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**Public Board Meeting**

**29 March 2023**

**Item No 12**

**THIS PAPER IS FOR DISCUSSION**

**PERSON CENTRED CARE UPDATE**

<b>Lead Director</b>	Emma Stirling, Director of Care Quality and Professional Development
<b>Author</b>	Mark Hannan, Head of Corporate Affairs and Engagement Alan Martin, Patient Experience Manager
<b>Action required</b>	The Board is asked to discuss and note the paper.
<b>Key points</b>	This paper provides an update of our patient experience activity and 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).
<b>Timing</b>	An update is presented bi-monthly to the Board.
<b>Associated Corporate Risk Identification</b>	Risk 4638 – wider system changes and pressures
<b>Link to Corporate ambitions</b>	We will <ul style="list-style-type: none"> <li>• Provide the people of Scotland with compassionate, safe and effective care where and when they need it</li> <li>• Work collaboratively with citizens and our partners to create healthier and safer communities</li> <li>• Innovate to continually improve our care and enhance the resilience and sustainability of our services</li> </ul>
<b>Link to NHSScotland's quality ambitions</b>	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.
<b>Benefit to Patients</b>	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.
<b>Equality and Diversity</b>	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**

University National NHS Board



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**SCOTTISH AMBULANCE SERVICE BOARD**

**PATIENT EXPERIENCE**

**EMMA STIRLING, DIRECTOR OF CARE QUALITY & PROFESSIONAL  
DEVELOPMENT**

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## **SECTION 1: PURPOSE**

This paper covers the period between 1 April 2022 and 12 March 2023. 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**

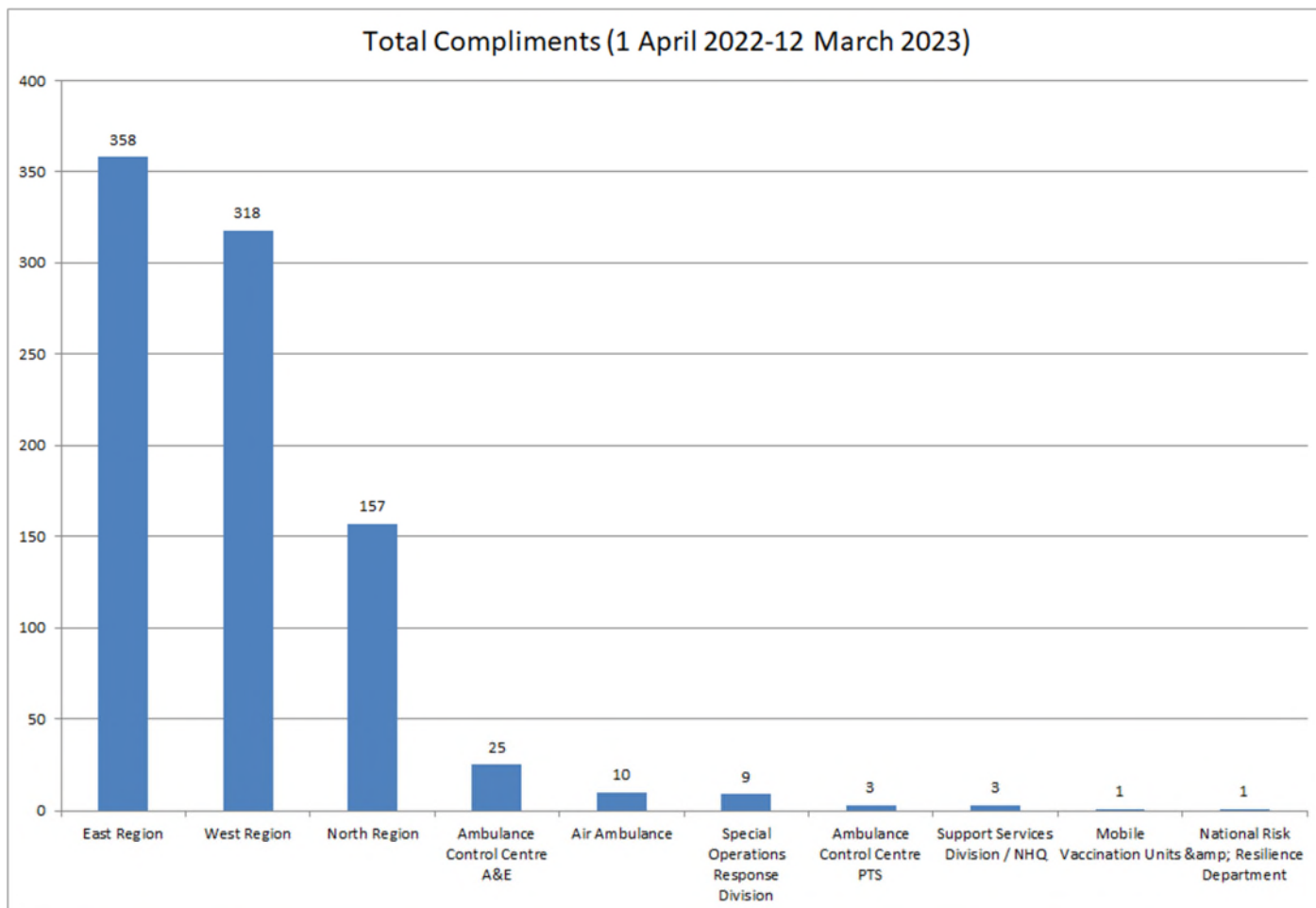
The Service actively seeks feedback on its services in order that it can continue to make improvements. We have many ways of gathering feedback – face to face, patient forums, online portals, complaint and concern channels.

