



**Scottish
Ambulance
Service**
Taking Care to the Patient



Chair Tom Steele
Chief Executive Pauline Howie OBE

22 January 2021

Scottish Parliament Health and Sport Committee

Dear Convenor,

Thank you for inviting the Scottish Ambulance Service to attend the Health and Sport Committee on 2 February 2021. We look forward to appearing to update you on the latest developments within the Service and answering any questions Members may have.

We have submitted key reports to Committee (Annual Report and Accounts, Remobilisation Plan and our latest Board performance report) to give you background ahead of our appearance but we would like to take the opportunity to summarise some of the main elements of these.

As the new decade gathers pace, the Scottish Ambulance Service is faced with new challenges such as the COVID-19 pandemic, but also new opportunities.

Our core remit remains the same – to save more lives and to give patients across Scotland the very best services; and we expect to contribute more to improving public health, sustainability and economic growth.

We know that demand for services is only likely to increase. Scotland's population has grown by five per cent in the previous decade. There are now around 250,000 more people living in Scotland than there were in 2010. We also know that, as people live longer, we are dealing with an increasingly older population. And as we have seen from recent and current events, there are unpredicted events, which we must try to anticipate by having robust escalation procedures and resilience plans in place.

Our staff, volunteers and partners have responded fantastically to the Covid-19 pandemic, rapidly developing innovative solutions to ensure we can effectively help patients and keep communities safe.

Frontline staff have learned new skills in treating patients wearing protective PPE kit that was previously not necessary; Critical Care Advanced Practitioners are providing enhanced triage support on critically unwell 999 calls; meanwhile, Advanced Urgent Care Practitioners, are utilising the instant video capabilities of the GOODSAM App to consult patients online, helping to guide clinical decision making about the most effective care with patients.

Collaboration on the redesign of urgent care continues working with Health Boards and the Scottish Government. Falls pathways have now also been enhanced across all locations.



We have built an entirely new service – Mobile Testing Units – from scratch, recruited and trained new staff in a short period of time to provide high quality care to communities and rolled these MTUs out across the country. This took a huge amount of effort and commitment from our staff who have done a fantastic job and we are now doubling the number of units by March 2021. In addition, all our staff have found new ways of working which reduces their amount of physical contact, by maximising the use of online software such as Microsoft Teams and using remote telephone meeting technology to conduct business meetings.

We have also vastly expanded the health and wellbeing services available to our staff, building on existing services which were in place and working alongside staff to design and support new mechanisms which can best support them, listening to their ideas and suggestions and making improvements as a result of their direct feedback.

Weekly staff engagement sessions have been introduced, hosted by the Chief Executive on Microsoft Teams with an open invite to all staff, giving them the opportunity to engage across a range of matters, raise any suggestions or issues of concern and hear back directly from the Senior Leadership Team and other leads in response.

In recent weeks we have also been looking at options to enhance our existing workforce to help bolster our front line response to COVID-19 and build resilience, including redeploying seconded clinical staff, bringing back retired staff, recruiting additional trained drivers and working with partner agencies such as the British Red Cross and other emergency services.

COVID-19 vaccination roll out is progressing well with patient facing staff already first dose vaccinated, with second dose vaccination being administered within 12 weeks.

This really has been one of the most challenging times for the Service. However, these new ways of working are helping us to find new ways of providing good patient care.

Meanwhile, new resources are being utilised out of necessity during the pandemic that could forever change the way we operate. As we now move to the next stage of the pandemic, we will continuously assess the effectiveness of all the changes implemented, building on our learning to ensure we give patients the best care possible.

We continue to invest in new staff, new vehicles and new equipment across the Service. It is fair to say that the COVID-19 pandemic has had an impact this year on the delivery of training and education, but recent new investment has been directed into training and education and remobilisation plans are now well underway to recover from the situation and cope with delivery of the ambitious growth plan.

More widely, we have carried out a huge amount of work around reviewing demand and capacity, working alongside specialists to forecast our current and future predicted demand across every area of Scotland and modelling the current and future resources which will be required in the years ahead. Discussions continue with the Scottish Government in relation to this work and we were very grateful for the recent £10.5 million additional funding announced to allow us to invest in 148 new staff and 24 extra vehicles, including 8 ambulances in our busiest areas of Glasgow and Lothian. £500,000 of this investment is also being invested to ensure priority rural stations at Aviemore, Golspie and Oban have crews available on station 24/7.

We are immensely proud of the efforts of our staff and the fact that, despite the challenges we all face, we are treating more people than ever before in their communities and saving more lives than ever before.

Survival rates for cardiac arrest patients have nearly doubled since Scotland's Out of Hospital Cardiac Arrest strategy was launched in 2015, and our improved approaches to identify and respond to immediately life threatening cases, including but not restricted to patients in cardiac arrest, have seen 30 day survival for this cohort of critically unwell patients remain stable this year despite the challenges of providing pre-hospital critical care under COVID-19 pressures.

The current COVID-19 pandemic brings with it much uncertainty, however we have a strong level of experience, preparedness and resilience in place and continue to work closely in tandem with our partners, including Health Boards and IJBs in response and recovery. The introduction of Flow Navigation Centres and Mental health assessment units continues to offer opportunities for more patient centered local care.

We are currently rolling out across Scotland Take Home Naloxone kits to people who are likely to witness a drug overdose in the near future and building partnerships with Alcohol and Drugs Partnerships for referrals. Additionally, we are liaising with Public Health Scotland to understand how our data on responses to overdose calls could help inform an early warning system to highlight changes in overdoses in Scotland, to further influence support service interventions.

We look forward to meeting you all at the forthcoming evidence session to tell you more about our work and answer any questions you may have.

Yours sincerely

Tom Steele
Chair

Pauline Howie OBE
Chief Executive