

Report to: **East Sussex Health Overview and Scrutiny Committee (HOSC)**

Date: **24th September 2009**

By: **Director of Law and Personnel**

Title of report: **South East Coast Ambulance Service NHS Trust (SECAMB) – key developments**

Purpose of report: **To brief HOSC on SECAMB's application for Foundation Trust status and its strategy for the ambulance station network.**

RECOMMENDATIONS

HOSC is recommended:

- 1. To agree any key points in relation to SECAMB's Foundation Trust application for inclusion in HOSC's response to the Trust's consultation.**
 - 2. To consider and comment on SECAMB's strategy for the ambulance station network, particularly the development of 'make ready' depots.**
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1. Background

1.1 South East Coast Ambulance Service NHS Trust (SECAMB) provides emergency and urgent care to residents across a large area encompassing Kent, Surrey and the whole of Sussex. In Kent and Sussex the Trust also provides non-emergency patient transport services (pre-booked journeys to and from healthcare facilities). The Trust was formed on 1 July 2006 from the merger of the three previous ambulance trusts in Surrey, Sussex and Kent and still retains emergency dispatch centres and offices in each of these three areas, as well as a network of 63 ambulance stations across its area.

1.2 The role of ambulance trusts goes well beyond simply responding to calls and transporting patients to hospital. Increasingly, ambulance staff 'take healthcare to the patient', providing treatment at the scene, then ensuring patients access appropriate follow-up care. This may involve taking a patient to hospital, but could also involve linking in with community services which can provide follow-up care at home or in a local facility, thus avoiding a hospital admission. For the most seriously ill or injured patients, the ambulance service has a key role in determining the best place to take the patient – this may be to a specialist centre, rather than the local general hospital.

1.3 This report encompasses two current areas of development for the Trust: its application for Foundation Trust status and its strategy for the ambulance station network, including the development of 'make ready' depots.

2. Foundation Trust application

2.1 Foundation Trusts represent a key part of the Government's reform programme for the NHS. They are a new type of NHS organisation, established as independent public benefit corporations and are intended to be free from central government control and strategic health authority performance management. However, they remain providers of NHS healthcare which is free at the point of delivery and are expected to conform to the same national standards in relation to clinical quality and safety.

2.2 The key features of Foundation Trusts relate to their governance arrangements and their financial regime. In terms of governance, Foundation Trusts are accountable to local people who

form a membership. From this, public Governors are elected to form part of a Council of Governors which works alongside the Trust Board. In terms of finance, Foundation Trusts are free to retain any surpluses they generate for reinvestment, to borrow in order to support this investment, and to make their own decisions about what capital investment is needed to improve services. These freedoms and increased local accountability are designed to encourage innovation in local service delivery.

2.3 Foundation Trusts are regulated by an organisation called Monitor. In order to become a Foundation Trust an NHS Trust must be approved by the Department of Health to apply to Monitor and must then meet a range of criteria, particularly relating to their financial stability, governance arrangements and plans for the future. There is an expectation that all Trusts will eventually become Foundation Trusts.

2.4 SECAMB is currently going through the process of Foundation Trust application and is currently in a consultation period. It is important to note that the consultation is not about whether or not the Trust should become a Foundation Trust. Instead, the consultation relates to how the governance arrangements of the proposed Foundation Trust should work and the Trust's future plans. HOSC is invited to comment on the proposals and agree key points for inclusion in a letter to the Trust in response to the consultation.

2.5 SECAMB is committed to holding Board meetings in public once authorised as a Foundation Trust whilst recognising that some Board meetings will need to be held in private.

3. Development of 'make ready' depots

3.1 Since 2008, SECAMB has been developing a new arrangement for cleaning, restocking and maintaining ambulance vehicles. 'Make ready' depots provide a central point with a dedicated team responsible for cleaning used vehicles, checking and restocking equipment and drugs and ensuring the vehicle is in full working order. In the past, the ambulance crews themselves carried out cleaning and restocking.

3.2 The scheme aims to improve infection control, reduce instances of faulty or missing equipment and free up ambulance crews so they have more time to treat patients. Overall, the aim is to improve patient safety and keep ambulances on the road for longer.

3.3 There is already one make ready depot in East Sussex, in Hastings, as well as one in Surrey. Having evaluated the success of these two depots, the Trust plans to extend the model to the rest of its area over the coming years. The depots tend to be larger than many ambulance stations and require certain facilities which are not available at all existing ambulance stations. This means that there will be fewer depots than the current number of ambulance stations and they may be in different locations.

4. Issues to consider

4.1 The Trust has provided a presentation (appendix 1) which gives an overview of both the Foundation Trust proposals and the plans for make ready depots. Geraint Davies, Director of Corporate Affairs and Geoff Catling, Head of Estates will attend HOSC to present and take questions.

4.2 HOSC may wish to explore the following issues:

Foundation Trust

- Whether the Committee endorses SECAMB's vision
- How the Trust will ensure representation from across its large geographical area in its Foundation Trust governance arrangements and whether the Committee agrees with SECAMB's proposed public constituencies and staff constituencies.

