

SECAMB Update to Health & Social Care Scrutiny Committee June 2016

Purpose

This briefing note is to update members of Healthwatch and local Health & Social Care Scrutiny committees with recent information as to SECAMB's performance. Alongside this, the report outlines:

- Recent CQC inspection feedback and the Trust's response
- Red 3 / Green 5 pilot patient impact
- Transition of Sussex Patient Transport Service provision from SECAMB to Coperforma from 1 April 2016
- Risks associated with patient handover delays at acute hospitals and recent performance trends

South East Coast Ambulance Service Performance

For 2016/17, SECAMB has agreed a performance improvement trajectory for the 3 main Ambulance Quality Indicators:

- Percentage of Red 1 calls receiving a response within 8 minutes
- Percentage of Red 2 calls receiving a response within 8 minutes
- Percentage of Red 1 & 2 calls receiving a transport-capable response within 19 minutes

The agreed improvement trajectory is shown in Figure 1 below:

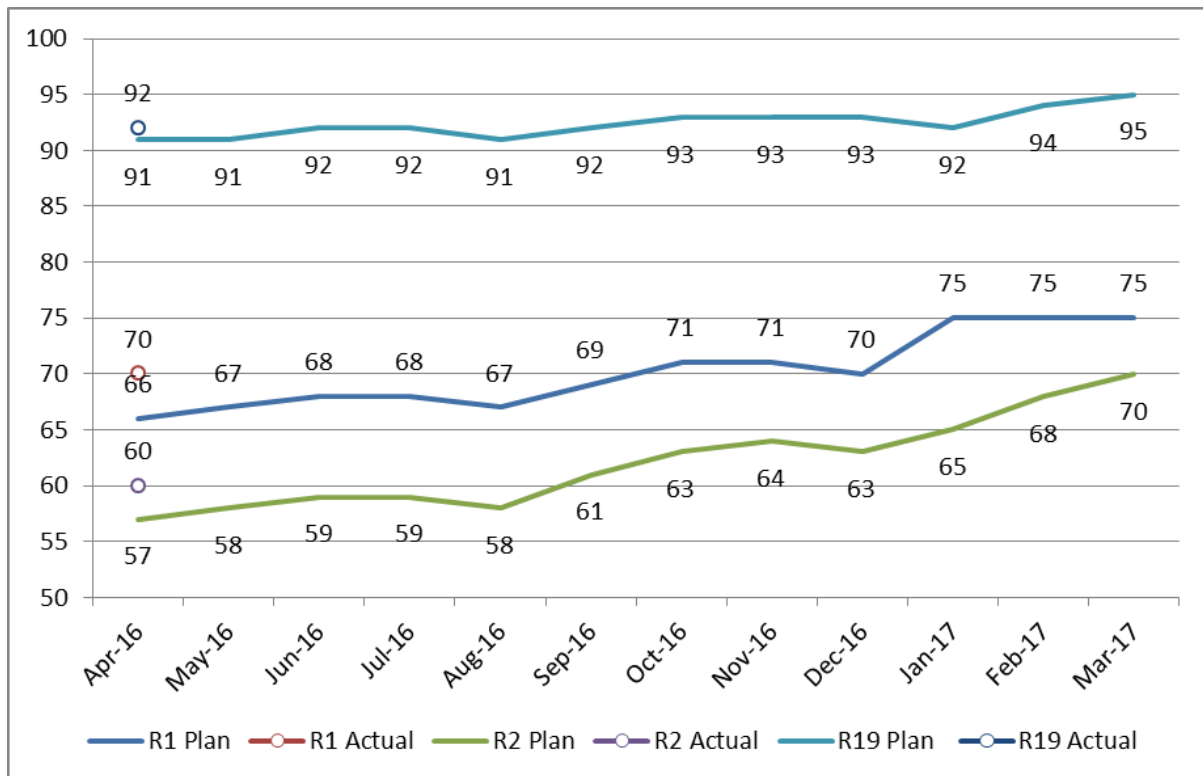


Figure 1: 999 Performance Improvement Trajectory

To date, the following performance has been achieved against the trajectory:

SECamb performance	April 2016	May 2016	Jun 2016
Red 1 trajectory	66%	67%	68%
Red 1 actual	70%	66%	Not yet available
Red 2 trajectory	57%	58%	59%
Red 2 actual	60%	57%	Not yet available
Red 19 trajectory	91%	91%	92%
Red 19 actual	92%	91%	Not yet available

Table 1 – Performance achieved year to date against improvement trajectory

SECamb met the trajectory for all three targets in April 2016, and narrowly missed targets for Red 1 and Red 2 in May 2016.

Improving Our Performance

SECamb is finalising a Trust-wide Recovery Plan, focusing on operational performance, improvements in quality, governance and culture, and delivery of major projects. This plan will be agreed with our Commissioners by June 30th 2016.

