



Title: G4S Performance Summary

Date: 4th January 2018

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Executive summary

The Non-Emergency Patient Transport Service (NEPTS) is provided by G4S.

This report gives an overview of contract performance relating to Non-Emergency Patient Transport Service (NEPTS) contracts as provided by G4S on behalf on West Kent CCG as lead commissioner.

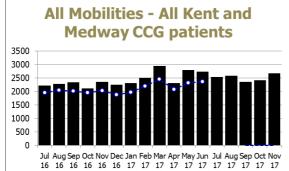
- Contract Lot 1 (Kent and Medway patient journeys excluding transports to Dartford and Gravesham hospital trust site and renal transports)
- Contract Lot 2 (Renal dialysis patient journeys only)

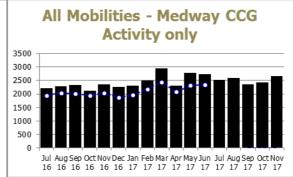
In addition, the report will also detail performance relating to Medway CCG locality.

Lot 1 Contract Performance Review

Activity

The graph below provides snapshot of activity volumes by plan and by actual activity for all non urgent patient transport journeys provided by G4S (excluding transports to Dartford and Gravesham hospital site and renal transports) for both all Kent and Medway CCGs and for specifically Medway CCG to the end of November 17. Activity overall has increased from February 2017 following the mobilisation of further journeys to and from Kings and Guys and St Thomas' sites (estimated at around 32,000 journeys for Kent and Medway patients).





Activity post February mobilisation for Lot 1 is now closer to expected levels than it was in the first few months of the contract and for Medway CCG patients has been consistently above planned levels ranging from 10-20% over-performance each month.

The type of activity and acuity level of patients is different to that included in the original plan, which was based on the data that was available prior to the tender. This means that the vehicle and personnel resources available are not always sufficient to meet the level demand. The mix of the mobility of transport requested for Medway CCG can be seen in Appendix A. Additionally the journey mileage has also seen an increase from the commissioned levels.

Due to the increased pressure from the variance from plan, G4S have found it challenging to improve performance to meet their contractual KPIs. Commissioners and CSU colleagues have met with G4S to discuss the additional resource needed in order to deliver the contractual KPIs with the new activity demands and discussions remain ongoing. Due to this there has been some discussion about the KPI regime and tailoring this to ensure that patient experience and safety can be at an acceptable and reasonable level. This work is expected to be concluded in late January 2018.

KPI Performance

KPI performance has been below expected levels since the mobilization of the contract and commissioners and G4S have had an agreed rectification plan with trajectories in place for some time. Due to the challenges in levels and mix of activity it is understood that full achievement is not achievable with the current level of resource. There are also challenges around the volume of on the day discharge bookings and G4S are working with local providers to try and improve this process where possible.

Shown below is a table of performance data for the key performance KPIs provided by G4S specifically focusing on Medway hospital which demonstrates some of the areas of pressure.

| KPI | Jan-17 | Feb-17 | Mar-17 | Apr-17 | May-17 | Jun-17 | Jul-17 | Aug-17 | Sep-17 | Oct-17 | Nov-17 | Dec-17 |
|---|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|--------|
| 1a - Journey booked in advance (Outpatient arrival) | 65% | 76% | 71% | 74% | 72% | 74% | 75% | 77% | 76% | 74% | 72% | 74% |
| 1g - Outpatient return journey. All bookings | 64% | 74% | 72% | 70% | 67% | 75% | 73% | 74% | 71% | 76% | 72% | 71% |
| 2b – Journey booked on the day discharge | 61% | 69% | 68% | 65% | 65% | 61% | 56% | 58% | 59% | 63% | 59% | 63% |
| 3b – Journeys booked on the day transfer of care | 67% | 685 | 77% | 60% | 80% | 50% | 66% | 54% | 45% | 47% | 63% | 66\$ |

Below is a table that shows the number of patients aborted each month, this has been broken down by mobility. As you can see from the table below this has increased over the year and remains over 200. Aborted journeys are a waste of time to both G4S and NHS.

| Month | Walker | ST1 | ST2 | WC1 | WC2 | SR2 | IT | STRB ARI | Total |
|-------|--------|-----|-----|-----|-----|-----|----|-------------|-------|
| Feb | 19 | 43 | 28 | 14 | 8 | 18 | 2 | 0 | 132 |
| March | 16 | 50 | 54 | 18 | 8 | 36 | 0 | 0 | 182 |

