



Patient Engagement and Experience

Annual Report
2023 - 2024





Foreword

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I am delighted to share the Patient Engagement and Experience Annual Report for 2023/24. Patients are central to everything we do, and we prioritise listening to and engaging with them, the public, and all key stakeholders to enhance our services and improve their experience. Patient experience is what the process of receiving care feels like for the patient, their family and carers. It is a key element of quality, alongside providing clinical excellence and safer care.

This report highlights the creative and innovative approaches we employ to achieve this and provides examples of the improvements and changes we've implemented based on our learnings.

Additionally, the report celebrates the positive strides we've made in recruiting and engaging with our Patient and Public Panel (PPP). The panel has not only grown in number but also become more representative of younger individuals and diverse communities. In the year to come we will continue to develop and invest in our membership, finding new and interesting ways for them to help and work with us as well as enabling them to grow as volunteers and individuals.

In June 2023, we hosted our first combined volunteer celebration event to thank and recognise the outstanding efforts of our volunteers we have across the North West. This includes our PPP members, volunteer car drivers and community first responders. The support, time and enthusiasm of these hundreds of people is very much appreciated, and I would personally like to thank every one of them for their fantastic contribution.

The past year has presented numerous challenges for North West Ambulance Service (NWAS) and other ambulance services across England, particularly with the increased demand and hospital handover delays in

our region. Despite these obstacles, we have achieved significant performance improvements compared to the previous year, giving us confidence that our initiatives are beginning to have a positive impact.

Our response times for Category 1 and 2 calls, which are the most critical and life-threatening, have consistently improved. Prioritising these calls is essential, even though it sometimes leads to longer waits for patients with less urgent needs. We understand that this can result in a less favourable experience for those patients and their families, which is something we are committed to addressing.

We continue to work closely with colleagues in Integrated Care Board (ICBs) and acute settings to reduce the time it takes for an ambulance patient to be moved into the care of the receiving hospital – known as hospital handover. Ensuring better experiences for all patients remains a top priority for the coming year.

In addition to an annual programme of engagement with specialist patient and community groups I am also pleased that we were successfully able to deliver another round of 5 community listening events hosted by NWAS.

Whilst all are welcome, we are particularly keen to meet with under-represented communities to listen to their experiences, hear about any barriers to access, answer their questions and share information about the 999, NHS 111 and patient transport service (PTS) together with the best routes to health care. We have tried hard to adapt and modify the format of our events based on the feedback of attendees and you can read about what we learned from those events in the following pages.

I hope you enjoy reading the report and always welcome your views and feedback which can be sent to talk.tous@nwas.nhs.uk.

Introduction

Each year the trust's Patient Engagement Team deliver an extensive patient engagement programme in line with our Patient Public and Community Engagement Implementation Plan.

The plan sets out the ways we propose to engage with and obtain feedback from our patients across all service areas, including our Paramedic Emergency Service (PES), Patient Transport Service (PTS), the NHS 111 Service and our Urgent Care Desk.



A minimum 1% of PTS, PES See and Treat and 1,200 NHS 111 patients receive the opportunity to provide Friends and Family Test (FFT) feedback monthly. Whilst the nationally mandated NHS 111 patient experience survey is still postal, we now offer predominantly digital opportunities to provide feedback using SMS text and links to our online surveys. In 2023/24 we refreshed our QR code feedback posters and returnable postcards on both 999 and PTS ambulances for patients to be able to provide real time feedback.

The past year also saw a return to mainly face-to-face engagement with patients and community groups. Positively we were also able to listen to the issues and experiences of our patients from mixed ethnic communities at our 5 community listening events.

Another success was the continued growth and development of our Patient and Public Panel (PPP), now at 329 members. Their feedback and lived experience are invaluable to the trust to better understand patient experience, produce stories, analysis and themed findings which in turn inform service development

Patient and Public Panel

- Giving our patients 'an increased voice'

Our volunteer Patient and Public Panel (PPP), established in 2019, is made up of representatives from local communities, interest groups, the voluntary sector and partner organisations, and offers meaningful opportunities for members to influence decisions and identify improvements in our urgent and emergency care, patient transport, NHS 111 and back-office services in a way that suits their lifestyle and the time and commitment they are able to give.

Panel members bring expert lived experience and knowledge of our services and offer valuable insights into numerous projects, initiatives, policies, systems and campaigns.

The PPP has a flexible infrastructure to enable patients/ the public to become involved at one or more levels that best suit them. All levels are equally important and consist of:

'Consult' is virtual, making the most of digital channels to interact with members who can get involved whenever or wherever they choose

'Co-produce' panel members work together on short-term projects using co-production techniques and get involved in projects on a task and finish basis

'Influence' members take an ongoing, active role in high-level meetings to enhance decision making and discussions

Our PPP has continued to grow, and we have actively engaged the membership via both face-to-face and virtual platforms throughout the past 12 months. We now have 329 PPP members fully inducted, with most already involved in the work of the trust. We have reached our target for disability (20%) with 26% (87) of the 329 PPP members declaring they have a disability. We have hit our 2023/24 youth target of 30%, with 31% (101) youth members signed up to our PPP membership.

Ethnic minority representation at the end of March 2024 was at 24% consisting of 79 panel members against a target of 40%. Whilst we have actively engaged with more and new diverse communities during 23/24, we recognise more work needs to be done to continue to reach this audience and this will remain a focus area for us in 2024/25. Just as importantly is the need to retain and invest in our existing membership and we will be working with our members to develop meaningful ways to do this too.



Our PPP members support with a wide range of new projects and refreshing existing pieces of work to ensure the patient voice has been considered and used to help finalise projects before being published. A wide range of members from our PPP membership varying from young people to members with experience within multiple areas get involved in our sessions so we receive a wide range of feedback to help us get things right to benefit our patients.

From April 2023 to March 2024, PPP members have been invited to get involved in 88 opportunities, with 27 requests for panel involvement from staff across the trust. Areas the PPP have been involved in include regular attendance at high-level meetings such as area learning forums, attendance at trust Board and learning from deaths. PPP members have been involved in various projects at the trust, including the blood pressure data sharing project, end of life care research study, EPR referrals, trust privacy notice, our winter demand management campaign and review of the friends and family test survey cards. We hold our sessions across various times of the day and in the evenings to allow our PPP members to get involved. If they are not able to participate in the online session, they are able to watch sessions back on our dedicated PPP forum, so they are able to watch the session back at a time that suits them best and still share their thoughts.

Our PPP members supported with hypertension pilot / blood pressure data sharing project following positive results from a small pilot in 2022, where NWS shared blood pressure patient records with a group of GPs. Our Public Health team worked with the Integrated Care Systems across the region to scale up this work.

NWAS Public Health Manager Claudia Soiland-Reyes:

"Last year, we consulted the PPP on plans for our blood pressure data sharing project, which aims to support identification and management of hypertension by Primary Care partners. The group acknowledged that whilst prevention of hypertension is not necessarily seen as the role of the ambulance service, they acknowledged that uncontrolled or unmanaged hypertension can have an impact in demand. Group welcomed initiative and, based on own or relatives' experiences, supported sharing blood pressure data of adults over 18 years old.

