

**TRAFFORD COUNCIL**

**Report to: Health Scrutiny Committee**

**Date: 26<sup>th</sup> June 2018**

**Report of: North West Ambulance Service NHS Trust**

**Report Title**

**NWAS Performance & Activity**

**Summary**

**An overview of the performance of North West Ambulance Service NHS Trust against national standards and the activity within the Trafford area.**

**Recommendation(s)**

**That the Health Scrutiny Committee note the contents of this report**

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**1.0 PURPOSE**

1.1 To give an overview to the Trafford Health Scrutiny Committee of the performance against national standards and activity in Trafford of the North West Ambulance Service NHS Trust

**2.0 BACKGROUND**

2.1 Since the trust last presented to Trafford Health Scrutiny Committee, the national ambulance response standards (targets) have changed, the data in this report therefore is from the implementation of the new standards introduced on 7 August 2017, to 7 June 2018.

2.2 Also included in this report is a brief summary of achievements from the last year.

2.2 The new performance standards are as follows:

Category	Description	Response Time
Category 1	Time critical life-threatening injuries and illnesses that need immediate intervention eg cardiac arrest, serious allergic reaction, airway obstruction, ineffective/abnormal breathing.	7 minutes on average for all responses & 90% in 15 minutes
Category 2	Emergencies that need rapid assessment, urgent on scene intervention or urgent transport eg heart attack, epilepsy, stroke, sepsis, major burns.	18 minutes on average for all responses & 90% in 40 minutes
Category 3	Urgent problems that need treatment to relieve suffering eg burns, diabetic and hypoglycaemic episodes, abdominal pain, injuries, drug overdose.	90% in 120 minutes
Category 4	Problems that are not urgent but need assessment in person or over the phone.	90% in 180 minutes

### 3.0 Performance

- 3.1 For the purposes of this report, NWS has supplied the number of incidents per category for each month, with the average response times for each category for that month. These are incidents which have originated from within the Trafford CCG area.
- 3.2 Working to the new ambulance response programme (ARP) standards has proved to be challenging for NWS but the trust firmly believes that the changes focus on making sure the best, most appropriate response is provided for each patient, first time.
- 3.3 Since adopting the new system in August last year, feedback from NWS and the trust's experience in implementing the changes has resulted in amends being made to some of the national coding used which will benefit other ambulance services and patients.
- 3.4 When adopting the new standards, NWS focused on both the life-threatening categories and the lower acuity calls. While we have performed very well in responding to the lower priority calls, we have been very aware that improvement is required for the higher priority calls.
- 3.5 A dedicated focus group was established to investigate what could be done to improve performance – this ranged from checking telephony systems, training, auditing by external bodies to undertake a full review of frontline resources, additional staff and a change in technology to speed up processes.
- 3.6 NWS has also undertaken a review of the vehicle mix and the replacement of rapid response vehicles with emergency ambulances, enhanced clinical support in our emergency operations centres with a full staffing in our clinical hub, reviewed our processes for dispatching ambulances to patients who call NHS 111, explored opportunities for training for staff and worked with BT to benchmark the 999 call answering performance.
- 3.7

Incidents	Mon-YY	Category	AVG Response
151	Aug-17	C1	0:10:34
1015	Aug-17	C2	0:24:10
564	Aug-17	C3	0:46:07
104	Aug-17	C4	1:22:03
32	Aug-17	C4H	0:38:01
117	Aug-17	C4HCP	1:02:55
173	Sep-17	C1	0:11:19
1360	Sep-17	C2	0:26:10
602	Sep-17	C3	1:04:08
111	Sep-17	C4	1:31:49
34	Sep-17	C4H	1:00:26

125	Sep-17	C4HCP	1:12:12
198	Oct-17	C1	0:09:35
1494	Oct-17	C2	0:29:26
543	Oct-17	C3	1:02:19
121	Oct-17	C4	1:27:00
37	Oct-17	C4H	0:45:41
140	Oct-17	C4HCP	1:35:37
197	Nov-17	C1	0:10:27
1489	Nov-17	C2	0:37:33
527	Nov-17	C3	0:59:49
109	Nov-17	C4	1:17:38
37	Nov-17	C4H	1:09:04
129	Nov-17	C4HCP	1:34:01
266	Dec-17	C1	0:10:47
1664	Dec-17	C2	0:58:59
442	Dec-17	C3	1:35:03
100	Dec-17	C4	1:47:52
15	Dec-17	C4H	0:57:42
100	Dec-17	C4HCP	1:58:20
257	Jan-18	C1	0:09:46
1372	Jan-18	C2	0:47:35
525	Jan-18	C3	1:52:56
109	Jan-18	C4	1:33:39
28	Jan-18	C4H	0:37:50
110	Jan-18	C4HCP	1:34:06
223	Feb-18	C1	0:10:38
1215	Feb-18	C2	0:41:58
367	Feb-18	C3	1:57:55
86	Feb-18	C4	1:24:52
13	Feb-18	C4H	1:22:17
91	Feb-18	C4HCP	1:35:41
267	Mar-18	C1	0:08:25
1354	Mar-18	C2	0:39:13
478	Mar-18	C3	1:43:15
96	Mar-18	C4	1:31:17
15	Mar-18	C4H	0:41:18
116	Mar-18	C4HCP	1:39:34
220	Apr-18	C1	0:08:55
1236	Apr-18	C2	0:29:06
531	Apr-18	C3	1:19:34
105	Apr-18	C4	1:18:30
14	Apr-18	C4H	0:24:42

