in recent months with positive outcomes.

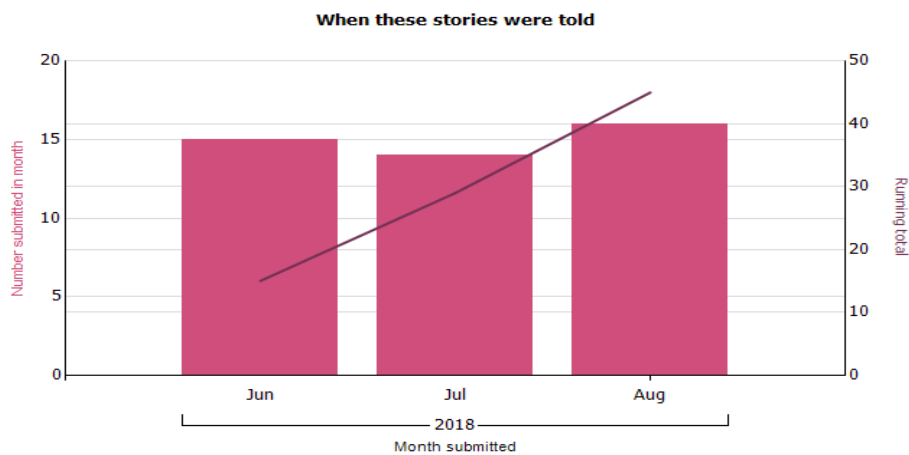
There were 45 posts on the Care Opinion website about care from the Service between 1 June and 31 August 2018. These were viewed 7,253 times.

