

Patient Transport Service - Update

**Health and Overview Scrutiny Committee
30 June 2016**

Setting the Scene

- In **2011** the Primary Care Trusts (PCTs) across Sussex commissioned a new Patient Transport Service (PTS)
 - The transport function was awarded to the South East Coast Ambulance Service (SECAmb)
 - The Patient Transport Bureau (PTB) was established to apply the Sussex PTS Eligibility Criteria and book transport for eligible patients and escorts
- HWLH CCG inherited pan-Sussex responsibility for PTS from B&H PCT in **2012**
- In **March 2014**, SECAmb stated it did not wish to extend the existing contract under the current terms beyond the scheduled end date of 31 March 2015
- A Project Team and Programme Board were established to lead and coordinate the re-tendering and procurement of a new PTS. These included representation from all 7 Sussex CCGs, and were attended by finance, procurement and quality experts
- A 12 month extension period was subsequently agreed with SECAmb to extend the contract end date to **31 March 2016**. This provided the opportunity to commission a new, innovative, more patient-centered service, with an aim for the new service to commence on **1 April 2016**. The Commissioners felt this was an opportunity to procure a PTS that met its users' needs; not an opportunity to 'privatise' the service.

Development & design of service model

- The CCGs designed and **tested a new service model** reflecting feedback from:
 - Current service users;
 - Current transport providers and their staff;
 - Local stakeholders, including the acute Trusts;
 - Patient and public groups; and
 - Other transport providers - community transport, volunteer drivers, and potential bidders.
- This process included **patient and public surveys and engagement events**, and a series of meetings with local stakeholders; including representation from BSUH
- **Managed Service Provider (MSP) model** includes a separate Booking Hub; a single point of access to PTS which applies Eligibility Criteria and manages bookings
- The MSP delivers patient transport via **multiple sub-contractual arrangements** with transport providers; sub-contracting will also enable partnership working with Local Authorities in preparation for integrating health, social and community transport
- The MSP employs **Service Delivery Specialists** to work in acute hospitals to support patients, answer PTS queries, and coordinate with hospital staff

Timelines and contract details

- All CCG Governing Bodies Inc. B&H CCG signed off PTS Business Case **April 2015**
- Market-warming event held **6 May 2015**, attended by 23 potential bidders
- Pre-Qualification Questionnaire (PQQ) to market on **20 May 2015**
- PQQ evaluation and selection of bidders completed end **June 2015**
- Service specification completed **June 2015** (including input from Patient Forum)
- Invitation to Tender (ITT), the second phase of procurement, **16 July 2015**
- Evaluation of ITT, **28 August to 16 September 2015**
- All CCGs in Sussex approved Award to Contract to Coperforma during **October 2015**
- Award of contract to Coperforma in **November 2015**
- New PTS service commenced **1 April 2016**
- Contract length **4 + 1 years** (maximum of 5)
- Underpinned by Programme Budget of **c£60m for 5 years**
- Based on 2014/15 activity and spend
- Includes all activity, both planned (including renal) and unplanned/on-the-day
- Includes additional, historical activity and spend as identified by each CCG

Who are Coperforma?

- Coperforma has **five years' experience of managing NHS patient transport** for hospital Trusts, CCGs and community and mental health service providers in London and Hampshire.
- Coperforma's NHS contracts have included delivery of a c18 month renal dialysis patient PTS pilot for Barts Health NHS Trust from April 2013 and providing PTS cover across mid- and North Hampshire for Hampshire Hospitals NHS Foundation Trust and a community hospital.
- The **CCGs sought references** from Hampshire Hospitals NHS Foundation Trust and Barts Health NHS Trust, who both confirmed that Coperforma had delivered a good quality, consistent service aligned with their Specifications. The referees stated that Coperforma had received minimal complaints, had quickly responded to any arising issues, and had proactively adapted its services to support changes in the wider healthcare system. Both confirmed they would contract with Coperforma again.
- In 2012, Coperforma won the Health Service Journal (HSJ) **Efficiency Award for Transport & Logistics**.