- Whether the proposed governance arrangements promote openness and transparency as recommended by national guidance.
- Whether the Committee agrees that there should not be a minimum age of membership
- Whether the Committee agrees that the minimum age of a governor should be 16.
- How the Trust can effectively communicate and engage with its membership.

Make ready depots:

- How local ambulance stations will be affected by the development of make ready depots.
- What benefits there are likely to be for East Sussex residents from the development of further depots in the county.
- Impact of make ready arrangements on response times – particularly in rural areas
- Impact on Patient Transport Service

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Your service, your call

Our plans for becoming a foundation trust

Geraint Davies

Director of Corporate
Affairs & Service
Development





Who are we?

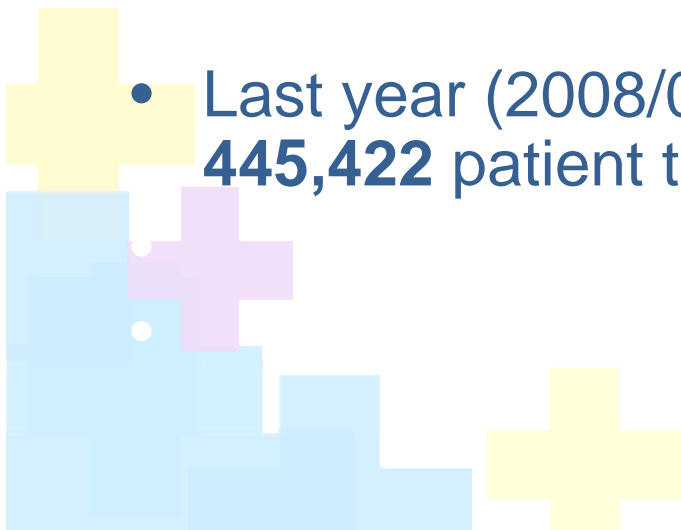
- SECAMB was formed on **1 July 2006**, following the merger of Kent, Surrey and Sussex ambulance trusts
- SECAMB employs around **3,000 staff** across more than **65 sites**.
- Around **85 per cent** of SECAMB's workforce are operational staff – those working with patients either face to face in the field, or over the phone.





Did you know?

- SECAmb covers an area of **3,600 square miles** and a population of about **4.5 million people**
- Every **minute** an emergency call is answered by one of SECAmb's three control rooms = **more than 500,000 emergency calls each year**
- Last year (2008/09) we undertook a staggering **445,422** patient transport services (PTS) journeys.





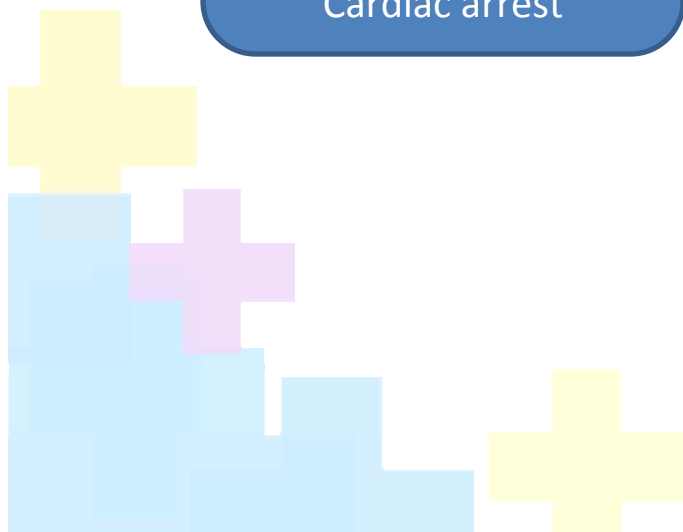
Who are our patients?

- We hear, see and treat a massively diverse range of patients every day

CRITICALLY ILL
Stroke
Trauma
Heart attacks
Cardiac arrest

ACUTE / URGENT
Falls
Non-life threatening
illness and injury
Long-term condition

**NON-EMERGENCY
TRANSPORT**
Patients who need
support in attending
routine healthcare
appointments





SECAmb's vision

'We will match and exceed international clinical excellence through embracing innovation and putting the patient at the heart of everything we do'

Response time reliability
Getting to the patient quickly

Economic efficiency
Achieving this without it costing more

Customer satisfaction
Treating people with dignity and respect

Clinical effectiveness
Making the patient better, or taking them to someone who can





What is a foundation trust?

