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**Title:** The role of feedback and follow up in ambulance services: a qualitative interview study

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**Background** International studies have shown that the feedback that ambulance staff receive lacks structure, relevance, credibility and routine implementation (Cash, 2017; Morrison, 2017). Research from psychology and implementation science suggests that feedback can change professional behaviour, improve clinical outcomes and positively influence staff mental health (Ivers, 2012; Michie and Williams, 2003). The aim of this study was to explore the experience of ambulance staff regarding current feedback provision and their views on how feedback impacts on patient safety, staff wellbeing and professional development.

**Methods** A qualitative study conducted as part of a wider study of work-related wellbeing in ambulance staff. 25 semi-structured interviews with prehospital staff in a clinical role from a UK ambulance service sampled using theoretical sampling. Theoretically-informed thematic analysis using psychological theory linked to the self-motives framework for feedback-seeking behaviour.

**Results** Study participants viewed current feedback provision as inadequate and consistently expressed a desire for increased feedback. Participants raised concerns that inadequate feedback could negatively impact on patient safety by preventing learning from mistakes. Enhancing feedback provision was suggested to improve patient safety by supporting professional development and clinical decision-making, through facilitating reflection, knowledge acquisition and professional behaviour change. Similarly, participants thought that enhanced feedback could improve staff wellbeing by enabling closure and encouraging intra-professional dialogue and peer-support. The self-motives framework was useful in interpreting personal and professional motivators for feedback-seeking behaviour within the data.

**Conclusions** In accordance with previous research in this area, this study highlights prehospital clinicians' strong desire for feedback. Furthermore, it suggests that enhancing prehospital feedback could improve patient safety by enriching clinical decision-making and supporting professional development, as well as promote staff wellbeing. Findings from this initial study will be used to guide a PhD programme to address this evidence gap.