Programme Governance - procurement

Structure overseeing procurement and transition:

- The Programme Board comprises director leads from the 7 CCGs, with procurement and project support. It has provided scrutiny during the procurement, contract award, transition and mobilisation periods.
- The Project Team comprises Programme Managers from the 7 CCGs, procurement leads, Subject Matter Experts (SMEs), and members of the CCGs' PTS Patient Forum were also involved in designing the new Service Specification, Eligibility Criteria and procurement process.
- The CCGs undertook an extensive patient, public and stakeholder engagement process.
- On-going contract monitoring arrangements with current providers.
- Transition and mobilisation plan with actions, timelines, roles and responsibilities in place.
- Frequent meetings to manage transition and review progress with current providers, new provider and CCGs.
- Bi-monthly meetings with Trust leads to monitor progress and address any issues;

Service issues experienced from 1 April 2016

Issues related to the Booking Hub (Demand Centre):

- Lengthy call-handling response time, with patients and Healthcare Professionals (HCPs) unable to get through on their dedicated telephone lines;
- Staff who were TUPE'd from the previous service started training on Coperforma's system on 1 April 2016 and Coperforma were unable to install its booking system in the Durrington office during the mobilisation process.
- Unexpectedly excessive call volumes on 1 April 2016 from users with future PTS bookings, who stated they had been advised by previous PTS staff to call in on that date to confirm their booking;
- Low uptake of online booking by local Trusts and delayed roll-out of online staff training and login allocation by Coperforma;
- Some patient records on Coperforma's system incorrect / incomplete; some bookings not transferred.

Service issues experienced from 1 April 2016

- **Issues related to patient transport vehicles:**
 - Patient transport failing to arrive to collect booked patients;
 - Some staff expected to TUPE-transfer to transport providers did not arrive for work on 1 April;
 - Staff from previous provider not trained prior to 1 April 2016;
 - Patients waited excessively long periods of time for collection by patient transport;
 - Receiver appointed to transport provider VM Langford Ltd;
 - CCG, Coperforma and Unison working together to ensure that plans are in place to minimise any impacts on patient transport service delivery and patient experience.
 - CCG are working with Coperforma and Unison, the recognised trade union, to ensure that any effect on staff is in keeping with employment legislation and good practice.'
- **Complaints & incidents (service exceptions) related to Managed Service:**
 - Significant volumes of complaints and patient queries regarding transport;
 - The occurrence of several incidents relating to PTS, which have been logged by local Trusts;
 - Coperforma's clear complaints process will respond to each complaint within agreed timeframes.
 - Coperforma is establishing a process for investigating all incidents, undertaking a Root Cause Analysis (RCA), and sharing associated learning with the relevant Trust.

Programme Governance - mobilisation

Structure overseeing mobilisation and remedial action plan:

- Continuation of Programme Board, with director leads (including B&H CCG) from 7 CCGs providing scrutiny of progress and risks during the mobilisation period
- Weekly Trust conference calls, with CCGs (BSUH & B&H CCG) and Coperforma since April 2016
- Joint development of Remedial Action Plan (RAP) in May 2016, HWLH CCG and Coperforma, underpinned by standard contractual process and levers
- Weekly RAP Review meetings to monitor performance, delivery and progress attended by HWLH CCG and Coperforma
- Standard, monthly contracting meetings led by the South East Commissioning Support Unit (CSU) commenced in May 2016
- The Internal Audit Association (TIAA) commissioned by HWLH CCG to undertake an independent investigation and review of the transition and mobilisation of Sussex PTS. The review's Terms of Reference have been agreed jointly by HWLH CCG, SECAMB and Coperforma.
- Identify next steps following independent report. TIAA report will to be shared with stakeholders after submission and scrutiny by the commissioners.

Remedial Action Plan (RAP) SMART actions

The RAP developed by HWLH CCG and Coperforma contains SMART actions to address issues with:

- Staffing levels and integration within the Booking Hubs;
- Staff training and compliance with service specification;
- Online booking availability and training for hospital staff;
- Improving data quality and accuracy, with an initial focus on renal dialysis, oncology and neurology patients;
- Consistent communication with staff and stakeholders;
- Timeframes for handling incidents, complaints and appeals and completing RCAs;
- Sufficient vehicle capacity for all required activity, and allocation of multiple journeys to each vehicle;
- Patients arriving in time for appointments and being collected in a timely manner.

