

NOT PROTECTIVELY MARKED

Public Board Meeting

**July 2018
Item 10**

THIS PAPER IS FOR DISCUSSION

PERSON CENTRED CARE UPDATE

Lead Director	Dr Patricia O'Connor, Director of Care Quality and Strategic Development
Author	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 between 27 April 2018 and 1 June 2018.</p> <p>Care Opinion continues to provide valuable patient and carer feedback, with 30 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	<p>1.1 – Engage with partners, patients and the public to design and co-produce future service.</p> <p>1.2 - Engaging with patients, carers and other providers of health and care services to deliver outcomes that matter to people.</p>
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 27 April 2018 and 1 June 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 326 compliments were received by the Service between 1 April 2018 and 20 June 2018.

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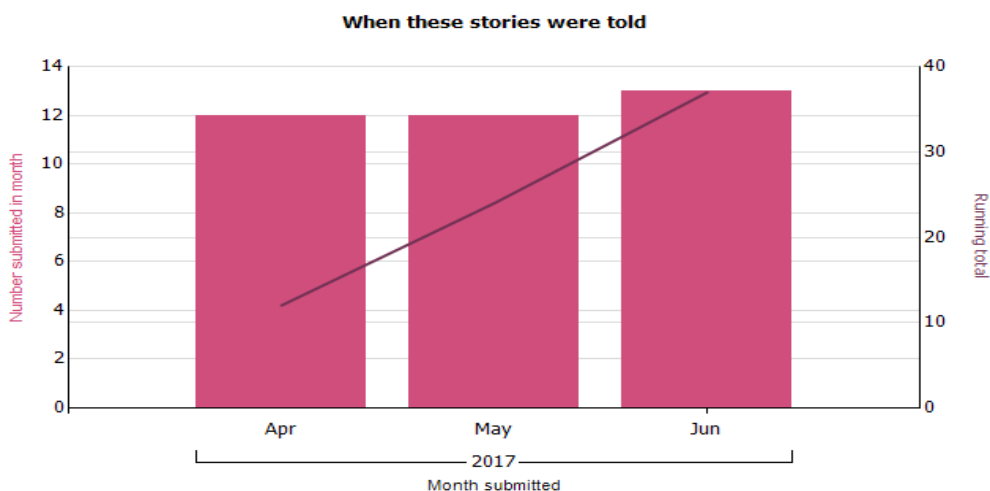
Care Opinion

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.

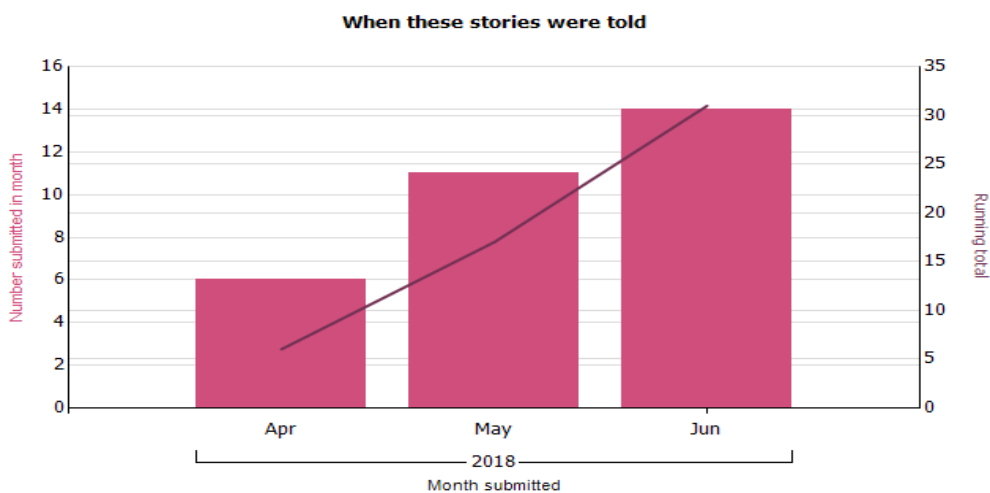
There were 31 posts on the Care Opinion website about care from the Service between 1 April and 30 June 2018. These were viewed 3,529 times.

