



GIG
CYMRU
NHS
WALES

Pwyllgor Gwasanaethau
Ambiwlans Brys
Emergency Ambulance
Services Committee

Reporting Committee	Emergency Ambulance Services Committee
Chaired by	Chris Turner
Lead Executive Directors	Health Board Chief Executives
Author and contact details.	Gwenan.roberts@wales.nhs.uk
Date of last meeting	8 September 2020

Summary of key matters including achievements and progress considered by the Committee and any related decisions made.

An electronic link to the papers considered by the EAS Joint Committee is provided via the following link: <http://www.wales.nhs.uk/easc/september2020>

Chris Turner (Chair), welcomed Members to the virtual meeting (using the Microsoft Teams platform) of the Emergency Ambulance Services Committee.

CHIEF AMBULANCE SERVICES COMMISSIONER'S REPORT

Stephen Harrhy presented an update on the following areas:

- **Ministerial Ambulance Availability Taskforce**

Members noted that arrangements were continuing to start the work related to the Taskforce. The proposed framework was being developed including the key output products identified. Stephen Harrhy agreed to share the draft work and asked for comments to shape the work as it develops. The aim was to use existing mechanisms where possible and an interim report was planned to be developed by the end of November.

- **Refreshing the Emergency Medical Services (EMS) Framework**

Members were aware of the plans to refresh the EMS Framework and it was suggested that this take place by April 2021. Detailed discussions would take place at the EASC Management Group and a report would be developed for the next EAS Committee meeting. The aim of the refresh would be to ensure that the Framework was streamlined and more reflective of the current position for EMS services.

- **Quality and Delivery (Q&D) Meeting with the Welsh Government (WG)**

Members noted a recent Q&D meeting had taken place and the areas discussed where the biggest concern, and the majority of the meeting's focus, was on the current performance.

- **EASC allocation letters for Major Trauma Services and Critical Care Transfer Services**

Members noted that the allocation letters had been received by the CASC and were pleased to note that they were in line with the expectations of the financial plan within the Integrated Medium Term Plan (IMTP).

• **Progress on the Emergency Medical Services Demand and Capacity Implementation Plan**

Members were aware of the agreement at EASC to fund up to 90wte additional staff within the plan. The WAST team had previously discussed that a further 46wte staff could be recruited and trained within the financial year.

Members noted that a discussion had taken place at the EASC Management Group regarding the recruitment of the additional front line staff which had been supported, although the source of the funding was unclear. Stephen Harrhy suggested that this additional cost of £1.4m could be included as part of the process to bid for resources under the winter protection fund to ensure maximising front line staff. This suggestion was supported by Members.

The Chair thanked Stephen Harrhy for his report and Members discussed the following matters:

- Concerns were raised regarding the capacity of the system to meet all of the ongoing plans during the potential resurgence of the pandemic. In terms of the revision of the EMS Framework, Members felt that clinical outcomes would be important but there may be a wider requirement to filter the work of the Committee to business critical areas only.
- Members noted that the review of the IMTP would provide an opportunity to redefine the key areas of work and this would be discussed at the EASC Management Group and would be reported to the next EAS Committee meeting.
- Members noted the opportunity to align with the work already underway on seasonal planning and the potential opportunity to be more coordinated with the option of needing to work outside of the formal Committee arrangements if required.
- Members noted that good collective progress had been made on the arrangements to open the Grange University Hospital and a helpful recent meeting had taken place which had resolved some key outstanding issues.

The Chair summarised the discussion and Members **RESOLVED** to:

- **NOTE** the Chief Ambulance Services Commissioner's report
- **NOTE** the need to identify a set of specific priorities
- **NOTE** the aim to link to seasonal priorities
- **APPROVE** the intention to seek £1.4m from the winter protection funding for the additional staff within the EMS Demand and Capacity Implementation plan.