"The PPP was interested in having an update of progress with the project, as well as offering support with the creation of lay dissemination materials in future. The feedback from the PPP helped us validate the relevance of this work and identify future opportunities. We used a summary of the feedback received in our project proposal document and the project equality impact assessment."

During 2023/24, our PPP members supported with various projects managed by different teams within the trust. For example, our Friends and Family Test (FFT) postcards were due a refresh and we wanted to make sure that the cards were accessible for our patients. We also wanted to produce posters to be placed in our 999 emergency vehicles and PTS vehicles to allow patients to share their experience with us via an online free post survey card or online survey. We worked with PPP members to review the design and icons have been added to the new FFT comment cards to make the cards more accessible. We have also increased the writing space to allow patients to tell us why they would or would not recommend our service to their family and friends. The updated FFT comment cards and posters containing a QA code which takes you to our online surveys are now in all our vehicles.

Our PPP members also supported with EPR referrals pilot as the EPR project team as they wanted to gather feedback surrounding the proposed change to understand what patients need to know and how they feel about this change. The pilot essentially changed the way we worked with band 6 paramedics and above being able to have the option to leave scene following a referral into an Acute Visiting Service (AVS) provider for low acuity patients. This will impact the public as previously they would have had clinicians waiting in their house whilst the GP calls back to accept the referral, but they will now be left on their own.

Comments were raised around how you can ensure that a call can get priority it deserves, how do we prevent the system from being abused and will number of calls being made to GP practice impact call back window.

The conversations held helped the team consider what messages to give to staff and gave them different perspectives. One panel member in the session mentioned would it be their own GP calling the patient. The team amended their communication and information to make sure staff were telling patients that is not the case. It won't be their own GP ringing.

The pilot has now gone live since the session was held. The team are now also using all the information in the evaluation to help them evaluate how successful the pilot was and how to prepare for a trust wide roll out.

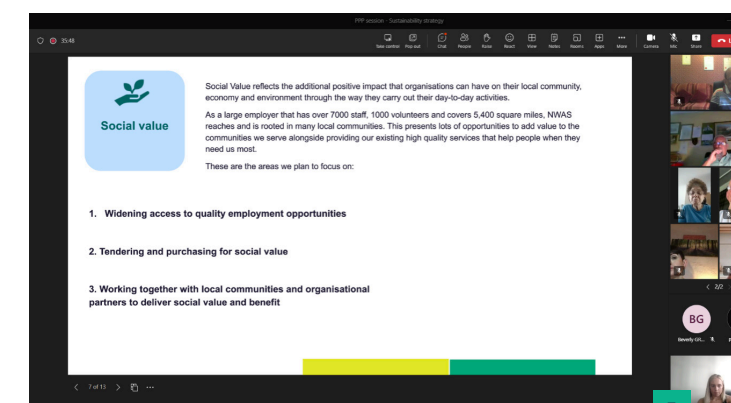
In March 2024, our PPP members were invited to review submissions from various departments at NHS Equality Delivery System (EDS) Grading Event. PPP members from our influence level scored NWAS on a scale of 0-3 (0 being undeveloped and 3 being excelling) according to several parameters that NHS Trusts must align with.

Equality, Diversity and Inclusion Advisor Wasim Mir:

"The trust equality, diversity and inclusion team are grateful for the PPP members who supported as grading panellists at the EDS grading event in December 2023. EDS is a requirement under the NHS contract and by having stakeholders/representatives of the communities we serve supporting the assessment of the evidence gathered and presented, this allows us a trust to identify areas where we are doing well and areas for improvement.

"This collaborative working goes to show how instrumental having PPP involvement is in the work we do to continue to build a culture, which leads to all being at their best, which leads to delivering toward the best patient outcomes, first time, every time."

Image below: screenshot from a virtual PPP session on blood pressure data sharing project with presentation screen and group of PPP members observing.



Our PPP members receive regular information via the weekly roundup newsletter containing latest panel and trust news. They can also engage with each other on a dedicated PPP members area on the trust's website. We update our PPP members what happened because of their feedback on a project via an update through an online session or through our weekly roundup, so they are aware of the impact their feedback had.

The trust is very proud of its volunteers and to mark their achievements and thank them for their efforts for their service with us, we held our first joint volunteers' event for our PPP members, CFRs, VCDs and Welfare Van volunteers in June 2023.

The event was split into two parts of the day with a dedicated morning to hear from our PPP members as to what they would like to see in our yearly work plan and the remainder of the day consisted of all volunteers coming together to recognise the work of our volunteers. We held various activities including a personal resilience session delivered by an established coach and mentor. Our volunteers also received their own goody bag with a personalised certificate, pin badge and branded giveaways.

Following the event, we surveyed our attendees to find out how they found the event and what they would like to see at a future volunteer's event which will be used to potentially plan another volunteer's event and recognise our volunteers in 2024/25.

Our PPP members told us: "The event was nice and really enjoyed meeting other PPP members and staff." As well as saying, "It was great hearing other people's thoughts, and the conversations were diverse and got those talking within their groups on all matters concerning how one could enhance the work of NWAS."

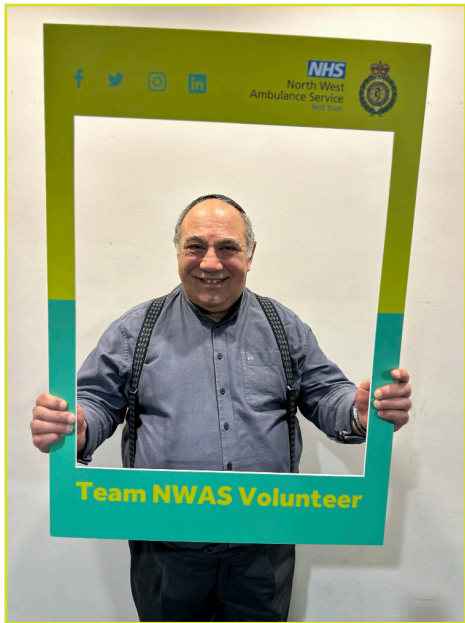


Image above: A PPP member holding up a selfie frame with "Team NWAS Volunteer" written on the board, celebrating our volunteer's event.



Image: A male PPP member and two NWAS colleagues stood behind a light up '#PENNA' sign at Patient Engagement National Network Awards ceremony.

To showcase our achievements and growth of our membership over past year, a PPP achievements summary book will be produced. Our PPP also became finalists at Patient Experience National Network Awards in 'Engaging and Championing the Public' award category based on the work our members have supported with.

During 2023/24, we saw a huge increase in our PPP membership including an increase in young people and ethnic minority communities resulting in us coming close to our target membership of 350 members.

Our priority for 2024/25 is to look at developing our existing PPP membership with the aim to deliver new development opportunities, refreshed site visits and potential opportunities to get involved in more areas of the trust's work.