Number of posts per month

2017

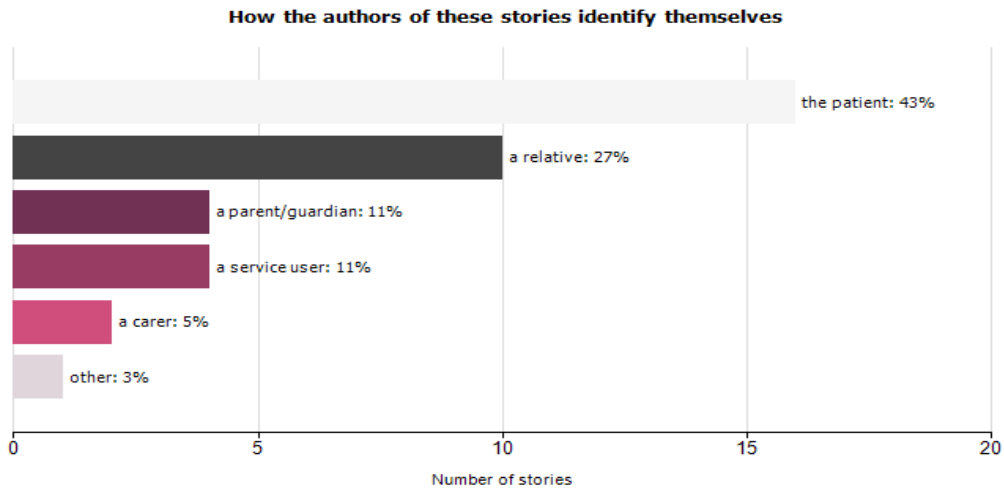


2018

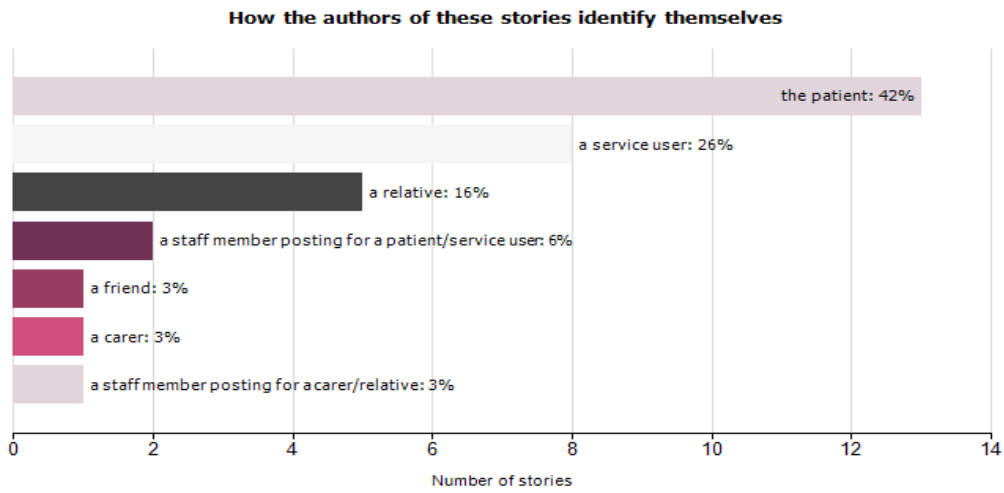


How the author of these posts identify themselves

2017

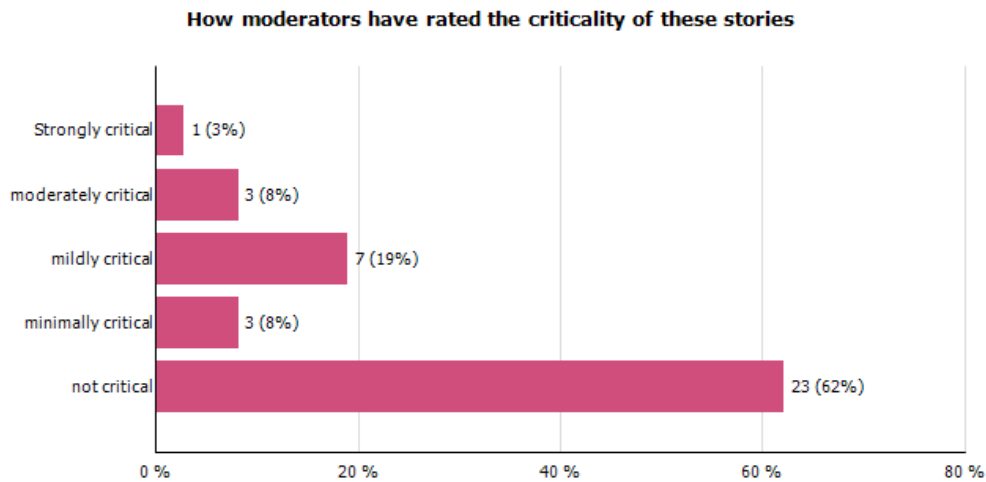


2018

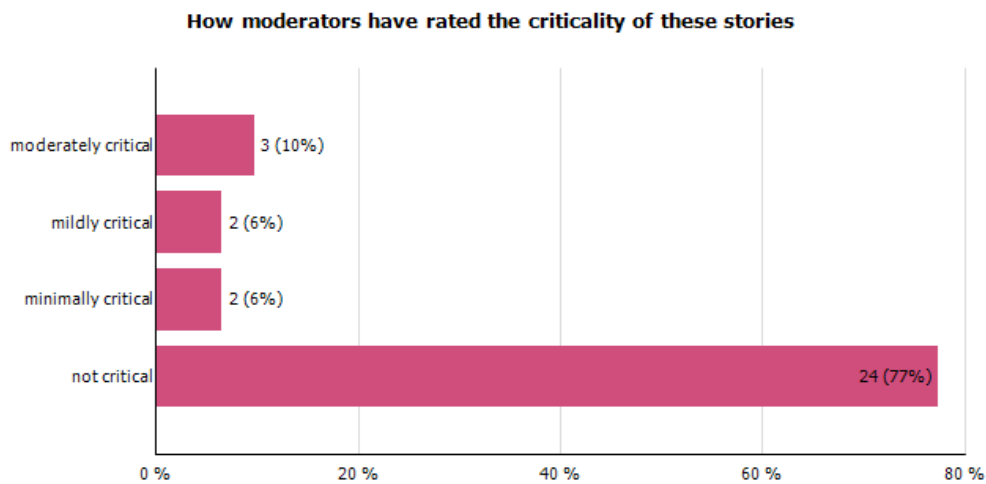


How moderators have rated the criticality of these stories

2017



2018



Of the posts on Care Opinion, 29 related to Accident and Emergency services, with 2 relating 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. Of the three moderately critical stories, one is about a delayed response, one is about clinical care and the other is about another Board.

Compliments

The Service recorded 326 compliments between 1 April and 20 June 2018 across all social media channels. 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 **Annex A**.

Patient Focus Public Involvement (PFPI)

The Service is continuing to develop a new, improved approach to our PFPI arrangements. Our Community Engagement Officer is expanding our outreach and engagement to new community groups within the third sector, including mental health charities. We held our latest PFPI meeting on 24 May, with a large number of new patient representatives and third sector groups present, alongside existing long-standing members.

Positive discussions were held on latest developments within the Service, such as Patient Transport, Major Trauma Improvements and the Direct Paramedic Admission Scheme which has been trialled in Dundee and Angus. Feedback and suggestions were also sought on our strategic work to align our patient engagement work with NHS 24.