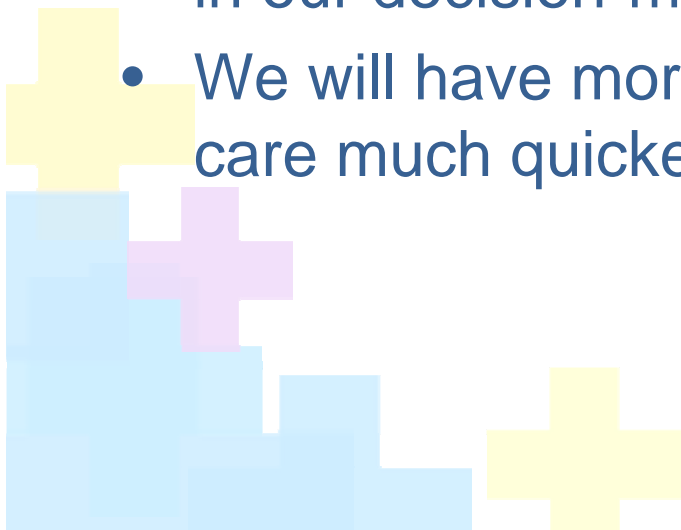
- Foundation trusts are run locally, and are **accountable to patients, local people and staff** rather than to government
- They are still NHS organisations that provide **free care** and treatment to patients
- They still have to **meet national targets** and are **regularly inspected**





Why become a foundation trust?

- Becoming a foundation trust will help us to achieve our vision of becoming a world class ambulance service.
- Local accountability will make sure that the services we provide are meeting the needs of our communities.
- Foundation trust members will have a recognised voice in our decision-making and how we plan future services.
- We will have more freedom, meaning we can improve care much quicker than we are able to as an NHS trust.





Benefits of becoming a foundation trust





By becoming a member of our foundation trust, you will have a recognised voice in our decision-making and how we plan future services.

Benefits of becoming a foundation trust

You will have a greater say in helping us develop a service which reflects the needs of local people – designing today's services that you want tomorrow.

There will be improved care for patients. This is because, as a foundation trust, we will be able to introduce new technology and treatments much more quickly, and provide more education, training and development for staff.

We will be able to work more closely with local communities to provide more advice and education on conditions such as stroke and heart disease, helping local people learn how to save a life.

There will be more opportunities than ever before for our staff, including more training, education and development, as well as more opportunity for progression.

We will be better able to take into account the varied range of needs within our communities, by making sure our membership represents all the communities we serve.

As a foundation trust, we will have more freedom to introduce new ideas, technology and techniques as we will be able to make decisions much more quickly. We won't have to get permission from other organisations such as the Department of Health to change and improve our services, which means we can respond better to our patients' changing needs.





You will have a greater say in helping us to develop a service which reflects the needs of local people – designing today the service that you want tomorrow.

We can increase our investment in new services, upgrading buildings and emergency vehicles as well as developing our staff.

