



Surrey Health Scrutiny Board

7 January 2016

Paul Sutton, Chief Executive

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Item 8





Agenda

- ✚ Re-triage process
- ✚ Performance up-date & challenges:
 - ✚ 999
 - ✚ PTS
 - ✚ NHS 111
- ✚ Preparing for winter
- ✚ Performance reporting – defibrillators
- ✚ Key developments



Re-triage process

- ✦ Introduced during Winter 2014/15
- ✦ Background of significant system pressures & real risks to patient care
- ✦ Process saw clinicians taking up to an extra ten minutes to 're-triage' calls that had come across from 111 to 999 as requiring an emergency response, during a period when we simply did not have sufficient resources available to respond to the demand.
- ✦ It allowed the clinicians to spot immediately life-threatened patients (Red 1s) amongst these, who needed a very quick response, as well as those calls that could wait a little longer for a response.

Call ID	Date	Time	Diagnosis	Start	End	End
2325555	18/05/2014	00:00:38				
23313412	18/12/2014	19:16:59	Mental Health Issues	00:24:49.72	00:09:48	00:00:39
23267118	28/11/2014	13:54:42	Diabetic Probs	00:20:37.72	00:09:49	00:00:36
23249986	23/11/2014	02:53:52	Allergic Reaction	00:13:43.72	00:09:56	00:00:04
23249942	23/11/2014	02:53:47	Trauma	00:28:01.72	00:10:04	00:01:34
23309810	04/11/2014		NHS 111	00:55:33.72	00:10:08	00:00:40
23243753	20/12/2014	20:02:06	Stroke/Neurological	00:27:11.72	00:10:06	00:00:08
23259002	25/11/2014	15:46:37	Chest Pain/Cardiac Prob	00:20:17.72	00:10:08	00:02:16
23207066	06/11/2014	13:10:06	Diabetic Probs	00:14:37.72	00:10:17	00:00:08
23257824	28/11/2014	05:53:46	Stroke/Neur	00:29:09.72	00:53:28	
23213763	08/11/2014	00:37:92	Bleeding	23:30:44.59	22:32:12	
23310892	14/12/2014	22:47:31	NHS 111	23:29:44.44	10:12/2014	
23288437	28/11/2014	09:57:21	Chest Pain/Prob	19:02:10		
23241095	18/11/2014	18:29:14	Chest Pain/Prob	23:31:32.86	15/12/2014	
23234003	18/11/2014	20:35:30	Mental Health	23:27:47.61	02/12/2014	
23218376	10/12/2014	18:48:17	NHS 111	23:28:56.70	07/12/2014	
23228706	20/12/2014	19:21:17	Falls <12ft	23:25:33.59	24/11/2014	
23307682	13/12/2014	22:30:41	Falls <12ft	23:31:39.50	15/12/2014	
23290636	07/12/2014	20:46:56	Chest Pain/Prob	23:19:62.69	02/11/2014	
23286176	28/11/2014	12:58:28	Back Pain	23:28:7.662	07/12/2014	
3261	18/11/2014	02:44:00	Unconscious	23:26:89.25	30/11/2014	
23288100	07/12/2014	02:26:14	Mental Health	23:28:7.662	07/12/2014	
23193566	01/11/2014	03:59:26	Breathing/ENT Problems	23:28:20.62	06/12/2014	
23256942	28/11/2014	18:01:21	Generally Unwell	23:30:52.06	13/12/2014	
23291112	00/00/19	08/12/2014	Generally Unwell	23:30:98.41	14/12/2014	
23280065	27/11/2014	00:29:57	Alcohol Intoxication	23:21:90.25	11/11/2014	
23231000	18/11/2014	22:42:06	Bleeding	23:21:90.25	11/11/2014	

