



## **NOT PROTECTIVELY MARKED**

## Public Board Meeting 31 May 2023 Item No 11

## THIS PAPER IS FOR DISCUSSION

## PERSON CENTRED CARE UPDATE

Lead Director	Emma Stirling, Director of Care Quality and Professional Development					
	Mark Hannan,	Head of Corpo	rate Affairs and Engagement			
Author	Alan Martin, Pa					
	Than martin, I allow Exponence manage.					
Action required	The Board is as	sked to discus	s and note the paper			
''''''''		The Board is asked to discuss and note the paper.				
Key points			te of our patient experience activity and			
			compliments, our Patient Focus Public			
		ork as well as	complaints, their themes and actions to			
	address them.					
	An update is al	so provided on	cases with the Scottish Public Services			
	Ombudsman (S	SPSO).				
Timing	An update is presented bi-monthly to the Board.					
Associated Corporate	Risk 4638 – wie	der system cha	anges and pressures			
Risk Identification		, , , , , , , , , , , , , , , , , , , ,	3-1-1-1			
Link to Corporate	We will					
ambitions	Provide the	people of Sco	tland with compassionate, safe and			
			vhen they need it			
			citizens and our partners to create			
		d safer commu	•			
	Innovate to continually improve our care and enhance the					
	resilience and sustainability of our services					
Link to NHSScotland's	Person centred care is delivered when health and social care					
quality ambitions						
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					
Benefit to Patients	improvement of the experience of patients and of staff.					
benefit to Patients	Patient and carer feedback involvement in service development helps					
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	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

# EMMA STIRLING, DIRECTOR OF CARE QUALITY & PROFESSIONAL DEVELOPMENT

## **SECTION 1: PURPOSE**

This paper covers the period between 1 April 2022 and 31 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

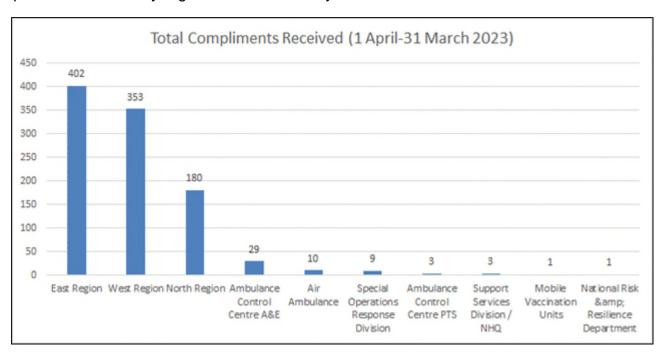
The Service actively seeks feedback on its services in order that it can continue to make improvements. We have many ways of gathering feedback – face to face, patient forums, online portals, complaint and concern channels.

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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 31 March 2023, a total of 991 compliments have been received. East Region received around 40.6% of these compliments. The graph below shows the compliments received by region for the financial year.

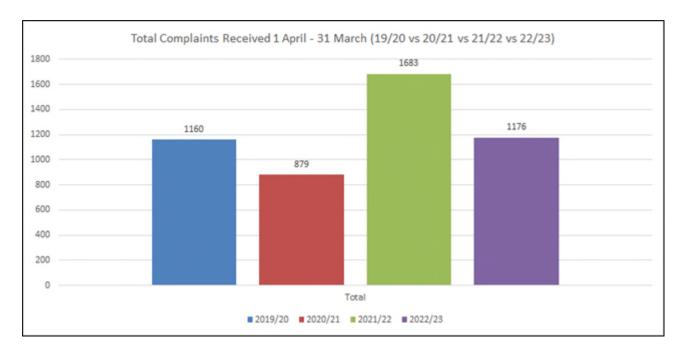


## **Complaints Data**

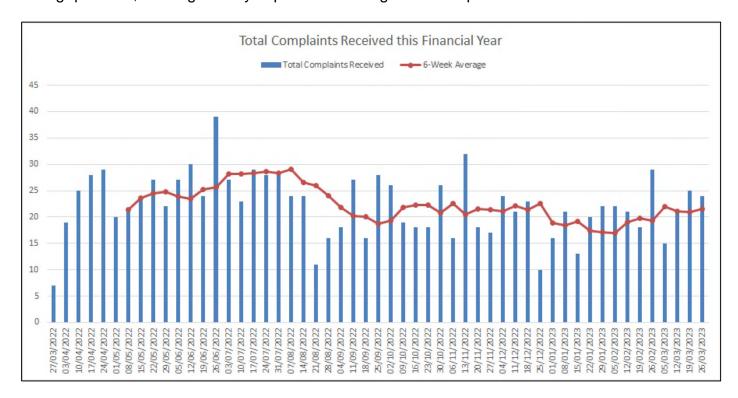
Between 1 April 2022 and 31 March 2023, a total of 1176 complaints have been received. This shows a decrease of 507 (30.1%) complaints in comparison to 2021 but is similar to the number of complaints received during this time period in 2019/20 where we had 1160 complaints.

