Lincolnshire COUNTY COUNCIL *Working for a better future*		THE HEALTH SCRUTINY COMMITTEE FOR LINCOLNSHIRE	
Boston Borough Council	East Lindsey District Council	City of Lincoln Council	Lincolnshire County Council
North Kesteven District Council	South Holland District Council	South Kesteven District Council	West Lindsey District Council

Open Report on behalf of East Midlands Ambulance Service NHS Trust

Report to	**Health Scrutiny Committee for Lincolnshire**
Date:	**15 February 2017**
Subject:	**East Midlands Ambulance Service Update and Performance**

Summary:

This report summarises the key areas of demand and performance within East Midlands Ambulance Service with specific reference to Lincolnshire Division.

Actions Required:

(1)   To seek assurance and commentary on the continued work and delivery of EMAS urgent and emergency care in Lincolnshire.

(2)   To identify whether any additional information is required on any part of the information in the report.

1. Ambulance Performance Standards

The following national performance standards have been set for calls to ambulance services:

- Red 1 – Immediately life threatening calls, for example cardiac arrest patients who are not breathing and do not have a pulse, and other severe conditions such as airway obstruction. Red 1 patients account for less than 5% of all ambulance calls. **Response time: 8 minutes from call received (Target 75%) and 19 minutes for conveying resource to scene (Target 95%)**.
- Red 2 –Life threatening calls, such as cardiac chest pains. **Response time: 8 minutes from call received (Target 75%) and 19 minutes for conveying resource to scene (Target 95%).**
- Green 1 – Serious, but not life threatening. **Response time of 20 minutes from call received (Target 85%).**

- Green 2 – Serious, but not life threatening and with no serious clinical need: **Response time of 30 minutes of call received (Target 85%).**
- Green 3 – Non-life threatening non-emergency call. **Telephone assessment within 20 minutes of call received (Target 85%).**
- Green 4 – Non-life threatening non-emergency call. **Telephone assessment within 60 minutes of call received (Target 85%).**

The contractual arrangements for the East Midlands Ambulance Services NHS Trust (EMAS) during 2016-17 provide an expected performance against Red1, Red 2 and Red 19. For the whole of the Lincolnshire Division these contractual targets have been set as follows: -

	Oct	Nov	Dec	Jan	Feb	Mar	Grand Total
Red 1	71.60%	75.80%	71.60%	74.80%	73.50%	81.60%	74.00%
Red 2	68.00%	71.00%	68.00%	70.60%	69.50%	71.80%	68.10%
Red 19	84.00%	81.80%	84.00%	81.20%	80.50%	84.60%	82.60%

As indicated above, the contractual targets (approved by the Clinical Commissioning Groups in the East Midlands) have been set at a lower level than the national performance standards. For example, the national performance standard is for ambulances to be at the scene ready to convey in 95% of cases for a red 1 and red 2 call, whereas the contractual figures is 82.60%.

While performance information is provided in this report at county and clinical commissioning group level, EMAS (like all other ambulance services in England) is only required to meet response time performance <u>across the Trust as a whole</u>. However, there is a local expectation for increased performance.

2. Performance Summary

Nationally ambulance services are struggling with performance against the national trajectory and standards set. During Quarter 3 of 2016/17, EMAS did not meet the national trajectory or the contractual standard within Lincolnshire Division, which includes North Lincolnshire and North East Lincolnshire.

Performance - Lincolnshire	Target	Oct-16	Nov-16	Dec-16	Jan–17	Feb-17	Mar-17	YTD/ Average
Red 1 (8 min)	75%	69.00%	73.55%	71.24%				70.22%
Red 2 (8 min)	75%	60.24%	59.44%	55.65%				59.11%
Red 19 (19 min)	95%	75.49%	75.55%	74.34%				76.58%
Green 1 (20 min)	85%	63.31%	60.44%	55.54%				65.38%
Green 2 (30 min)	85%	58.20%	61.11%	62.97%				64.47%
Green 3	N/A	72.06%	61.27%	66.45%				71.47%
Green 3 Telephony (20 min)	85%	87.21%	74.58%	66.00%				77.43%
Green 4	N/A	89.63%	84.69%	79.92%				89.06%
Green 4 Telephony (60 min)	85%	98.60%	96.14%	95.12%				96.54%
Urgent (pick up within 15 mins)[1]	90%							64.72%

Responses - Lincolnshire	Oct-16	Nov-16	Dec-16	Jan–17	Feb-17	Mar-17	YTD/

[1] From October 2016, urgent calls from health care professionals have been classed as Green 3 or Green 4 responses.