Number of posts per month

2017

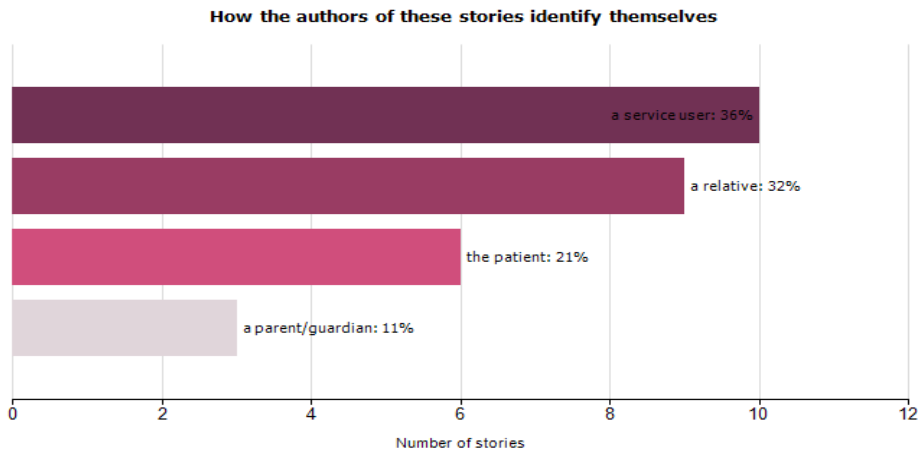


2018

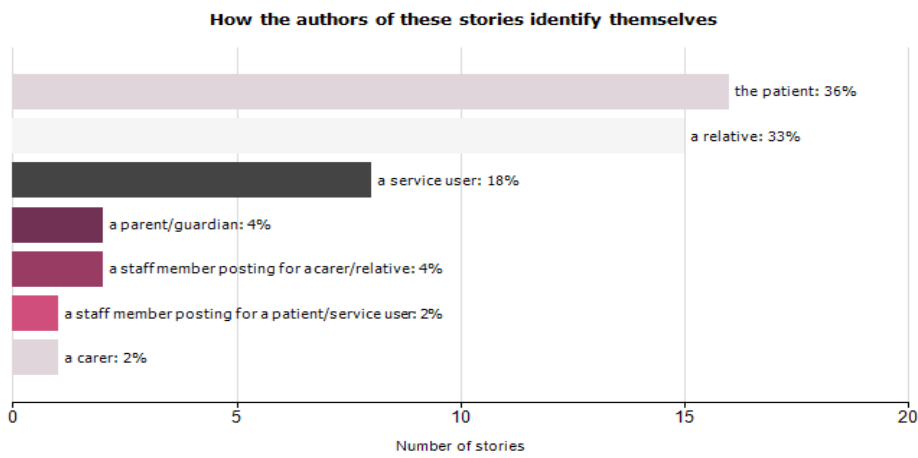


How the author of these posts identify themselves

2017

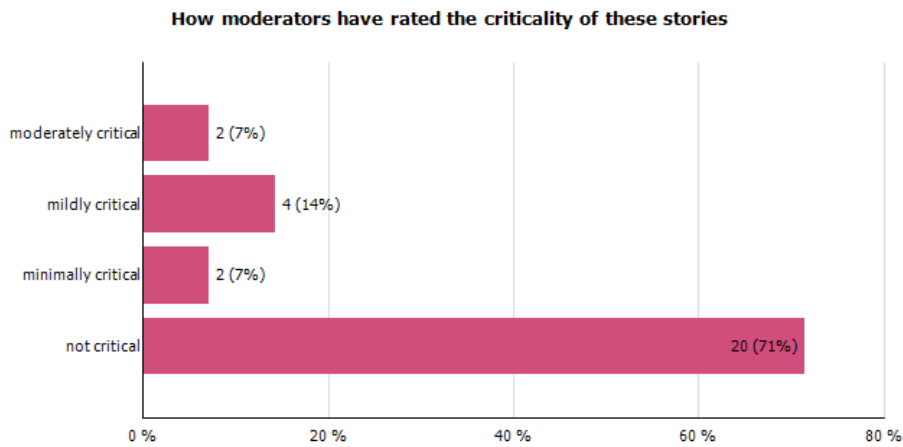


2018

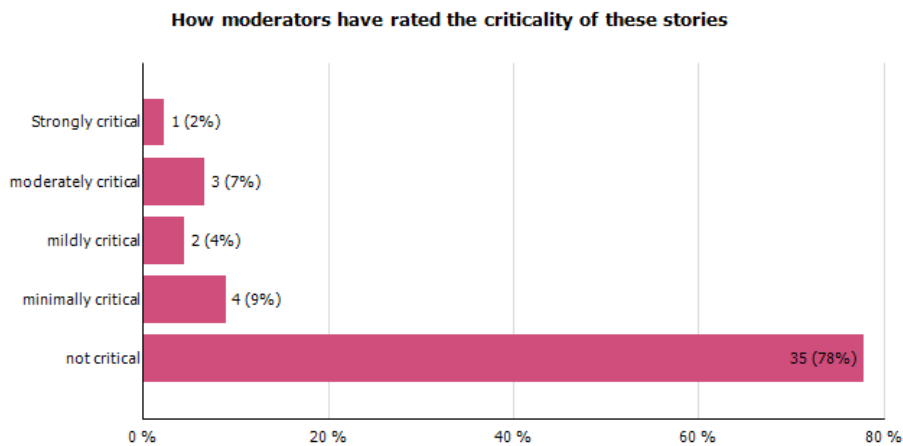


How moderators have rated the criticality of these stories

2017



2018



Of the posts on Care Opinion, 36 related to Accident and Emergency services, 4 related to the Patient Transport Service.

The majority of compliments related to the clinical care of the patient and the care and compassion of our staff. The strongly critical story partly relates to a delayed response, with the rest about another Health Board. Of the three moderately critical stories, two are about a delayed response and the other is about another Board.

Compliments

The Service recorded 323 compliments between 1 June and 31 August 2018. The number of compliments received via digital channels continues to increase, particularly on Facebook, Twitter and Care Opinion. Some examples of these, and other compliments, can be found in **Annexes A**.

Patient Focus Public Involvement (PFPI)

The Service is continuing to develop our new, improved approach to our PFPI arrangements. Our Community Engagement Officer is continuing to expand our outreach and engagement to new community groups within the third sector, including mental health charities. The Service will hold its next PFPI meeting on 2 October 2018, following on from a very successful meeting in May.

The May meeting was attended by a large number of new patient reps from the public and representatives from the third sector. Subjects such as the new PTS portal and the direct paramedic admissions were discussed, along with latest developments in major trauma. At the October PFPI meeting, patient representatives will hear more about PTS given the level of interest in this at the first meeting, whilst fleet and education colleagues will also deliver presentations updating on key pieces of work in their areas.

We also plan to introduce patient reps to our work on a new post 2020 strategy and seek their support and assistance going forward, working alongside the Scottish Health Council.

Introduction of the new Model Complaints Handling Procedure (MCHP)

As highlighted previously to the Board, a new NHS Scotland Model Complaints Handling Procedure was introduced last year, in order to standardise the way in which NHS Boards handle complaints.

The 30th of March 2018 marked the end of the first full year of the new MCHP. During 2017/18, the Scottish Ambulance Service (SAS) received a total of 1,311 complaints.