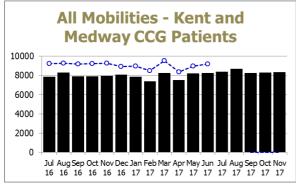


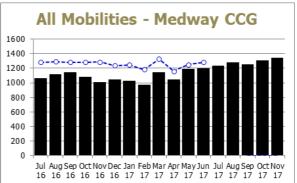
| April | 11 | 41 | 44 | 11 | 5 | 24 | 0 | 0 | 136 |
|-------|-----|-----|-----|-----|-----|-----|---|---|------|
| May | 17 | 40 | 46 | 19 | 9 | 26 | 0 | 0 | 157 |
| June | 32 | 54 | 60 | 23 | 17 | 24 | 0 | 0 | 210 |
| July | 32 | 59 | 58 | 20 | 6 | 27 | 0 | 0 | 202 |
| Aug | 22 | 44 | 46 | 15 | 7 | 24 | 0 | 0 | 158 |
| Sept | 22 | 48 | 59 | 19 | 6 | 22 | 0 | 0 | 176 |
| Oct | 34 | 32 | 39 | 16 | 15 | 22 | 1 | 0 | 159 |
| Nov | 33 | 62 | 47 | 16 | 11 | 37 | 0 | 1 | 207 |
| Dec | 29 | 47 | 71 | 25 | 10 | 21 | 1 | 1 | 205 |
| Total | 267 | 520 | 552 | 196 | 102 | 281 | 4 | 2 | 1924 |

Lot 2 - Renal Contract Performance Review

The graphs below show a snapshot of transport activity volumes by plan and actual activity for patients receiving renal dialysis.

In line with Lot 1, there has also been a material shift in the types of mobility for transport that is requested and so have not been able to meet their contractual KPIs. The breakdown of this can be seen in Appendix B for Medway CCG patients. Whilst they have an action plan in place, they have modelled the requirements for vehicles and staffing to enable full achievement of the KPI regime. As per Lot 1 commissioners are in discussion about the current set of KPIs and G4S have made some suggestions about changes which could support a greater level of performance.





KPI Performance

In line with Lot 1, KPI performance has been below expected levels since the mobilization of the contract and commissioners and G4S have had an agreed rectification plan with trajectories in place for some time. Due to the challenges in levels and mix of activity it is



understood that full achievement is not achievable with the current level of resource. There are also additional changes around the further development of twilight sessions that mean a change in working for G4S which presents additional challenge.

Shown below is a table of the last 2 months of performance data provided by G4S which demonstrates some of the areas of pressure.

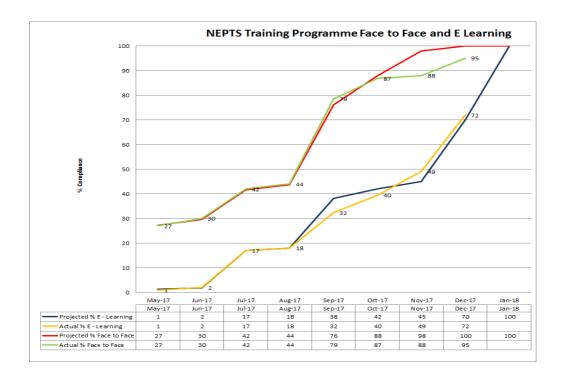
| | | Performanc | | |
|----------------------------|----------------------------------|-------------|--------|--------|
| | | e reporting | | |
| Reference and journey type | Required standard | threshold | Sep-17 | Oct-17 |
| | Patients to arrive on time and | | | |
| | no more than 15 minutes prior | | | |
| | to or later than their scheduled | | | |
| 1a - Arrival time | appointment | 95% | 84% | 88% |
| | Return journey patients to be | | | |
| | collected within 30 minutes of | | | |
| | the identified booked-ready | | | |
| 1b - Return Journey | time. | 95% | 84% | 83% |



Service Quality Review

Training

G4S had identified that training records for staff previously subject to TUPE were not complete as they had not been provided by the previous contractor. Therefore the decision was taken to retrain everyone to ensure consistency and provide assurance about both the level and delivery of training. This was shared with the CQC and training will be fully compliant against a trajectory provided by the end of January



Complaints

The challenges experienced by G4S in the delivery of the service resulted in an increase in critical feedback from both patients and stakeholders.