							Average
Red 1	329	310	306				2726
Red 2	6121	5964	6835				53753
Green 1	2093	2116	2447				18065
Green 2	3251	3001	2814				32083
Green 3	136	142	155				1415
Green 4	839	712	518				3055
Urgent [2]	N/A	N/A	N/A	N/A	N/A	N/A	4356

The ambulance services across England continue to struggle with demand and ability to meet nationally set targets. The future changes as set by the Ambulance Response Programme nationally will impact this position as we enter 2017-18 and migrate to the new method of coding and response.

Quarter 3 Performance at Clinical Commissioning Group Level

Appendix A to this report sets out for indicative purposes only the performance at Lincolnshire CCG level. As stated above, EMAS (like all other ambulance services in England) is only required to meet response time performance <u>across the Trust as a whole.</u>

Red Conversion Rate

The red conversion rate is the percentage split between red calls and green calls. In effect it is a comparison between calls for the very unwell, which necessitate a response within eight minutes, compared to calls for the moderately unwell, where a response longer than eight minutes is accepted.

The expected and forecast norm to meet national performance standards is 42% of emergency calls having an acuity level necessitating an eight minute response. Therefore an increase in red conversion above this level is a marker of increased acuity of 999 calls. This is referred to as the red conversion rate.

The red conversion rate has steadily increased to a peak of 58% in December 2016. This is significantly above the expected level for efficient delivery of service (42%). Analysis of these figures shows a steady increase in 111 red conversion over a twelve month period.

Hear and Treat and See and Treat

Both *Hear and Treat* (HAT) and *See and Treat* (SAT) have increased with a concurrent decrease in *See, Treat and Convey,* which shows a reduction in conveyance to hospital over Quarter 3. This is also marked against a gradual increase in call cycle time for non-conveyance where clinical staff are referring to other agencies, health care professionals, providing a safety net for non-conveyed patients.

The figures relating to the above are set out in Appendix B.

Hospital Handover Times

---

[2] From October 2016, urgent calls from health care professionals have been classed as Green 3 or Green 4 responses.

Hospital handover times for Quarter 3 indicate significant pressure around Lincoln County Hospital with the highest proportion of one-two hour and two hour plus delays felt there. Across Quarter 3 EMAS lost 6,543 hours in total through turnaround delays at Lincolnshire Division or adjacent hospitals. The details are set out in Appendix C.
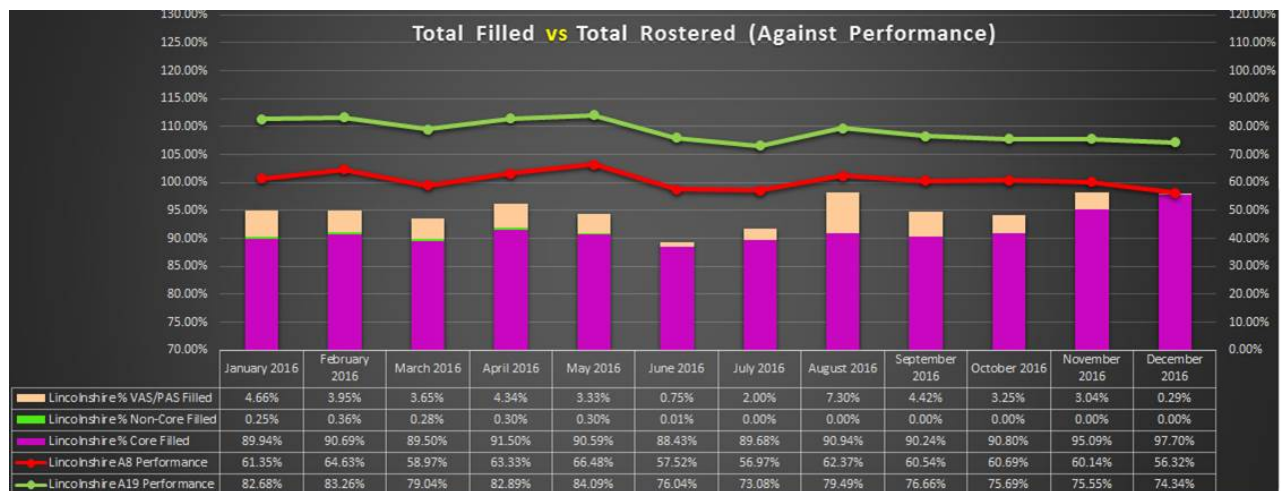
Historical Call Demand Pan-EMAS

