

**HEALTH AND ADULT SOCIAL CARE
OVERVIEW AND SCRUTINY COMMITTEE
18 JUNE 2019**

SOUTH EAST COAST AMBULANCE SERVICE UPDATE

Report from: Joe Garcia, Executive Director of Operations,
SECamb

Author: Ray Savage, Strategy & Partnerships Manager,
SECamb

Summary

This report updates the Committee on the progress being made by the South East Coast Ambulance Service (SECamb) to improve its CQC rating, Executive leadership development, the Demand and Capacity review and resulting Service Transformation and Delivery Programme, alongside other strategic performance updates and local performance for Medway.

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 SECamb during the past two years has undergone a significant period of transformation following the initial CQC visit of 2016, resulting in a number of key programmes of transformation and service delivery.

- 2.2 Following the CQC published report on the 29th September 2017, the result of which saw the Trust rated as 'inadequate' and to continue in special measures, SECamb has been on an improvement trajectory.
- 2.3 Following this rating, the Trust implemented a delivery plan with a clear focus on the key area for improvement as indicated by the CQC.
- 2.4 In 2018, SECamb and CCG's jointly commissioned a Demand and Capacity review carried out by Deloitte and ORH, the result of which has resulted the Service Transformation and Delivery (STaD) programme.

3. CQC Update

- 3.1 Following the CQC published report on the 29th September 2017, the result of which saw the Trust rated as 'inadequate' and to continue in special measures, SECamb has been on an improvement trajectory. Further unannounced visits from the CQC saw their formal recognition of the progress that the Trust was making', largely achieved through a comprehensive work of the Programme Management Office (PMO).
- 3.2 The Trust was inspected by the CQC in July and August 2018 and the subsequent report published on the 8th November 2018 (**Appendix A** shows key excerpts). The Trust's rating moved from 'inadequate' to 'requires improvement'. See **Appendix B**.
- 3.3 Whilst the Trust is rated as 'requires improvement', the CQC acknowledged a number of areas where the Trust has made significant progress and again rated the care given by staff to patients as good, with several other areas as outstanding.
- 3.4 Some of the key areas of feedback:
 - 3.4.1 Staff cared for patients with compassion. All the staff that inspectors spoke with were motivated to deliver the best care possible. Feedback from patients and those close to them was also positive.
 - 3.4.2 The Trust promoted a positive culture that supported and valued staff. Inspectors found an improved culture across the service since the last inspection. Most staff felt the culture had improved and were able to raise concerns to their managers.
 - 3.4.3 Medicines Management was robust and effective with a marked improvement since the previous inspection. Inspectors found elements of outstanding medicine management, for example, the way the Trust handled controlled drugs.
 - 3.4.4 An external review also recognised the impressive turnaround in performance.
 - 3.4.5 A new Well-Being Hub, which enables staff to access support in a variety of areas. This service was widely commended by staff during the inspection.

- 3.4.6 A significant improvement in the process for investigating complaints and the quality of the Trust's response since the previous inspection.
- 3.4.7 SECamb continues to align practice between its 111 service and the 999 Emergency Operations Centre, through learning from its good practice and combined management structure.
- 3.4.8 Following the publication of the report and its findings, the Trust has been working with its PMO on a delivery plan to continue the progress and improvements required. **Appendix A.** shows the Must Do and Should Do areas required.

4. NHS Staff Survey 2018

- 4.1 The results from last years (2018) NHS staff survey recently published, highlighted positive results for SECamb compared to previous years' surveys.
- 4.2 The results of individual questions, grouped into 10 key themes, represents the best ever scores for SECamb since they were introduced in 2014, and when compared to last year's scores, shows significant improvements in every area where comparison is possible.
- 4.3 The Trust had an improved response rate with 53% of staff completing the survey compared to a sector average of 49%.
- 4.4 Areas of improvement included in the 10 themes (**Appendix C**) were; safety culture, morale, and quality of care. Compared to 2017, more staff look forward to going to work and staff are more enthusiastic about their jobs. The number of staff who would recommend SECamb as a place to work has risen by nearly 20% in a year.