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## Feedback analysis

### Compliments

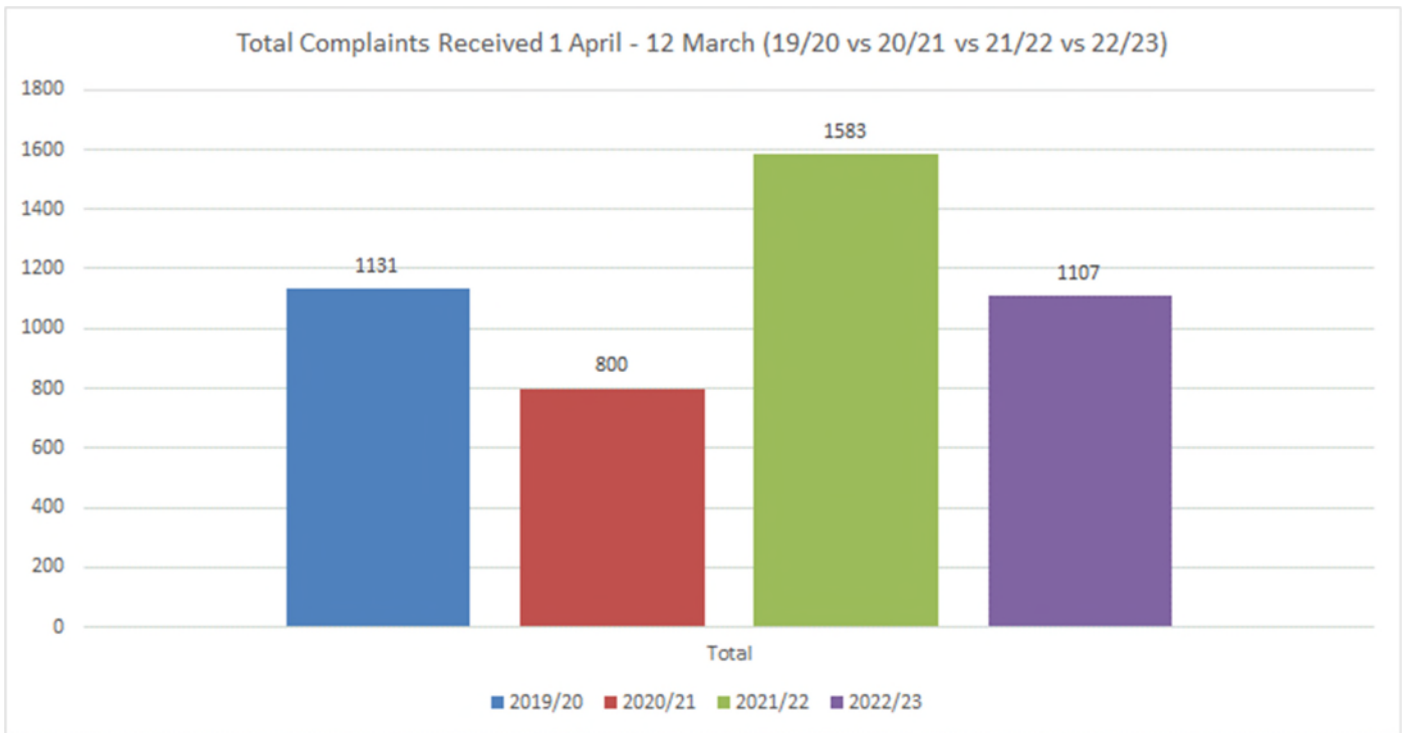
Compliments received from sources other than social media are logged and actioned on the DATIX system. Between 1 April 2022 and 12 March 2023, a total of 885 compliments have been received. East Region received around 40% of these compliments. The graph below shows the compliments received by region for the financial year.



