



**Scottish
Ambulance
Service**

Working in Partnership with Universities



NOT PROTECTIVELY MARKED

Public Board Meeting

28 May 2025

Item No 12

THIS PAPER IS FOR DISCUSSION

PERSON CENTRED CARE UPDATE

Lead Director	Emma Stirling, Director of Care Quality and Professional Development
Author	Mark Hannan, Head of Corporate Affairs and Engagement
Action required	The Board is asked to discuss and note the paper.
Key points	<p>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.</p> <p>An update is also provided on cases with the Scottish Public Services Ombudsman (SPSO).</p>
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.



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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 2024 and 31st March 2025. 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 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. As illustrated in figure 1 below, between 1 April 2024 and 31st March 2025, a total of 1036 compliments have been received. East Region received around 43% of these compliments.

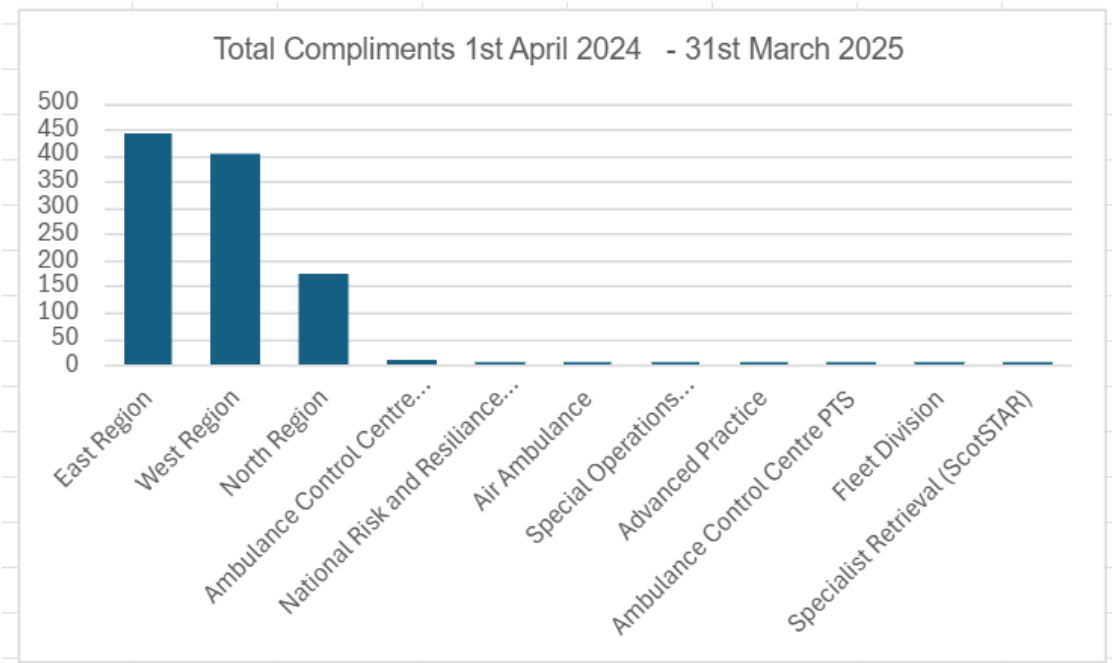


Figure 1

Complaints Data

As shown in Figure 2, between 1 April 2024 and 31st March 2025, a total of 1103 complaints have been received. This shows an increase of 125 (12.8%) complaints in comparison to 2023/24 and a reduction of 73 complaints (6%) in comparison to 2022/23. The increase in complaints appears to be consistent with what is being seen at other UK Ambulance Services and Territorial Health Boards, with the SPSO also reporting increases.