RAP planned outcomes

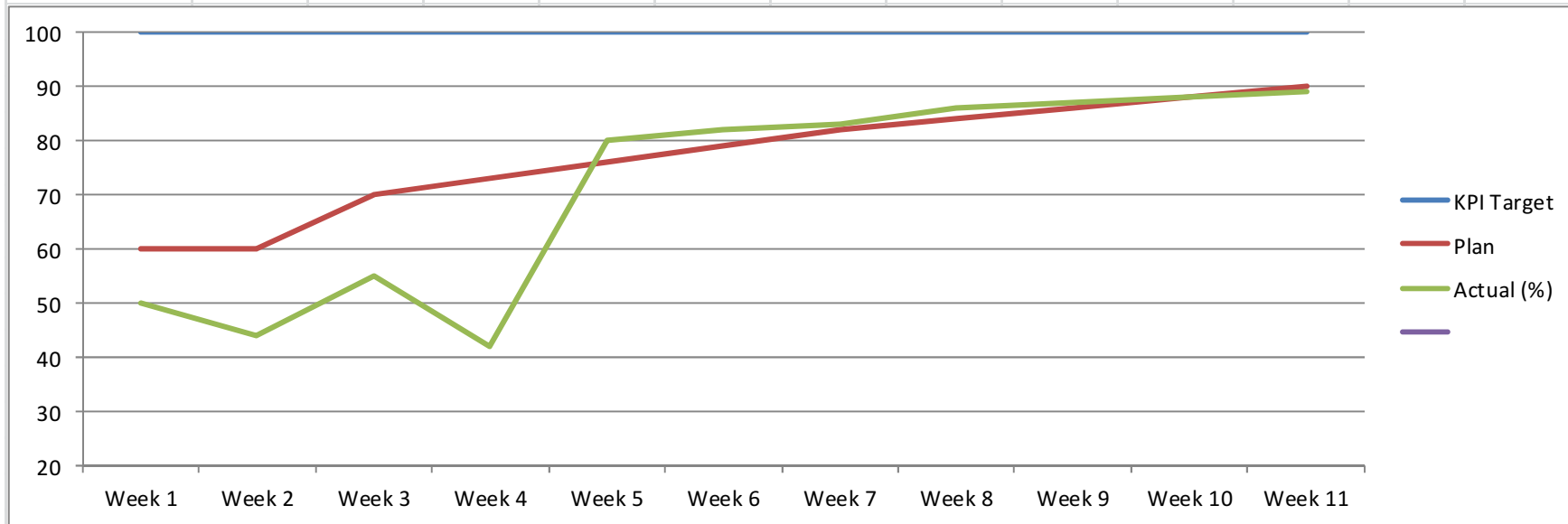
Delivery of the RAP SMART actions is intended to achieve:

- Delivery of KPI targets as per improvement trajectory, including call handling, scheduling, and advance contact;
- Increase in proportion of journeys made/checked online;
- Improvements in PTS staff satisfaction levels, full compliance with staff training requirements, and a clear understanding of their roles and responsibilities;
- 100% accurate data set including names, addresses, journey details, mobility/vehicle needs and carers;
- A joint communications plan;
- Appropriate investigation, response and closure of all complaints, incidents and appeals since 1 April 2016;
- Completion of all booked journeys within agreed timeframes, with all journeys appropriately allocated.

Renal Inbound Timeliness

Target KPI: 100% of renal patients to arrive between 45 mins before and the actual appointment time