North East Coast Ambulance Service

NHS Foundation Trust



Call ID	Date	Time	Diagnosis	Start	End	End
23304459	12/12/2014	22:32:12	Assault	00:18:10.72	00:13:25	00:00:11
23298444	10/12/2014	19:02:10	Chest Pain/Cardiac Prob	00:16:50.72	00:13:26	00:01:13
23313286	15/12/2014	18:36:38	Breathing/ENT Problems	00:18:02.72	00:13:27	00:00:08
23274761	02/12/2014	08:20:57	Minor Ailment/Injury	00:20:58.72	00:13:45	00:01:40
23289670	07/12/2014	13:52:46	999 HCP	00:26:52.72	00:14:02	00:00:02
23253359	24/11/2014	11:05:25	Chest Pain/Cardiac Prob	00:19:19.72	00:14:13	00:00:26
23313950	15/12/2014	22:35:24	Falls <12ft	00:25:03.72	00:14:17	00:00:10
23196269	02/11/2014	01:32:22	Allergic Reaction	00:25:25.72	00:14:18	00:00:05
23268925	30/11/2014	02:43:18	NHS 111	00:26:22.72	00:14:21	00:00:04
23287862	00:46:21		Chest Pain/Cardiac Prob	00:17:23.72	00:14:22	00:00:32
23282062	06/12/2014	02:19:47	Abdominal/Flank Pain	00:20:13.72	00:14:26	00:01:11
23305206	13/12/2014	04:58:41	Unconscious/Faint	00:25:36.72	00:14:34	00:00:00
23309841	14/12/2014	15:42:36	NHS 111	00:19:59.72	00:14:49	00:02:29
23219025	11/11/2014	00:34:22	Generally Unwell	00:31:34.72	00:14:52	00:00:13
23289619	07/12/2014	13:33:33	Stroke/Neurological	00:23:45.72	00:15:03	00:02:07
23312760	18/12/2014	18:12:16	Maternity Issues	00:43:42.72	00:16:07	00:00:46
2332336	19/12/2014	04:19:43	Bleeding	00:47:20.72	00:16:10	00:00:05
23288501	06:54:28		Prob	00:21:36.72	00:16:21	00:00:15
23270722	30/11/2014	18:01:38	999 HCP	00:19:45.72	00:15:22	00:00:06
23210271	07/12/2014	18:22:27	Stroke/Neurological	00:19:33.72	00:15:38	00:00:43
23289611	07/12/2014	14:12:10	Chest Pain/Cardiac Prob	00:35:52.06	00:16:23	00:00:42
2331440	16/12/2014	03:18:21	Chest Pain/Cardiac Prob	00:38:12.72	00:16:33	00:05:20
2330790	14/12/2014	00:00:00				
2332612	19/12/2014	23:57:11				
23288104	02:29:41					
23238680	20/12/2014	19:09:59				
23288104	02:29:41					
23304539	12/12/2014	23:38:56	Stroke/Neurological	00:56:34.72	00:31:14	00:00:05
23213876	08/11/2014	01:40:12	Falls <12ft	01:05:32.72	00:31:32	00:00:12
23314356	16/12/2014	02:37:43	Breathing/ENT Problems	01:02:38.72	00:39:52	00:00:01