5. Executive Board Recruitment

- 5.1 SECamb has continued to recruit to the Executive and Non-Executive team.
 - 5.1.1 Following the recent departure of Ed Griffin, Paul Renshaw has been appointed as the interim Director of Human Resources and Organisational Development.
 - 5.1.2 Darren Mochrie, the Trust's Chief Executive, left SECamb at the beginning of April 2019, to take up the position of the Chief Executive of the North West Ambulance Service. Following the subsequent recruitment process, Philip Astle, currently the Chief Operating Officer at the South Central Ambulance Service, will be joining SECamb as its new Chief Executive in September 2019. Dr Fiona Moore, the Trust's Executive Medical Director is currently the Trust's acting Chief Executive.
 - 5.1.3 September 2018 saw the appointment of David Astley as the Substantive Chair of the Trust.

6. Demand and Capacity Review

- 6.1 During 2017- 2019, following the identification of a gap in funding, for SECamb to deliver its existing model and achieve all performance targets,

Commissioners and SECAMB jointly commissioned (with the Support of NHS England and NHS Improvement), Deloitte and ORH to undertake a review of existing and future operating models.

- 6.2 The approach from Deloitte and ORH was in the form of a 'Demand and Capacity' review to understand the relationship between resources, performance, and finances.
- 6.3 The focus of the review was on two operating models: 1) Paramedic Led Ambulance Model and 2) The Targeted Dispatch Model. Both identified a requirement to increase not only the number of front line staff, but also the fleet resource.
- 6.4 The conclusion of this review was to recommend the 'Targeted Dispatch Model', which focused on getting clinically appropriate resources to patients by using specialist paramedics in cars, paramedics on ambulances and the introduction of a lower acuity mode of ambulance to specifically support those patients that fall into category 3 (urgent calls) & 4 (less urgent calls) calls. Non-Emergency Transport (NET) vehicles have since been procured and were being rolled out across the Trust by March 2019.
- 6.5 The NET vehicles will support The Trust to improve the response to patients who are not in a serious or life-threatening condition. Primarily they will serve patients who have been assessed by a Health Care Professional, such as a Paramedic or GP and who require non-emergency urgent transport to a healthcare facility. However, all NET vehicles will be equipped with essential life-saving equipment and will be able to attend as a first response to life-threatening calls. The NETs will be crewed by Emergency Care Support Workers, Associate Ambulance Practitioners and Ambulance Technicians.
- 6.6 Another key element of the 'Targeted Dispatch Model' is that it builds on our work with the wider system to enable and facilitate alternatives to conveyance to an Emergency Department. That is, increase 'hear and treat' and 'see and treat' or refer into jointly developed and clear care pathways to deliver continued benefit to patients and the system.
- 6.7 Work on the delivery of this model is through the Service Transformation and Delivery (STAD) Programme implementation with staff recruitment and fleet procurement underway. A key part of the delivery is that Q1 2019/20 will see C1 (For calls to people with immediately life-threatening and time critical injuries and illnesses) performance achievement on a sustainable basis, and the introduction of the full model for all categories of performance, with sustainability fully achieved by Q4 2020/21.
- 6.8 The Emergency Operations Centres (EOC) will also see an increase in its staffing levels with an uplift from 308 full time equivalents (FTE) to 398 by Q4 2020-21. This uplift will ensure that call-answering times are at 95% of calls answered within 5 seconds.
- 6.9 An increase in the EOC's of Clinical supervisors will see an improvement of 'Hear and Treat' from the current 6% to 10% by early 2019-20.

7. Fleet

- 7.1 During 2018/19, as a part of the STaD programme, the Trust has invested in an additional 43 Mercedes Sprinter ambulances as well as 16 Fiat Ducato van conversions.
- 7.2 During the winter of 2018/19 the Trust invested in 30 new non-emergency transport (NET) vehicles (section 6, 6.4) which are in the process of becoming fully operational.
- 7.3 In addition to the current fleet enhancement programme, the Trust received approval to commission 92 replacement Mercedes Sprinter ambulances. The first of which were released to operations during May 2019.