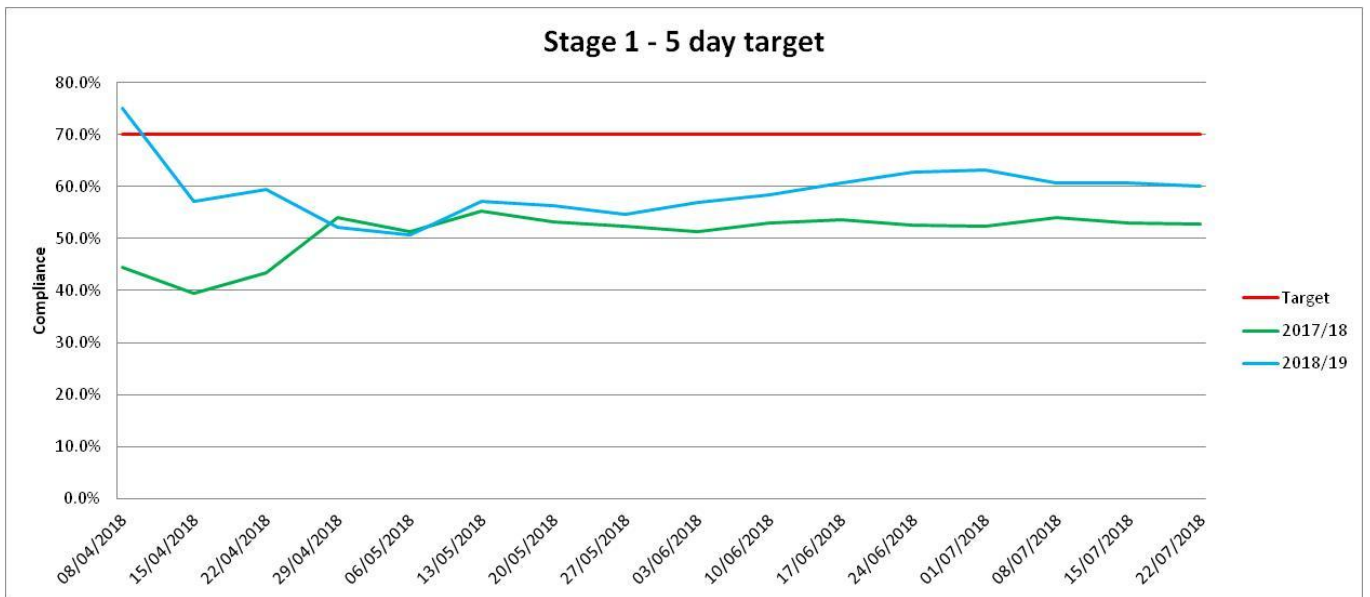
Of the 1,311 complaints 722 were 'Stage 1' complaints and 589 were 'Stage 2' complaints. This represents a 2.7% increase from the previous year. However, it should be noted that this represents just 0.07% of the 1.8 million calls we received in the year.

The Service is currently developing the complaints module of DATIX, which is widely used across NHS Scotland Boards for complaints handling. NHS Fife, NHS Lothian & NHS Highland colleagues are working in partnership with DATIX to ensure that the measurement framework within the system is fit for purpose for the new procedure. The Patient Experience team is currently working with internal and external users of the DATIX system adapting the specifications to match the Service's requirements. A systems design and testing workshop will take place shortly.