Appendix D includes information on Call Demand for EMAS

Non Conveyance Q3 2016 Lincolnshire Divisional Breakdown

Appendix D also includes information on the non-rates for the Lincolnshire Division.

3.   **Staffing**

The staffing position has improved through Quarter 3 with rostered staffing (core-filled) increasing from circa 90% to 97%. Additionally our abstractions and more importantly our staff sickness position remains the best across EMAS.

Total Filled vs Total Rostered (Against Performance)

	January 2016	February 2016	March 2016	April 2016	May 2016	June 2016	July 2016	August 2016	September 2016	October 2016	November 2016	December 2016
Lincolnshire % VAS/PAS Filled	4.66%	3.95%	3.65%	4.34%	3.33%	0.75%	2.00%	7.30%	4.42%	3.25%	3.04%	0.29%
Lincolnshire % Non-Core Filled	0.25%	0.36%	0.28%	0.30%	0.30%	0.01%	0.00%	0.00%	0.00%	0.00%	0.00%	0.00%
Lincolnshire % Core Filled	89.94%	90.69%	89.50%	91.50%	90.59%	88.43%	89.68%	90.94%	90.24%	90.80%	95.09%	97.70%
Lincolnshire A8 Performance	61.35%	64.63%	58.97%	63.33%	66.48%	57.52%	56.97%	62.37%	60.54%	60.69%	60.14%	56.32%
Lincolnshire A19 Performance	82.68%	83.26%	79.04%	82.89%	84.09%	76.04%	73.08%	79.49%	76.66%	75.69%	75.55%	74.34%

4.   **Actions and Update relating to CQC areas of improvement and EMAS Quality Improvement Plan**

Our Band 6 managers have undergone enhanced incident investigation training to provide a robust process when untoward incidents are reported. This is concurrent with increased awareness and education to our frontline staff on what constitutes an untoward incident and how to report it.

The Statutory and Mandatory training schedule & appraisal schedule for our frontline staff is still being delivered from April 2016-17 and we have confidence that all available frontline staff will have completed updates by the end of the financial year.

Our skill mix of qualified ambulance staff has improved both across the division and across the Trust with a large and progressive recruitment campaign over the past year. In conjunction we have recruited Paramedics internationally in a climate of national shortage and hope to see the first cohort of international paramedics in place during Q2 of 2017, specifically in the east of the County.

All of our incident commanders are undertaking update training at the National Ambulance Resilience Unit to improve and enhance our response to a major incident scenario.

Across EMAS we plan to move to an all electronic patient report form service during 2017-18 in line with the forward vision set by NHS Digital.

Our medicine management compliance has been reviewed over the past months and Lincolnshire Division is now experiencing the lowest number of medication errors across the EMAS divisions.

Our fleet is being continually updated and we have recently taken delivery of 10 new ambulances in division, continuing to provide the people of Lincolnshire with quality and visibly updated vehicles.