Last week, our Community Engagement Officer held meetings with local schools to explore partnership work with pupils and there is a meeting planned with Young Scot in the coming weeks. The Corporate Affairs and Engagement team is also creating a newsletter which will be used to regularly update patient representatives and partner organisations on latest developments within the Service.

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.

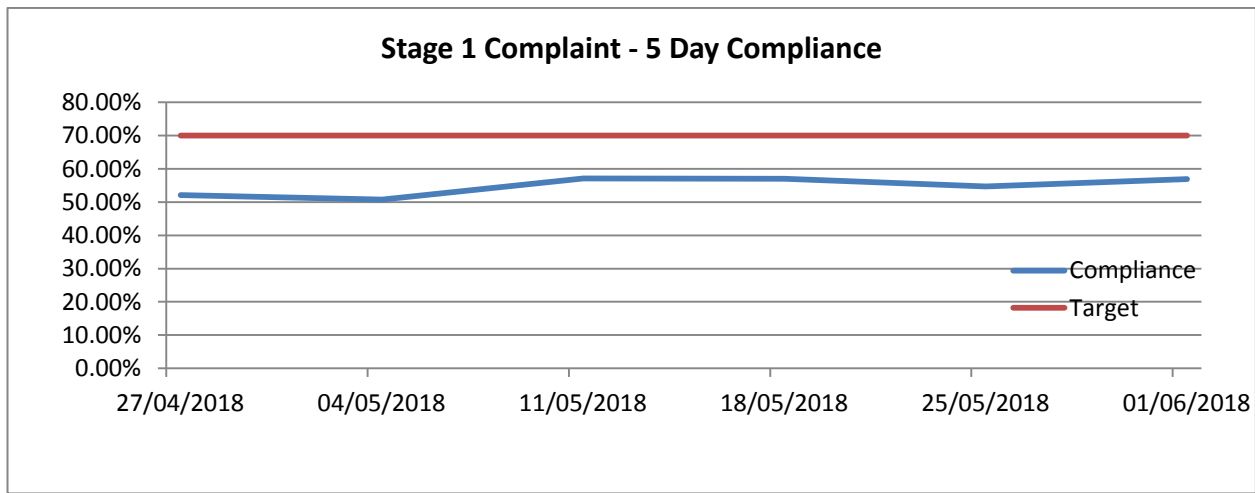
The Service is currently developing the complaints module of DATIX, which is widely used across NHS Scotland Boards for complaints handling. NHS Fife, NHS Lothian and NHS Highland colleagues are working in partnership with DATIX to ensure that the measurement framework within the system is fit for purpose 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.

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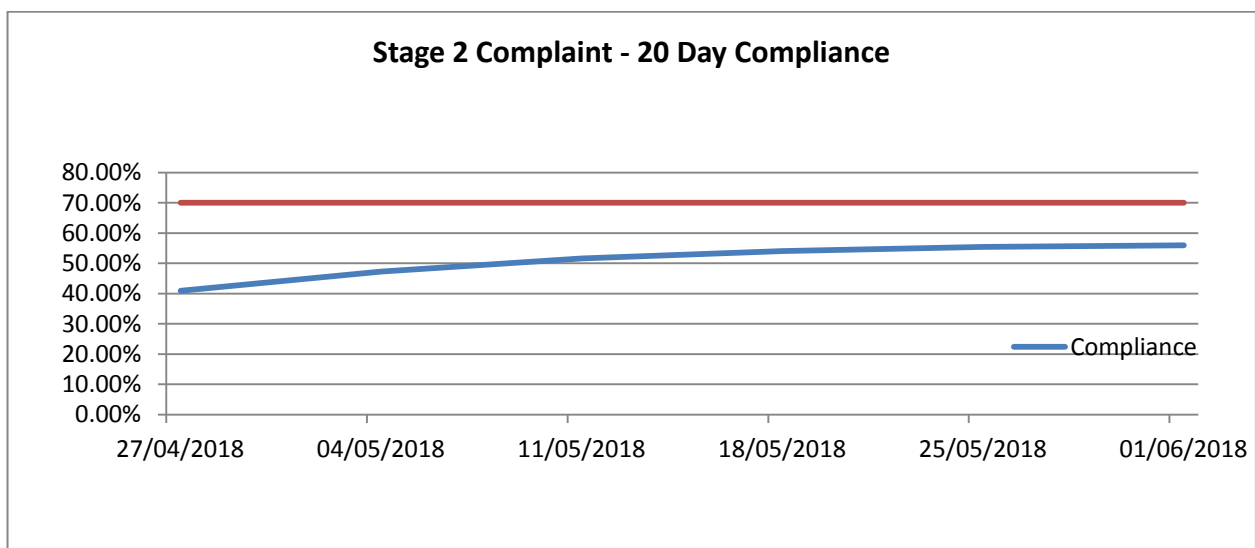
Complaints Data