Figure 1 below shows the breakdown of PPP member's involvement by group level:

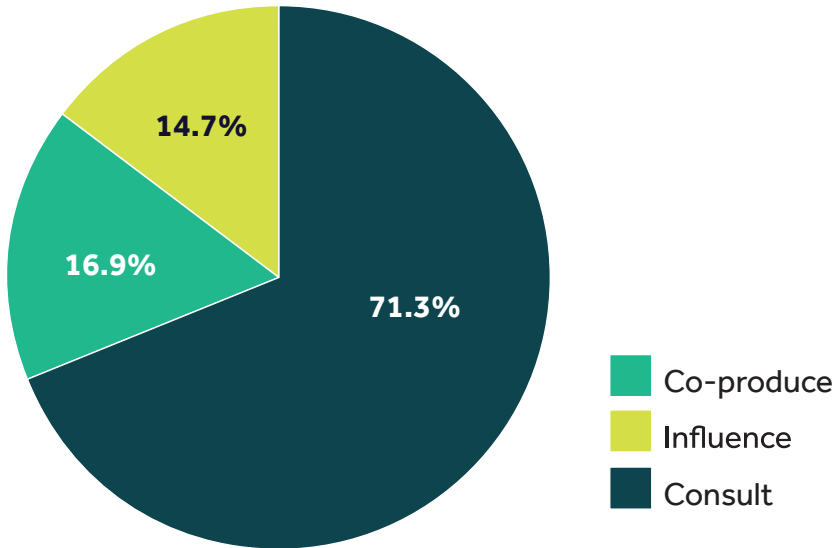


Figure 1

Figure 2 below shows a breakdown of PPP members by age:

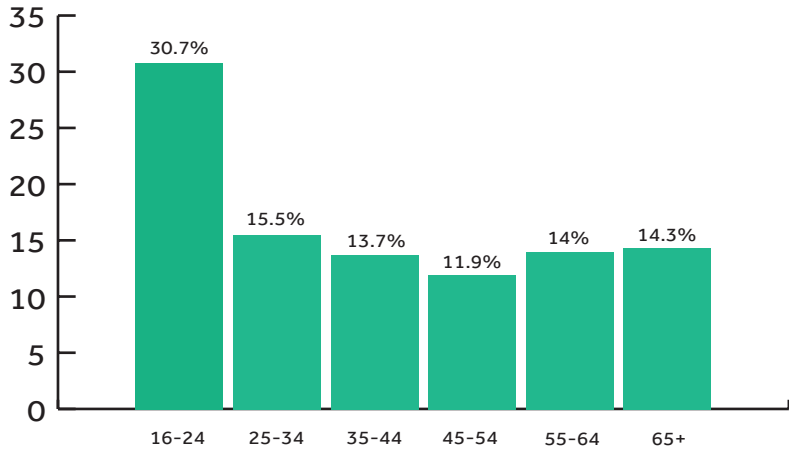


Figure 2

Figure 3 below shows a breakdown of PPP members by ethnicity:

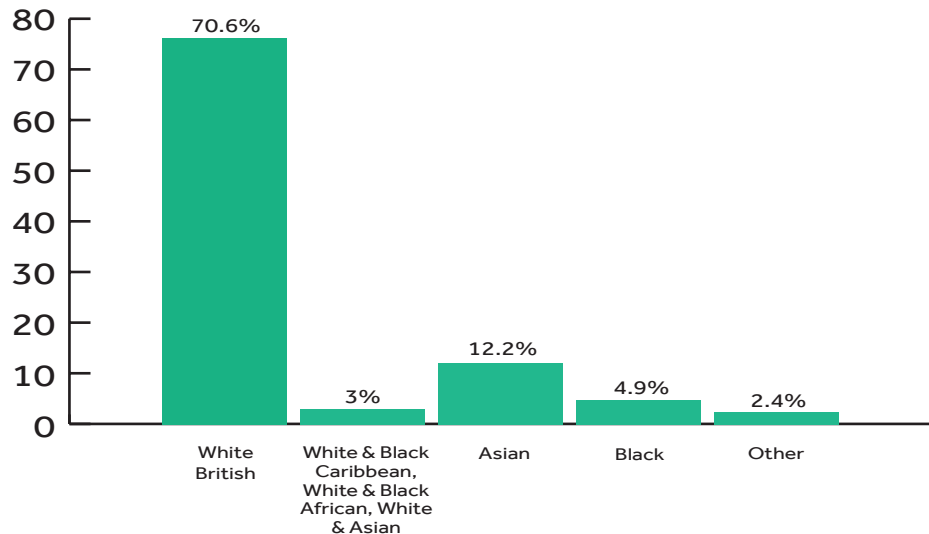


Figure 3

Patient experience surveys and the Friends and Family Test 2023-24

Service based patient experience surveys and the Friends and Family Test (FFT) are important feedback tools that supports the fundamental principle that people who use NHS services should have the opportunity to provide feedback on their experience. Listening to the views of patients and staff helps identify what is working well, what can be improved and how.

We have dedicated surveys for our 999, Urgent Care, PTS and NHS 111 services inviting patients or those who care for them to provide feedback on all aspects of their

experience with us. Each year these are reviewed by service teams and our PPP for suitability.

The FFT asks people if they would recommend their friends and family to use our services and offers the opportunity to qualify their response with supplementary information. The trust receives a lot of detailed feedback via the FFT which is vital in transforming our services and improving patient experience.

Figure 4 below provides a summary of survey and FFT feedback data including number of returns and key satisfaction levels by quarter.

| Patient Engagement Surveys (1 April 2023 - 31 March 2024) | | Patient Transport Service | Paramedic Emergency Service | Urgent Care Service | NHS 111 Service |
|---|-----|---------------------------|-----------------------------|---------------------|-----------------|
| Completed PE Surveys | Q1 | 300 | 276 | 99 | 512 |
| | Q2 | 300 | 325 | 114 | 482 |
| | Q3 | 314 | 267 | 86 | 394 |
| | Q4 | 354 | 290 | 180 | 456 |
| | YTD | 1,268 | 1,158 | 479 | 1,844 |
| Cared for appropriately with dignity, compassion and respect (strongly agree / agree) | Q1 | 95.2% | 96.9% | 84.9% | n/a |
| | Q2 | 93.4% | 94.6% | 85.5% | n/a |
| | Q3 | 95% | 89.1% | 90.4% | n/a |
| | Q4 | 94.4% | 92.6% | 90.6% | n/a |
| | YTD | 94.7% | 93.3% | 87.9% | n/a |
| Overall satisfaction received (very satisfied / fairly satisfied - yes) | Q1 | n/a | n/a | n/a | 87.4% |
| | Q2 | n/a | n/a | n/a | 88.2% |
| | Q3 | n/a | n/a | n/a | 88.8% |
| | Q4 | n/a | n/a | n/a | 87.6% |
| | YTD | n/a | n/a | n/a | 87.7% |
| Overall experience of service / recommend ambulance service to friends and family (very good / good - extremely likely / likely) | Q1 | 90.8% | 94.5% | 71.2% | 87.4% |
| | Q2 | 93.4% | 90.9% | 64.1% | 88.5% |
| | Q3 | 91.2% | 87.7% | 68.1% | 90.1% |
| | Q4 | 90.8% | 90.6% | 77.4% | 88.5% |
| | YTD | 91.6% | 91.2% | 71.6% | 88.5% |

Figure 5 below provides a summary of FFT feedback data and channels used to gather patient experience. As can be seen, a high number of patients provide qualifying narrative to support their response.