5.   Engagement with Partners and Agencies

We continue to have a professional and established relationship with many partners across the county and beyond. To exemplify a few:

United Lincolnshire Hospitals NHS Trust (ULHT) – We continue to engage with ULHT to improve cross agency efficiency and quality of care. We have recently collaborated on an improved handover process for emergency departments and this will continue into 2017-18. We support and provide assistance to ULHT during the current temporary overnight suspension of Emergency Department services at Grantham Hospital.
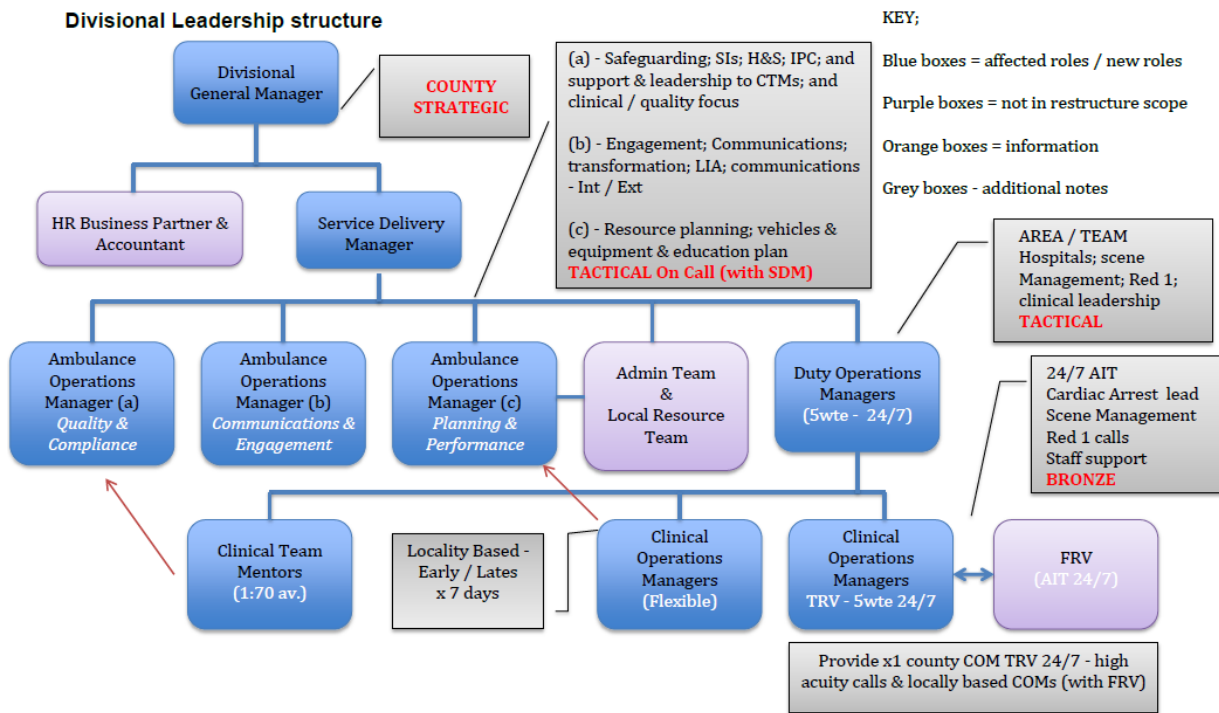
Lincolnshire Partnership NHS Foundation Trust (LPFT) – Through closer working with our colleagues in mental health a number of work streams are ongoing. Our established mental health triage car continues to provide assistance to patients where the default of ED is not appropriate for their current condition. Additionally we are working closely with them on a frequent caller project.

Lincolnshire Committee Health Services NHS Trust (LCHS) – In terms of non-conveyance and supporting people in their communities our working relationship with LCHS is extremely close. This is seen across a number of areas but key is the development and continued enhancement of the Clinical Assessment Service to improve access to the Urgent Care system. This is also aided by our involvement in the Pan-Lincolnshire Urgent Care Working Group.

Blue Light – Our colleagues in Police and Fire are regularly sharing learning and training through the national JESIP program, and through collaborative working in Lincolnshire Resilience Forums. Additionally from an estates point of view we are continuing our work to improve financial efficiency and quality improvement through the shared premises programme "blue light campus"

6.   Operational EMAS Re-Structure

Through Q4 and into 2017-18 Q1 EMAS is undertaking a Trust Wide operational re-structure. In summary this is to provide an enhanced clinical leadership response to critically ill patients while providing greater face-face management presence to our frontline clinicians. The new structure is summarised below.