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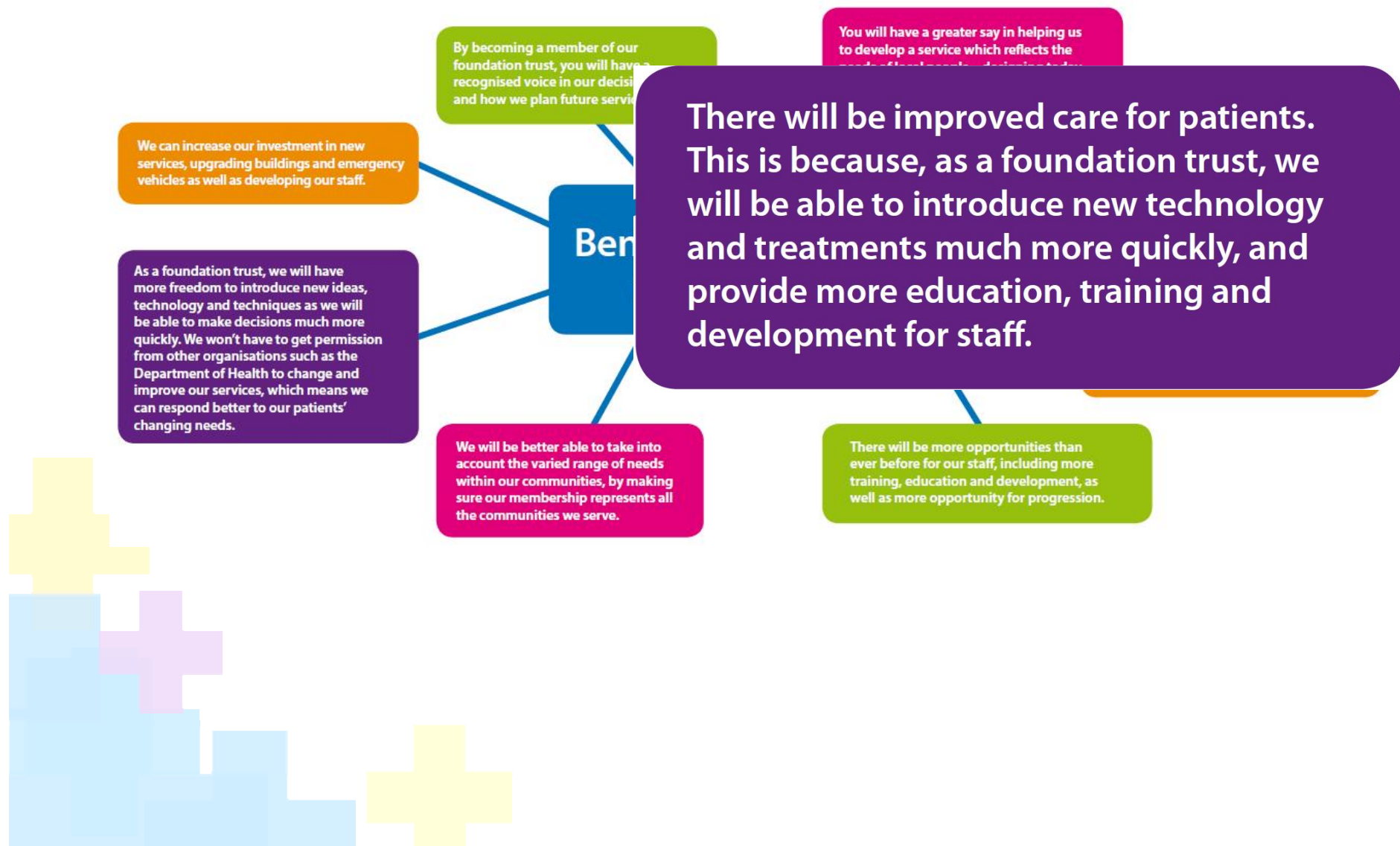
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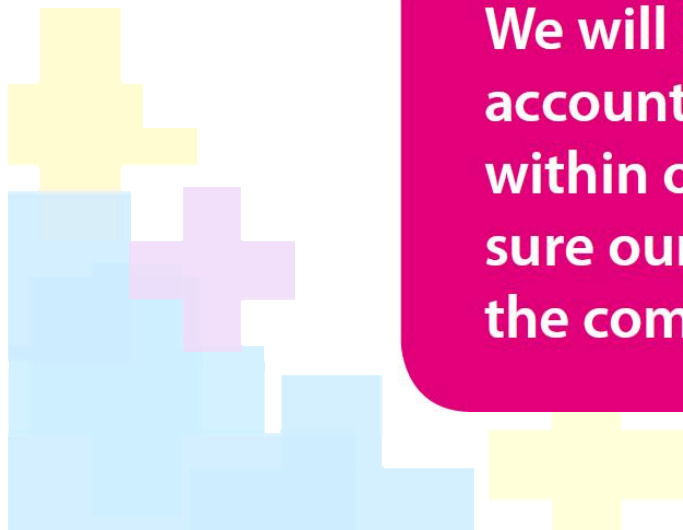
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Being a
Trust

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foundation trust

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Our plans for the future

- Improve outcomes for seriously ill and injured patients through ensuring most advanced paramedics get to the patient first
- Improve patient experience by improving access to urgent care
- Improve patient safety and infection control by continuing to roll out Make Ready





Our plans for the future

- Improve communications technology for frontline staff
- Increase the number of trained clinicians able to provide advice to patients over the phone

Improving patient outcomes

Improving patient experience

Improving patient safety





Council of Governors

Staff governors (elected)	4
Operational	3
Non-operational	1

Public governors (elected)	14
Brighton and Hove	1
East Sussex	2
Kent	4
Medway	1
Surrey	4
West Sussex	2

Appointed governors	8
Primary care trust	1
Local authority	1
Voluntary organisation or charity	1
Regional Resilience Forum	1
NHS acute trust	2
NHS mental health or social care trust	1
University	1

Each of the groups highlighted in the appointed governor list above will be asked to submit a nomination for consideration if they would like to have a representative on our Council of Governors.



Moving forward

- We want you to be involved in our journey
- SECAMB is your ambulance service and we want you to help us shape our future
- A 12 week public and staff consultation began on 25 July
- **Share your views** – Please complete a consultation questionnaire providing the views of the HOSC on our consultation questions.
- Individual members can complete a form too if they would like to.





Consultation feedback

- We will consider all of the responses we receive during the consultation when finalising our plans for the future
- All responses will be collated into a report that will be made available on our website





Remember, it's...

Your service, 
your call



South East Coast Ambulance Service
NHS Trust



Make Ready





Context

- Old estate - 68% built pre 1974.
- Mal-located estate impedes response.
- Speed of response is the key to clinical outcomes
- Patient demand changes – stations do not reflect the change.
- £4m backlog in maintenance.
- Trust Estates Strategy confirmed move to Make Ready system