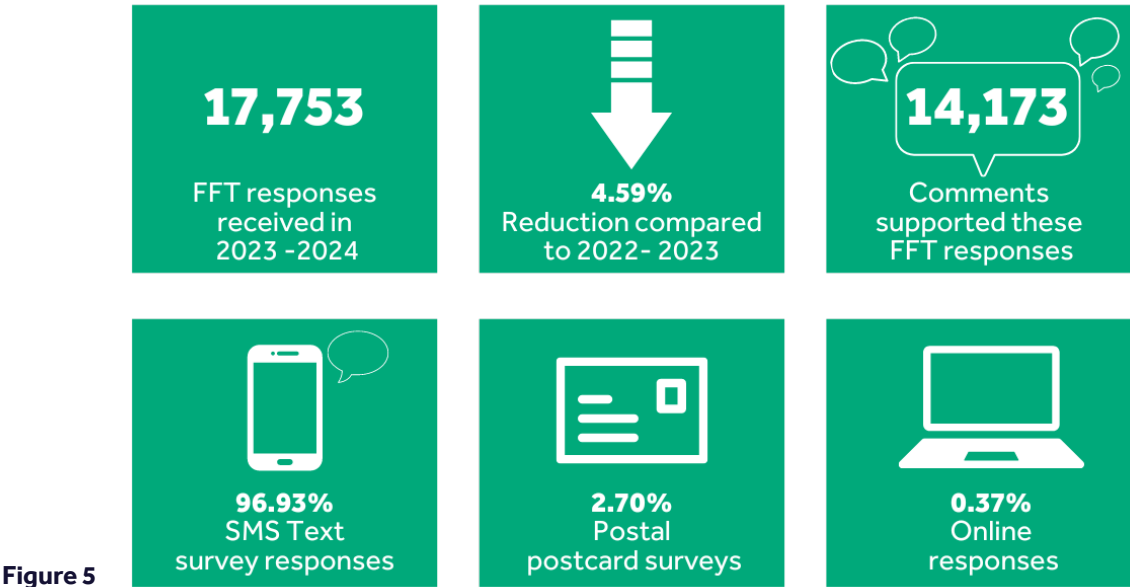


Figure 5

Figure 6 below provides the total breakdown of completed returns on patient engagement surveys used to gather patient experience.

Figure 6: Table of survey methods for 2023-2024 (Please note all data as of 31 March 2024).

| Patient Engagement Survey - survey channels (1 April 2023 - 31 March 2024) | Completed returns | % of total |
|--|-------------------|------------|
| Patient Transport Service PE Survey (via SMS delivery - online completion) | 1,268 | 5.64% |
| Patient Transport Service - Friends and Family Test (FFT) (SMS text completion) | 13,419 | 59.63% |
| Patient Transport Service - Friends and Family Test (FFT) (Postcard) | 128 | 0.57% |
| Paramedic Emergency Service PE Survey (via SMS delivery - online completion) | 1,158 | 5.15% |
| Paramedic Emergency Service - Friends and Family Test (FFT) See and Treat (SMS text completion) | 4,080 | 18.13% |
| Paramedic Emergency Service - Friends and Family Test (FFT) See and Treat (Postcard) | 22 | 0.10% |
| Paramedic Emergency Service - Friends and Family Test (FFT) Convey (Postcard) | 104 | 0.46% |
| Urgent Care Service PE Survey (via SMS delivery - online completion) | 479 | 2.13% |
| NHS 111 Service PE Survey (Postal) | 1,844 | 8.19% |
| TOTAL | 22,502 | |

We see a drop of 5.2% in total returns compared to the returns from 2022/2023 which was 23,724. In terms of return rates, cumulatively for 2023/2024, this was 8.9%, compared to the 8.1% reported for 2022/2023.

From the patient experience surveys feedback results, we continue to see a high regard for the professionalism of the ambulance services, especially in relation to the care and treatment provided by staff.

Cumulatively across all the 4,749 patient experience survey returns, 92.9% of patients agreed that they were cared for appropriately with dignity, compassion and respect:

"Excellent service whether provided by Taxi, ambulance or volunteer driver, provided in a friendly manner with care and consideration."

(PTS - Cumbria)

"Ambulance staff were fantastic and dealt with my wife so quickly and helped her through the pain. Call handler gave us accurate information and managed our expectations well. Arrival at hospital was quick and transfer to their care went very well."

(PES - Merseyside)

"The paramedics could not do enough for us, they cared for my dad whilst we waited for them to find a stretcher for him, going above and beyond what we could have expected, and greatly assisting the A&E staff to manage the care of others at the same time."

(PES - Cheshire)

"From the initial call to 111 to call back and from the two lovely paramedics that attended I cannot thank you all enough. My son and I were listened to, treated with respect and great advice was given!"

(UCS - Greater Manchester)

"Very helpful and dignity respected throughout. Would recommend service. Thank you!"

(NHS 111)

For the overall service received, 87.9% gave rating as 'very good/good':

"All ambulance staff are efficient, polite and friendly but professional at all times. They ask relevant questions in order to give the correct level of care/help needed."

(PTS - Lancashire)

"Because the overall experience was very good."

(PES - Lancashire)

"The call handler listened and understood that there was a definite need for an ambulance on this occasion without a doubt. Very professional and I thank the call handler for being there for me that day."

(UCS - Cumbria)

"Service received was excellent, questions asked were concise and clear and person on phone was very professional and reassuring. Ambulance/Paramedic arrived very quickly."

(UCS - Merseyside)

Meanwhile, 88.6% responded that they were 'extremely likely/likely' to recommend our ambulance service to friends and family:

"The drivers that have been taking me to my hospital appointment for over 15 years have all ways been pleasant and polite and I would recommend this service."

(PTS - Cumbria)

"I would actually describe the Emergency Ambulance crew as excellent! Both were awesome in every way possible. They treated my 85 year old Mother with dignity and respect. I could not praise them enough for all their care and treatment of Mum. A true credit to your 999 service."

(PES - Greater Manchester)

"The 111 service were wonderful from start to finish. Got me the help I needed quickly. Highly recommend this service. Thank you."

(NHS 111)

"Having heard of negative thoughts for 111, this was my first experience of using this service. Which was a success for me. I was given the chance to see a Dr that same day and medication. From my experience, I can only fully recommend the 111 service. Thank you."

(NHS 111)

Monthly feedback, specifically from the Friends and Family Test questionnaire, for PTS and PES (See and Treat), is mainly provided via a SMS Text message and comment postcards. This is reported monthly through the integrated performance report to Board, Quality Committee and nationally with NHSE through UNIFY 2 submissions, as well as being shared on patient experience service line dashboards.