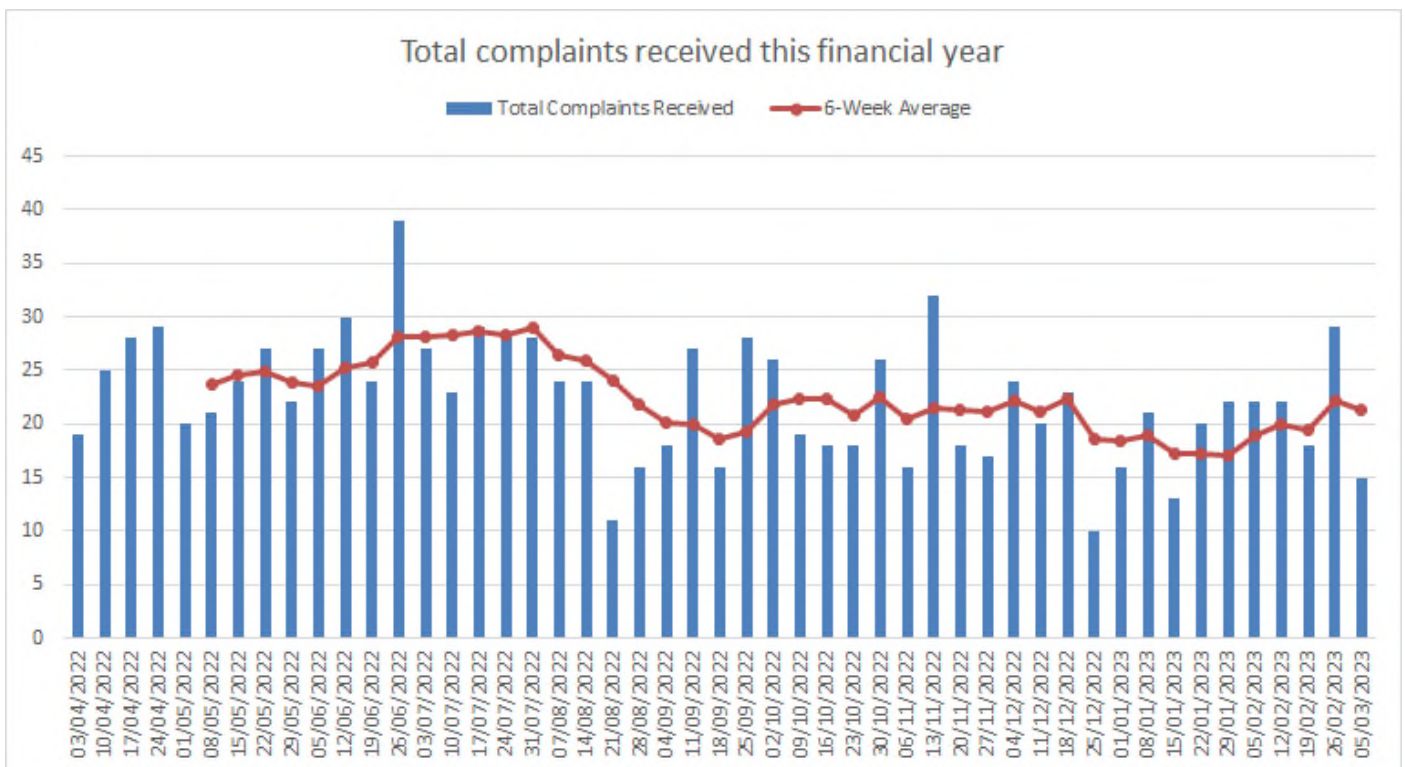
### Complaints Data

Between 1 April 2022 and 12 March 2023, a total of 1107 complaints have been received. This shows a decrease of 476 (30%) complaints in comparison to 2021 but is similar to the number of complaints received during this time period in 2019/20 where we had 1131 complaints.