Principal Objectives

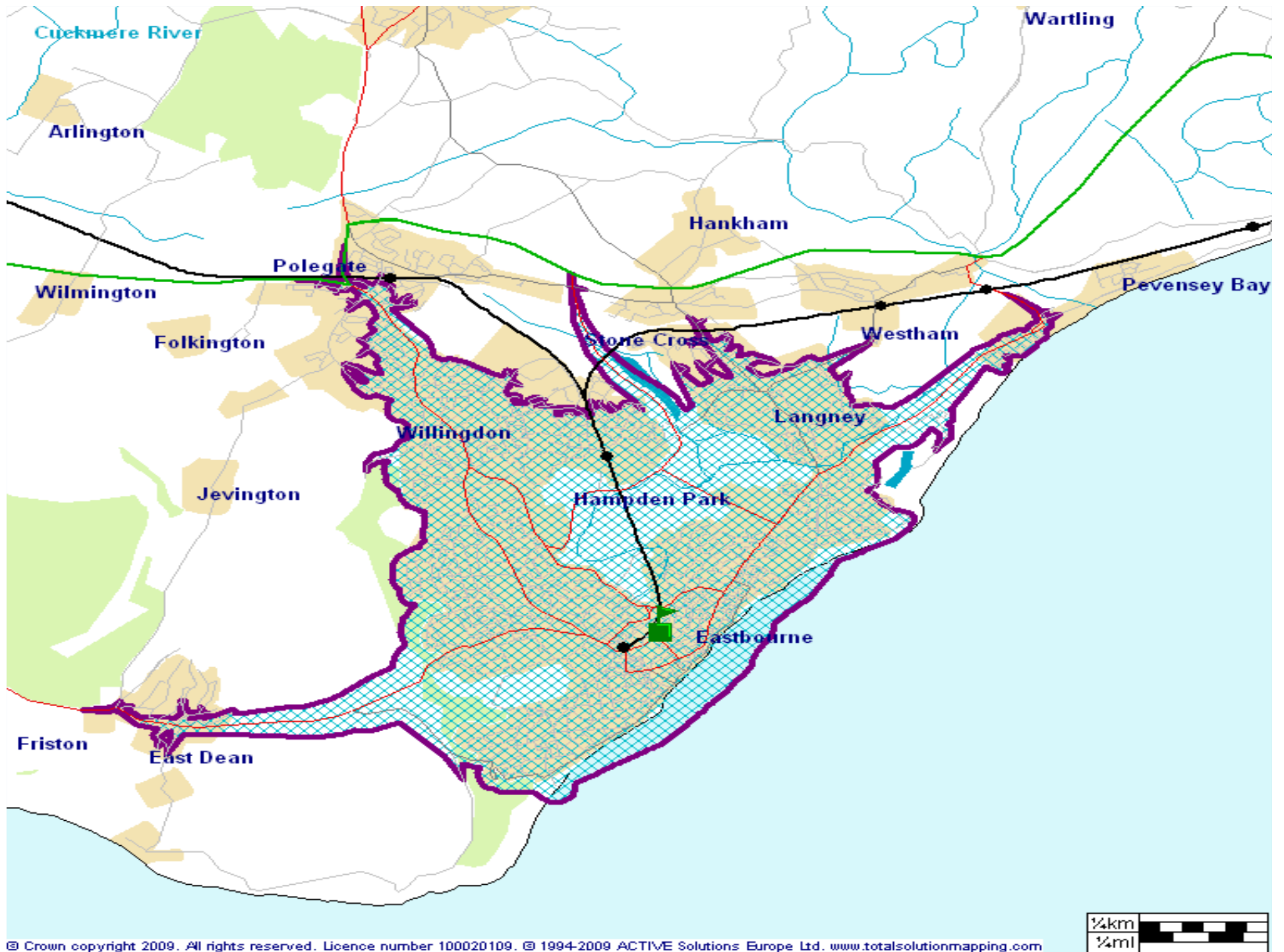
- Improve patient safety through a rigorous vehicle and equipment cleaning and infection control regime
- Improve patient safety by maximising hours clinicians see patients
- Improve patient safety by minimising the risk of a vehicle breaking down en route
- Improve patient safety by minimising the risk of a lack of, or failure of, key clinical equipment.

