



Scottish Ambulance Service

Working in Partnership with Universities



Exploring the needs and benefits of crew feedback within the Scottish Ambulance Service.

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Introduction

Ambulance crews within the Scottish Ambulance Service can request for the Advanced Practitioner Response car to attend patients which they have assessed and thought appropriate for further review and treatment, ensuring right care at the right time and place is delivered. Following the car attendance there is often little opportunity to discuss the outcome with the referring crew. Therefore, crews are unable to reflect on their practices.

Learning and excellence in patient care is central to feedback provision. Where there is a lack of feedback, errors can go unchecked and there is no reinforcement of good practice. (1) Additionally, provision of feedback allows a workforce to become more engaged, improving the delivery of care and enhancing staff wellbeing (2)

Methods

All staff working on A&E vehicles within the Lanarkshire area were surveyed. With a return of 29 questionnaires.

Results/ discussion

Of the returned questionnaires, 60% found it was difficult to get feedback, with 95% stating they would benefit from feedback relating to ongoing care.

Furthermore, the types of feedback requested related to the patient's continuation of care and outcomes. Additionally, crews were keen to know if it was appropriate to contact AP team, to know if their assessment and diagnosis were correct and if there was anything else they could have considered.

Conclusion

Overall, there was interest in feedback about patient outcomes and their decision making, therefore the next step is to provide feedback and assess whether it remains a valuable tool for crews and patient care.

References

- (1) Jug, R et al (2019) Giving and receiving effective feedback. A review article and how-to guide. Archives of pathology and laboratory medicine, vol 143, pp244-250
- (2) Eaton-Williams et al (2020) Exploring paramedic perceptions of feedback using a phenomenological approach, British Paramedic Journal, vol. 5(1) 7-14