Divisional Leadership structure

Divisional General Manager

COUNTY STRATEGIC

HR Business Partner & Accountant

Service Delivery Manager

(a) - Safeguarding; SIs; H&S; IPC; and support & leadership to CTMs; and clinical / quality focus

(b) - Engagement; Communications; transformation; LIA; communications - Int / Ext

(c) - Resource planning; vehicles & equipment & education plan
TACTICAL On Call (with SDM)

KEY;

Blue boxes = affected roles / new roles

Purple boxes = not in restructure scope

Orange boxes = information

Grey boxes - additional notes

Ambulance Operations Manager (a)
Quality & Compliance

Ambulance Operations Manager (b)
Communications & Engagement

Ambulance Operations Manager (c)
Planning & Performance

Admin Team & Local Resource Team

Duty Operations Managers (5wte - 24/7)

AREA / TEAM Hospitals; scene Management; Red 1; clinical leadership
TACTICAL

24/7 AIT Cardiac Arrest lead Scene Management Red 1 calls Staff support
BRONZE

Clinical Team Mentors (1:70 av.)

Locality Based - Early / Lates x 7 days

Clinical Operations Managers (Flexible)

Clinical Operations Managers TRV - 5wte 24/7

FRV (AIT 24/7)

Provide x1 county COM TRV 24/7 - high acuity calls & locally based COMs (with FRV)

7. Appendices

Appendix A	Quarter 3 Response Time Performance by Lincolnshire Clinical Commissioning Group
Appendix B	Lincolnshire Division - Red Conversion Rate / Heart and Treat / See and Treat / See, Treat and Convey
Appendix C	Hospital Handover Times – Quarter 3 2016/17
Appendix D	Historic Call Demand – Pan-EMAS and Lincolnshire Division Non-Conveyance Rates Quarter 3 – 2016/17

8. Background Papers - No background papers within Section 100D of the Local Government Act 1972 were used in the preparation of this report.

This report was written by the East Midlands Ambulance Service NHS Trust.

This is not a consultation report.

Quarter 3 (Oct / Nov / Dec 2016) Performance By Lincolnshire CCG

	RED1	RED2	RED	RED1 19	RED2 19	RED 19	Green1	Green2	Urgent	Green 4 (Card 35's)	with a response (Total)
Lincolnshire	945	18920	19865	940	18851	19791	6656	9066	0	1989	37576
NHS Lincolnshire East CCG	239	4803	5042	238	4786	5024	1783	2241	0	645	9711
NHS Lincolnshire West CCG	221	4063	4284	219	4038	4257	1334	2152	0	438	8208
NHS North East Lincolnshire CCG	142	3065	3207	141	3056	3197	859	1238	0	168	5472
NHS North Lincolnshire CCG	149	2759	2908	148	2752	2900	999	1411	0	357	5675
NHS South Lincolnshire CCG	110	2296	2406	110	2292	2402	914	1115	0	185	4620
NHS South West Lincolnshire CCG	84	1934	2018	84	1927	2011	767	909	0	196	3890

	Performance - Incidents (Response)									Performance - Telephony	
	RED 1 (75%)	RED 2 (75%)	RED (75%)	RED 1 (95%)	RED 2 (95%)	RED (95%)	GREEN 1 (85%)	GREEN 2 (85%)	URGENT (90%)	GREEN 3 (85%)	GREEN 4 (85%)
Lincolnshire	71.22%	58.33%	58.94%	93.62%	74.17%	75.09%	59.54%	60.64%	N/A	77.95%	97.05%
NHS Lincolnshire East CCG	62.34%	53.74%	54.15%	86.55%	62.54%	63.67%	55.58%	56.94%	N/A	84.91%	95.81%
NHS Lincolnshire West CCG	82.35%	64.80%	65.71%	98.17%	84.32%	85.04%	64.17%	65.33%	N/A	77.78%	96.61%
NHS North East Lincolnshire CCG	80.28%	68.42%	68.94%	100.00%	86.65%	87.24%	69.85%	65.51%	N/A	61.90%	98.17%
NHS North Lincolnshire CCG	72.48%	61.62%	62.17%	95.95%	82.52%	83.21%	63.06%	62.58%	N/A	77.42%	98.41%
NHS South Lincolnshire CCG	61.82%	46.47%	47.17%	91.82%	64.97%	66.19%	53.06%	54.71%	N/A	80.77%	97.40%
NHS South West Lincolnshire CCG	61.90%	49.53%	50.05%	89.29%	61.03%	62.21%	52.28%	56.33%	N/A	73.68%	95.65%