8. Performance

- 8.1 The variance in performance across the Trust across the three counties (Kent, Surrey and Sussex) is minimal however, the Trust recognises that achieving C1, C2 (For emergency calls) C3 (urgent calls) and C4 (less urgent calls) performance measures continues to be challenging. **Appendix D.**
- 8.2 C1 performance for ambulances in England during April 2019 was 07:01 minutes (mean). Five ambulance trusts achieved performance within the 7-minute performance measure. SECamb achieved 07:20 minutes and was positioned 7th. The Demand and Capacity review and STaD programme (section 6) is addressing this performance concern through the increase in resource (workforce and fleet) and implementation of the 'Targeted Dispatch Model' with an increase in the number of Clinical staff (Health Care Professionals) based in the Emergency Operations Centre, providing support to the Emergency Medical Advisors and clinical triage.
- 8.3 C2 performance for ambulance services in England was 21:13 minutes (mean) during April. Two ambulance services performed better than the 18-minute performance measure with SECamb achieving: 19:18 minutes and positioned 4th accordingly.
- 8.4 C3 and C4 performance (90th percentile) for SECamb has seen the trust continue to perform below the national average (England) of 2:25 hours and 3:06 hours respectively. SECamb achieved 3:37 hours for C3 and 4:30 hours for C4. April saw three trusts achieve the C3 2-hour measure and only one achieved the C4 3-hour measure.
- 8.5 C1 performance across Medway at 05:57 minutes remains strong with C2 performance just outside the 18:00 minute measure at 18:52 minutes, and both categories performing better than the SECamb and Kent and Medway averages. **Appendix E.**
- 8.6 C3 and C4 performance as indicated in section 6, 6.4, remains a challenge to the Trust and is the focus of a different approach with the aim to meeting these measures.

9. Alliances

- 9.1 On the 22nd November 2018, the Trust announced that it was working to form an alliance with the West Midlands and the South Western Ambulance Services that will see us working closely together to deliver efficiency savings to invest in front line services.
- 9.2 The alliance expects to deliver savings through initiatives such as the joint procurement of supplies, including equipment and fuel. In addition, we will work collaboratively to share best practice for the benefit of patients and staff, and will work on improving resilience between the organisations for planned events and major incidents.
- 9.3 The work will draw upon existing benchmarking and evidence from the National Audit Office investigation into ambulance services, and more recently, the report from Lord Carter into efficiency and productivity.
- 9.4 It is important to stress that there are no plans to merge services or re-structure existing operations, but the alliance will mean that the three Trusts can make every pound of taxpayers' money work as efficiently as possible.
- 9.5 This is very much the start of the process and further work will follow over coming months through our Board and governance framework. However, by forming this partnership, we will be able to bring together the knowledge and experience of the three Trusts to explore ways to reduce variation and develop new joint initiatives.

10. Finances

- 10.1 The Trust's income and expenditure performance for the year ended 31 March 2019 was a surplus of £2.4m which, included £4.4m Provider Sustainability Funding (PSF). The Trust had planned a surplus of £0.7m for the year, being the revised control total agreed with NHS Improvement (NHSI) during the year. This was an improvement on the original control deficit of £0.8m agreed with NHSI.
- 10.2 The significant improvement in the Trust's financial performance from the original plan was due to the additional non-recurrent PSF contribution of £1.0m based on delivering a £0.5m improvement in the original underlying performance and a further PSF distribution of £1.7m for achieving the agreed control totals target.
- 10.3 The Trust's underlying performance was a deficit of £2.0m, which is the position excluding PSF.

11. Risk management

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

12. Legal and Financial implications

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

13. Recommendations

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

Lead officer contact

Ray Savage, Strategy and Partnerships Manager, SECAMB

Appendices

Appendix A – CQC report summary findings, 8 November 2018

Appendix B – CQC rating transition from inadequate to requires improvement

Appendix C – The 10 key theme areas

Appendix D – National ARP AQI's April 2019

Appendix E – Kent and Medway Performance April 2019

Background Papers

None.