Dear Ms Howie

Feedback from the Sharing Intelligence for Health & Care Group – Scottish Ambulance Service

The Sharing Intelligence for Health & Care Group (referred to as ‘the Group’) considered the Scottish Ambulance Service at our meeting on 18 January 2021, as part of our routine annual programme of work. We are writing now to summarise the main points we discussed collectively as seven national organisations.¹

First we wish to acknowledge, and show our appreciation for, the great efforts of staff from the Scottish Ambulance Service in response to the COVID-19 pandemic. In our annual report for 2019-20, we highlighted the committed workforce in Scotland that has continued to deliver high-quality care. Colleagues’ expertise, professionalism, commitment and compassion is needed now more than ever. We also understand that the COVID-19 pandemic will continue to impact on front line services for a considerable time to come.

The seven national organisations on the Group have also made changes to our work programmes, with the ultimate aim of supporting front line services during the COVID-19 pandemic. This is having

¹ The Sharing Intelligence for Health & Care Group is a partnership involving: Audit Scotland; Care Inspectorate; Healthcare Improvement Scotland; Mental Welfare Commission for Scotland; NHS Education for Scotland; Public Health Scotland, and: Scottish Public Services Ombudsman.
some impact on the intelligence that is readily available to us. We are, however, continuing to share and consider intelligence regularly throughout the current pandemic – as we have a duty to make the best use possible of existing data, knowledge and intelligence. One of our main objectives is to ensure that, when any of the seven agencies on the Group have a potentially serious concern about a care system, then this is shared and responded to as necessary. Sharing concerns at the right time can help identify emerging problems which can then be acted upon.

The intelligence considered by the Group on 18 January should already be known to the Scottish Ambulance Service, including a range of information which is already in the public domain. This is somewhat different to the information we look at for territorial NHS boards, reflecting your organisation’s unique position in Scotland. It is important to note that we consider data/information that is held by the seven agencies represented on the Group. This sort of intelligence helps us identify things that are working well, as well as emerging problems. It does not, however, allow us to make a comprehensive assessment of the quality of care – nor is it the role of the Group to do this. Furthermore, we are prioritising the points that we feed back to individual NHS boards during 2020-21, with the aim of drawing attention to points that continue to be relevant at the time of the current pandemic.

**Scottish Ambulance Service**

When we considered the Scottish Ambulance Service on 18 January 2021, the partner agencies on the Group found it helpful to learn from each other about various aspects of your organisation. This will help inform the work we carry out as national organisations. As described below, we were pleased to note aspects of your local system that are working well. We also discussed some risks to the quality of care delivered by the Scottish Ambulance Service. We acknowledge that work is already being carried out locally to respond to these issues, sometimes with input from one or more of the partner agencies on the Group.

As a Group, we have previously acknowledged the environment of extreme pressure that the leaders of today’s health and social care systems are working within – together with the significant level of change across Scotland within the senior leadership of NHS boards. At our meeting on 18 January, we learned that the senior leadership of the Scottish Ambulance Service is relatively stable, and you have a well-established Board.

Audit Scotland also explained that the Scottish Ambulance Service continues to have a relatively stable governance structure – and that some initial progress was made with further strengthening your corporate governance arrangements following your self-assessment in relation to the Scottish Government’s Blueprint for Good Governance. We understand this work is progressing, including the further development of your risk management arrangements.

As a Group, we previously highlighted the significant financial pressures being experienced by care systems across the country. Audit Scotland informed the Group that the Scottish Ambulance Service achieved its financial targets for 2019-20, although you continue to be reliant on non-recurring savings. We understand that the Scottish Ambulance Service’s medium term financial plan, for 2020-23, is set in a context of rising pay and non-pay cost pressures. Significant efficiency savings are required over the coming years in order to achieve financial balance and, as for NHS boards across Scotland, we understand that you are assessing the financial impact of COVID-19.

When we considered the Scottish Ambulance Service in 2019, we noted plans to change how your paramedic workforce is trained. We also acknowledged that the Scottish Ambulance Service had a relatively high sickness absence rate – and at our meeting last month NHS Education for Scotland reported that this continues to be the case (8% versus a Scottish average of 5%).
Our meeting on 18 January 2021 provided an opportunity for the partner agencies on the Group to share information with each other about the quality of other front line services provided by the Scottish Ambulance Service. For example, we were informed that the Scottish Ambulance Service has secured significant additional funding from the Scottish Government to deliver a demand and capacity plan. The aim of this is to further reduce response times in order to improve patient outcomes and experience, while also reducing accident and emergency attendance by treating more patients in local communities and contributing to the development of sustainable primary care services.

It is important that the Scottish Ambulance Service has a robust approach for measuring/monitoring the quality of the services you deliver. We understand that the Scottish Ambulance Service has implemented a new performance framework, which focuses on improving patient outcomes rather than simply a measure of response times.

When we considered the Scottish Ambulance Service in December 2019, we noted your intention to introduce team based quality reviews – and to further develop an honest and open culture that includes a focus on learning from adverse event reviews. It is also important to learn from the experience of people using your services. We noted that the Scottish Ambulance Service received 128 Care Opinion stories in the past year, with Care Opinion moderators rating 20% of stories as having some critical content (this was 33% for the previous year) – and you have responded to 97 of the last 100 stories. The Scottish Public Services Ombudsman is tracking cases related to COVID-19, and to date it has not received any such complaints about the Scottish Ambulance Service.

The Group agreed that, at this time, there are no actions beyond any already planned that any of the seven national agencies need to take.

We hope you find this summary of our consideration of our collectively shared intelligence helpful. As a Group, we will continue to share intelligence in order to inform the work we carry out as seven national agencies. If you have any suggestions for how our Group can better support your work to deliver high quality care for the patients of the Scottish Ambulance Service then please don’t hesitate to let us know.

Yours sincerely

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