

NWAS Joint Strategic Partnership Board

Briefing 1st February 2018

Key Messages

Ambulance Response Programme Performance and Improvement

The February Strategic Partnership Board (SPB) set aside the majority of the meeting to focus on the Ambulance Response Programme performance against standards, and the actions to deliver the required improvements.

National ARP performance information was published in January. The comparison showed that NWAS are particularly challenged on C1 (life threatening) and C2 (emergency) performance, and C3 (urgent) and C4 (non-urgent), in relation to the other 10 Ambulance Trusts.

The report produced by NWAS and circulated to CCGs in January was discussed in detail and further assurance sought on their plans to improve on the current levels of performance for C1 and C2. NWAS updated on the improvements in January on C1 and C2 incidents and the national comparison on the latest week (commencing 22nd January). NWAS has seen the biggest improvement nationally on C1 and C2 incidents mean and achieved the standard on the C1 90th centile. However, performance against the standard is still challenged,

NWAS has been formally asked to develop an ARP performance improvement plan (PIP), which is a joint plan between NWAS, NHSE, NHSI and commissioners. Principles governing the performance improvement process have been agreed between the parties to the joint plan. The plan is to be finalised for sign off by SPB / NHSE and NHSI by the on 16th February, and the actions being taken to deliver further improvements was discussed.

Blackpool CCG and NHSI are meeting with NWAS to agree the plan before sign off and there in on a weekly basis to ensure the plan is robust and sustainable; thereafter the weekly performance meetings will focus on monitoring delivery and impact of the PIP.

NWAS has a high ratio of Rapid Response Vehicles (RRV) to ambulances; under ARP this ratio needs to move to more double crewed ambulances and this has been evidenced by higher under-utilisation of RRVs under ARP. NWAS outlined plans to increase the fleet, necessary to deliver the improvements in C2. Ambulance handover delays in the North West were reported as being the highest number of ambulance resources lost in handover at hospitals in the country. Achieving the 95% call pickup standard is a key component to delivering C1 performance and this was improved in January with no calls being diverted to other providers post 8th January and HCP call answering much improved.

Transformation

NWAS are working towards a 2021 position where they will convey fewer patients to A & E.; to do this NWAS needs to increase the number of patients managed on the phone or at scene. There is a necessity to move at pace as the contract plan for 2018/19 assumes a level of channel shift and reduction in conveyances.

NWAS outlined their must dos as:

- Increase hear and see and treat to meet National IUC specification requirements
- Medical support at the point of contact –increasing the number of clinicians in call centre
- Convert see and convey to see and treat
- Optimise the use of GP/AVS schemes
- Move to a common 111/999 platform
- Refine work streams within the transformation programme to align with the change priorities of clinicalisation of the EOC and clinical hub
- Pathfinder/MTS/Astra clinical pathway development
- Develop paramedic/urgent care practitioner rotational working for see and treat
- Integrate urgent care and expand clinical assessment services

NHS 111 Performance

NWAS updated on the NHS 111 performance challenges in December and January. January activity was 8% above plan and the service achieved 72% against the calls answered in 60 seconds KPI in January. NHS 111 performance has not improved from the festive period and there remains higher than normal calls on some days.

Weekly briefings on NHS 111 are being provided by NWAS, which Blackpool CCG sends to the county leads.

SPB recognised the need to ensure focus on NHS 111 is not lost and separate weekly progress meetings to the ARP improvement meeting. Separate meetings are now in place to focus on improving NHS 111 performance with a clear plan for improvement to be agreed with commissioners and reported back to SPB and CCGs,

SPB agreed that an external peer review would be beneficial and should be undertaken with NHSE North support. This will be actioned as part of the action plan improvement of NHS 111 service delivery.

There will be a focus on NHS 111 at the next SPB.

West Midlands Ambulance Service Patient Transport Service performance in West Cheshire (December 2017)

Enhanced Priority Service (Renal patients)

On Time Arrival – **76.8%** up to 45 minutes early and not late (Target – 90%)

Timeliness Departure – **93.5%** collected within 60 minutes (Target – 85%)

Travel Time – **93.5%** on vehicle for less than 60 minutes (Target – 85%)

Planned

On Time Arrival – **69.5%** up to 60 minutes early and not late (Target – 90%)

Timeliness Departure – **84%** collected within 60 minutes (Target – 80%)

Travel Time – **88.6%** on vehicle for less than 60 minutes (Target – 80%)

Unplanned

On Time Arrival – N/A (no KPI in relation to time of arrival)

Timeliness Departure – **76.09%** collected within 60 minutes (Target – 80%)

Travel Time – **85.3%** on vehicle for less than 60 minutes (Target – 80%)