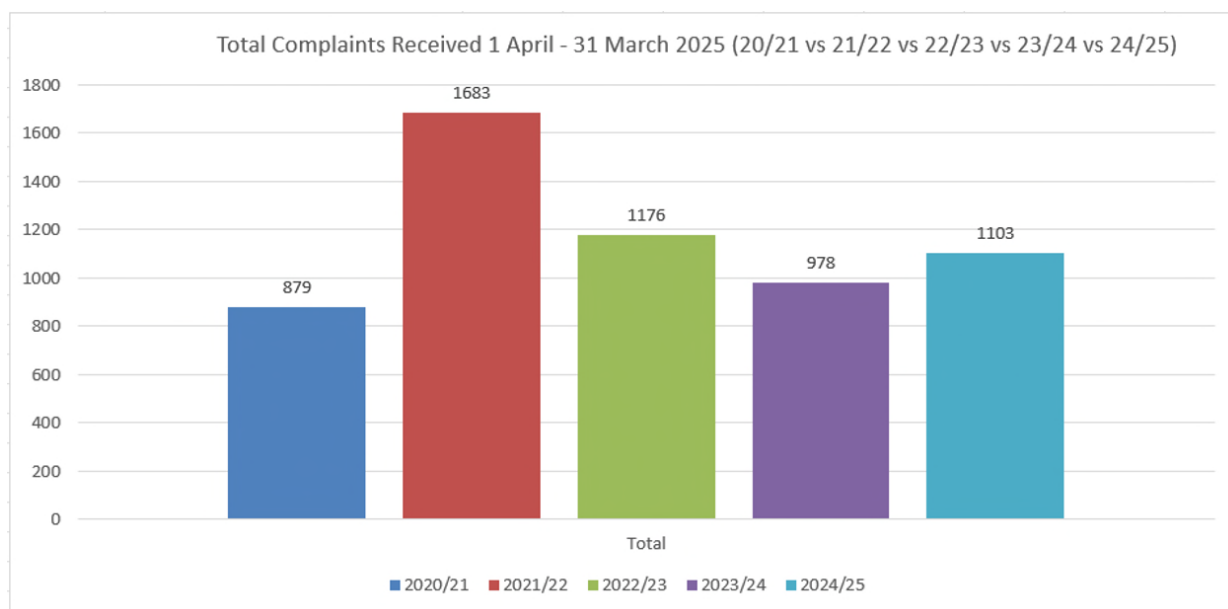


Figure 2

System-wide challenges put significant pressure on the Service this year, but our staff have continued to do their very best to deliver the highest quality of care for patients.

The volume of complaints received by the Service has fluctuated over the year. Figure 3 below shows the number of complaints received per month. As can be seen, the number of complaints began to fall over the summer and autumn months, before steadily rising again over winter.



Figure 3

The graph below shows the distribution of complaints throughout the Service. As can be seen, the majority of complaints continue to be owned by the Ambulance Control Centre A&E and PTS.

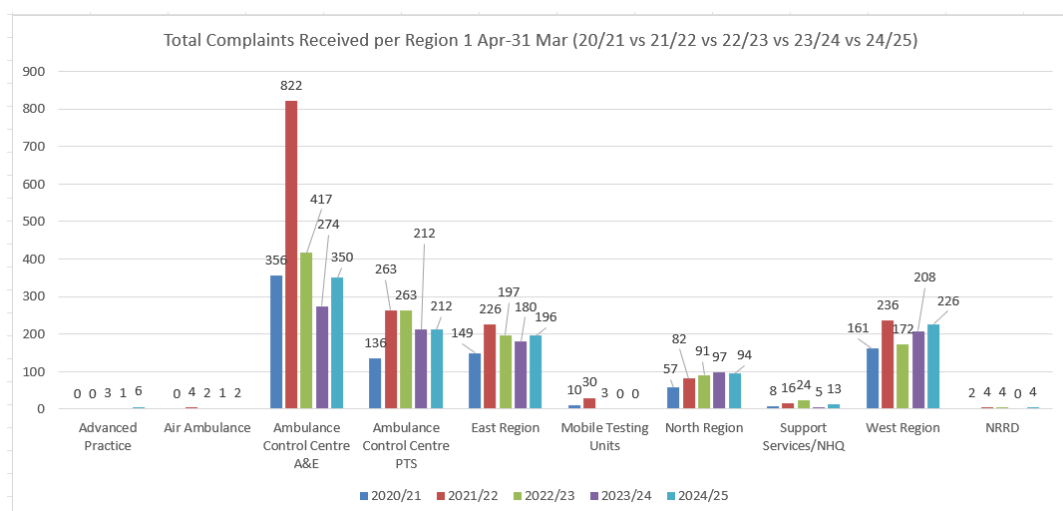


Figure 4

Complaint Themes

Of the 1103 complaints received, the 3 most common themes for complaints are:

1. Attitude and Behaviour – 351 complaints representing 32% of the total. This compares with 294 such complaints in 2023/24, representing 30% of the total last year.
2. Delayed Response – 202 complaints representing 18% of the total. This compares with 119 such complaints in 2023/24, representing 12% of the total last year.
3. Triage/Referral to NHS24 – 163 complaints representing 15% of the total. This compares with 126 such complaints in 2023/24, representing 13% of the total last year.