The 999 elements of this Plan will drive achievement of the trajectory outlined above through a focus on key factors within our control including:

- 1) Provision of sufficient response capacity (unit hours) to meet expected activity. This will require accurate forecasting and planning, and maintenance of appropriate staff skill mix and vehicle provision mix in each local area. Alongside this, we will minimise loss of hours due to absences and sickness.
- 2) Effective demand management through appropriate clinical management of calls transferred to 999 from NHS 111. The Trust will improve the proportion of calls resolved through 'Hear & Treat' (for example, by improving our management of frequent callers), and maximising our available capacity to meet peak demand through effective planning and escalation processes.
- 3) Delivering response time improvement by improving 999 call answer performance, and the effectiveness with which resources are dispatched.
- 4) Maximising the use of available capacity, by identifying safe and appropriate ways to reduce job cycle time and working with the wider healthcare system to minimise loss of hours due to hospital handover delays.

Alongside this, the Trust will implement a range of projects to ensure continued improvement in clinical quality and patient experience.

External Factors Affecting Performance

SECAMB's performance is also affected by a range of external factors over which we have limited influence. The most important amongst these are explained below.

Where activity levels exceed those for which SECAMB has been commissioned and funded, the level of capacity available 'per incident' is reduced and overall response time reliability will be reduced. During April and May 2016, activity exceeded our commissioned plan by 2.5% and 5.6% respectively which will have reduced the level of performance it was possible to deliver.

Delays to patient handover at hospitals further reduce the capacity available to respond to new incidents. During 2015/16, SECAMB lost over 47,000 hours to hospital delays – an increase of over 60% on the level of hours lost in 2013/14.

Unfortunately, the general trend remains one of increasing losses of resource hours to handover delays, with 4600 and 4800 hours lost in April and May 2016 respectively. Alongside the impact on response performance, these delays present a significant risk to patient experience and safety whilst awaiting handover, and the safety of patients in the wider community who will receive a slower response to their emergency needs.

Role for Wellbeing & Scrutiny Boards

Board members are asked to:

- Recognise the severity and impact of this issue, and ensure it remains a high priority for the healthcare economy
- Invite regular updates from local Systems Resilience Groups / Urgent & Emergency Care Networks as to progress in driving improvement
- Provide constructive challenge and scrutiny to the healthcare system to ensure risk is appropriately managed

SECAMB CQC Inspection

SECAMB was inspected by the CQC during the week commencing 3rd May 2016. We have received initial feedback via letter and expect the full report in due course. The initial feedback letter has been published on the Trust's website, and via the public Trust board meeting on 23rd June.

The inspectors gave positive feedback in a range of areas, including the quality of caring amongst our staff, with high levels compassion and awareness of patient need being demonstrated. Several of the Trust's innovations such as the IBIS system, and the roles of our Critical Care Paramedics and Community Paramedics were praised. However, the Trust received challenging feedback in a number of areas, including:

- The management of risks, incidents and complaints and how we learn from these
- Lack of clarity and accountability in some senior management roles
- Safeguarding training and responsibilities
- Infection control issues relating to hand hygiene and waste disposal
- Staff not feeling cared for, alongside issues of bullying and harassment
- Business continuity planning at Dorking Patient Transport Service locations
- Security and access issues at Lewes Emergency Operations Centre (EOC)
- Issues with the Trust's Computer Aided Dispatch System (CAD)

The Trust has taken immediate action to address the practical concerns, including:

- Resolving the access and security issues at Lewes EOC
- Communicated with staff about their responsibilities for infection control, and planned a training needs analysis to identify any further improvement needs. Key skills training is underway for patient facing staff to reinforce infection control practices

- Commenced an action plan to improve business continuity in the Patient Transport Service
- Resolved several immediate CAD issues, and ensured a program of planned maintenance and upgrades is in place to address the concerns that have been raised

Alongside this, the Trust is implementing a longer term program to improve governance and culture. This program will focus on areas including:

- Review of executive portfolios to ensure clarity of roles and responsibilities
- Redesign of committee structures and revised terms of reference to ensure clarity and coherence of decisions and management of issues
- Establishing a new Risk Practice Meeting and revised Risk Management Strategy
- Renewed focus on incident reporting and process improvement to provide assurance of resolution of issues, and implementation of lessons learned
- Improving quality and speed of response to complaints to address the current backlog
- Ensuring the basic structures and processes are in place to ensure staff are well looked after, such as guaranteed regular appraisals, and personal development plans.
- Commissioning external support for a full review of how the Trust works together, with specific training and support to address bullying and harassment issues
- Implementing a leadership development program and talent management framework

Whilst the Trust pursues these improvements, we will maintain our focus on our key goals of:

- Improving operational performance in 999, 111 and PTS
- Improving patient safety and performance against national Clinical Quality Indicators

Patient Impact Review Following Red 3/Green 5 Pilot

The Trust was previously expecting to receive the final Patient Impact Review in June 2016. The Review is externally-led and was one of the actions required by NHS Improvement (formerly Monitor) as part of their regulatory action against the Trust.

The Review is largely complete, however, for various reasons, the completion of the Review is likely to be slightly delayed.

Review into transition of Sussex PTS contract

An external review into the transition and mobilisation of the Sussex PTS contract by the new provider has been commissioned by the High Weald Lewes Havens CCG.

SECamb have participated fully in this review and have provided a full timeline of events, with associated evidence. We understand that the findings of the review will be made public in June 2016.

Following the on-going difficulties with VM Langfords, one of the two main transport providers, we are continuing to monitor the impact that this is having on our 999 services and the wider patient community.