90	Apr-18	C4HCP	1:13:47
244	May-18	C1	0:08:56
1274	May-18	C2	0:29:33
586	May-18	C3	1:26:04
79	May-18	C4	1:25:20
8	May-18	C4H	0:28:01
88	May-18	C4HCP	1:35:20

3.8

	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	APR	MAY
Gtr Manchester										
Trafford CCG										
C1 Best Response Average	00:10:36	00:11:19	00:09:35	00:10:27	00:10:47	00:09:46	00:10:38	00:08:25	00:08:55	00:08:56
C1 90th Percentile	00:13:37	00:16:31	00:15:07	00:15:44	00:16:46	00:16:33	00:15:25	00:13:19	00:14:24	00:13:25
C2 Best Response Average	00:23:35	00:26:10	00:29:27	00:37:33	00:58:59	00:47:35	00:41:58	00:39:13	00:29:06	00:29:33
C2 90th Percentile	00:50:48	00:59:34	01:07:30	01:22:37	02:12:06	01:44:44	01:33:30	01:23:57	01:03:40	01:04:09
C3 90th Percentile	01:36:44	02:25:53	02:27:59	02:25:55	03:11:10	04:11:01	04:23:00	03:50:55	02:51:54	03:11:01
C4 90th Percentile	02:24:18	02:36:36	02:48:04	02:30:43	03:07:03	02:48:01	02:45:17	03:00:21	02:12:00	02:45:50
Wigan Borough CCG										

#### 4.0 Key Factors Affecting Performance

- 4.1 Managing Hospital Handover. The target is 15 minutes, but unfortunately, it often it takes longer and these delays do have a huge impact on NWAS' ability to respond to patients waiting in the community, as while ambulance crews are waiting at hospitals, their vehicle is off the road.
- 4.2 Appendix A shows the hospital turnaround for those accident and emergency departments which patients from within Trafford are predominately taken to – Wythenshawe and Manchester Royal Infirmary.
- 4.3 Tightening Financial Position - £9.85 million savings
- 4.4 Recruitment and Retention Challenge

#### 5.0 Patient Transport Service

- 5.1 The North West Ambulance Service undertakes approximately 1.2 million non-emergency journeys every year. We provide Patient Transport Services in Lancashire, Greater Manchester, Merseyside and Cumbria
- 5.2 The service requirements are as follows:

##### **Calls answered:**

Within 20 seconds

##### **Time spent on the vehicle:**

Aim for no more than 60 minutes on board

**Arrival at appointment:**

The majority of patients will arrive on time for their appointments and no more than 60 minutes before (45 minutes before for EPS patients)

**Collect following appointment:**

Within 60/90 minutes of scheduled/notification pick up time

5.3 The Greater Manchester performance for PTS is shown in Appendix B.

**6.0 What we are proud of**

6.1 The trust has introduced the role of Community Paramedics to provide a stable central presence within the community, add additional capacity as a 999 responder and to build relationships with patients, the public and other provider organisations, to create a more integrated and patient-centred approach and improve the local community infrastructure and to provide safe care closer to home. The borough of Trafford is one of those communities to have it's own Community Paramedic, Sara Harris, whose current projects include improving healthcare services for those who are homeless.

6.2 Trafford is also set to benefit from additional double manned emergency vehicles at Urmston, Eccles and Salford, which it is envisaged will contribute to improving performance and timely response.

6.3 IIP Gold, Health and Wellbeing Award and shortlisted for the Northern Power Women Awards

6.4 During 2016/17 NWS trained 39,000 people in Basic Life Support & AED use

6.5 Clinical staff progression to paramedic and beyond. There are now Consultant Paramedics in each county who oversee the clinical skills and development of their teams.

6.6 We are committed to the development of apprentices as part of our future workforce model as they offer a way to provide high quality training and education, leading to a recognised qualification. NWS is delivering the national Associate Ambulance Practitioner (AAP) programme to 125 new EMT1 recruits, with the first due to qualify mid-2018. The trust met the public sector apprenticeship targets last year which require us to develop 2.3% of our workforce through apprenticeships.

6.7 In the North West we receive nearly 95,000 emergency 999 calls a year relating to patients under 16 years old and more than 400,000 urgent 111 calls. Our aim is to ensure the highest standard of care is provided both over the telephone and face-to-face. To achieve this we are actively engaging with children, their parents and carers across the region by establishing the Children's Patient Priority Group.

6.8 The Urgent Care Development Team work collaboratively with community and primary care professionals, on the development of pathways and individual care plans for patients. Care planning ensures that any ongoing and long-term care needs, including baseline observations, are available for the attending ambulance crew. The presence of a care plan should be flagged to the crew, on route.

6.9 83 staff completed a Higher Education Certificate in healthcare this last year which contributed to 49 of the 80 staff progressing to become paramedic students that year being EMT1s. We also supported 45 staff that lacked formal qualifications to complete access courses. These staff are now going on to complete an Associate Ambulance Practitioner qualification which will enable them to access future paramedic training.

6.10 We have developed a triage tool for nursing and residential home staff which enables them to determine themselves whether a patient requires an emergency ambulance or it would be more appropriate for them to be cared for by a GP or urgent care service.

## **7.0 Recommendations**

7.1 That the Trafford Health Scrutiny Committee note the contents of this report.

7.2 That any questions arising from this document can be submitted by emailing [madeline.edgar@nwas.nhs.uk](mailto:madeline.edgar@nwas.nhs.uk)

7.3 That the Committee notes that NWAS is happy to arrange for a representative to attend any future meetings