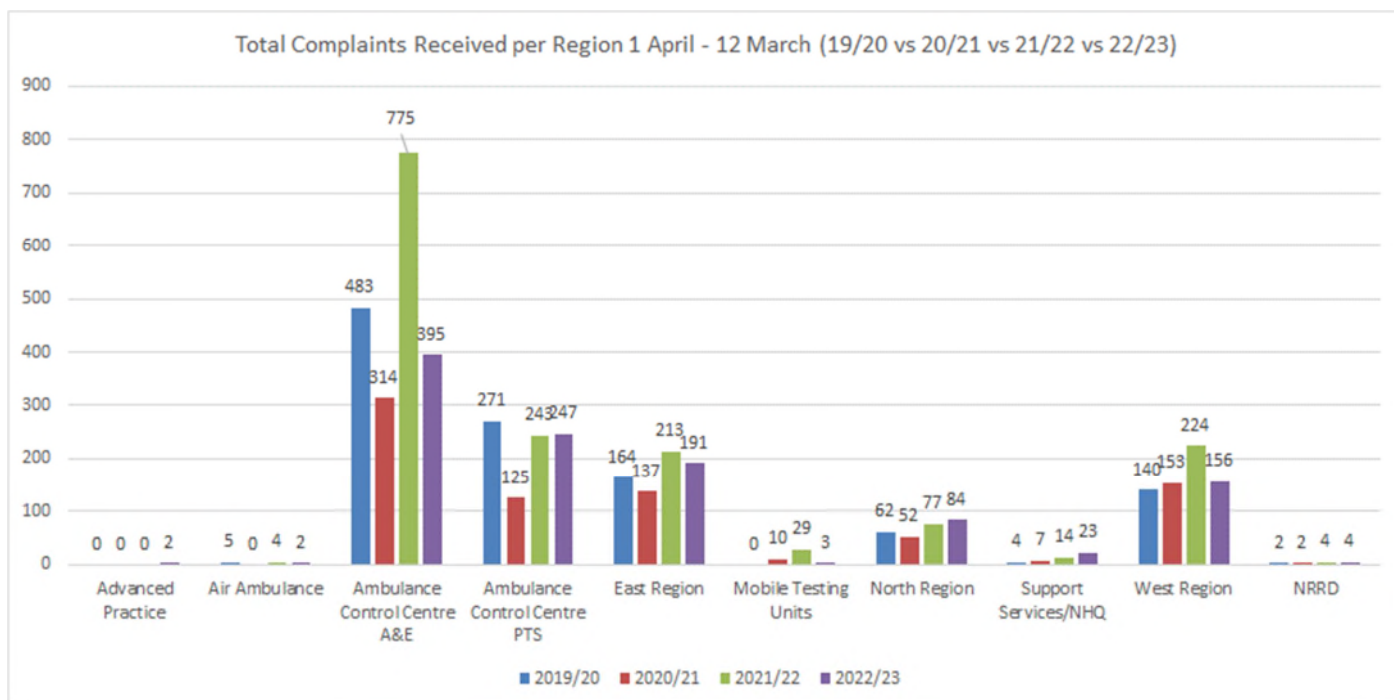
The data shows that in 2020, during COVID, there was a substantial decrease in the number of complaints received. In 2021, there was then an increase in complaints as restrictions eased across Scotland. This latest data shows that the number of complaints appear to have stabilised back to the pre-COVID levels seen in 2019/20.



The challenges the Service has faced since the beginning of the pandemic have been significant and this has been reflected in the above data. Last year saw the highest volume of complaints that the Service has received, however challenges such as rising staff absences, increased hospital turnaround times as well as the continuing pandemic and its recovery are likely to have impacted on these numbers. The increase in complaints last year has been reflected across the country in most other health boards.