Cumulatively, trust wide i.e. PTS and PES (See and Treat) combined, in 2023/2024, 90.6% of FFT respondents rated their overall experience of our services as 'very good/good'. For PTS this was 91.6% and 87.5% for PES respectively.

Analysis of the supporting qualitative feedback provided with the FFT scorings further confirms the professionalism, care and compassion displayed by our staff.

"The two paramedics were amazing and so caring to both the elderly lady who wasn't well and her husband who was very upset and emotional."

"I'm a carer and have had to call for an ambulance many times but this was the best experience, and I can't praise the two lovely, caring ladies enough for their professionalism and care which went above and beyond."

"The staff were very friendly and helpful. Nothing was too much trouble. Assistance given without issue. Staff in the back of the ambulance sat and listened to my conversation and answered any queries I had on the journey to and from the hospital and upon my original admission were very observant of my state of health and wellbeing."

"From phoning to make the booking very caring and considerate confirming each step of the way to ensure all needs are met."

"Drivers excellent and extremely helpful getting in and out of patient transport and I love the text updates to say they're on their way."

"The team that arrived at my mums were very professional, thoughtful, kind and considerate."

"They gave mum a thorough health check. Saw to the cut on her head and did everything that was needed to help mum. They even spoke to our social worker to arrange for some movement mats so we know if mum is getting up and might fall again."

"Overall, a brilliant response."

From the summary data captured in Figure 7 below, we see the breakdown of demographics for each feedback channels, both for patient experience surveys (PTS, PES, UCS and NHS 111) as well as the bespoke FFT feedback SMS channel (PTS and PES - see and treat).

| 2023-2024 Patient Engagement Surveys Summary of key demographic data (1 April 2023 - 31 March 2024) | | PTS (URL Link)* | PES (URL Link)* | UCS (URL Link)* | PTS FFT (SMS Text) | PES FFT (SMS Text) | 111 (Postal) |
|---|-------------------------------------|--------------------|--------------------|--------------------|-----------------------|-----------------------|-----------------|
| Patient age | Under 16 yrs | 1.0% | 2.2% | 2.9% | 1.2% | 1.3% | 4.1% |
| | Over 16+ yrs | 99.1% | 97.8% | 97.1% | 98.8% | 95.5% | 95.9% |
| | Over 25+ yrs | 98.7% | 92.8% | 90.6% | 98.3% | 91.2% | 92.5% |
| | Over 35+ yrs | 97.3% | 86.2% | 82.0% | 97.1% | 85.1% | 84.3% |
| | Over 45+ yrs | 94.6% | 77.7% | 68.8% | 94.1% | 74.2% | 74.7% |
| | Over 55+ yrs | 86.0% | 67.3% | 56.1% | 85.2% | 58.3% | 65.4% |
| | Over 65+ yrs | 65.2% | 53.2% | 39.6% | 64.3% | 35.5% | 50.3% |
| | Over 75+ yrs | 35.3% | 31.8% | 24.1% | 37.4% | 18.4% | 31.1% |
| | Over 85+ yrs | 9.2% | 11.7% | 7.2% | 10.2% | 5.4% | No data |
| Patient gender | Female | 54.5% | 52.9% | 51.1% | 54.1% | 58.7% | 60.1% |
| | Male | 45.1% | 46.3% | 47.9% | 45.9% | 37.3% | 37.9% |
| | Prefer not to say | 0.4% | 0.8% | 1.1% | 0.0% | 4.0% | 2.0% |
| Patient impairment | Limiting illness | n/a | n/a | n/a | n/a | n/a | 47.5% |
| | None | 17.8% | 41.0% | 46.0% | 7.4% | 39.8% | 46.9% |
| | More than one | n/a | n/a | n/a | 24.0% | 15.0% | n/a |
| | Mobility | 67.0% | 35.1% | 25.2% | 53.1% | 18.6% | n/a |
| | Hearing | 14.9% | 17.1% | 7.8% | 0.9% | 1.3% | n/a |
| | Visual | 12.1% | 5.3% | 3.3% | 3.8% | 1.0% | n/a |
| | Mental Health | 11.7% | 15.1% | 24.5% | 2.2% | 10.1% | n/a |
| | Dementia | n/a | n/a | n/a | 0.8% | 2.0% | n/a |
| | Learning | 2.0% | 3.5% | 5.0% | 0.75 | 1.95 | n/a |
| Patient ethnicity | Black & Minority ethnic communities | 3.6% | 5.0% | 4.8% | 5.5% | 8.6% | 6.5% |
| | Prefer not to say | 1.8% | 1.3% | 2.1% | 2.7% | 3.8% | 0.0% |
| Demographic data request | No response provided | 0.0% | 0.0% | 0.0% | 0.0% | 0.0% | 2.7% |

Figure 7: Demographics breakdown of 2023-2024 respondents

Some high-level findings are:

- From the PTS respondents, as expected, 94.6% are over the age of 45 years of age.
- 67.0% of PTS respondents indicated mobility as their main disability, with 24.0% indicating more than one on their booking criteria.
- We see the highest percentage of female respondents continue to be with NHS 111 respondents at 60.1%.
- On average, 5.7% of respondents were from ethnic minority communities which is representative of the ethnic diversity in the north west.
- Overall, an average 1.9% of respondents preferred not to indicate their ethnicity.

Patient, public and community engagement

Whilst patient surveys provide us with a real insight into the care and treatment that patients have received, another method we use to gain qualitative feedback is by engagement with community and patient groups within our region.

Our focus has been to reaffirm the basics of what we offer across each of our three main service lines as well as to explore any misconceptions and / or barriers to access. We have also used these valuable face to face opportunities to educate our communities about self-care, winter health messaging and offer service-based activities to elicit their understanding and experience of care.



Image above: Two NWAS colleagues in uniform, stood outside. Male colleague holding a CPR dummy, and female colleague holding a defibrillator machine.

More than 14 virtual engagement events and 19 face to face engagement sessions were attended by the trust as either principal speakers, advisory or facilitators. Some examples include Lancashire Teaching Hospitals (LTHTR) Carers Group Forum, Healthwatch Wirral BRIDGE Forum, Salford Deaf Community Group and the African Caribbean Care Group. During virtual engagement sessions, notable recurring themes have been around PTS and waiting times, along with lack of awareness around 111 online.

In addition to this we have also been able to attend 28 high footfall face to face events in 2023/24. Examples include PRIDE, health melas, county shows and national disability awareness days. Each event has revealed recurring themes related to accessibility within communities, lack of knowledge of 111 online and access into the service for Deaf communities. To raise awareness, we have distributing important messages at various face-to-face engagement session, informing stakeholders and community contacts through our monthly 'Info Burst' and making sure that social media messaging is planned to increase viability around access. Face to face engagement with students and others at University Freshers Fayres has particularly helped with the recruitment of more young people to our Patient and Public Panel as well as help inform the development of our online resource for young people, their parents and teachers: Ambulance Academy.



