

**HEALTH AND ADULT SOCIAL CARE  
OVERVIEW AND SCRUTINY COMMITTEE  
18 JANUARY 2018**

**SOUTH EAST COAST AMBULANCE SERVICE UPDATE**

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**Summary**

This report updates the committee on progress being made by South East Coast Ambulance Service to improve its CQC rating through its Delivery Plan in line with CQC expectations, as well as the organisational developments that have taken place since the Committee was last updated.

**1. Budget and Policy Framework**

- 1.1 Under the Local Authority (Public Health, Health and wellbeing Boards and Health Scrutiny) Regulations 2013 the Council may review and scrutinise any matter relating to the planning, provision and operation of the health service in Medway.
- 1.2 The terms of reference for the Health and Adult Social Care Overview and Scrutiny Committee (Chapter 4 Part 5 paragraph 21.2 (c) of the Constitution) includes powers to review and scrutinise matters relating to the health service in the area, including NHS Scrutiny.

**2. Background**

- 2.1 On 29 September, the CQC published their findings following their inspection of the South East Coast Ambulance Service (SECAmb) which saw an overall rating of 'inadequate' for the 999 service and 'good' for the 111 service.
- 2.2 Following this rating, SECAmb implemented a delivery plan with a clear focus on the key areas for improvement as indicated by the CQC.
- 2.3 SECAmb has also continued to recruit to its Executive Team and has recently made several appointments:
  - 2.3.1 Steve Emerton has been appointed to the role of Executive Director of Strategy and Business Development with a start date of 2 January 2018.

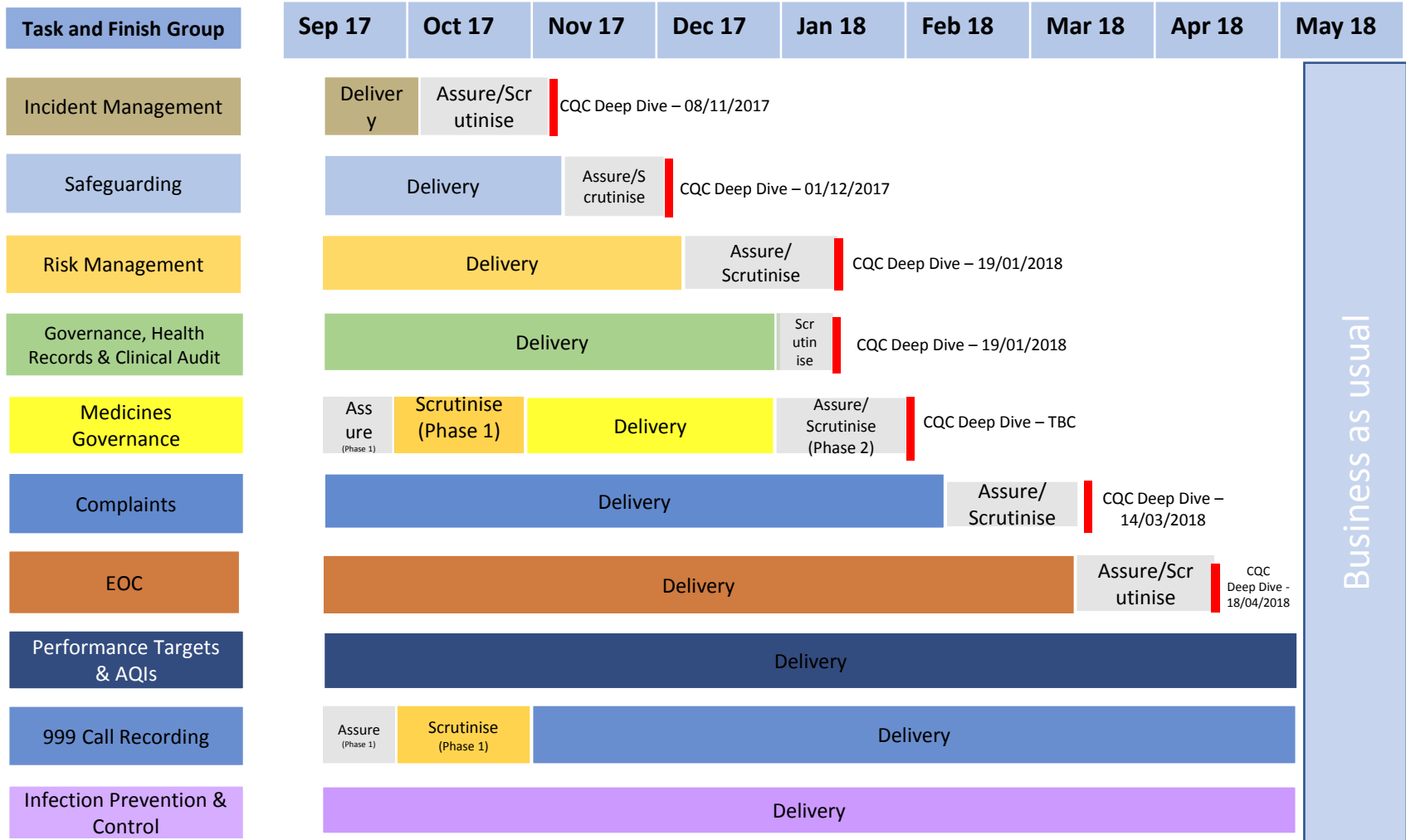
- 2.3.2 Ed Griffin has been appointed to the role of Executive Director of HR and Organisational Development and will be joining the Trust in April 2018.
- 2.3.3 Steve Lennox will continue in the role of Chief Nurse & Director of Quality and Safety while the next round of interviews are arranged.
- 2.4 The 22 November saw the launch of the Ambulance Response Programme (ARP), with SECamb being the last Ambulance Trust to go live following extensive trials.
- 2.5 This is a change in how Ambulance Services in England report performance against targets and replaces the previous R1, R2, and green targets with 4 new categories.