The total number of complaints received in September was 131 of 27,456 journeys (0.5%). Most complaints are regarding timeliness of journeys for outpatient appointments.

| Booking Type | Jul | Aug | Sep | Oct | Nov | Dec | Jan | Feb | Mar | Apr | May | Jun | Jul | Aug | Sep | Oct | Total |
|--------------|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-----|-------|
| Admission | | | | 1 | 1 | | 2 | 1 | 7 | | 1 | 2 | 1 | 1 | 2 | 2 | 21 |
| Discharge | 6 | 6 | 3 | 2 | 5 | 9 | 3 | 17 | 30 | 4 | 14 | 20 | 2 | 3 | 3 | 9 | 136 |
| N/A | | | | 3 | 2 | | 5 | 5 | 3 | 1 | 5 | 3 | 2 | 0 | 0 | 0 | 29 |
| Outpatient | 146 | 92 | 43 | 27 | 61 | 79 | 74 | 177 | 140 | 66 | 120 | 108 | 27 | 34 | 63 | 55 | 1312 |
| Transfer | 1 | 1 | 1 | | 1 | 3 | | 1 | 2 | 1 | 1 | 1 | 0 | 0 | 0 | 3 | 16 |
| Datix | 79 | 41 | 61 | 50 | 20 | 31 | 39 | 14 | 5 | 6 | | 12 | 73 | 74 | 72 | 62 | 639 |
| Grand Total | 232 | 140 | 108 | 83 | 90 | 122 | 123 | 215 | 187 | 78 | 141 | 146 | 105 | 112 | 140 | 131 | 2153 |

CQC Inspection



In October G4S was the subject of a full CQC inspection which had positive findings and is publically available. It comments on positive, caring staff and fleet procedures while recognising the work being undertaken to improve on training compliance



Conclusion

This report provides an updated position statement on the performance of the contracts with G4S for the provision of non-urgent patient transport. The report has been based on data available up to January 2017 and was reviewed between commissioners and G4S at the Contract Performance Meeting held on 8th December 2017.

Commissioners are actively working with G4S to ensure that the contract accurately reflects the level and type of activity required and that the operational structure of the service is robust. We anticipate that the exercise to rebase the contract will be complete by the end of January 18.

Further contractual levers may be applied once this exercise is complete.

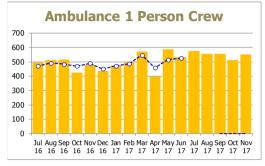


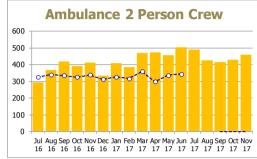


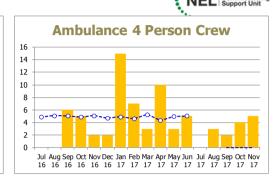


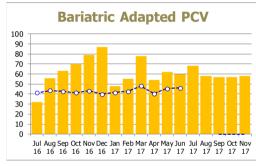
Commissioning Support Unit Appendix A - Lot 1 Activity Levels against Plan for Medway CCG patients with G4S

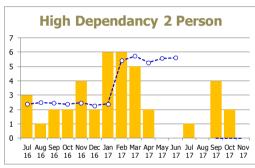
Lot 1 Activity v Mobility - Medway CCG

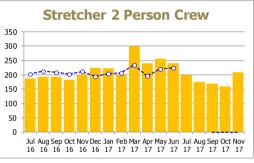


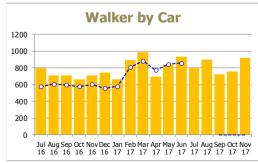


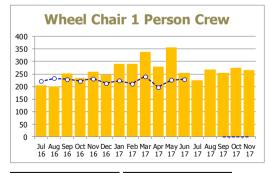


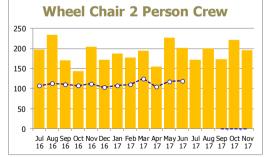












Appendix B - Lot 2 Activity Levels against Plan for Medway CCG patients with G4S

Lot 2 [Renal] Activity v Mobility - Medway CCG

