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

Date of meeting: 1 December 2016

By: Assistant Chief Executive

Title: Patient Transport Service

Purpose: To consider an update on the Patient Transport Service in Sussex

RECOMMENDATIONS

1) to consider and comment on the updates from High Weald Lewes Havens Clinical Commissioning Group (appendices 1 and 2)

2) to request a further report, focusing on progress with the transition to South Central Ambulance Service, in March 2017

1 Background

1.1 The Patient Transport Service (PTS) is a Sussex-wide service that helps people access healthcare appointments. The service provides some 25,000 journeys per month for people who are unable to use public or other transport owing to medical conditions. The service is booked for people who meet certain medical criteria which would otherwise prevent them from getting to their appointment. PTS is free at the point of use for all eligible patients. It is a non-emergency transport service and is quite separate from emergency ambulance services which are commissioned separately.

2 Supporting information

- 2.1 On 1 April 2016 a new PTS went live across Sussex, provided by Coperforma. This followed a procurement process led by High Weald Lewes Havens Clinical Commissioning Group (HWLH CCG) on behalf of the seven CCGs in Sussex.
- 2.2 In June HOSC received a report from HWLH CCG outlining problems which had been experienced with the delivery of the PTS service since the change of provider and how these were being addressed. Both the CCG and Coperforma acknowledged that performance had been unacceptable, with many patients experiencing severe delays or not receiving transport at all. There had been considerable media coverage of the problems experienced by patients and concerns had been raised with patient groups and elected representatives.
- 2.3 In September HOSC received a further update on the performance of the service. Performance data provided by Coperforma and feedback from patients and hospital Trusts analysed by the CCG indicated that the service had improved. However, it was acknowledged that this was not consistent or embedded across Sussex and some patients continued to experience problems with the service.
- 2.4 Since September a number of further issues have arisen in relation to one of Coperforma's sub-contractors, Docklands Medical Services (DMS) including disputes over payment and issues with Care Quality Commission (CQC) registration. As a result DMS is no longer providing a transport service in Sussex with alternative sub-contractors providing additional capacity to compensate.
- 2.5 On 1 November 2016 CQC published a report outlining findings from an unannounced inspection of Coperforma in July 2016, serving six requirement notices to the service to ensure improvements are undertaken. A full report of this inspection has previously been circulated to HOSC Members and is available on the CQC website. Areas for improvement included:

- The provider must ensure a robust system is in place for handling, managing and monitoring complaints and concerns.
- There must be robust systems in place to assess, monitor and improve the quality and safety of the services provided.
- The vehicles and equipment used by contracted services must be appropriate for safe transportation of patients, including wheelchair users
- Patients must receive timely transport services so they can access the health services they need from other providers.
- A manager must be registered with the Commission.
- CQC must be notified of safeguarding incidents and incidents affecting the running of the service.
- 2.6 Also on 1 November 2016, the Chairman was informed by letter from Wendy Carberry, Accountable Officer, HWLH CCG that South Central Ambulance Service NHS Foundation Trust (SCAS) would take over the contract for the PTS from April 2017. The transition from Coperforma will be phased over the next few months and be complete by April. The letter is attached at appendix 1.
- 2.7 As requested by HOSC, HWLH CCG has provided a further report (appendix 2) which provides an update on PTS performance, current service issues and the transition to SCAS.
- 2.8 Representatives of HWLH CCG will be in attendance at the HOSC meeting to take questions on the report.

3. Conclusion and reasons for recommendations

- 3.1 HOSC is recommended to consider the updates from HWLH CCG and question the attendees on the issues arising. The Committee will wish to consider whether everything possible is being done to ensure patients consistently receive an appropriate level of service now and during the transitional period, how the issues raised by CQC are being addressed and how ongoing risks are being managed.
- 3.2 HOSC is also recommended to request a further report, focussing on progress with the transition to SCAS, in March 2017.

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