

**PRESENTATION TO ABERTawe BRO
MORGANNWG UNIVERSITY HEALTH
BOARD**

**COMMISSIONING EMERGENCY
AMBULANCE SERVICES**

**PROFESSOR SIOBHAN McCLELLAND
STEPHEN HARRHY**



**GIG
CYMRU
NHS
WALES**

Pwyllgor Gwasanaethau
Ambiwlans Brys
Emergency Ambulance
Services Committee

Key Contents

- Role of EASC
- Role of CASC
- Collaborative Commissioning
- Where are we now?
- Ambulance Quality Indicators
- Key Issues and Opportunities for Abertawe Bro Morgannwg University Health Board

Role of EASC

- McClelland Review (2013) vision of clinical Emergency Ambulance Services embedded in Unscheduled Care System
- EAS commissioned by 7 LHBs on behalf of people of Wales through EASC (April 2014) and delivered by WAST
- EASC required to commission jointly and nationally
- Independent Chair, CEO's from each HB and the Commissioner
- Three Sub Groups
- Health Board Champion

Role of the Commissioner

- Develop commissioning arrangements via Commissioning Quality and Delivery Framework
- Provide advice to Welsh Government, Health Board's, EASC and WAST
- Act as a liaison point between WAST and Health Board's
- Performance manage commissioning Quality and Delivery Framework

Collaborative Commissioning

- Made in Wales approach to commissioning
- CAREMORE methodology
- Dynamic process engaging key stakeholders across the system
- National Collaborative Commissioning: Quality and Delivery Framework

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CARE STANDARDS

The right expectations are defined for quality and safety.

✓ Agreed Care Standards

Where are we ?

- Commissioning arrangements maturing
- New Clinical Response Model introduced
- Ambulance Quality Indicators published
- Role of EASC widened to include EMRTS and NEPTS
- Improving performance but too much variation
- Improved whole system working
- Improving collaboration between LHBs & WAST
- WAO Review of EAS Commissioning

New Clinical Response Model

999 Calls divided into 3 types:

RED	Immediately life threatening
AMBER	Serious, but not immediately life threatening
GREEN	Neither serious or life threatening

Independent Evaluation Dec 2016

Ambulance Quality Indicators

<http://www.wales.nhs.uk/easc/ambulance-quality-indicators>

Monitor and improve performance across 5 step pathway



Right response for a patient dependent on their clinical need

April –June 2016 Data at LHB and All Wales level

Help Me Choose

- WAST organised 50 community engagement meetings and attended 72 stakeholder events
- 983,537 visits to NHS Direct website
- Dental problems top reason to call NHS Direct Wales
- 5038 incidents generated by frequent callers

Answer My Call

- 23,134 calls for an urgent (1-4 hour) admission from health care professionals
- 114,640 999 calls were answered
- 15,507 of these calls were in relation to falls, 14,030 were from HCPs, 11,436 were for chest pain and 10,958 for breathing problems
- 6,002 were ended following WAST telephone assessment: 'Hear and Treat'

Come to See Me

- 4,765 RED calls. 65% target met at an All Wales level
- Median RED response was 5 minutes and 01 seconds. 65% responded to within 6 minutes and 31 seconds and 95% within 14 minutes and 20 seconds
- 63,509 AMBER calls and 12,677 GREEN calls
- Community First Responders attended 1,535 incidents and first on scene in 1,173

Give me Treatment

- Cardiac Arrest
- Stroke
- Fractured Hips (femur injuries)
- STEMI
- Sepsis
- Febrile Convulsion
- Hyoglycaemia
- 14,262 incidents did not result in conveyance to hospital or another destination: 8480 treated at scene and 5,782 to an alternative provider

Take Me To Hospital

- 52,949 who called 999 were conveyed to hospital or another destination
- 56.5% patients handed over within 15 minutes
- 82% of ambulances cleared within 15 minutes or less

Key Issues and Opportunities for Abertawe Bro Morgannwg University Health Board

Ambulance Quality Indicators

- Here and Treat Rates
- Number of calls transferred to NHS Direct ended through transfer to another service and see and treat rates
- Conveyance to a Hospital outside of area
- Conveyance to alternatives other than Tier 1 major A&E

Key Issues and Opportunities for Abertawe Bro Morgannwg Health Board

Benchmarking Toolkit

- Total incidents per 1000 population
- Percentage calls ended following WAST telephone assessment
- Notification to handover

Potential key actions – Abertawe Bro Morgannwg Health Board

- **Targeted actions to improve red performance**
 - Staffing model
 - Clinicians in control
- **Actions to manage demand**
 - Use top 10 information and link with USC plan to put alternative pathways in place
 - Targeted actions to reduce multi vehicle responses
 - Amber and green call split - audit
- **Actions to manage access**
 - Joint planning on direct access to ease the pressures on Emergency Departments
 - Development of 111
 - Intelligent conveyancing