Action: See RAP ID1, ID2, ID3, ID4

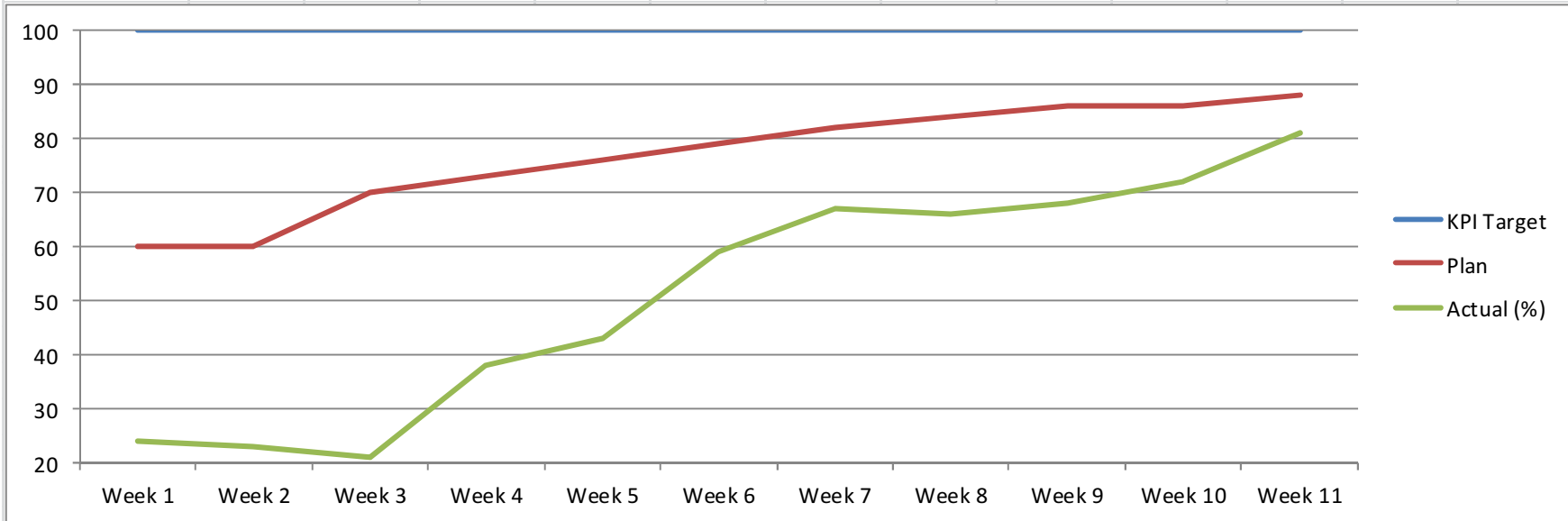


	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Week 9	Week 10	Week 11
KPI Target	100	100	100	100	100	100	100	100	100	100	100
Plan	60	60	70	73	76	79	82	84	86	88	90
Actual (%)	50	44	55	42	80	82	83	86	87	88	89

Renal Outbound Timeliness

Target KPI: 100% of renal patients to depart no later than 60 mins after booked time.