	Performance - Incidents (Response)									Performance - Telephony	
	RED 1 (75%)	RED 2 (75%)	RED (75%)	RED 1 (95%)	RED 2 (95%)	RED (95%)	GREEN 1 (85%)	GREEN 2 (85%)	URGENT (90%)	GREEN 3 (85%)	GREEN 4 (85%)
	67.94%	56.08%	56.62%	96.56%	82.17%	82.82%	54.65%	58.16%	N/A	78.88%	96.37%

Lincolnshire Division - Quarter 3

Red Conversion Rate / Heart and Treat / See and Treat / See, Treat and Convey

Red Conversion Rate		Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	YTD /Average
Red Conversion Rate		50.51%	51.24%	54.62%	58.01%			49.49%
Conversion Rates	Target	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	YTD /Average
Hear & Treat %		13.89%	15.43%	16.66%	16.75%			14.10%
See & Treat %		24.94%	24.12%	25.35%	25.57%			25.52%
See, Treat & Convey %		61.17%	60.45%	57.99%	57.67%			60.38%
CAT Team	Target	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	YTD /Average
Upgrades (Green to Red)		332	260	494	312			2866
Downgrades (Red to Green)		410	412	346	202			4136

Call Cycle Times	Target	Oct-16	Nov-16	Dec-16	Jan-17	Feb-17	Mar-17	YTD /Average
Mobilisation (seconds)	00:00:30	0:00:43	0:00:44	0:00:43	0:00:40			0:00:42
**On scene time		0:37:33	0:36:57	0:38:41	0:41:21			0:36:58
**On scene time (Conveyed)		0:28:11	0:29:07	0:29:36	0:30:10			0:28:27
**On scene time (non-conveyed)		0:44:57	0:43:38	0:46:22	0:50:22			0:43:58
** Total Average Job Cycle (First on Scene)		1:17:22	1:17:45	1:20:42	1:32:14			1:15:14

Hospital Handover – Quarter 3 2016/17

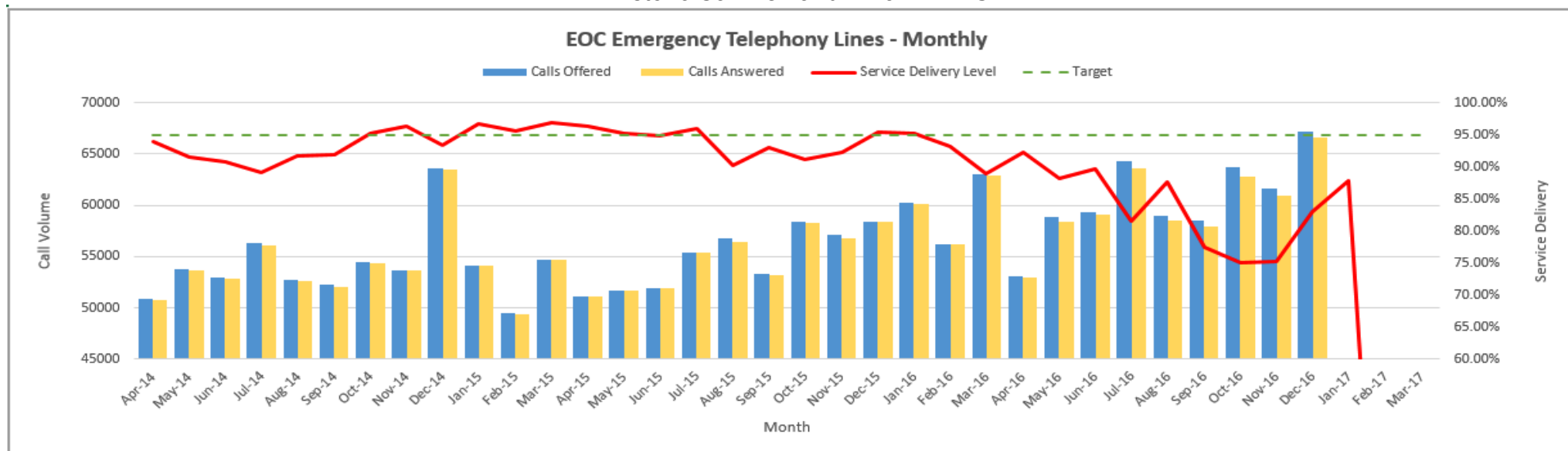| Hospitals	No Of Vehicles At Hospital	No Of Usable Handover Times	Handovers Over 15mins	% Delayed over 15	Handovers Over 20mins	% Delayed over 20	Handovers Over 30mins	% delayed over 30	Handovers Over 45mins	% Delayed over 45	30 To 59 minutes	1 To 2 Hours	2 to 4 Hours	4 to 6+ Hours
Boston Pilgrim Hospital	6149	6149	3636	59%	2643	43%	1415	23%	603	10%	1128	269	24	0
Grantham and District Hospital	693	693	420	61%	281	41%	133	19%	43	6%	117	17	0	0
Grimsby Diana Princess Of Wales	5317	5317	2457	46%	1733	33%	939	18%	405	8%	759	175	7	0
Lincoln County Hospital	7699	7699	5790	75%	4753	62%	2973	39%	1735	23%	1888	889	209	2
Peterborough City Hospital	2444	2444	1477	60%	1169	48%	785	32%	497	20%	467	256	71	1
Scunthorpe General Hospital	4628	4628	2247	49%	1692	37%	1052	23%	577	12%	729	269	57	3
Grand Total	26930	26930	16027	60%	12271	46%	7297	27%	3860	14%	5088	1875	368	6