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.

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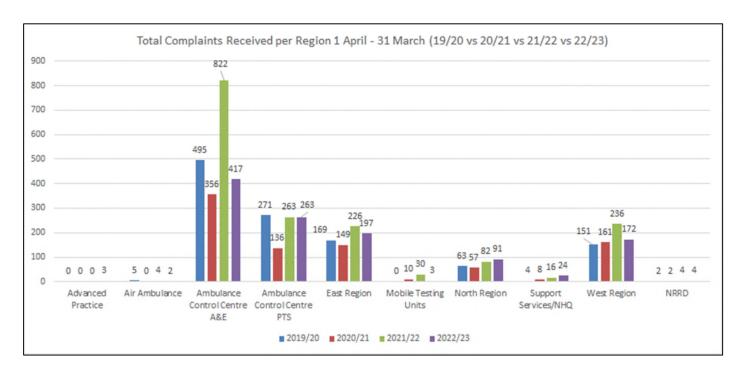


As previously stated, the challenges the Service has faced since the beginning of the pandemic have been significant and this is reflected in the above data. Whilst there continues to be systemwide challenges, the volume of complaints received during the financial year 2022/23 appears to have levelled off to a similar volume to that seen pre-pandemic. The chart below illustrates the weekly volumes of complaints being received and, whilst we saw an increase in the 6-week average during quarter 4, this is generally expected following the winter period.



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 levelling off, with the gap reducing in comparison to the previous year.

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#### **Complaint Themes**

Of the 1176 received, the 3 most common themes for complaints are:

- 1. Attitude and Behaviour 262 complaints (22.3% of the total, compared to 21.8% in the last paper)
- 2. Delayed Response 219 complaints (18.6% of the total, compared to 19.1% in the last paper)
- 3. Triage/Referral to NHS 24 166 complaints (14.1% of the total, compared to 13.9% in the last paper)

## **Actions from Complaints**

The top 5 themes from complaints have remained consistent over the last 3 years. As is illustrated, there has been a reduction in the total volume of complaints this year, as well as a decrease in complaints related to both Delayed Response and Clinical Assessment.

The increase in the percentage of complaints related to Attitude and Behaviour has been noted and discussed previously. This is a complex issue and requires a deeper investigation into the factors surrounding this data. A paper was delivered to the April 2023 Research and Development Group proposing that a piece of research be commissioned, in partnership with the University of Stirling, to better understand the potential causes of these complaints, including any systemic causes, and how the Service can improve the system to reduce the likelihood of these complaints being received. The proposal was positively received by members of the group and work is now underway to initiate a research project into attitude and behaviour feedback.

In terms of other data, the Patient Experience Team and the Ambulance Control Centre Complaints Resolution Managers have noted an increase in Stage 2 and MSP complaints related to the updated Patient Needs Assessment (PNA). The revised PNA went live on 1 March 2023 with the key improvements being implemented to tighten up compliance to ensure that the most vulnerable and clinically appropriate patients are provided with the services they require. This has resulted in some patients, who may have historically been provided transport by the Service, being signposted to alternative methods of transport. There is a robust process in place where patients can appeal any decisions relating to their application.

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## **Stage 1 Complaints (1 April 2022 – 31 March 2023)**

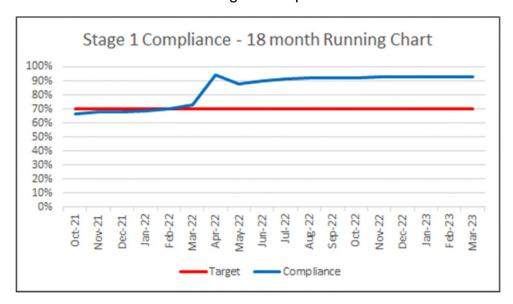
Stage 1 complaints have a 5-day target to be closed. This can be affected through direct contact with the complainant at supervisor level. This may be by phone, email or a face-to-face contact. There should be no complaints where a patient has come to harm or there is a clinical challenge completed as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

Stage 1					
		Closed wit	thin target		Still Open and
	No	Yes	Total	Compliance	now overdue
Advanced Practice	1	1	2	50.0%	0
Air Ambulance	0	1	1	100.0%	0
Ambulance Control Centre A&E	4	239	243	98.4%	0
Ambulance Control Centre PTS	3	208	211	98.6%	0
East Region	4	118	122	96.7%	0
Mobile Testing Units	3	0	3	0.0%	0
North Region	21	49	70	70.0%	0
Support Services/NHQ	4	4	8	50.0%	0
West Region	16	104	120	86.7%	0
NRRD	3	1	4	25.0%	0
Total	59	725	784		0
No.					
Compliance			92.5%		

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.