Action: See RAP ID1, ID2, ID3, ID4

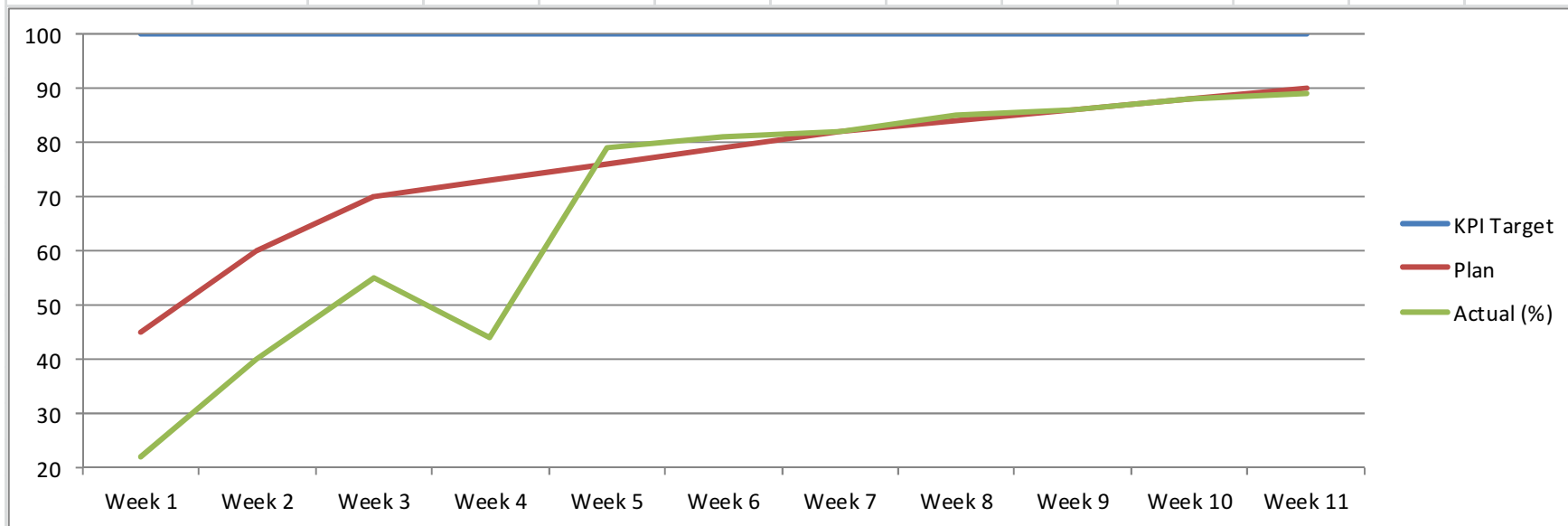


	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Week 9	Week 10	Week 11
KPI Target	100	100	100	100	100	100	100	100	100	100	100
Plan	60	60	70	73	76	79	82	84	86	86	88
Actual (%)	24	23	21	38	43	59	67	66	68	72	81

Non Renal Inbound Timeliness

Target KPI: 100% of non renal patients to arrive between 75 mins before and the actual appointment time for attendances.

Action: See RAP ID1, ID2, ID3, ID4, ID6

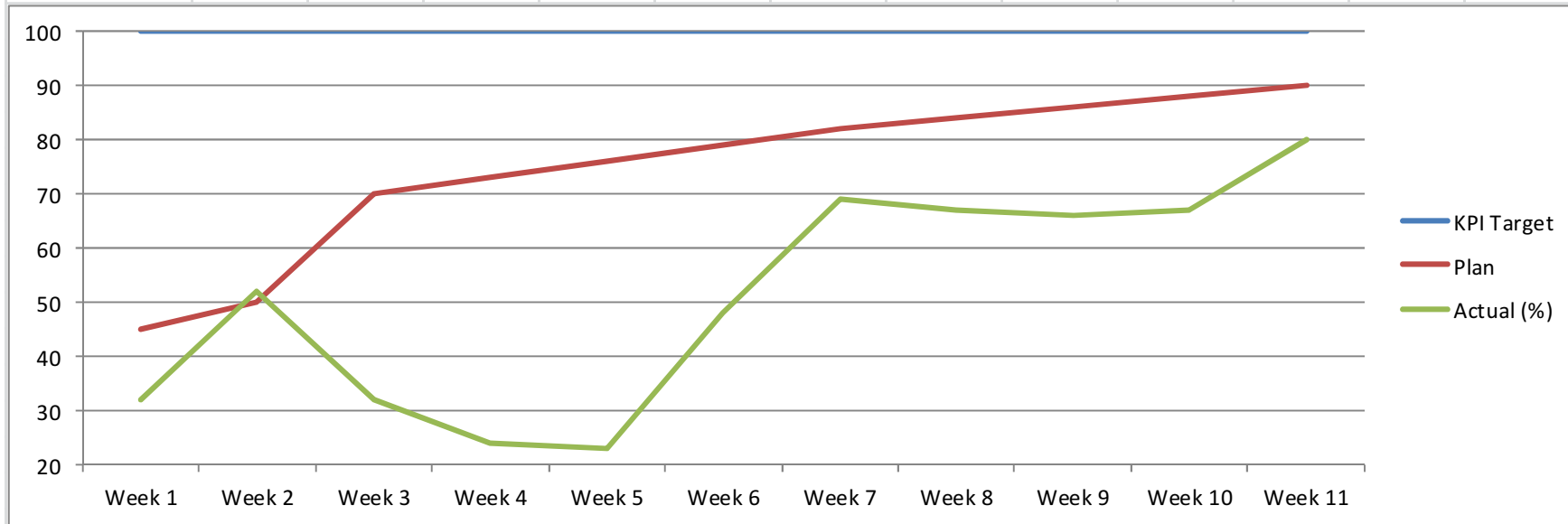


	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Week 9	Week 10	Week 11
KPI Target	100	100	100	100	100	100	100	100	100	100	100
Plan	45	60	70	73	76	79	82	84	86	88	90
Actual (%)	22	40	55	44	79	81	82	85	86	88	89

Non Renal Outbound Timeliness

Target KPI: 100% of non renal patients to depart no later than 60 mins after booked time for attendances, 90 mins for planned discharges, and 180 mins for unplanned discharges.