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 figures show that Stage 1 complaints compliance is currently at 56.9%, rising from 52.1% at the start of the new compliance year. Stage 2 complaints compliance is currently 56%, up from 40.9% at the start of the new compliance year.

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 little opportunity or capacity for frontline staff to both manage an issue brought to their attention whilst providing care and recording data. Stage 1 complaints are proving to be very challenging and 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 Manager Ms Elaine Jamieson and Ms Lorraine Tough, 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.

The top five complaint themes, in order, between 1 April 2018 and 1 June 2018 were delayed response, attitude and behaviour, clinical assessment, triage and eligibility.

Delayed response and attitude & behaviour continue to be the main areas of complaint for 2018/19 with PTS Cancellations also seeing an increase.

Themes 2017/18

Complaint Theme	Complaint Stage 1&2 (2017/18)
Delayed Response	316
Attitude & Behaviour	270
Clinical Assessment	58
AMPDS – Not Triageed Appropriately	68
Patient not Conveyed	21

Themes 2018/19 to date

Complaint Theme	Complaint Stage 1&2 (Start of 2018/19)
Delayed Response	39
Attitude & Behaviour	35
PTS Cancelled	22
Clinical Assessment	13
Call Not Upgraded	8

Mitigating Actions

The Patient Experience Manager delivered a presentation to the SAS 2020 Steering Group on 14 May 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. It was noted that there has been very little academic work carried out on how best to measure patient experience in a pre-hospital environment. This is an opportunity for the Service to lead on the development of this evidence base for other ambulance services and boards across the UK.

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 and emergency cases leading to a minority of 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.

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Eligibility:

Over the last year, a sub group of the Scheduled Care Advisory Group has been reviewing the Patient Needs Assessment (PNA). This Group has included patients, road staff and members of the Ambulance Control Centre. As part of their work, the Group has been testing a number of changes to the PNA which have demonstrated improvements and these changes went live on 5 December 2017. The improved version of the PNA should give us a better understanding of patients' needs and make 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 and these are being managed and reviewed on a case by case basis.

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Current SPSO cases

SPSO Tracker					
SAS Ref/Decision	SAS Decision	SPSO Ref	Complaint Overview	Recommendation	Status
WEDMC/31/1059 3/17	Not upheld	201707301	1. The Service failed to appropriately assess the 999 call in view of the patients reported symptoms and medical history.	SAS recommendation: The conclusion of the SAS investigation was that the call was appropriately handled by the Clinical Advisor on the basis of the information given by the patient.	<p>SPSO upheld the complaint from the patient. Concluded that a number of signs were not given sufficient weight by the Clinical Advisor in the assessment made.</p> <p>SPSO recommendations:</p> <p>1) An apology is issued to the complainant. Deadline: 19 June 2018.</p> <p>Update: Completed by SAS. Sincere apology issued.</p> <p>2) Evidence that the Clinical Advisor has been reminded of their responsibilities when carrying out clinical assessments.</p> <p>Deadline: 19 June 2018</p> <p>Update: Completed by SAS. Review of case undertaken with Clinical Advisor by Manager to identify learning in relation to clinical assessments.</p> <p>SAS have also commissioned a leading stroke expert to deliver additional training to all clinical advisors in identifying complex stroke symptoms as a priority.</p>