### **3. CQC Update**

- 3.1 As reported to the Committee on 17 October 2017, SECamb continues to make improvements against the key areas of concern raised by the CQC during their visit in May 2017 and published in their report of 29 September 2017. Since the publication of the original report and following subsequent unannounced visits, the CQC has formally recognised the improvements that have been made in two key areas; medicines management and 999 call recording. These findings have led to the conditions that were placed being lifted.
- 3.2 SECamb continues to align practice between our NHS111 service and the 999 Emergency Operations Centre (EOC), learning from the good practice already established in NHS111.
- 3.3 The Project Management Office (PMO) continues to play a key part in ensuring that the key CQC concerns are being addressed through 11 task and finish groups and that agreed timelines are being met along with the appropriate scrutiny for each individual task (Table 1).
- 3.4 Feedback to date from the regulators has been broadly positive on the progress that the Trust has made, with specific notices of concern being removed in October 2017 for 999 call recording and medicines management.

Table 1

# CQC Task and Finish Groups



**NOTE:**

After the scrutiny phase, the project will move into Sustainability (BAU), with quarterly station visits. Aim is to do every station every quarter. Results feed into Area Governance Meetings and Executive Committee.  
 If assurance is not provided, project will go back to delivery stage.

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## **4. Bullying and Harassment**

- 4.1 When SECamb commissioned Professor Duncan Lewes to research the culture at SECamb, his subsequent report (presented at the October HASC) confirmed the concerns that the Trust already had regarding along with those identified in the CQC report of 29 September 2017.
- 4.2 In response to the concerns raised SECamb has embarked on a programme of staff engagement along with a drive to stamp out any bullying, harassment or discrimination and promote a culture of; trust, openness, and positive engagement.
- 4.3 The approach that SECamb has taken to address the cultural change required:
  - 4.3.1 During the Autumn, a number of focus groups were held across all areas of the Trust, giving staff the opportunity to discuss their concerns with the issues and behaviours identified in the report and also giving staff the opportunity to support the development of solutions.
  - 4.3.2 Building on this work a series of 'Cultural Change Conversation' sessions have been organised during December 2017 and January 2018, where staff can come and hear about the all the work that is being done to create an environment of; trust, openness and positive engagement, as well as giving staff an opportunity to have their say about 'signature' behaviours that as a Trust we need to deliver on.
  - 4.3.3 On 6 December 2017, SECamb launched its 'Community Facebook Group', which is a closed group for staff and volunteers only. Within the first 2 days, 700 had signed up to use this medium to instantly share their experiences and also for instant feedback on certain key topics that the Trust wants to socialise with its staff and volunteers.
  - 4.3.4 There has been clear and consistent messaging from the Chief Executive and the Trust Board on a 'Zero' tolerance towards any bullying and harassment towards any member of staff.
  - 4.3.5 4 December 2017, saw the start of the Wellbeing Hub team. They will be working hard to have the Wellbeing Hub established on 2 January 2018. The Hub will provide staff with a place to go, in confidence, to receive advice and support not only through internal system support but also by signposting to appropriate local services. This is just the beginning for the Hub, with future events already planned for the New Year to ensure that staff at SECamb are being supported not only at work but personally as well.
  - 4.3.6 The Trust has implemented a new approach to learning from 'incidents', to reduce the previous 'blame culture'.

## **5. Computer Aided Dispatch system (CAD) update**

- 5.1 Following the successful installation of the replacement CAD in July of this year, when SECamb invested in a new computer system to support the dispatching of Ambulances, one of the early key features is the 'auto-dispatching' function, which will see the average time for the nearest

appropriate resource to be automatically dispatched by the computer instead of being manually dispatched by the 'Dispatcher'. The dispatcher will continue to play a vital role in monitoring which resource the CAD is allocating to emergency calls.

- 5.2 The investment in the 'Cleric' CAD gives the Trust a solid technological base to build on for future years.

