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Public Board Meeting

26 March 2025 Item No 10

THIS PAPER IS FOR DISCUSSION

PERSON CENTRED CARE UPDATE

Lead Director	David Bywater, Interim Director of Care Quality and Professional			
	Development			
Author	Mark Hannan, Head of Corporate Affairs and Engagement			
	Marie Kennedy, Patient Experience Manager			
Action required	The Board is asked to discuss and note the paper.			
Key points	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).			
Timing	An update is presented bi-monthly to the Board.			
Associated Corporate	Risk ID 4638 – Hospital Handover Delays			
Risk Identification	, ,			
Link to Corporate	We will			
ambitions	Provide the people of Scotland with compassionate, safe and			
<u> </u>	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	Person-centred care is delivered when health and social care			
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 improvement of the experience of patients and of staff.			

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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

DAVID BYWATER, INTERIM DIRECTOR OF CARE QUALITY & PROFESSIONAL DEVELOPMENT

SECTION 1: PURPOSE

This paper covers the period between 1 April 2024 and 28 February 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 28 February 2025, a total of 1019 compliments have been received. East Region received around 43% of these compliments. The graph below shows the compliments received by region for the financial year so far.

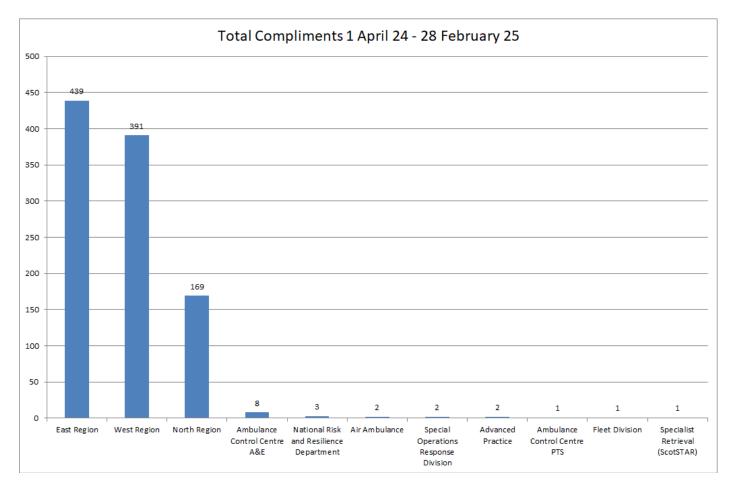


Figure 1.

Complaints Data

As shown in Figure 2, between 1 April 2024 and 28 February 2025, a total of 1041 complaints have been received. This shows an increase of 163 (18.56%) complaints in comparison to 2023/24 and a reduction of 37 (4%) 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.

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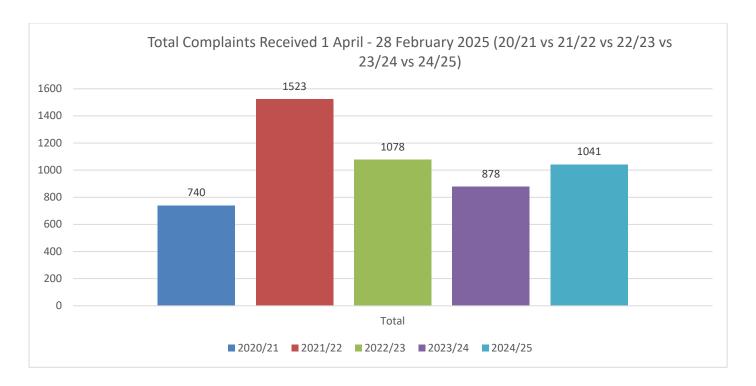


Figure 2.

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

Figure 3 below illustrates the weekly volumes of complaints being received. The volume of complaints has started to rise over the winter months, consistent with the patterns we have seen in previous years.

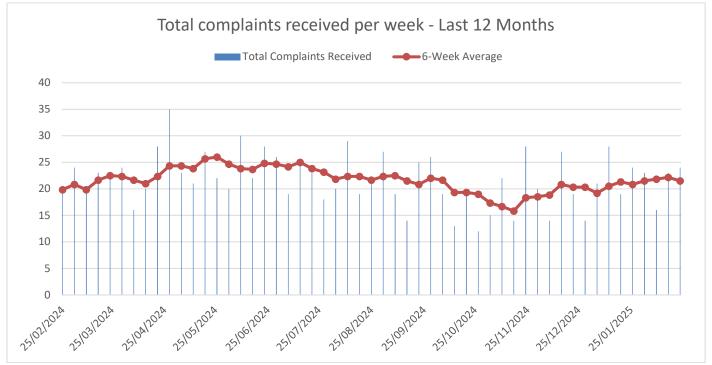


Figure 3.

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Figure 4. 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.