WEMDC/31/8691/ 17	Upheld	201703342	<p>1. There was an unreasonable delay in an ambulance attending to the patient after he suffered an accident (upheld).</p> <p>2. Unreasonable delay in transferring the patient from local hospital to trauma centre (partial).</p>	<p>SAS recommendation: Review to be undertaken with the dispatcher in question to allow for reflection and learning.</p> <p>SAS recommendation: None. Unfortunately, the delay was unavoidable due to increased demand at the time of the call.</p>	<p>Final SAS response issued to SPSO.</p> <p>SPSO decision pending.</p>
WC/24/8529/17	Not upheld	201703141	<p>1.The Scottish Ambulance Service's actions in relation to patient assessment and transfer to hospital were unreasonable.</p>	<p>SAS recommendation: Review to be undertaken with both crew members as an opportunity for reflection and learning, highlighting the Service values and the constant need for positive communication with patients and their families.</p>	<p>Final SAS response issued to SPSO.</p> <p>SPSO decision pending.</p>

SE/25/8150/16	Upheld	201701591	<p>1. The ambulance crew failed to transfer the patient to hospital in an appropriately safe manner.</p> <p>2. <i>The Scottish Ambulance Service handling of the complaint was unreasonable.</i></p>	<p>SAS recommendation: Undertake a full clinical review into the case.</p> <p>SAS recommendation: Review to be undertaken with both crew members as an opportunity for reflection, learning and identify any further training required.</p> <p>SAS recommendation: Direct feedback to staff involved in handling the complaint to pass on the frustrations of the family and highlight where processes could have been followed more effectively.</p>	<p>Final SAS response issued to SPSO.</p> <p>SPSO decision pending.</p>
WEMDC/33/1000 8/17	Not upheld	201705035	<p>1. <i>The Scottish Ambulance Service unreasonably failed to dispatch an ambulance.</i></p> <p>2. The Scottish Ambulance Service did not investigate and respond to complaint reasonably.</p>	<p>SAS recommendation: Review to be undertaken between the Supervisor and call handler to allow for reflection, learning and identify any further training required.</p> <p>SAS recommendation: None. In our view, complaint was dealt with in an efficient, professional and timely manner</p>	<p>Final SAS response issued to SPSO.</p> <p>SPSO decision pending.</p>

Social media – examples of compliments received this month

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!

My daughter aged 9 witnessed my epilepsy for the first time last month without another adult in the house. She followed 999 protocol and gave all the info and unlocked the door, she was quite freaked to say the least and the paramedics that came out were amazing with her, they calmed her, praised her for her quick thinking and quickly stopped her worrying and changed it to praise for her positive actions, she was so proud. I can't thank them enough for calming her down and distracting her turning a crappy experience into something to be proud of - she said she wants to help people like they do when she's older and I can't thank you enough.

Thank you to the Falkirk crew who attended a call for an incident I had during a visit to Zetland park Grangemouth with my daughter. You guys do great work, and the time and care you took was so reassuring. Keep up the good work guys. And most of all THANK YOU!!

Many thanks to your Aberdeen crew who attended a sporting injury at our rugby club last Saturday 21st - they were highly professional and did a fantastic job. Greatly appreciated.

Back in January of this year I gave birth prematurely to my beautiful baby girl at 32 weeks at home in my bathroom, she had already arrived before my husband was able to call 999

I can't thank the ambulance service enough for the support they gave to myself and my husband, from the call handler explaining to my husband what to do until the paramedics arrived (my son who was 20 months old at the time was screaming the house down so as you can imagine was very stressful) I don't know her name but she made a very stressful situation that little bit calmer and the amazing paramedics who cared for us and got us to the Victoria hospital in Kirkcaldy very quickly! All your actions ensured that my little girl survived and I can never thank you enough! Little Emilie spent only 2 weeks in SCBU in Kirkcaldy and is now 14 weeks old and thriving and has a very doting little brother who adores her very much. Again thank you, thank you, thank you!