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 1107 received, the 3 most common themes for complaints are

1. Attitude and Behaviour – 241 complaints (21.8% of the total, compared to 20.7% in the last paper)
2. Delayed Response – 211 complaints (19.1% of the total, compared to 19.7% in the last paper)
3. Triage/Referral to NHS24 – 154 complaints (13.9% of the total, the same as the last paper)

## Actions from Complaints

The top 5 themes of complaint have remained stable over the last 3 years. As is illustrated there is a reduction in the volume of complaints this year in Delayed Response and Clinical Assessment categories.

The volumes of complaints relating to Attitude and Behaviour has been noted and discussed previously and work was scheduled to better understand this complex issue. A plan to begin this work has now been agreed and the Patient Experience Manager along with the Regional Clinical Quality Leads, Clinical Governance Manager for Guidelines and Community Engagement Officer are working on a proposal to take to the Research and Development Group on 27 April 2023. This paper will seek support in how the Service can better understand the current data and glean meaningful learning. There are theories around current contributory factors such as abstractions resulting in increased overtime, delayed and missed rest breaks, more complex patient presentations and challenges with hospital turnaround times and pathways however there is little known about whether these are the sole causes.

. The Service is also anticipating an increase in complaints due to the review of the Patient Needs Assessment (PNA) and the Patient Experience Team is working closely with the ACC Complaints



Resolution Team to ensure that any learning from these changes is considered for future development.

### Stage 1 Complaints (1 April 2022 – 5 March 2023)

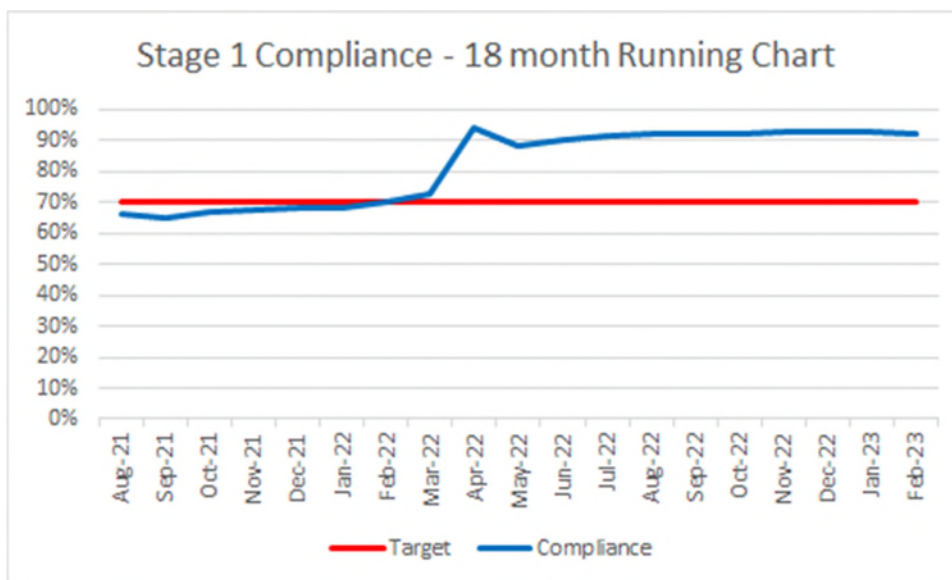
Stage 1 complaints have a 5-day target to be closed. This can be affected through direct contact with the complainant at supervisor level. This may be by phone, email or a face-to-face contact. There should be no complaints where a patient has come to harm or there is a clinical challenge completed as a stage 1.

Stage 1					
	Closed within target				Still Open and now overdue
	No	Yes	Total	Compliance	
Advanced Practice	0	1	1	100.0%	0
Air Ambulance	0	1	1	100.0%	0
Ambulance Control Centre A&E	4	229	233	98.3%	0
Ambulance Control Centre PTS	3	200	203	98.5%	0
East Region	5	112	117	95.7%	1
Mobile Testing Units	3	0	3	0.0%	0
North Region	20	42	62	67.7%	0
Support Services/NHQ	3	3	6	50.0%	0
West Region	14	92	106	86.8%	0
NRRD	3	1	4	25.0%	0
<b>Total</b>	<b>55</b>	<b>681</b>	<b>736</b>		<b>1</b>
<b>Compliance</b>	<b>92.5%</b>				

Latest results indicate that Stage 1 complaints compliance is at 92.5%, the same as the previous paper.