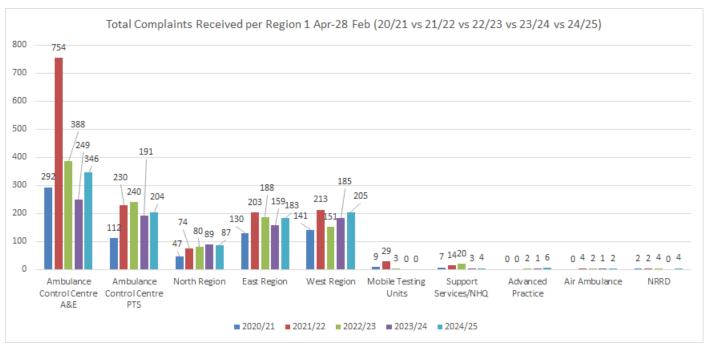


Figure 4.

Complaint Themes

Of the 1041 received, the 3 most common themes for complaints are:

- 1. Attitude and Behaviour 282 complaints (27% of the total, compared to 31% in the last paper)
- 2. Delayed Response 165 complaints (16% of the total, compared to 18% in the last paper)
- 3. Triage/Referral to NHS24 142 complaints (14% of the total, compared to 15% in the last paper)

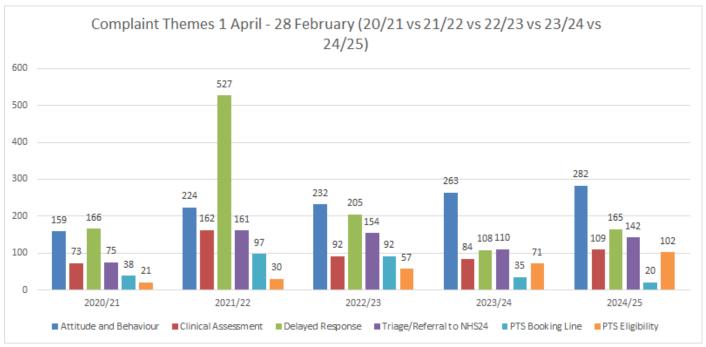


Figure 5.

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Actions from Complaints

The top 5 themes from complaints have remained relatively consistent over the last 3 years. As previously illustrated, there has been a substantial decrease in complaints around Delayed Response, which in 2020/21 was the theme in over 39% of complaints. However, this theme now makes up just under 16% of 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 percentage of Attitude and Behaviour complaints has decreased slightly from the last paper and it still remains lower than the previous year. The decrease in the percentage of complaints related to Attitude and Behaviour is considered a positive, particularly with the challenges that the Service experienced over the winter period in terms of demand. However, the overall trend for Attitude and Behaviour complaints has seen a steady increase over the past five years. If this trend continues it will be pivotal to analyse these complaints in more depth. This will aid the understanding of the root causes behind these complaints and allow appropriate support and improvement plans to be developed.

There has been a substantial increase (385% since 2020/21) in complaints relating to Patient Transport Service (PTS) Eligibility and a steady increase in complaints relating to Triage/Referral to NHS24. The rise in these complaints may be explained in part by the tightening of the Patient Needs Assessment and the introduction and expansion of the Integrated Clinical Hub.

Stage 1 Complaints (1 April 2024 – 28 February 2025)

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.

Stage 1					
		Closed wit	hin target		Still Open and
	No	Yes	Total	Compliance	now overdue
Advanced Practice	1	3	4	75.0%	0
Air Ambulance	1	0	1	0.0%	0
Ambulance Control Centre A&E	4	153	157	97.5%	2
Ambulance Control Centre PTS	1	116	117	99.1%	1
East Region	0	110	110	100.0%	0
Support Services/NHQ	0	1	1	100.0%	0
North Region	1	50	51	98.0%	1
NRRD	2	1	3	33.3%	2
West Region	21	107	128	83.6%	7
Total	31	541	572		13
Compliance			94.6%		

Figure 6.

Figure 6 demonstrates that Stage 1 complaints compliance is at 94.6% which is well above the government target of 70%.

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Stage 2 Complaints (1 April 2024 – 1 December 2024)

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.

Stage 2					
		Closed wit	hin target		Still Open and
	No	Yes	Total	Compliance	now overdue
Advanced Practice	0	2	2	100.0%	0
Air Ambulance	0	1	1	100.0%	0
Ambulance Control Centre A&E	3	175	178	98.3%	0
Ambulance Control Centre PTS	3	81	84	96.4%	0
East Region	1	68	69	98.6%	0
North Region	11	25	36	69.4%	3
Support Services/NHQ	2	1	3	33.3%	0
West Region	16	55	71	77.5%	1
Total	36	408	444		4
Compliance			91.9%		

Figure 7.

Figure 7 shows the Service is sitting at a compliance rate of 91.9% which again is well above the government target of 70%.