I had to call an emergency ambulance for a friend who collapsed recently. The paramedics were both pragmatic and professional, and made my friend and her husband feel listened to and safe.

There have been multiple occasions recently when Paddy, paramedic attached to Aurora medical practice, has been called to attend my elderly, frail and infirm parents. He has been unfailingly kind, caring, helpful and professional on every occasion providing much needed reassurance to both my parents and myself.

[@Scotambservice](#) once again my family and I would like to extend our thanks and praise for the excellent care my elderly mother received from David and Daz when they very gently took her from her home in Clydebank to QEUH, forever grateful.

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Eastriggs family praises ambulance crew actions in saving son

23 June 2018

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A mother has praised the actions of an ambulance crew in saving her son after the 11-year-old fell seriously ill.

Debra Thompson, 39, was at the family home in Eastriggs when Elliott developed a rash and a lump on his head.

She said the incident was "extremely scary" but the Scottish Ambulance Service call handler and crew took away "all the panic and fear".

Ms Thompson said that Elliott had made a good recovery and said she would always be "extremely grateful".

The incident happened in April this year and when the rash and bump developed she took her son to see a doctor.

However, she said they advised that the problem would "go away" but instead it worsened.

'Violently sick'

"He was violently being sick, his heart rate was extremely fast, his body was shaking and burning hot - he started to become disoriented," she said.

Ms Thomson said that was when they called for the ambulance.

Her son has a nut allergy but she said he had not eaten one on the day he fell ill.

"We are not sure what caused this, the hospital didn't know either," she said.

"When we phoned the ambulance we told them what was happening.

Top Stories

No 10 produces new Brexit customs model

The plan for handling customs after the UK leaves the EU will be discussed by the cabinet on Friday.

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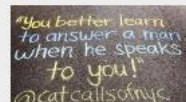
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Features



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Preserving the memory of Holocaust victims



Layby lullaby as new mum makes pit stop to have baby

by STEPHEN DEAL

A MUM has been reunited with a paramedic crew after the dramatic birth of her son in a layby.

Keryn Laver gave birth to Keldan in the layby in Dunfermline after she told her husband he would have to pull over before they got to the hospital as their baby was on the way.

The 39-year-old had phoned the Victoria Hospital in Kirkcaldy, Fife, on March 7 last year to say contractions had started and she was told to get to the hospital as quickly as she could. Keryn, of Oakley, near Dunfermline, said: "We were in the car and I was screaming. My husband started driving me to hospital. Around a mile down the road, there was a little layby near the Carnock Inn."

She added: "The ambulance came around the corner and must have heard me from the car!"

As she was put on to the stretcher by paramedics Andrew Paterson and Richard Garside, the baby's head was out.



Home comforts: Keldan as a baby

The paramedic crew helped deliver the 8lb 6oz baby at 9.03pm, with the location on Keldan's birth certificate listed as Carnock Road.

Now Keldan has met the crew for the first time. Keryn added: "I think for my husband it was a huge relief that he did not have to deliver it."

The date of the birth has an extra special significance for Keryn as it was the same day her brother Gedric died in 2009 after a sailing accident.

She said: "It changes a bitter day and turns it into a happy day."



Reunited: Keryn with sons Torin, three, and Keldan, along with Richard Garside, left, and Andrew Paterson, right

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Family pays tribute to Patient Transport crew

My heart stopped 15 times but I'm here to tell the tale

by STEPHEN DEAL

A FATHER-OF-THREE has told how he survived 15 cardiac arrests in three hours.

Ian Clark said ambulance staff 'miraculously' saved his life.