The top 5 themes from complaints have remained relatively consistent over the last 3 years. As has been highlighted in previous updates, there has been a substantial decrease in complaints related to Delayed Response, which in 2020/21 was the theme in over 39% of complaints. However, this theme now makes up just 18% of our complaints. This decrease may be in part due to the sustained efforts in the development and implementation of the Integrated Clinical Hub and Pathways.

The proportion of complaints in relation to Attitude and Behaviour has remained fairly stable compared with last year, although there has been an increase in the total number of such complaints this year. It should be noted however that there has also been an increase in the overall number of complaints the Service has received this year, compared to last year.

For example, as can be seen from the data, we've also seen similar increases in the total number of delayed response and triage/referral to NHS24 complaints this year, alongside the overall increase in the total number of complaints received by the Service.

Stage 1 Complaints (1 April 24 – 31 March 2025)

Stage 1 complaints have a 5-day target to be closed. 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 or not closed properly
	No	Yes	Total	Compliance	
Advanced Practice	1	3	4	75.0%	0
Air Ambulance	1	0	1	0.0%	0
Ambulance Control Centre A&E	2	157	159	98.7%	0
Ambulance Control Centre PTS	0	121	121	100.0%	0
East Region	1	120	121	99.2%	0
Support Services/NHQ	0	3	3	100.0%	0
North Region	1	55	56	98.2%	0
NRRD	2	1	3	33.3%	2
West Region	25	117	142	82.4%	7
Total	33	577	610		9
Compliance	94.6%				

The above table shows SAS is sitting at a compliance rate of 94.6% for the year, which is well above the government target of 70%. This compares with a Stage 1 compliance rate of 97.4% last year (2023/24).

Stage 2 Complaints (1 April 24 – 31 March 2025)

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 should be 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 or not closed properly
	No	Yes	Total	Compliance	
Advanced Practice	0	2	2	100.0%	0
Air Ambulance	0	1	1	100.0%	0
Ambulance Control Centre A&E	3	188	191	98.4%	0
Ambulance Control Centre PTS	3	88	91	96.7%	0
East Region	1	74	75	98.7%	0
North Region	10	28	38	73.7%	2
Support Services/NHQ	8	3	11	27.3%	1
West Region	19	65	84	77.4%	3
Total	44	449	493		6
Compliance	91.1%				

The above table shows SAS is sitting at a compliance rate of 91.1.% which is well above the government target of 70%. This compares with a Stage 2 compliance rate of 94.6% last year (2023/24).

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 2024 and 31st March 2025, 348 stories were posted on Care Opinion relating to the Scottish Ambulance Service. These have been viewed 77,038 times.

Of the 348 posts, 72% were uncritical in tone. It should be noted that whilst the remaining 28% 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.

Involving People

Volunteer Structures & Representation

In support of the Involving People Strategy and The Anchor Plan we've enhanced the recruitment process for PFPI (Public Focused Public Involvement) volunteers. This work builds upon wider feedback from volunteers, NHS partners and our benchmarking activity with ambulance trusts across the UK. This now includes best practice methods from Healthcare Improvement Scotland and the dynamic outreach approach of London Ambulance Service. Updates also extend to improvements on our public website and a more inclusive interview process.

Further aligning with our Equality Outcomes and NHS Scotland's Participation Standard, we are actively recruiting patient representatives for key governance areas, including Infection Prevention and Control and the Clinical Governance Committee.

Promoting Community Engagement and Reporting

As part of our ongoing work with the Community Resilience Team and guided by the principles in the National Standards for Community Engagement, we are now encouraging staff to report and celebrate community engagement activities - from regional director correspondence to volunteer-led outreach. This helps recognise best practice, improve visibility of local engagement and strengthens our accountability to communities.