Action: See RAP ID1, ID2, ID3, ID4, ID6

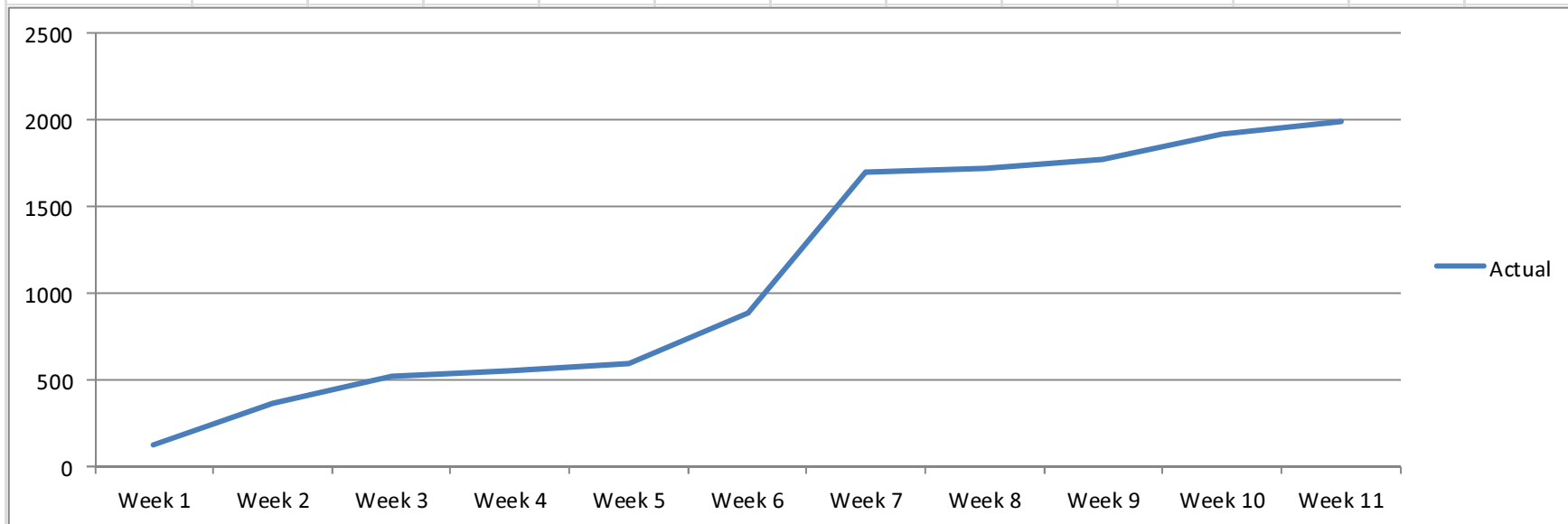


	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Week 9	Week 10	Week 11
KPI Target	100	100	100	100	100	100	100	100	100	100	100
Plan	45	50	70	73	76	79	82	84	86	88	90
Actual (%)	32	52	32	24	23	48	69	67	66	67	80

On line booking user accounts

Target KPI: n/a

Action: See RAP ID4



	Week 1	Week 2	Week 3	Week 4	Week 5	Week 6	Week 7	Week 8	Week 9	Week 10	Week 11
Actual	130	369	520	557	600	890	1698	1725	1777	1919	1996

Key messages and next steps

Summary of key messages:

- The Patient Transport Service is still experiencing difficulties and the CCGs apologise to all patients affected for this unacceptable level of service
- There have been improvements in the timeliness of call handling and journey transportation, although further improvement is expected and required
- The CCGs with TIAA, independent auditors, are undertaking an external review of the data to ensure it is accurate
- The CCGs are working closely with and supporting Coperforma to deliver the improvement actions detailed in the RAP, within the framework of the national contract
- The CCGs are exploring contingency plans should the RAP not deliver the required improvements.