## **6. Ambulance Response Programme (ARP)**

- 6.1 On 22 November, SECAmb went live with the Ambulance Response Programme.
- 6.2 The ARP is a nationally driven initiative aimed at improving the way the ambulance service responds to the most critically ill patients and will see a change in the way 999 calls are triaged (where a patient's condition and treatment needed are determined).
- 6.3 Its introduction by NHSE follows trials with a number of ambulance services and extensive research by the University of Sheffield, where over 14 million ambulance calls were monitored during the trials with no patient safety incidents recorded.
- 6.4 These key changes focus on making sure that patients dialling 999, receive the most appropriate response and a move away from the previous performance standards, Red and Green categories to 4 new categories 1,2,3, and 4:
- Category one is for calls about people with life-threatening injuries and illnesses. These will be responded to in an average time of seven minutes
  - Category two is for emergency calls. These will be responded to in an average time of 18 minutes
  - Category three is for urgent calls. In some instances, patients may be treated by ambulance staff in their own home. These types of calls will be responded to at least nine out of 10 times within 120 minutes
  - Category four is for less urgent calls. In some instances, patients may be given advice over the telephone or referred to another service such as a GP or pharmacist. These less urgent calls will be responded to at least 9 out of 10 times within 180 minutes

## **7. Medway Performance**

- 7.1 Performance for Medway has generally been above the average for the SECAmb area (Surrey, Sussex, and Kent & Medway).
- 7.2 Following the introduction of ARP, SECAmb's performance in Medway has seen the achievement of both C1 & C2 999 calls. Table 2 and 3.

**Table 2**

01 Nov - 22 Nov 2017 @2017-12-04	CCG	Red1 <8min perf	Red2 <8min perf	R <19min Perf
NHS Ashford CCG	Kent	44.8%	50.2%	83.2%
NHS Canterbury and Coastal CCG	Kent	58.3%	37.6%	81.5%
NHS Dartford, Gravesham and Swanley CCG	Kent	59.3%	46.2%	89.4%
NHS Medway CCG	Kent	73.3%	58.8%	94.7%
NHS Swale CCG	Kent	75.0%	35.4%	80.2%
NHS Thanet CCG	Kent	85.7%	70.0%	94.8%
NHS West Kent CCG	Kent	53.5%	40.1%	83.4%

**Table 3**

22nd Nov 17 @ 27/11/17	CCG	Cat 1 Mean Response Time <7 min mean perf	Cat 2 Mean Response Time <18 min mean perf
NHS Ashford CCG	Kent	00:11:36	00:14:55
NHS Canterbury and Coastal CCG	Kent	00:08:55	00:15:47
NHS Dartford, Gravesham and Swanley CCG	Kent	00:08:05	00:16:10
NHS Medway CCG	Kent	00:06:47	00:14:04
NHS South Kent Coast CCG	Kent	00:12:02	00:19:03
NHS Surrey Downs CCG	Surrey	00:09:20	00:18:22
NHS Swale CCG	Kent	00:08:04	00:23:36
NHS Thanet CCG	Kent	00:07:10	00:11:56
NHS West Kent CCG	Kent	00:09:48	00:18:53

**8. Finances**

- 8.1 At Month 8, SECamb is on track to deliver its Cost Improvement Programme of £15.1m, through the achievement of efficiencies in Operations and wider Trust efficiencies.
- 8.2 The Trust is also on track to deliver the target deficit of £1m.
- 8.3 Whilst the Trust remains in a financially challenging position, the work being done internally is ensuring that key targets are being met.

**9. Sustainability and Transformation Plan (STP) – Kent & Medway**

- 9.1 SECamb has been actively involved in the continuing development of the STP across Kent and Medway and all the key elements that this work encompasses.

- 9.2 The hospital care work stream has been actively working on the Stroke services reconfiguration through the creation of Hyper Acute Stroke Units (HASU) across K&M. Currently K&M does not have a HASU.
- 9.3 Whilst there will be a reduction in the number of locations that patients who have been identified as having a stroke, the result of K&M having a number of HASU's, will ensure that patients receive the specialist treatment
- 9.4 SECAMB has been fully engaged with this work and has supplied travel time and response location data to this work stream, as well as clinical input, which has supported the STP in its decision making.
- 9.5 It has been clearly identified from the modelling that there is an impact on SECAMB where an increase in travel time to the specialist units, HASU, will cause a deficit in SECAMB's resourcing, however this has been identified along with the building and modifications required at the Acute sites identified as potential HASU's in the Pre Consultation Business Case.

## **10. Risk management**

- 10.1 There are no specific risk implications for Medway Council arising directly from this report.

## **11. Legal and Financial Implications**

- 11.1 There are no specific financial or legal implications for Medway Council arising directly from the report.

## **12. Recommendations**

- 12.1. The Committee is asked to note and comment on the update provided.

### **Lead officer contact**

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### **Appendices**

None.

### **Background papers**

None.