The 52-year-old was at home with wife Carole and youngest son Kaiden, 12, in Elrick, near Aberdeen, on August 15 last year when he suffered the first cardiac arrest while eating chicken and sweetcorn soup.

An emergency call was made to 999 by his wife, with an ambulance crew from Huntly - Deborah Cameron and Claire Allan - dispatched.

The crew also had assistance from Aberdeen's paramedic response unit, manned by Calum Moir.

Mr Clark said: 'My wife called 999 - I had finished my soup, and then I fell and caught my eye socket on the fire-place. That's when my heart stopped.'

He said he had three cardiac arrests at his house, three in the



Miracle recovery: Ian (left) lies in an induced coma in hospital but (above) he is now alive and well

ambulance and the rest were in the accident and emergency department at Aberdeen Royal Infirmary.

He added: 'This all happened in the space of two or three hours.'

Once in hospital, he was put in an induced coma, adding that, after his initial collapse, the next thing he remembers is 'waking up in hospital.'

Mr Clark was stunned when a doctor explained what had happened.

He added: 'He said what happened was very rare. I just want to thank everyone for helping me.'

The Scottish Ambulance Service's area service manager for Grampian Ewan Murray said: 'I hope Ian continues his recovery.'





Wonderful story here from the PTS crew at Law and the relationship they had with Rita.

Two Patient Transport Service crew members were invited to be pallbearers at the funeral of a woman they transferred on a weekly basis to hospital for 13 years.

Brian Muldoon and Jim Vincent, based at Law Ambulance Station, have been described as part of Rita Cross' "family" by her two daughters, Melanie and Pauline.

Former nurse Rita, 80, passed away earlier this year. She had been travelling back and forth from her property in Carluke, Lanarkshire, to hospital.

Rita had been a dialysis patient for the past 16 years. Initially, she had some mobility but once this decreased, she started using PTS for transport between hospital and her home. This is where she struck up the relationship with Brian, and Jim, also known as "Vinny" . Rita called them her 'toy boy' and 'Koi boy' respectively, and the trio shared banter and many laughs over the past several years.

Melanie said: "They were part of the family. My mum looked at them as part of the family. They did not just go in and just do their job. They did the job plus. They were very good with mum, and very caring.

"They use to stop at the chip shop when they were coming back from the hospital. They both went above and beyond their duties. From day one, they put her at ease straight away. They all had good banter between each other. Right from day one, it was like they had know her all their life."

When Rita passed away, the pair were notified of her funeral details and were had already made plans to attend.

Melanie said: "She loved them, they were her boys."

She said Brian and Jim picked her mum up on different days and added that Rita "missed it when it wasn't them."

She said Brian and Jim picked her mum up on different days and added that Rita "missed it when it wasn't them."

Rita's other daughter, Pauline, said the relationship they had with her mum was special, saying Rita used to buy them gifts while away on trips, along with other medical staff she received help from over the years.

She added "she never forgot about them" and said they were invited to be pallbearers as they "lifted her for the last 13 years.

She continued: "Mum would have totally appreciated and grateful they did that. They are absolutely brilliant guys. I wanted them to be part of the funeral as well."

Brian said: "I was picking her up before Jim started. I have been picking her up for about 13 years, Jim for about 10 years.

"We got to chat with her and she asked us to do the odd wee thing, such as record the odd thing on TV, like Neighbours or Emmerdale, or get a bottle of water. It was just normal, we didn't give it a second thought.

"On the way back from hospital, we would stop and get some food. She used to call me her 'toy boy' and Jim was her Koi Boy, as he had fish. She was a lovely person."

Once the pair found out she had passed away, they wanted to attend the funeral, with Brian adding: "Then we got asked to be pallbearers, as we had been carrying her for years. I was absolutely shocked, but also delighted.

"We met the rest of the family, and they said 'you must be Vinny and Brian'. They knew exactly who we were. Most crews like her, but we struck a real chord with her. I think it is part and parcel of the job. If you can have a bit of banter, it takes their mind off where they are going."

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