23288104	07/12/2014 02:29:41	Headache	00:21:08 72	00:16:55	00:00:06
23328680	20/12/2014 19:09:59	Minor Ailment/Injury	00:29:53 72	00:17:02	00:01:45
23244691	21/11/2014 08:17:51	Back Pain	00:44:35 72	00:17:21	00:00:04
23247713	22/11/2014 10:49:54	Back Pain	00:56:55 72	00:17:45	00:00:09
23273770	01/12/2014 21:21:08	Alcohol Intoxication/Related	00:31:01 72	00:17:56	00:00:09
23316446	16/12/2014 19:26:26	Breathing/ENT Problems	00:21:01 72	00:18:17	00:00:54
23198681	02/11/2014 23:42:02	Fitting	00:44:51 71	00:19:43	00:00:20
23313540	15/12/2014 19:57:54	Generally Unwell	00:23:06 72	00:19:54	00:00:14
23256115	24/11/2014 12:49:03	999 HCP	00:33:36 72	00:19:58	00:05:37
23224453	10/11/2014 19:14:44	Chest Pain/Cardiac Prob	00:39:51 72	00:21:33	00:00:17
23283072	07/12/2014 17:04:59	Headache	00:41:22 72	00:22:28	00:00:48
23323300	19/12/2014 03:08:17	999 HCP	00:34:11 72	00:22:38	00:01:59
23311187	15/12/2014 02:42:52	Unconscious/Faint	00:32:25 72	00:22:41	00:01:07
23254872	24/11/2014 21:58:57	Bleeding	00:32:21 72	00:22:52	00:02:56
23257322	25/11/2014 22:12:37	Back Pain	00:25:06 72	00:23:33	00:00:09
23313984	15/12/2014 22:50:28	Breathing/ENT Problems	00:34:08 72	00:24:19	00:00:46
23304539	12/12/2014 23:08:56	Stroke/Neurological	00:56:34 72	00:31:14	00:00:09
23213876	09/11/2014 01:40:12	Falls <12ft	01:05:32 72	00:31:32	00:00:12
23314355	16/12/2014 02:37:43	Breathing/ENT Problems	01:02:38 72	00:39:52	00:00:05

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Review process

- + Reviews undertaken to date have recognised that the pilot was undertaken to ensure that the right response was provided to patients
- + During the pilot period, 26,000 calls were transferred from the 111 service to 999
- + As part of the review:
 - + 899 incidents were reviewed
 - + 25 incidents were identified, that were linked to the Red 3 process in some way
 - + 7 Serious Incidents reported
- + No identifiable patient harm attributable to the pilot has been identified to date
- + But reviews have also revealed that the pilot was not well implemented and we did not use our own internal governance processes properly to manage it = serious findings.



Review process – contd./

- ✚ Action plan in place & reviewed with CCGs via contractual route
- ✚ Process with Monitor underway, includes:
 - ✚ **Forensic Review** - to be undertaken by Deloitte during November & December 2014, looking to establish the 'how, why, who & when' facts
 - ✚ **Patient Impact Review** - to be led by SECAMB Medical Director, Dr Rory McCrea and supported by Dr Andy Carson from WMAS. This has already commenced, with a likely timescale of four to six months, due to report in April 2016.
 - ✚ **Governance Review** – a wide-ranging review, covering all aspects of the Trust's governance arrangements. This will be shaped by the outcome of the Forensic Review and therefore will not start until the end of January/February 2016. It is likely to take circa three months to complete.



999 Performance

- ✚ Current performance – challenges around achieving Red 1, Red 2 and A19 targets
 - ✚ Red 1 75% in 8 mins – 73.5% at 30.11.15
 - ✚ Red 2 75% in 8 mins – 73.8% at 30.11.15
 - ✚ Red calls 95% in 19 mins – 94.9% at 30.11.15
- ✚ Performance remedial plan agreed with commissioners:
 - ✚ Focus on call answer time – aim to get to 95% within 5 seconds by year end
 - ✚ Focus on improving allocation of resources – forecasting, operational hubs, new management structure
 - ✚ Transition to Operating Units
- ✚ Key risks to patient care & service delivery:
 - ✚ Potential of fines – would require reduction in resource provision
 - ✚ Handover delays
 - ✚ Worse than last year, despite lower number of conveyances
 - ✚ Requires close scrutiny & audit



999 Performance by CCG level for Surrey- YTD

CCG	Red 1/Total no of calls	Red 2/Total no of calls	A 19
East Surrey	73.1% (234)	71.3% (4,734)	96.6%
Guildford & Waverley	66.1% (254)	70.4% (4,702)	95.6%
SE Hampshire & Farnham	70.1% (291)	71.9% (5,137)	98.0%
North West Surrey	74.3% (483)	74.5% (9,262)	98.6%
Surrey Downs	73.5% (370)	69.5% (6,926)	97.4%
Surrey Heath	76.1% (113)	74.7% (2,239)	98.3%