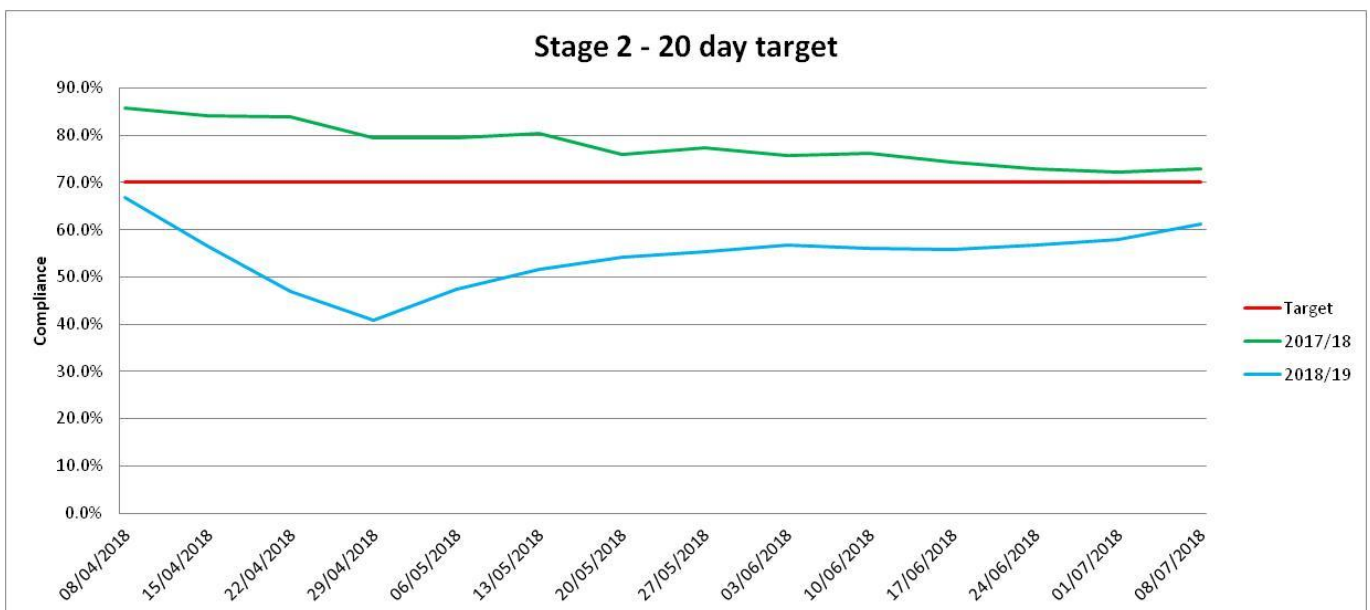
Complaints Data

The complaints handling standard for Stage 1 complaints is five working days and for Stage 2 complaints it is 20 working days.

Stage 1



Stage 2



Latest results indicate that Stage 1 complaints compliance is currently 60.1% up from 52.8% in the same period the previous year. Stage 2 complaints compliance is currently 61.2% down from 73% in the same period last year. The complaints compliance rate is recognised as an on-going challenge and a progress report is being presented to the senior leadership team by regional representatives on a weekly basis to monitor improvement work being undertaken.

Latest actions from Scottish Ambulance Service to improve complaints handling

It was acknowledged that handling stage 1 complaints within five days would be challenging for most NHS Boards, since there is limited capacity for frontline staff to both manage an issue brought to their attention, whilst providing care to patients and recording data. Our Quality Improvement teams are working within regions with the operational directors and managers to try and address and identify options for improvement and take urgent action.

QI managers have been testing Quality Improvement work in the East (Central) Region focusing on Stage 1 complaint handling. So far this has been very productive and should help improve the compliance rates going forward. The testing of the new approach is now underway and the results are demonstrating an ongoing improvement.

Stage 2 complaints compliance has steadily increased from the start of the new compliance year and each Regional Director has been asked to develop an improvement plan locally to increase the completion of cases to meet the 70% target. In addition, our Patient Experience Manager is continuing to undertake Quality Improvement work for Stage 2 responses. Two QI sessions have been held with key staff from the regions and our ambulance control centre. Feedback from these sessions was positive and is helping to support the focus on improved complaints handling and increasing compliance rates. We are now seeing compliance rates improve as a result of this work.

East Central Region is also piloting a new approach to handling Stage 2 complaints to test whether new procedures can improve efficiency.

The top five complaint themes, in order, between April 2018 and July 2018 were delayed response, attitude and behaviour, clinical assessment, driving standards and PTS cancellations.

Complaint Theme	Complaint Stage 1&2
Delayed Response	51
Attitude & Behaviour	31
Clinical Assessment	18
Driving Standards	15
PTS Cancellations	14

Mitigating Actions

The Patient Experience Manager delivered a presentation to the SAS 2020 steering group earlier this year outlining suggestions and options for improvement to enable Service managers to capture, record, and analyse the patient experience, as well as identify learning which could be implemented to improve patient care and work is ongoing to shape a new approach to measurement and evaluation.

Attitude and Behaviour:

A new questionnaire has been designed for testing in the Service which will be utilised as part of the formal investigation process for every attitude and behaviour complaint. Tests are underway before the final version is used.

This questionnaire will allow the Service to identify and measure possible contributory factors more effectively such as time on shift, incidents which occur near end of shift, length of service, meal break data and last known CPD training sessions. This will allow us to identify areas for improvement and any additional support required.

Work is continuing to promote positive patient experiences through sharing patient and carer stories.