We're also exploring the availability and sharing of community engagement resources, including equipment, in partnership with local public sector organisations. This supports our goals within The Anchor Plan and the wider ambitions of Community Empowerment (Scotland) Act 2015.

Youth Engagement & Dramatised Insight Projects

In line with the UNCRC and the 2030 Strategy commitment to involving young people, we're collaborating with ACC teams to dramatise a real-life call involving a call handler guiding someone through the home birth of his child. This engaging case study will offer students an authentic insight into the skills and challenges of emergency call handling.

It will serve as a key feature within a new programme we are co-designing with students from Queen Margaret University's Paramedic Science course. The aim is to create a more compelling entry point for young people exploring healthcare careers and to align our engagement with curriculum development in further and higher education.

Scheduled Care & Mental Health Peer Support

In collaboration with the Scottish Recovery Network, we continue to advance our Scheduled Care mental health training programme. Rooted in the values of Realistic Medicine, we're developing an education package to empower Scheduled Care Coordinators to better manage their own mental health and support their peers.

Workshops and co-production sessions across our ambulance control centres have provided rich insight, and peer-led networks are now taking shape. This supports the wider workforce resilience agenda outlined in NHS Scotland's Workforce Strategy 2031.

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Ongoing Youth and Community Partnerships

In collaboration with NHS 24 and NHS Lothian, our planned work experience initiatives will offer students a full view of emergency care - from a 999 call to hospital discharge. A mentorship scheme is in early development, designed to foster leadership and interpersonal skills in young people through guidance from SAS staff. This links directly to our Anchor commitments around local skills development and widening access.

Children's Hospices Across Scotland (CHAS)

Our partnership with the Palliative and End of Life Care team and CHAS continues, with active discussion groups involving young people and families shaping our shared agenda. This reflects the inclusive values at the heart of our Involving People Strategy and ensures our support is grounded in lived experience.

SPSO

The below table illustrates the cases currently being reviewed by the SPSO. The Service currently has 4 open cases 7 closed cases. Of the 8 that have been assessed by the SPSO, 5 did not meet the criteria for further investigation, 2 cases have not been upheld and one case has been upheld. 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 all recommendations that have been identified and agreed will be prioritised for action.

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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 13225	202304669	16/01/2024	Ill-prepared for a cardiac arrest	Part Upheld	Review completed Not upheld	26/09/2024	N/A	N/A	Closed
DATIX 9759	202207244	18/10/2023	Failed to timeously send an Ambulance to Patient A	Upheld	Review completed Not upheld	12/08/2024	N/A	N/A	Closed
DATIX 13814	202304529	16/01/2024	Inappropriately referred 999 call to NHS24	Not Upheld	Currently reviewing	N/A	N/A	N/A	Open
DATIX 6473	202110696	18/05/2022	Failed to take patient to hospital	Part Upheld	Review completed Upheld	15/12/2023	1. Letter of Apology to complainant 2. Review policy on documentation standards 3. Share report with attending crew in a supportive manner for their own learning	1. Recommendation 1 completed and signed off (23/01/2024) 2. Recommendation remains open (autumn 25 timeframe due to ePR move) 3. Recommendation completed and signed off (29/02/2024)	Open
DATIX 17220	202409103	14/01/2025	Care provided at RTA	Not Upheld	Decided not to investigate	04/02/2025	N/A	N/A	Closed
DATIX 17176	202408704	16/01/2025	PTS Eligibility	Not Upheld	Decided not to investigate	03/02/2025	N/A	N/A	Closed
DATIX 14391	202401360	12/09/2024	Ambulance Delay and clinical assessment	Not upheld	Decided not to investigate	06/02/2025	N/A	N/A	Closed
DATIX 16700/16480	202406895	07/02/2025	Safety warning on system	Not Upheld	Decided not to investigate	N/A	N/A	N/A	Closed
DATIX 16307	202409508	25/02/2025	Delayed response	Upheld	Currently assessing whether to investigate	N/A	N/A	N/A	Open
DATIX 14277	202309999	19/03/2025	Delayed response and clinical assessment	Upheld	Review ongoing	Ongoing	TBC	NA	Open
DATIX 16598	202407561	04/03/2025	PTS Eligibility	Not Upheld	Decided not to investigate	N/A	N/A	N/A	Closed