The government target is 70% of complaints to be dealt with by the target 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 2022 – 12 February 2023)

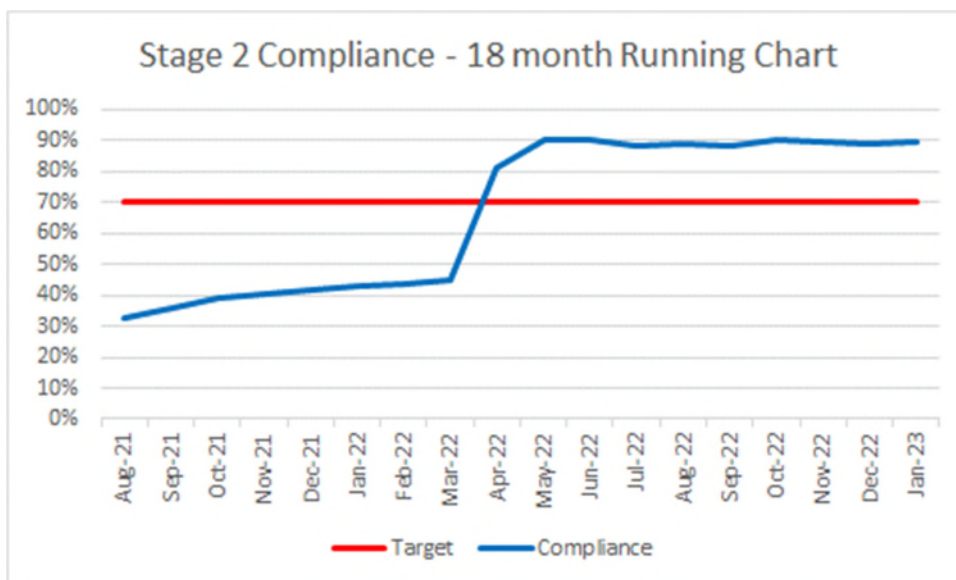
Stage 2 complaints have a 20-day target to be closed and all stage 2 complaints should be closed with a final response letter from a Director. A full investigation is also required, and all evidence collated to ensure the investigation will stand up to scrutiny from the SPSO, other auditors and legal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

Stage 2					
	Closed within target				Still Open and now overdue
	No	Yes	Total	Compliance	
Advanced Practice	1	0	1	0.0%	0
Air Ambulance	1	0	1	0.0%	0
Ambulance Control Centre A&E	4	147	151	97.4%	0
Ambulance Control Centre PTS	0	35	35	100.0%	0
East Region	4	63	67	94.0%	1
North Region	5	14	19	73.7%	0
Support Services/NHQ	6	5	11	45.5%	2
West Region	13	31	44	70.5%	1
<b>Total</b>	<b>34</b>	<b>295</b>	<b>329</b>		<b>4</b>
<b>Compliance</b>	<b>89.7%</b>				

Latest figures show the Service is sitting at a compliance rate of 89.7%, compared to 89.4% 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.

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





### **Compliance Comments**

The Service's staff continue to make considerable efforts in respect to performance throughout the year. As the Service enters into the end of the financial year, it is on direction for its highest performance since the NHS Model Complaints Handling Procedure began. The Patient Experience Team would like to once again thank each and every member of staff involved in complaints handling for their professionalism and hard work in achieving this.

### **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 12 March 2023, 195 stories were posted on Care Opinion relating to the Service. These have been viewed 45,543 times.

Of the 195 posts, 71% were uncritical in tone. It should be noted that whilst the remaining 29% 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)**

#### **Continual Patient feedback**

We have made positive progress in recent years in implementing a system of regular feedback from patient and public representatives, and the third sector, to help us improve our services. We are now exploring how to put in place a system of continual feedback involving the patients we treat, in addition to our normal feedback mechanisms. This has historically been very difficult to achieve due to a range of factors. We are currently engaging with patient engagement teams from ambulance services across the UK to learn more about any successful methods they use to gather patient feedback and how they have managed to overcome some of the issues faced.