Patient experience is also embedded in our Organisational Development work programme focussing on change, values and culture.

Delayed Response:

Complaints related to delayed responses continue to be a challenge, with periods of excessive demand in Immediately Life Threatening cases leading to a minority of lower acuity cases where some patients may have to wait longer.

Our whole systems approach and improvement focus on the regions and the Ambulance Control Centres are addressing the complaints individually.

The Service is currently recruiting extra staff and aligning shift patterns to the busiest times of the day. A roster review is underway in the Ambulance Control Centres to determine the optimal shift coverage for Clinical Advisers to ensure that the necessary cover is in the right place at the right time to provide enhanced clinical triage for patients.

Triage and Clinical Assessment:

The new response model is helping to get the right resource to patients within the appropriate timeframe to meet their needs. Ongoing investment in additional staff, along with the training and development of existing staff, is also helping improve the patient experience.

Eligibility:

An improved version of the Patient Needs Assessment has been rolled out across Scotland, shaped by patients, road staff and members of Ambulance Control Centre. This is giving us a better understanding of patients' needs and making sure that the most appropriate resource is sent in response to a request. There have been some complaints as a result of people not passing the eligibility for the PNA which is to be expected with any new system implemented, but these are being managed and reviewed on a case by case basis.

Recent SPSO cases

SPSO Tracker					
SAS Ref/Decision	SAS Decision	SPSO Ref	Complaint Overview	Recommendation	Status
WPTSCC/02/1015 2/17	Upheld	201707033	1. The Scottish Ambulance Service inappropriately refused transport to an appointment initially. The vehicle subsequently arrived well ahead of the advised time, causing the complainant to not be ready.	<p>SAS recommendation: Patient should have been advised of change of time. Patient did not fit criteria within PNA so GP made request on their behalf.</p> <p>SPSO recommendations: 1) None July 2018.</p>	<p>Final SAS response issued to SPSO.</p> <p>SPSO have not taken the complaint on.</p>
WC/34/10306/17	Part Upheld	201709148	1. The Crew did not transport a patient and incorrectly referred the family to their GP.	<p>SAS recommendation: Review to be undertaken with the staff in question to allow for reflection and learning.</p> <p>SPSO recommendation: An apology be sent to the family and the crew to be made aware of the findings allowing them to further reflect with a senior member of staff.</p>	<p>Final SAS response issued to SPSO.</p> <p>SPSO upheld complaint with 2 recommendations.</p>
WEMDC/34/10593 /17	Not upheld	201707301	1. SAS failed to send an ambulance to a patient.	<p>SPSO recommendation: An apology letter, Evidence that the clinical advisor has been reminded of their responsibilities when carrying out their medical assessment.</p>	<p>Final SAS response issued to SPSO.</p> <p>SPSO upheld with 2 recommendations.</p>

WC/24/8529/17	Not Upheld	201703141	1. The ambulance crew failed to handle a patient safely when attending after a fall.	<p>SAS recommendation: Reflective case review with both crew members, highlighting the Service values and the need for positive communication with patients and others on scene to be completed.</p> <p>SPSO recommendation: An apology letter and evidence that these findings have been shared with the crew involved to ensure learning and reflection.</p>	<p>Final SAS response issued to SPSO.</p> <p>SPSO upheld complaint.</p>
SE/25/8150/16	Upheld	201701591	<p>1. The ambulance crew failed to transfer the patient in a safe manner.</p> <p>2. The Scottish Ambulance Service did not investigate and respond to complaint reasonably.</p>	<p>SAS recommendation: Clinical review with crew</p> <p>SPSO recommendation: An apology letter covering both parts of the complaint, an anonymised case study in reference to this case study to be shared with the service and a reminder to all complaints handling staff around the process and requirements of the NHS Complaints handling procedure.</p>	<p>Final SAS response issued to SPSO.</p> <p>SPSO upheld complaint with 3 recommendations.</p>

EXAMPLES OF SOCIAL MEDIA STORIES FROM TWITTER AND FACEBOOK HERE

“I would like to say a huge Thank you to The Lockerbie Ambulance department for the care they gave my husband yesterday which was exceptional so Thank you to Rob & Keith for all your help.”