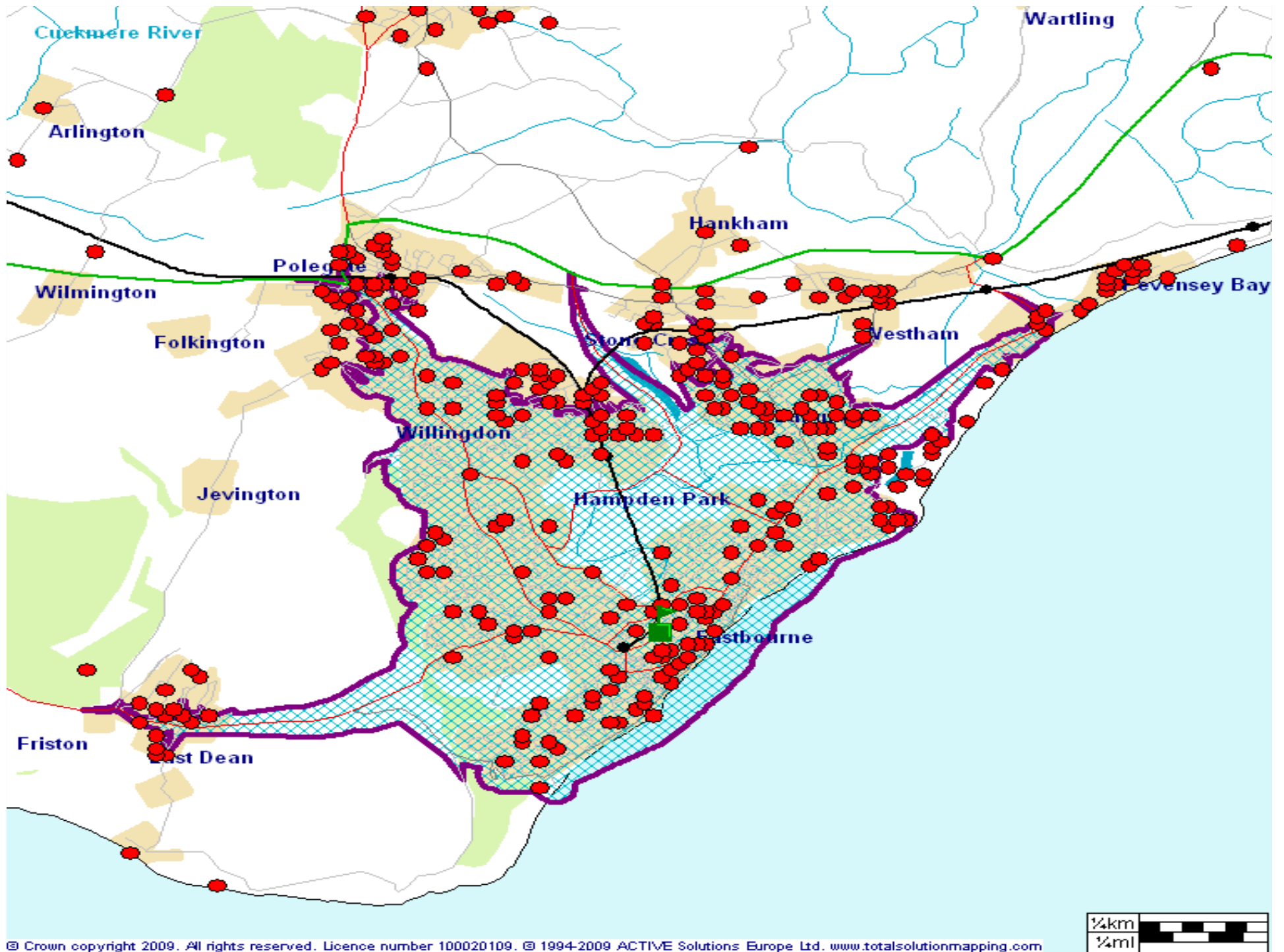


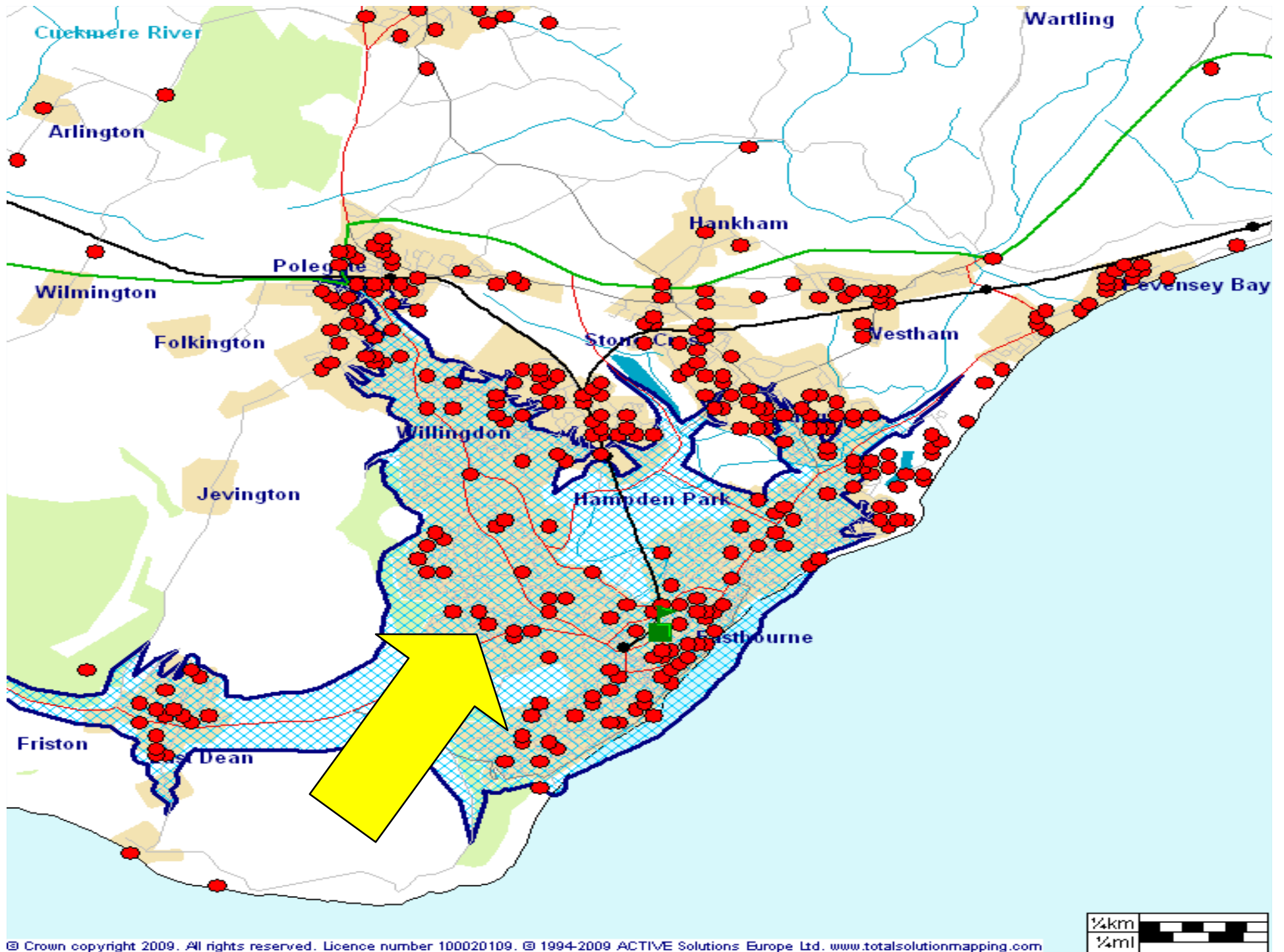
Make Ready Concept

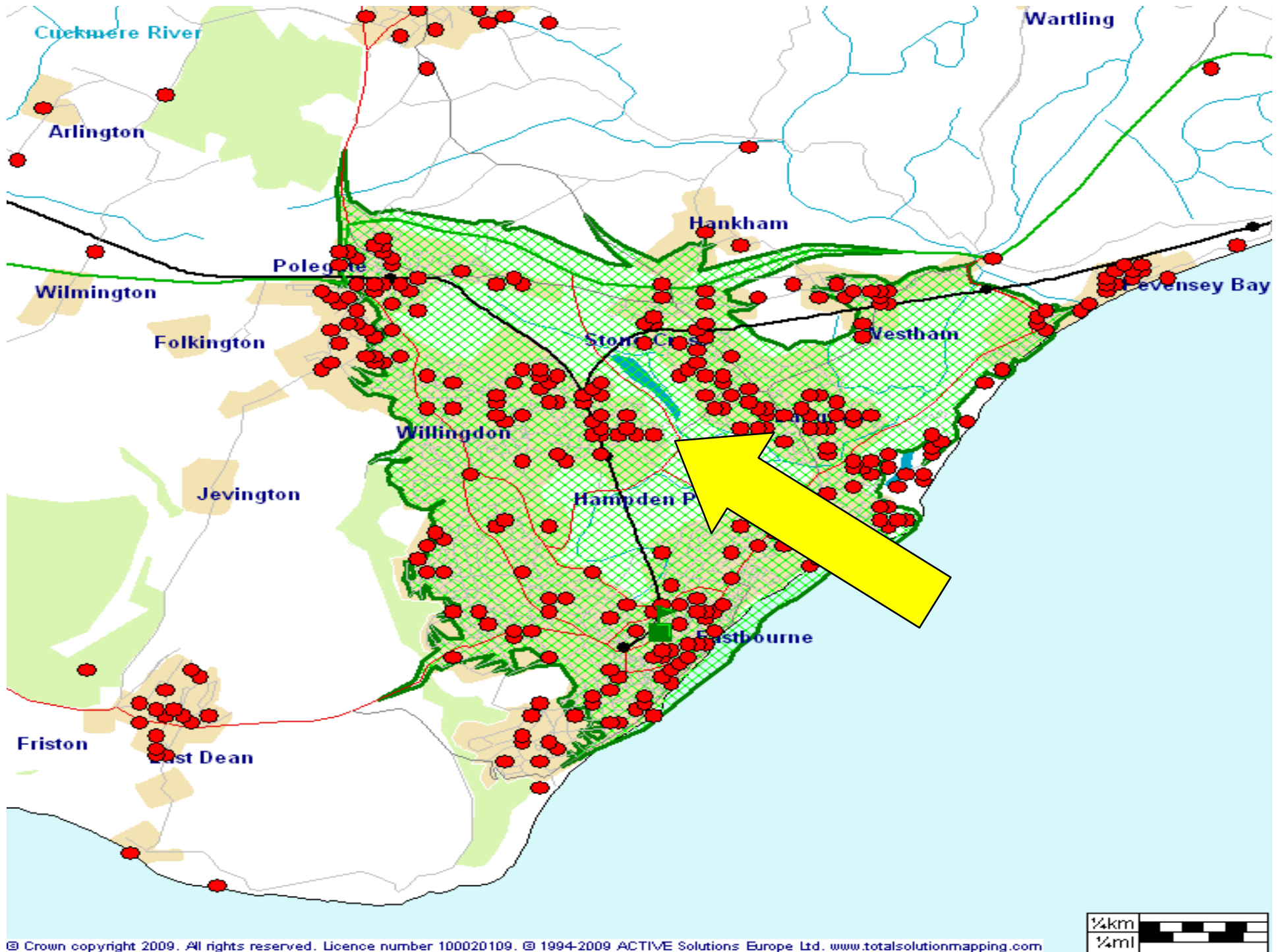
- All resources concentrated at large depots.
- Response posts aligned with patient demand provide locations from which crews respond.
- Speed of response the key to clinical outcomes.
- More response posts than stations.
- Some response posts will be former stations if in the right patient led location.
- All response posts have crew facilities.