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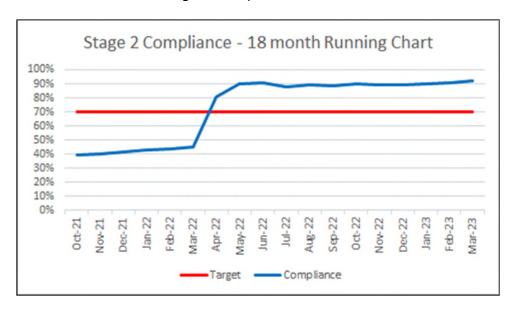
## **Stage 2 Complaints (1 April 2022 – 31 March 2023)**

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 Service 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 wit	thin target		Still Open and
	No	Yes	Total	Compliance	now overdue
Advanced Practice	1	0	1	0.0%	0
Air Ambulance	1	0	1	0.0%	0
Ambulance Control Centre A&E	4	170	174	97.7%	0
Ambulance Control Centre PTS	0	52	52	100.0%	0
East Region	3	72	75	96.0%	0
North Region	5	16	21	76.2%	0
Support Services/NHQ	6	10	16	62.5%	1
West Region	12	40	52	76.9%	0
Total	32	360	392		1
Compliance			91.8%		

Latest figures show the Service is sitting at a compliance rate of 91.8%, compared to 89.7% 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**

All complaints from the previous financial year are now closed with the exception of 1 and it would appear that the Service will be finishing with both Stage 1 and Stage 2 compliance above 90%. This will be the strongest position that the Service has achieved since the inception of the Model Complaints Handling Procedure (MCHP) and the Patient Experience Team would like to extend

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their thanks to all complaints handling staff throughout the Service for their commitment and effort through what has been an exceptionally challenging year.

## **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 31 March 2023, 207 stories were posted on Care Opinion relating to the Service. These have been viewed 50,624 times.

Of the 207 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)**

## **Patient representation**

We continue to encourage teams within the Service to ensure they gain patient feedback when developing services. We have adopted a network approach to PFPI involvement. We have around 20 active members and are continuously recruiting more. Our network consists of third sector organisations, previous patients, and interested members of the public.

In practice, when a department in the Service would like immediate patient feedback, we will brief the network and seek feedback and discussion from members.

A response can be in the form of a filled-out online survey, written submissions, or attending a Microsoft Teams or in-person meeting.

We continue to refine the process of receiving patient feedback. Our goal is to make it an easy and pleasant experience for both teams and volunteers.

#### Research and development team

We are working with the research and development team as part of building a case for funding from the Scottish Government for a range of projects to help improve patient care and are involving patients and the public in this work. We have been able to request support from other PFPI networks within NHS Scotland (NHS 24, Tayside and Western Isles) to ensure that the team receive feedback from a wide and varied patient demographic.

#### See Me

We are in the process of formalising a partnership agreement and work plan for the year ahead with the mental health organization See Me.

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We have already worked closely with See Me over the last few years, forming a very close relationship. For example, they have helped support the implementation of a mental health section to the Patient Needs Assessment (PNA) for schedule care, new mental health awareness training of our call handlers and a training package for ambulance care assistants.

The goal in formalising this partnership working is to continually improve services for patients with mental health issues and support our staff in the delivery of these services.

#### **Patient Needs Assessment**

The revised Scheduled Care Patient Needs Assessment is being supported through continual engagement to ensure it is meeting the needs of patients.

We are involving third sector partners in this work to ensure we can learn from their research, expertise, and access their wide client base to improve efficiency within the engagement process.

More information will be provided to the Board as this work evolves.

#### School visit trial

We are looking to improve our engagement with schools and young people across Scotland. As part of this work, we want to implement a more formalised process for crews visiting classrooms and community events to improve standards and ensure we are engaging with as many communities as possible.

Working with Save a Life for Scotland, Edinburgh primary schools and Queen Margaret university, we will be trialing new delivery methods and ensure a better experience for both staff and attendees.

We are aiming to create a network of staff and resources to increase our visibility in the community, aid with recruitment and support our corporate goal of being an anchor institution.

#### **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	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	Scottish Ambulance failed to take patient to hospital	Part Upheld	SPSO reviewing comments of draft response	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 10125	202203262	12/12/2022	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	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	patient and also; for SAS to consider issuing guidance around management of cardiac arrest in a moving vehicle 4. Share the review with the involved Complaints handling staff reflection and learning 5. Provide further training on complaints handling and evidence how this learning is being monitored to ensure that the complai handling process is being followed and applied appropriately 6. Share the review with the involved operational staff for reflec and learning on asking bystanderds to do CPR	Recommendation 1 closed and signed off (23/05/2022)  Recommendation 2 completed, awaiting sign off from SPSO recommendation 3 completed, awaiting sign off from SPSO recommendation 4 completed, awaiting sign off from SPSO recommendation 5 completed, awaiting sign off from SPSO recommendation 6 completed, awaiting sign off from SPSO recommendation 7 completed, awaiting sign off from SPSO recommendation 8 completed	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

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