PROVIDER ISSUES

The update report from the Welsh Ambulance Services NHS Trust (WAST) was received and in presenting the report Jason Killens highlighted key areas which included:

- **Serious Adverse Incidents (SAIs)** – a marked reduction in numbers over the recent months although now monitored weekly by the WAST Directors, reported to a WAST sub-committee and onto the WAST Board. The Chair asked if it would be possible to compare the levels of SAIs with other comparable areas as it was difficult to set in context the data presented. Jason Killens agree to try and benchmark with other areas and present the information in the next report.
- **Health and Safety Executive (HSE)** – two improvement notices had been received (sharps injury (disputed) and extended time spent in personal protective equipment).

A full response had been provided to the HSE and the policy position on personal protective equipment (PPE) had been updated. The importance of the turnaround of ambulances at emergency departments was discussed and that WAST staff wearing PPE were reliant on health board staff to comply with the guidance (added to the Action Log). Members noted that it was likely that the HSE would escalate this issue if further situations arose

Performance position

- RED position – for August was below 65%, however the number of calls responded to in 8 minutes was more than the previous August
- 999 handling and 999 calls – good performance
- Incidents – volumes increased from August 2019
- Production comparison August – more this year compared to previous years
- EMS Abstractions – increase due to annual leave as staff were encouraged to take leave before winter
- Overtime reductions – no incentivised overtime
- Covid 19 abstractions now at 3%
- More activity August 2020 compared with 2018 and 2019
- Emergency Ambulance Utilisation (3% tolerance)
- Staffing – focus is on additionality and recruitment

Forecast

- Production stronger in September – on or over 100% for emergency ambulances, more work required on rapid response vehicles
- Amber performance and patients experiencing long waiting times
- Anticipating further Covid19 surge
- Modelling forecast for September - 66%.

Members were concerned about the deterioration in performance; it was noted that Powys had not met the target over the last 5 or 6 months although ongoing discussions were taking place. The performance was worse during 2020 and it was suggested that this could be attributed to the switch away from the deployment of rapid response vehicles (RRVs); it was hoped that the recommencement of RRVs would improve the performance in Powys and other health board areas.

Members asked regarding the impact of 'consultant connect' in terms of managing conveyance and whether any learning could be shared across the system. Members noted that the numbers to date were small and that there was a large variation in the uptake.

The CASC responded to the content of the presentation and highlighted:

- Helpful to note that more front line staff available in August than previous year despite reduction in overtime and an increase in annual leave allocated; therefore, additional investment in demand and capacity plan is starting to become effective
- Support the rebalancing of emergency vehicles and RRV as this will have a positive impact on red performance; however, WAST need to keep in mind any potential negative impact on amber performance

- Keen to work with health board colleagues re handover delays and what do their plans look like – it was agreed that the CASC to contact everyone for their plans (added to the Action Log)
- Confirmed that a detailed analysis of the ambulance performance in August was being undertaken to supplement WAST improvement plan including variation in mobilisation times in South East Wales compared with other regions
- Opportunities for learning across Wales including Cardiff and Vale UHBs CAV 24/7.

The Chair asked regarding the information on current and forecasted future performance and suggested that it would be helpful to have a coordinated plan from WAST to tackle the issues identified. It was felt this overview list would also be helpful for the work of the Ministerial Ambulance Availability Taskforce to coordinate the actions to be taken.

Members agreed that the EASC Management Group receive and discuss the overview list (Added to the Action Log). Members also noted the importance of the impact of cultural issues in terms of the ownership and professional responsibilities in working together and this would be key during the winter months.

Other matters highlighted from the WAST provider report included:

- the recruitment of the additional staff for the front line which was at 119.28wte to date which subject to additional resources could be increased although the additional work by the finance teams would provide clarity.
- Where health board service changes had been planned, Jason Killens thanked colleagues for including the WAST Team as early as possible to support service changes across NHS Wales.

Members **RESOLVED** to:

- **NOTE** the provider report and the actions agreed.

