Agenda Item 7

Non

Lincolnshire 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 by Tim Fowler, Associate Director of Contracting and Performance, NHS Lincolnshire Integrated Care Board

Report to	Health Scrutiny Committee for Lincolnshire		
Date:	15 February 2023		
Subject:	Non-Emergency Patient Transport		

Summary:

This report provides an update from NHS Lincolnshire Integrated Commissioning Board (ICB) on the Non-Emergency Patient Transport Service (NEPTS) for the period since the previous report considered by the Committee in March 2021.

The main NEPTS contract for Lincolnshire is operated by Health Transportation Group UK (HTG) who were formerly known Thames Ambulance Service Limited. A new contract for NEPTS in Lincolnshire has been awarded to the East Midlands Ambulance Service (EMAS) with the service commencing on 1 July 2023. It is fully expected that EMAS will have a robust service in operation on day one of 'go live' for the new contract and thereafter.

New eligibility criteria for access to NHS funded non-emergency patient transport services were published in May 2022. These criteria are being applied by HTG and will be applied by EMAS. A summary of the criteria is included in this report.

HTG have continued to work closely with the ICB and health service partners in Lincolnshire. Performance against contract key performance indicators has largely been stable although there continue to be issues with call handling due to recruitment and retention.

Actions Requested:

The Committee is asked to note the contents of this report.

1. Background

Context

NHS Lincolnshire Integrated Commissioning Board is responsible for commissioning nonemergency patient transport services (NEPTS) for the patients of Lincolnshire. The Committee has, following concerns raised, previously received a number of reports from NHS Lincolnshire Clinical Commissioning Group (LCCG) in relation to the operation of the nonemergency patient transport service in Lincolnshire, with the latest report being considered in March 2021.

The current contract for NEPTS in Lincolnshire is operated by Health Transportation Group UK (HTG), formerly known as Thames Ambulance Service Limited (TASL), with the contract originally being awarded for five years commencing on 1 July 2017. Following a competitive procurement process undertaken in 2021, a new nine-year nine month contract has been awarded to East Midlands Ambulance Service (EMAS) with services starting on 1 July 2023. The contract with HTG was extended by a further year to 30 June 2023 to coincide with the commencement date of the EMAS service.

Eligibility Criteria

Following a review of NEPTS published in August 2021, new national eligibility criteria for access to NHS funded patient transport services was published in May 2022. This replaced the previous national criteria which had been in place since 2007.

The new national criteria are clearer and more directive than the 2007 version which had been open to considerable local interpretation and variation. The new criteria include the overarching principles that most people should travel to and from hospital independently by private or public transport, with the help of relatives or friends if necessary and that NHS-funded patient transportation is reserved for when it is considered essential to ensuring safety, safe mobilisation, condition management or recovery. In addition, the patients have to have been referred by a doctor, dentist, or ophthalmic practitioner for non-primary care NHS-funded healthcare services for diagnosis or treatment or the patient is being discharged from NHS-funded treatment.

As well as the above, the guidance includes six qualifying criteria, and a patient would need to meet one or more of these criteria in order to qualify for funded patient transport. In summary these are:

- A. They have a medical need for transport.
- B. They have a cognitive or sensory impairment requiring the oversight of a member of specialist or non-specialist patient transport staff or a suitably trained driver.
- C. They have a significant mobility need that means they are unable to make their own way with relatives/friends and/or escorts/carers whether by private transport (including a specially adapted vehicle if appropriate for the journey), public transport or a taxi.
- D. They are travelling to or returning from in-centre haemodialysis.

- E. A safeguarding concern has been raised by any relevant professional involved in a patient's life, in relation to the patient travelling independently. This may mean that the patient requires the oversight of a suitably trained driver or other member of patient transport staff.
- F. They have wider mobility or medical needs that have resulted in treatment or discharge being missed or severely delayed.

The Lincolnshire-commissioned NEPTS largely operates in line with the requirements of the new guidance. The ICB in discussion with EMAS have confirmed that EMAS will enact the new eligibility criteria on commencement of their contracted service from July 2023. It is not expected that the application of the criteria will result in any major changes to the number or type of patients that have funded journeys in Lincolnshire.

Preparation with EMAS

At the date of consideration of this report by the Committee, there will be around four and half months until EMAS commence services under the new Lincolnshire NEPTS contract. The preparation and mobilisation of the EMAS service builds on their experience of the rapid implementation of a new contract elsewhere in the East Midlands. At the date of writing this report there were no known risks to the smooth commencement of the new service.

The ICB has project structures in place with EMAS to manage mobilisation of the new service and with HTG to manage the exit from the current service. A joint meeting between the ICB, EMAS and HTG is held monthly, as is a project steering group that is in place in the ICB as well as individual meetings with EMAS and HTG. As we get nearer to the service commencement date, the frequency of the meetings with EMAS will increase to fortnightly and then weekly and then as required.