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Through this process, we are bringing together patient engagement teams in the UK to share best practice and have set up a new forum to allow all teams to share ideas and learning. We are working in partnership with our own operational and clinical teams. We will provide updates on this work in future papers to the Board.

### **BAME communities**

Working with our third sector partners, we are continuing our work to engage with BAME communities. As part of this work, we are currently looking to identify what barriers to accessing the service may exist, including any employment barriers, to see where we can make future improvements.

We will be surveying members of the public and patients throughout the country and plan to use this data through more targeted focus group work.

We are also working with engagement colleagues in NHS 24 as we have shared goals regarding BAME community engagement.

It is hoped that this can boost capacity, focus and collaboration around this important engagement work.

### **Glasgow South Station**

Working with engagement colleagues in the local health board, health and social care partnership and other local partners, we are building an external stakeholder list to enable us to plan the community engagement element of the Glasgow South Station with the very community who will benefit from it.

Through engaging with local offices and third sector contacts in the Govanhill area, we are identifying how to best communicate and engage with local people. We will be developing a targeted engagement approach.

### **See Me**

We continue to work with the See Me charity on many areas of service improvement, including scheduled care. We aim to improve the patient experience of those with a mental health issue or difficulty and support our staff in the process. This work includes a new co-designed mental health section to the Patient Needs Assessment and co-produced call handler induction training for all new starts and CPD for existing call handlers.

There is interest from unscheduled care call handling managers to tailor this induction training for their staff too. Discussions are ongoing.

### **Patient representation**

We have two new recruits to the air ambulance re-procurement board. Both have been with us for over 4 years and have continually provided us with high quality support and feedback.

### **SPSO**

The Service currently has 7 open cases from the SPSO and has closed 1 since the previous paper.

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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/Closed
DATIX 10967	202202435	09/11/2022	1. Scottish Ambulance Service unreasonably failed to send an ambulance to patient	Not Upheld	SPSO Reviewing	N/A	N/A	N/A	Open
DATIX 6473	202110696	18/05/2022	1. Scottish Ambulance failed to take patient to hospital	Part Upheld	SPSO reviewing comments of draft response	N/A	N/A	N/A	Open
DATIX 7895	202200270	09/08/2022	1. Scottish Ambulance Service failed to reasonably carry out a clinical assessment of patient which resulted in a discharge	Part Upheld	SPSO have not taken forward	20/12/2022	N/A	N/A	Closed
DATIX 8570	202105207	05/07/2022	1. 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	1. Scottish Ambulance Service unreasonably failed to send an ambulance to patient	Not Upheld	SPSO Reviewing	N/A	N/A	N/A	Open
DATIX 10125	202203262	12/12/2022	1. Scottish Ambulance Service failed to take patient to hospital	Not Upheld	SPSO Reviewing	N/A	N/A	N/A	Open
DATIX 5488	202000766	10/02/2021	1. The care that Patient A received from the Scottish Ambulance Service was unreasonable; 2. The handling of the complaint was unreasonable	Upheld	SPSO have upheld both parts	25/04/2022	<p>1. Letter of apology to complainant</p> <p>2. Share review with the involved operational staff for feedback and learning around patient assessment and dispatch processes</p> <p>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 treatments have been performed on a patient and also; for SAS to consider issuing guidance around the management of cardiac arrest in a moving vehicle</p> <p>4. Share the review with the involved Complaints handling staff for reflection and learning</p> <p>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</p> <p>6. Share the review with the involved operational staff for reflection and learning on asking bystanders to do CPR</p> <p>7. Evidence that relevant 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</p>	<p>Recommendation 1 closed and signed off (23/05/2022)</p> <p>Recommendation 2 completed, awaiting sign off from SPSO</p> <p>Recommendation 3 completed, awaiting sign off from SPSO</p> <p>Recommendation 4 completed, awaiting sign off from SPSO</p> <p>Recommendation 5 completed, awaiting sign off from SPSO</p> <p>Recommendation 6 completed, awaiting sign off from SPSO</p> <p>Recommendation 7 completed, awaiting sign off from SPSO</p>	Open
DATIX 7795	202103065	15/10/2021	1. Ambulance Crew unreasonably failed to take Patient to hospital	Part Upheld	SPSO Reviewing	N/A	N/A	N/A	Open