Image above: Eight females and three males sat around a table, with an NWAS colleague.



Image above: A large indoor event with a mix of members of the public and NWAS colleagues sat at tables. An NWAS colleague in uniform is stood up presenting to a table.

Over the last year, we have also delivered 5 county-based face to face community listening events of our own.

We listen to, invite feedback, reassure and answer questions or concerns raised by our Northwest communities on our Paramedic Emergency Services (PES), Patient Transport Services (PTS) and NHS 111 services. A key section when planning for the 2023-24 events, was to reflect on the 2022-23 events and use what went well, but also implement any suggestions or improvements from the feedback obtained. During these events, attendees hear from service themed 'lightning speakers' before taking part in short interactive table exercises that help us identify what we are doing well as well as what needs to be improved.

Our events have evolved based on feedback and now include sections on our volunteers, career information, more opportunities for questions and an invitation to provide one to one feedback.

Our table-based activities have supported winter demand management for example the NHS 111 activity looks at the top reasons people call the service. One of the highest is about repeat prescriptions so the activity then moves on to how we can help people ensure they don't run out of key medication, particularly during public holidays. Helpful giveaways and leaflets also support this activity.

The PES activity initially focused on 999, the call, and care. Facilitators announced the name of each heading and

participants were asked to write down the first word that sprang to mind. Facilitators then discussed the words chosen. Directly after the Merseyside event, adaptations to the activity were made to focus on the reasons and expectations of why people call 999 to gather more insightful feedback. For the new activity, we asked to hear the 3 primary reasons they would call for an ambulance as well as their expectations of the service they would receive if they were to make this call. The reasons and expectations shared were then discussed. Falls were a key message we wanted to vocalise so if falls was not mentioned as a reason during this activity, facilitators were asked to raise as a discussion point.

The NHS 111 activity focused on the top 5 symptoms that people contact NHS 111. Each table had 5 buzz cards with the top 5 symptoms and requested participants within their groups to arrange them according to the greatest number of calls. Facilitators would reveal the correct order and then discuss, scribing notable feedback and discussions for us to evaluate later.

During the PTS activity, we asked tables to consider every aspect of the patient transport journey and tell us what they thought would make an excellent patient experience. Key ideas were written on post it notes and stuck to the roadmap around the relevant heading. All post it notes are collected at the end of the session to provide the team with valuable feedback.

During our Cheshire event, we replaced the PTS activity with an EOC activity, as NWAS don't have the PTS contract within the Cheshire area. We gave each attendee an activity sheet and asked tables to consider different aspects of calls to the EOC, specifically what they believed would make an excellent experience. Each question had two statements, one which was true and one which was false.

Each attendee had to tick which one they believed was 'true'. There were follow up questions to gain further feedback to assist in making appropriate changes moving forward.

Event venues are selected based on their usage by local communities and we have seen positive levels of attendance from groups that can be hard to engage with. A summary of feedback and what is to be changed as a result is produced and shared with attendees as well as community and specialist patient groups across our Northwest footprint.

Image below: A female PPP member, and three members of the public sat at a table with an NWAS colleague.



Feedback themes

Feedback over the year has consistently demonstrated a general high regard for the ambulance service and in particular the high percentage of patients feeling they were treated with dignity compassion and respect (92.9% of survey respondents). Some of the themes and feedback highlighted during the year have included:

- The impact that mental health related calls have on the service, and how we deal with these calls and patients.
- Profiling job roles and volunteering within the ambulance service at our community events.
- Lack of awareness of the NHS 111 online service across the board, but especially within ethnic minority groups
- Uncertainty about the criteria to access the patient transport service.
- Accessing services for both ethnic minority and deaf communities.
- Concerns and the need for reassurance that the service is still able to provide care on industrial action days by other parts of the NHS.
- PPP members hearing about the impact of their involvement and having the opportunity to ask further questions of the teams they have worked with.
- Extra support that crews can offer for those with a learning disability, with a focus on autism.
- The usefulness of knowing the estimated time of arrival for an emergency ambulance when calling 999.
- The importance of reaching out to engage with different communities and increasing awareness of cultural differences and specialist health conditions.
- Negative PTS patient feedback in relation to the service provided by some of our third-party taxi companies.
- Defibrillator maintenance concerns in relation to availability after usage when replacement pads and new batteries may be required.
- Concerns about how an organisation or member of the public can inform NWAS about access details to a property or street, particularly a new build or difficult to access property.

Recommendations for improvements

Feedback themes gathered from all the approaches the trust uses to listen to, engage and seek patient experiences are used to inform recommendations for improvements. The team produces learning dashboards for PTS, PES and 111 service improvement ambassadors to share feedback and learning as well as ensure support for the co-design of service improvements within the trust.

Some of our recommendations for improvements include:

Sharing more information on how we manage mental health calls via our community info burst newsletters. Involvement of our PPP in the development of the trust's mental health plan and creation of a series of short filmed lived experiences from patients with mental health conditions. The films were shared on our social media channels and used by NHS England as part of national mental health support month (January 2024).

Feedback from our deaf communities have highlighted barriers to accessing our services are still evident even after the rollout of the BSL 999 EVRs in June 2022. As a result, we have piloted an 'Insight' language communication app for operational staff to download on their iPad's which has now been approved by our board and rolled out within the trust in October 2023. This has been communicated to all stakeholders and is also a focus for our face-to-face engagement for all our deaf communities.

We provided reassurance to our patient, public and community groups during industrial actions days regarding resources, safety of our services, availability and our overall response via regular stakeholder updates, patient engagement events and information bursts. We also kept them informed on an area-based perspective of the availability of local services to support their self-care, with mental health as well as physical health and well-being respectively.

To improve accessibility to services we have improved our internal processes to support the production of alternative formats and language requests. An accessibility guide and flow chart has been produced to help the team better support requests for alternative formats. This is regularly communicated to our communities on our publications and monthly info-bursts.

The PPP weekly round-up and monthly info burst newsletters continue to provide topical health and service information and are provided in an accessible format.

PPP members are provided with feedback on their involvement with the trust via the weekly newsletter. Involvement sessions are recorded and shared on the PPP website area for other members to watch and comment on. In addition, a new feedback/question session is now organised with service teams after the involvement has taken place.

Our updated digital version pictorial communication handbook to aid communication between staff and patients has been designed and shared with the PPP for feedback. It is now in the final stages of development before being made available for staff to upload on to new iPads.

From our 5 events, it is clear there is a lack of awareness of the NHS 111 service overall and the eligibility for use of the patient transport service. This will be a focus for engagement events in 24/25 and information will be included in monthly Info Bursts sent to our North West communities.

Career information and opportunities to volunteer are included as part of our community events and this will continue throughout the 2024/25 programme. A trust wide recruitment campaign launched in early 2024, which will extend to our volunteers later in the year. In addition, we regularly feature the work of our volunteers and how to get involved with the trust. Volunteering options are now included on all our patient surveys.