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 28 February 2025, 323 stories were posted on Care Opinion relating to the Service. These have been viewed 67,556 times.

Of the 323 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.

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Involving People

Volunteer Engagement & Support

As part of our commitment to the Involving People Strategy and the Service Anchor Plan, we have undertaken a comprehensive review of volunteer engagement. Through extensive benchmarking with other NHS Scotland health boards and UK ambulance trusts, alongside direct feedback from our own volunteers, we have successfully developed a new induction programme for all PFPI volunteers. This programme ensures a structured, informed and supportive introduction to their roles.

We are also reviewing the support framework for patient representatives participating in Service committees with the aim of enhancing the process to ensure they are better equipped to contribute meaningfully to decision-making processes. These improvements reinforce our dedication to inclusion, representation and the ongoing development of volunteer engagement within the Service.

Scheduled Care Peer Support & Training Enhancement

In alignment with the 2030 Strategy goal to train and develop existing staff while adopting innovative ways of working, we continue to advance the redesign of mental health training for Scheduled Care Coordinators. This initiative is rooted in Realistic Medicine principles and aims to enhance the overall patient experience.

Through our collaboration with the Scottish Recovery Network, we are establishing formal peer support networks and developing tailored health and well-being training packages for staff. To ensure this initiative is both effective and sustainable, we are conducting ongoing open discussion workshops across all ambulance control centres. These sessions provide valuable insights into best practices, allowing us to refine our approach in real-time based on staff feedback and emerging needs.

Work Experience & Career Pathways

As part of our Service Anchor Plan commitment to widening access to healthcare careers, we continue to strengthen partnerships with NHS 24 and NHS Lothian to deliver innovative work experience opportunities for young people.

Our collaboration with NHS 24 provides an immersive experience in emergency call handling and ambulance control, helping participants develop a deeper understanding of pre-hospital care coordination.

With NHS Lothian, we deliver an interactive one-day workshop that guides young people through the entire emergency healthcare journey—from a 999 call to hospital discharge. This includes the use of simulated emergency scenarios, bringing the roles and responsibilities of ambulance service staff to life.

In addition, we are working in partnership with Queen Margaret University paramedic science students to co-design these initiatives, ensuring they are engaging, informative, and aligned with the needs of future healthcare professionals.

Furthering our commitment to professional development, we are in the early stages of designing a mentorship programme that will provide young people with opportunities to develop leadership and soft skills. Senior staff members will play a key role in mentoring students across all Scottish

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universities offering paramedic science, exploring innovative ways for students to contribute to the Service—such as conducting research to support decision-making.

Children's Hospices Across Scotland (CHAS) Partnership

In line with our Anchor Strategic Plan objective to better understand and support communities, we continue to deepen our collaboration with the Palliative and End of Life Care Team and CHAS.

Through discussion groups with young people, families, and staff, we are identifying key areas where the Scottish Ambulance Service can provide additional support to CHAS services. This work is instrumental in shaping our approach to palliative care engagement, ensuring that families receive the best possible support from both our Service and partner organisations.

We will provide further updates as we continue to build on these initiatives and strengthen our partnerships in the months ahead.

Scottish Public Services Ombudsman (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	III-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
							Letter of Apology to complainant	1. Recommendation 1 completed and signed off (23/01/2024)	
DATIX 6473	202110696	18/05/2022	Failed to take patient to hospital	Part Upheld	Review completed Upheld	15/12/2023	2. Review policy on documentation standards	2. Recommendation remains open (autumn 25 timeframe due to ePR move)	Open
							Share report with attending crew in a supportive manner for their own learning	3. Recommendation completed and signed off (29/02/2024)	
DATIX 17220	202409103	14/01/2025	Care provided at RTA	Not Upheld	Decided not to investigate	04/02/2025	N/A	N/A	Closed
DATIV 47476	202400704	46/04/2025	DTC Elt. II. III	Ni a Lilada a Lal	Decided not to	02/02/2025	N1/A	21/2	Classed
DATIX 17176	202408704	16/01/2025	PTS Eligibility Ambulance Delay	Not Upheld	investigate	03/02/2025	N/A	N/A	Closed
DATIX 14391	202401360	12/09/2024	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
10100	232 130033	3., 32, 2323	3,300	Spricia	Currently assessing	.,,,,,	.471	.973	c.cscu
DATIX 16307	202409508	25/02/2025	Delayed response	Upheld	whether to investigate	N/A	N/A	N/A	Open
			Delayed response and clinical	·					
DATIX 14277	202309999	19/03/2025	assessment	Upheld	Review ongoing Decided not to	Ongoing	TBC	NA	Open
DATIX 16598	202407561	04/03/2025	PTS Eligibility	Not Upheld	investigate	N/A	N/A	N/A	Closed

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