FOCUS ON – NON EMERGENCY PATIENT TRANSPORT SERVICE (NEPTS)

The report and presentation on the Non-Emergency Patient Transport Service (NEPTS) was received. In presenting the report, James Rodaway and Mark Harris explained that the report had been received at the NEPTS Delivery Assurance Group and also at the EASC Management Group.

Members noted:

- NEPTS Headline statistics
- The Collaborative approach undertaken at the NEPTS Delivery Assurance Group – this work included the team at WAST but also health board teams with a focus on continuous improvement
- Commissioning and Quality Assurance undertaken – the Framework was in place and robust processes were in operation. Step 1 and 2 were considered key in ensuring the transport solution is as good as possible
- NEPTS Service Development
- Enhanced Service Provision – renal, oncology and end of life service; renal patients account for 30% of all NEPTS journeys which was steadily increasing and more work ongoing to develop oncology services. It was noted that the End of Life Care Service

had won a Health Service Journal Award and the team were warmly congratulated on this achievement

- Performance/ Service Delivery Improvements
- Governance and Planning – this included a more joined up approach and particularly the tiered staff structure in health boards to support the local commissioning
- NEPTS Demand and Capacity Review now underway
- The Impact and Learning from Covid19
- The NEPTS Delivery Assurance Group at the end of September would be discussing winter planning and discharge capacity matters and the impact of Covid19 on NEPTS activity.

Mark Harris provided detailed operational information regarding the different ways of working within the NEPT service during the pandemic which included support providers, people driving themselves to appointments, student paramedics and also the voluntary sector. The team were working to manage through the agreed script and were finding alternative ways of transporting patients.

The importance of the whole system approach to developing winter plans was discussed and particularly for this service. The longer term issues would also need to be considered including the resetting of plans for outpatients and other work.

The CASC emphasised the importance of the joined up approach and informed Members of the ongoing work with the procurement team to look at all spend on private providers as there may be an opportunity to realise savings and the further development of the NEPT service in line with the 'Once for Wales' ethos. Members were very supportive of the All Wales approach and the improvements being made within the NEPT service to date.

Members discussed the outstanding transfers to complete the 'Once for Wales' approach as agreed and asked about the timescales. Members noted that prior to the pandemic and lockdown all of the work required pre transfer had been completed for the ABUHB area. The aim was now to revisit the data and WAST had appointed a lead manager to oversee the work – ABUHB would be the next area to transfer. The Powys area had also provided data and would follow ABUHB before the end of the financial year.

The CASC explained that the detail would be developed and reported via the NEPTS DAG to the next Committee meeting. In terms of the timescales, it was expected that CTMUHB would transfer in the first half of 2021 and BCUHB by the end of the financial year 2021-22 (added to the Action Log).

The Chair, in summary, confirmed that effectively phase 1 had been achieved and further work was now required to transfer the other services as soon as possible. The WAST team were also congratulated by the Chair on their achievement of the Health Service Journal Award for their End of Life service.

Members **RESOLVED** to: **NOTE** the presentation and report.

Other reports received included:

- Outline Commissioning Intentions which included timescales
- Finance Report – no specific concerns to report
- Unscheduled Care Presentation
- EASC Integrated Medium Term Plan (IMTP) Revised Delivery Plan – to be developed
- Emergency Medical Retrieval And Transfer Service (EMRTS Cymru) Framework Agreement Final Draft
- EASC Risk Register

Key risks and issues/matters of concern and any mitigating actions

- Red performance
- Increasing handover delays
- Decreasing Amber performance
- Agreed timescales for roll out of transfer of work from health boards to WAST – ABUHB, followed by Powys this financial year; CTMUHB by the end of June in the new financial year and BCUHB by the end of the financial year

Matters requiring Board level consideration and/or approval

- None

Forward Work Programme

Considered and agreed by the Committee.

Committee minutes submitted	Yes	√	No	
Date of next meeting	10 November 2020			