PTS Performance - Surrey

- ✚ Transfer of service in Surrey Downs to G4S on 1 October 2015
- ✚ Remainder of Surrey being delivered under contract extension using new model with SECAmb providing booking service = early indicators are good
- ✚ Procurement process for new contract has started, with deadline for submission of PQQ met in early December 2015
- ✚ Shortlist announced end of January 2016
- ✚ ITT stage will include more details around the new service specification and contracting format



NHS 111 Performance

- ✚ Current YTD performance – challenges around call answer times & abandonment rate, especially at weekends
- ✚ Performance reviewed through contractual process
- ✚ Key internal challenge – recruitment/retention of Health Advisors (call handlers)
- ✚ Failure of OOH services, especially at weekends = significant risk



Preparing for winter

- ✚ Detailed action plans developed for 999, PTS & 111
- ✚ Key focus period – 1 December to 12 January
- ✚ 999 :
 - ✚ Maximise availability of front-line resources – on the road & EOC:
 - ✚ Managers, Private Providers, CFRs & Co-responders (ESFRS)
 - ✚ Reduce leave & other abstractions
 - ✚ Offer enhanced overtime for 'hard to fill' shifts
 - ✚ Ensure availability of support services – fleet, logistics, operational hubs
 - ✚ Logistic preparations – winter tyres, 4x4s, back-up systems
 - ✚ Includes escalation options – regional & national



Preparing for winter – contd./

- + NHS 111:
 - + Maximise availability of Health Advisors (call-takers) & Clinical Advisors
 - + Identification of key ‘pinch points’
 - + Identification of ‘surge’ options e.g. front-end message
- + PTS plan:
 - + As above
 - + Complicated by contractual arrangements
- + Key risks (across all service areas):
 - + System issues:
 - + Availability/accessibility of other health & social care services
 - + System capacity – hospital handover/OOHs



Performance reporting - defibrillators

- ✚ We believe passionately in the widespread availability of Public Access Defibrillators (PADs) across our area
- ✚ 476 PADs currently in Surrey & 2,227 across our region as a whole
- ✚ Defibrillators & national performance reporting – the current position:
 - ✚ The Association of Ambulance Chief Executives (AACE), the representative body for all English ambulance services, provides guidance on interpretation of Ambulance Quality Indicators (AQIs) to ensure they are applied consistently and correctly by everyone in all ambulance trusts
 - ✚ We carefully consider how to define whether a defibrillator is available at an incident location and we have detailed rules governing this



Performance reporting - defibrillators

- ✚ For Red 1 patients, the 'clock stop' only counts if the defibrillator is actually by the patient's side.
- ✚ For Red 2 patients, the clock will only stop if there is someone able to collect the defibrillator and bring it to the patient and that the AED is accessible at the time of the call. Red 2 calls include incidents where there is a chance of cardiac arrest so there is a potential need for a defibrillator but it is not immediately required
- ✚ This process was used for approximately 5,000 calls in 2014/15 and should be seen in the context of the more than 850,000 total calls we received (which includes more than 200,000 Red 1 and Red 2 calls)
- ✚ We believe have been compliant with guidance - independent review currently underway to ensure
- ✚ Wider discussions underway, locally & nationally, on whether national reporting needs to change in this area



A key role in supporting & delivering system change

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- ✚ Key enabler = professionalisation of clinical workforce
 - ✚ Development of integrated Community Paramedic role
 - ✚ Chertsey Beacon Operational Unit
 - ✚ 111 contract extension for 18 months



A key role in supporting & delivering system change

- ✚ Working with local acute Trusts:
 - ✚ Joint action plan with East Surrey Hospital to address handover delays
 - ✚ Member of the '4-hour recovery working group' at ASPH, led by NWS CCG
 - ✚ Presented to Frimley system SRG in November 2015 on SECAMB activity and handover position
 - ✚ Supporting G&W CCG and RSCH to explore ways to streamline internal processes within A&E
 - ✚ Supporting Epsom CADU new initiative and integration of health and care services

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