“The ambulance crew were amazing with my son , who collapsed at kelty gala ... they were amazing with him all the way to hospital xx”

“The ambulance crew that subsequently attended were very professional and concerned for my wife’s health explaining that women do not easily show signs of suffering heart attacks and should attend hospital for assessment / tests. The crew spent a lot of time talking to my wife and trying I keep her calm which was appreciated”

“Massive thank you to the ambulance team that came to help my boy Theo when he fell from the trolley last night in Sainsbury’s Dundee. Both crew members were amazing and really put Theo and me at ease. They were excellent and also very creative Theo has still got his amazing hat on his head today, the ambulance man made it for him both an absolute credit to your service”

“I would like to praise Paramedic, Jamie that picked me from the middle of the Meadows on a busy Fringe Saturday. I cannot thank you enough for keeping me calm and comfortable, having great manners and making sure I was looked after. #lovewhatyoudo”

“Thanks to the brilliant fire service crews from Fort Augustus and Invergarry along with the land and air ambulance crews that saved his life at the scene and got a very broken Matthew to Raigmore hospital. Heroes all. @fire_scot @Scotambservice @scotambhelimed5 @scotambhelimed2”

“Dear Paramedics, Thank you for going into the craziness out there, and bringing the patients to us nicely stabilized with all the lines, tubes and a concise story amidst many constraints and dangers. I have massive respect for what you do and can’t ever imagine doing your job.”

Scottish Ambulance Service
Published by Mark Bing · 20 August at 11:35 · 🌐

A mum says she has been inspired to carry out her dream of becoming a paramedic after having her first child delivered at home by Scottish Ambulance Service emergency responders.

Ashleigh Carpenter, 19, was at her mum's house in Bo'ness when Lily Scott was delivered.

The retail worker said she woke up at around 2am on the day of the birth.... See more

Scottish Ambulance Service
Published by scotamb.communications@nhs.net ·

The wife of a woman who collapsed after accidentally overdosing on medication has praised the Scottish Ambulance Service emergency responders who rushed to the couple's home.

Fiona Fraser, 53, was at home in Dunoon with her partner of 25 years Joanne Singleton, aged 51, who has several complex health problems, including diabetes, kidney disease and systemic lupus.

Fiona, originally from Glasgow, said Joanne had been in the Queen Elizabeth Hospital the day previously for a ren...
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Doc: Person Centred Care Update	Page 12	Author: Head of Corporate Affairs and Engagement
Date: 2018-09-26	Version 1.0	Review Date: November 2018

Scottish dad uses earphones to tie off new baby's umbilical cord after wife gives birth in their bathroom

Richard Cox improvised when an ambulance call handler told him to find shoelaces or string to tie off the cord.



Quick-thinking Richard Cox used his earphones to tie off his new baby daughter's cord (page 10/12)

A father who delivered his premature **baby** at home on the bathroom floor used his headphones to tie off the new arrival's umbilical cord.

Richard Cox improvised when an ambulance call handler told him to find shoelaces or string to tie off the cord, stopping bleeding and preventing potentially deadly infection.

But the 31-year-old bank worker said all he had to hand were his headphones.

He said: "It all happened so quickly - my wife went into labour late at night and before I had time to dial for an **ambulance** she'd been born.

Richard praised the ambulance service for saving his baby daughter's life.

He said: "The call-taker deserves all the credit.

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Newborn named after ambulance technician after emergency roadside delivery

02 July 2018

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- May shows off her dance moves
- Man denies 'acid attack' on son, 3

Features

- Bridezilla spends 15 hours escaping wedding
- A brief history of flag tributes and non-tributes
- Bag, get arrested, go to court, repeat...
- Strictly stars share their hopes and fears

An Argyll and Bute couple have named their baby daughter after the ambulance technician who delivered her en route to the hospital.

Rachel Mackie now has a little namesake after she made the ambulance put over when it was clear they would not make it to hospital in time.

Parents Phil and Michelle Douglas have given their daughter Ainey the middle name Rachel to show their gratitude.

Rachel admits it is the first baby she has delivered in 11 years' service.

Gariochhead couple Phil and Michelle were at home when contractions started.

Phil, a firefighter, made an emergency call and an ambulance was quickly dispatched by the Scottish Ambulance Service from Arncroft station.

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'I wasn't meant to die that day': Man thanks the crew who saved him

04 August 2018

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A man who had resigned himself to dying on a beach on a Scottish island has been reunited with the medical team who saved him.

Get Dunmore hit 30ft off a cliff onto a beach in 10th and had to crawl across the beach to get away from the rising water.

With a broken collar bone, three broken ribs, punctured lungs and a broken penis, Get prepared himself to die there.

But after being discovered by an American walker, he was attended to by a paramedic team in what they described as a difficult rescue.

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