Patients have highlighted a lack of knowledge regarding the criteria to access the patient transport service. This is a regular feature in our community events and other engagement sessions. The service has also been heavily promoted as part of our winter demand management campaign.

Easy read formats of our service information are provided to community event attendees with learning difficulties and additional facilitators are on hand to assist.

The trust's stakeholder publication, 'Your Call' features many different health conditions as well as staff and volunteers from different cultures to increase awareness and understanding. A regular programme of filmed staff and patient stories is produced and shared with the Board and used for learning within the trust.

We have started to inform patients of the estimated time of arrival for an emergency ambulance.

Negative taxi feedback was investigated further, and issues raised with individual taxi firms.

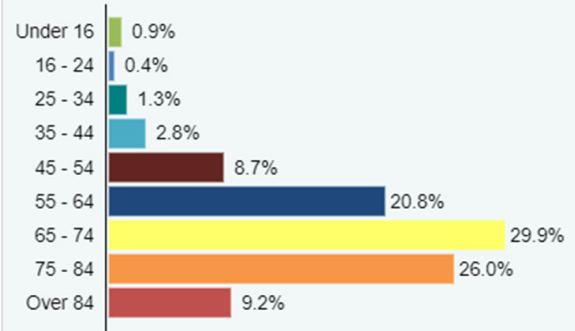
We shared concerns about the availability of defibrillators after usage ie quick replacement of pads as well as batteries with the national defibrillator network, the Circuit, who are going to include information about this in their publicity materials.

We provided information about how, a member of the public or organisation can inform NWS about access details to a property or street. We informed them they can email the Gazetteer Team directly on address.base@nwas.nhs.uk. The team will then enter a warning on the property which will be passed to responding ambulance crews in the event of receiving an emergency call.

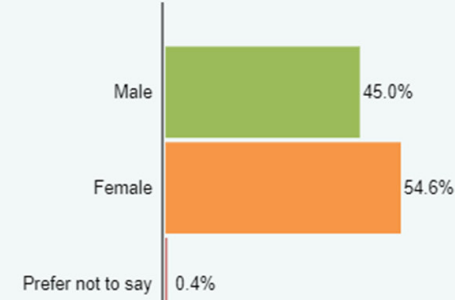
Appendix 1

Patient experience survey demographics PTS 2023/2024

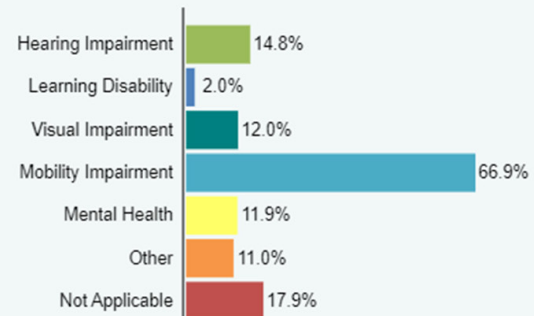
Patient age range



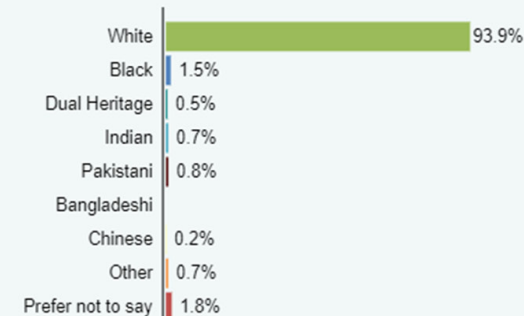
Patient gender



Patient impairment

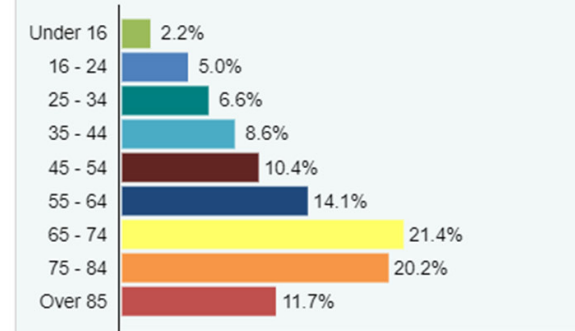


Patient ethnicity

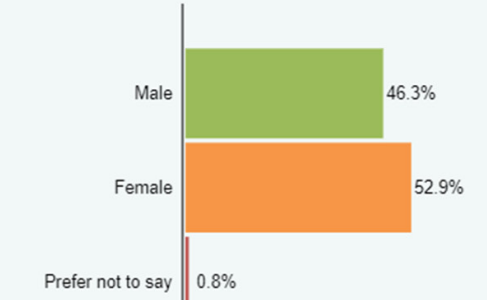


Patient experience survey demographics PES 2023/2024

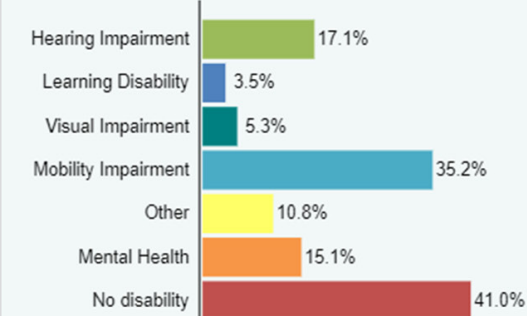
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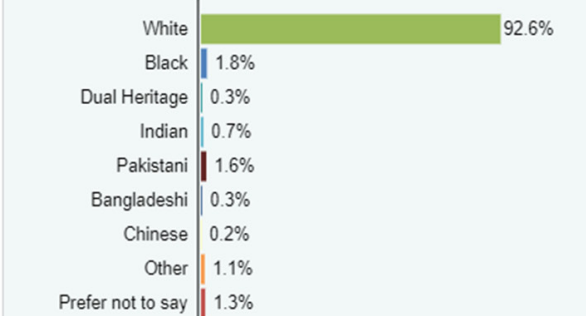
Patient gender