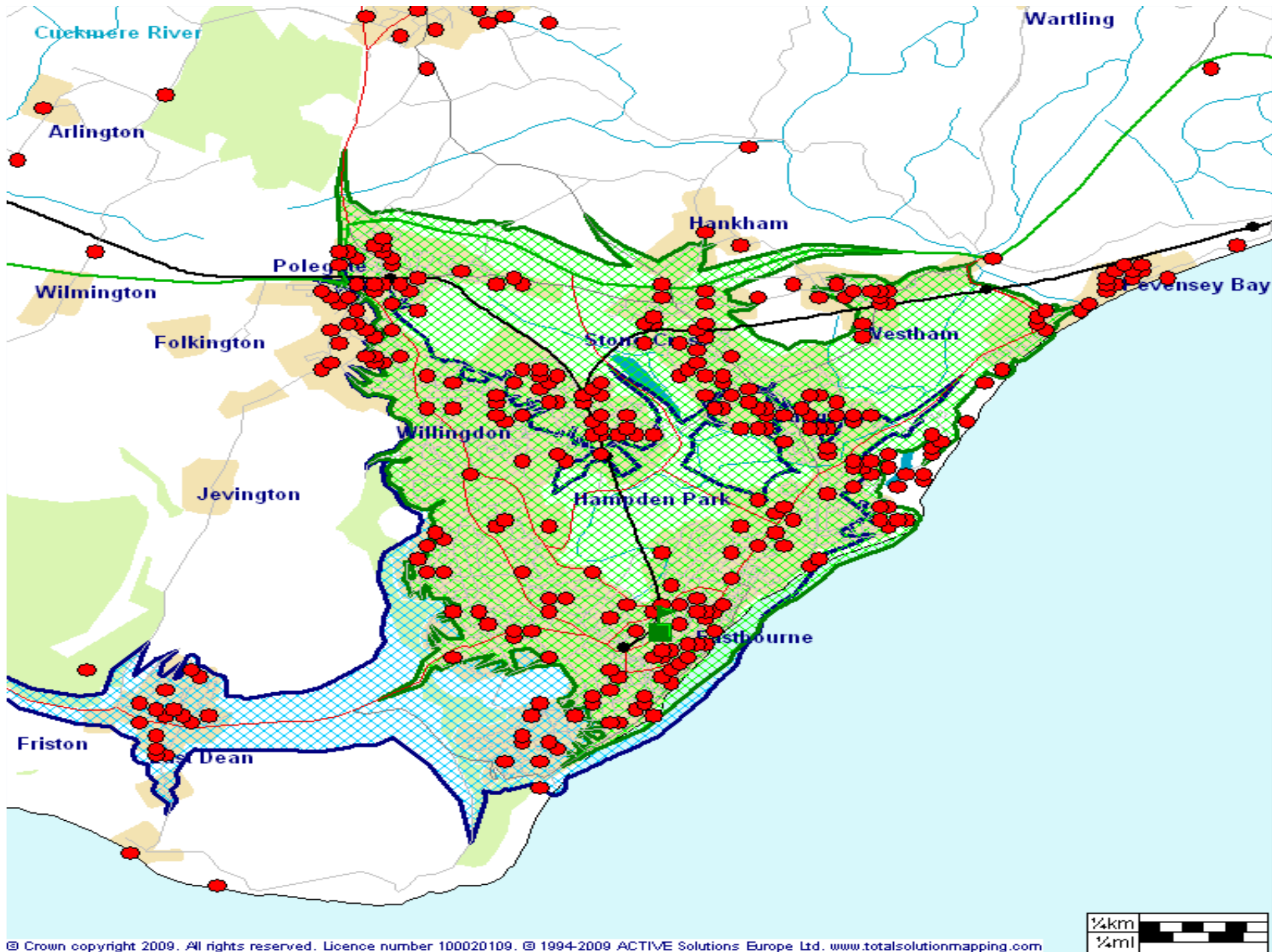














East Sussex developments

- Two Make Ready Depots – Hastings and Polegate (not before May 2011).
- A number of interlinked response posts aligned with patient demand. Some may be former stations – but don't need the complete station.
- Rationalisation of the old estate.