Hospitals	Lost Hours Pre Handover >15min	Average Clinical Handover Time	Lost Hours Post Handover >15min	Average Post Handover Times	Overall Average Turnaround	Lost Hours for overall Turnaround >30mins	HO Post Over 15	HO Post 15 To 30
Boston Pilgrim Hospital	1049:32:31	0:22:51	451:01:43	0:16:07	0:38:58	1201:35:34	2947	2446
Grantham and District Hospital	94:05:58	0:20:54	37:15:25	0:14:42	0:35:36	99:41:20	295	250
Grimsby Diana Princess Of Wales	673:34:15	0:19:25	483:05:02	0:17:28	0:36:52	849:39:11	2886	2240
Lincoln County Hospital	2655:54:50	0:34:15	342:58:28	0:12:20	0:46:34	2433:20:47	2124	1727
Peterborough City Hospital	730:52:51	0:30:41	218:25:44	0:17:15	0:47:56	824:59:55	1156	913
Scunthorpe General Hospital	876:10:38	0:23:08	538:42:49	0:18:36	0:41:44	1133:58:50	2425	1597
Grand Total	6080:11:03	0:26:08	2071:29:11	0:15:48	0:41:56	6543:15:37	11833	9173

Pre handover is the time in hospital prior to passing care responsibility and the physical movement of the patient to a hospital trolley: 15 minute target

Post handover is the time taken to prepare the ambulance for the next patient: 15 minute target

Overall turnaround is the combined figure e.g. pre+post handover 30 mins target

Historic Call Demand – Pan-EMAS

EOC Emergency Telephony Lines - Monthly

Legend: Calls Offered | Calls Answered | Service Delivery Level | Target

Lincolnshire Division – Non-Conveyance Rates Quarter 3 2016/17

	Outcome					Conveyance Rates	
	Type1 & Type2	Other conveyed	H&T	S&T	Total	Non Conveyance %	Conveyance %
Lincolnshire	25717	964	6847	11068	44596	42.33%	57.67%
NHS Lincolnshire East CCG	6768	347	1771	2635	11521	41.26%	58.74%
NHS Lincolnshire West CCG	5131	274	1628	2836	9869	48.01%	51.99%
NHS North East Lincolnshire CCG	4202	79	885	1219	6385	34.19%	65.81%
NHS North Lincolnshire CCG	4184	127	816	1408	6535	35.98%	64.02%
NHS South Lincolnshire CCG	2979	36	1000	1627	5642	47.20%	52.80%
NHS South West Lincolnshire CCG	2453	101	747	1343	4644	47.18%	52.82%
Trust Wide Position Quarter 3						41.37%	58.63%