Patient impairment



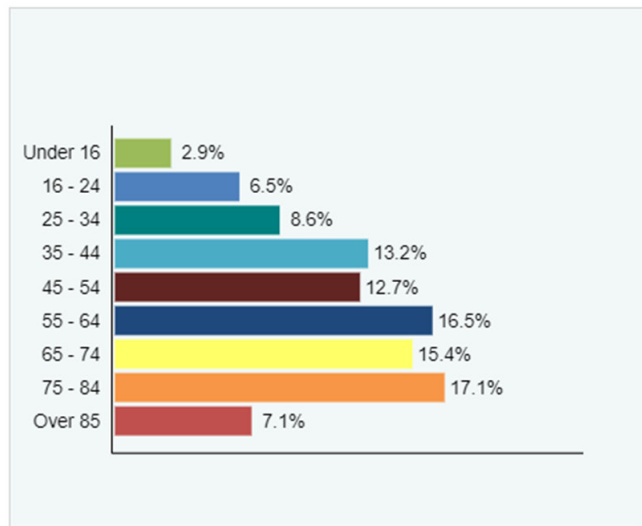
Patient ethnicity



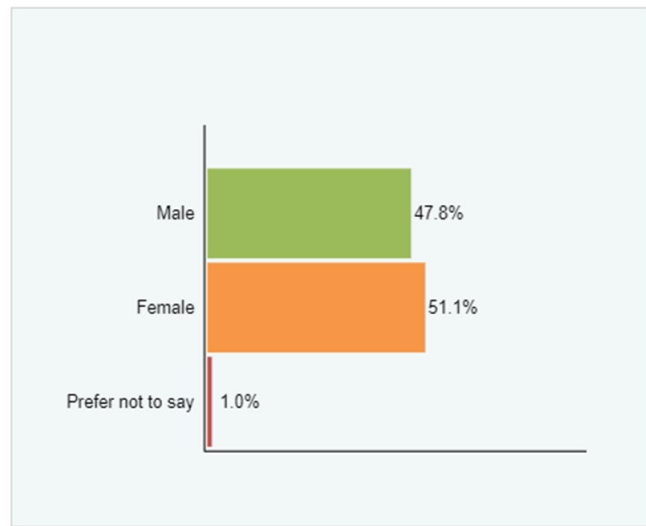
Patient experience survey demographics

UCS 2023/2024

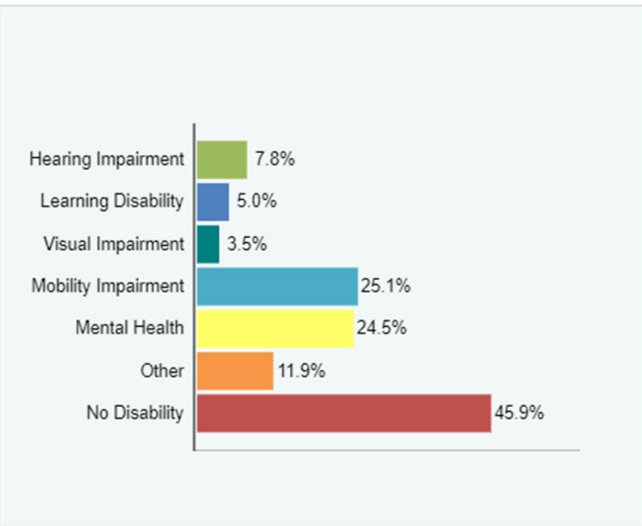
Patient age range



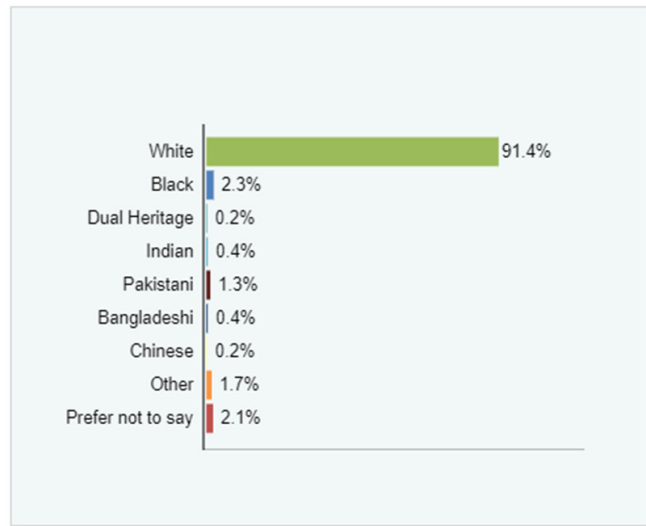
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Patient impairment



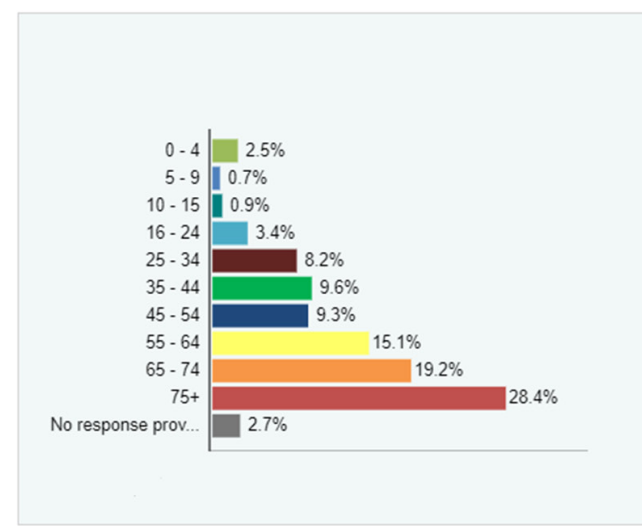
Patient ethnicity



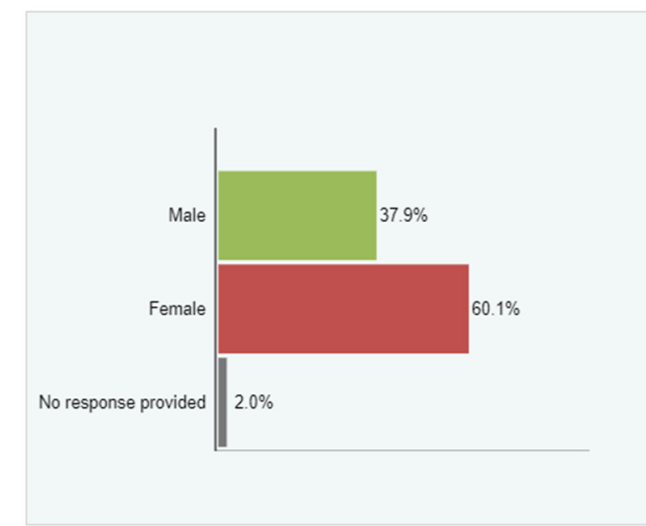
Patient experience survey demographics

NHS 111 2023/2024

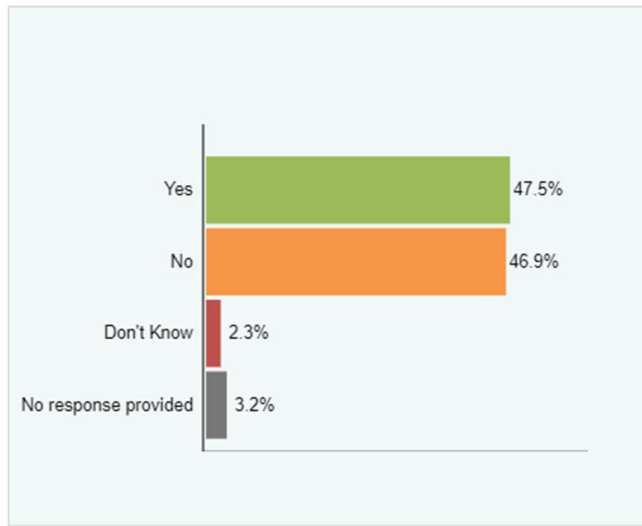
Patient age range



Patient gender



Patient has long-term illness, health problems or disability that impacts daily activities or work



Patient ethnicity