Progress against the EMAS mobilisation plan and risk and issue logs are maintained by the EMAS project manager and reviewed by the ICB. EMAS and HTG have both indicated that they are working well together and EMAS are engaged with the separate transport provider for the renal satellite units and with the provider supporting additional discharge capacity at ULHT. EMAS have commenced engagement with hospital and community service providers used by Lincolnshire patients.

Staffing requirements have been identified by EMAS and lists of staff who may be eligible for TUPE have been shared with EMAS by HTG. Vehicles have been ordered and are due to arrive sufficiently in advance of go live, technology solutions are in place and there is agreement between HTG and EMAS for the transfer of booking information in advance of go live. Premises in Lincolnshire have been identified by EMAS and leases and in the process of being agreed and signed.

The ICB will undertake a number of 'walk-throughs' of EMAS operations in mid-May and early June in order to assure readiness for go-live on 1 July 2023. These 'walk-throughs' will test the operational readiness of the new service across a number of areas including call handling, journey booking and planning, staff training, premises and vehicle and technology readiness and will assist in identifying any issues that require urgent remedial action.

<u>Current Contract Performance</u>

TASL have continued to work closely with the ICB and hospital and community providers over the past years and following changes in their local teams are now more responsive to issues raised and have shown an appetite to identify and resolve the issues that arise.

There are no concerns related to the quality metrics reported for the contract. However, the service has continued to struggle to meet the Key Performance Indicators (KPIs) included in the contract and a summary of the performance against KPIs to December 2022 is attached to this report as Appendix A. With the exception of call handling, performance has been relatively stable since the date of the last report to the Committee.

HTG have recently struggled to maintain resilience in their call handling service with significant issues of recruitment and retention due to competition with other local employers, and this is reflected in the relatively poor performance against this KPI (KPI1) recorded in December 2022. HTG have recently been successful in recruiting further call centre staff and it is expected that these staff will further improve the position.

2. Consultation

This is not a direct consultation item.

3. Key Strategy Documents

The key NHS guidance for non-emergency patient transport services is set out in the documents *Non-emergency patient transport services eligibility criteria*, and *NEPTS: Commissioning, contracting and core standards* which were published in May 2022 and July 2022 respectively. These documents relate to the recommendations in the *Report of the non-emergency patient transport review* published in August 2021 and provide a direction for the future operation of non-emergency patient transport services. The guidance documents are reflected in the ICB approach to the commissioning of patient transport and early insights into this guidance were available prior to their formal publication and were considered in the development of the ICB non-emergency patient transport procurement.

There are no explicit references to non-emergency patient transport in the NHS Long Term Plan, the Lincolnshire Joint Strategic Needs Assessment or the Lincolnshire Health and Wellbeing Strategy. It is, however recognised that the provision of non-emergency patient transport supports eligible patients to access hospital and other healthcare service and, in this way, contributes to the delivery health and well-being in Lincolnshire.

4. Conclusion

NEPTS services in Lincolnshire have generally been stable since the date of the previous of report to the Committee in March 2021. HTG is working responsively with the ICB and hospital and community partners in the delivery of their service.

Since the last report to the Committee, Lincolnshire ICB has undertaken a procurement for NEPTS and has awarded the contract for the service to East Midlands Ambulance Service.

This contract commences service delivery on 1 July 2023, and at present it is fully expected that there will be smooth transition to EMAS from HTG and other NEPTS providers commissioned in Lincolnshire.

New national eligibility criteria for access to NHS funded non-emergency patient transport was published in May 2022. The new criteria are being applied by HTG and processes are in place to ensure that EMAS will also apply the criteria when they assume responsibility for the patient transport service on 1 July 2023.

5. Appendices

These are listed below and attached at the back of the report			
Appendix A HTG KPI Performance to December 2022			

6. Background Papers

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

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HTG PERFORMANCE AGAINST CONTRACTED KEY PERFORMANCE INDICATORS TO DECEMBER 2022

КРІ	Description	Contract Target	Latest Performance (Dec 2022)	Change on previous month	previous	since start of Contract	Best Achievement Since Contract Start	Average Achievement Since Contract Start
KPI 1	Calls answered within 60 seconds	85%	53.6%	28.4%	Better	8	88.7%	61.1%
KPI 2	Journeys cancelled by provider	0.50%	3.9%	1.9%	Better	20	0.0%	1.2%
KPI 3a	Same day journeys collected within 150 mins	95%	69.5%	0.1%	Same	0	93.3%	74.6%
KPI 3b	Same day journeys collected within 180mins	100%	76.7%	1.8%	Better	0	95.5%	81.7%
KPI 4a	Renal patients collected within 30 mins	95%	77.1%	-1.5%	Worse	0	87.0%	76.6%
KPI 4b	Non-Renal patients collected within 60 mins	95%	59.7%	-1.8%	Worse	0	83.5%	69.5%
KPI 4c	All patients collected within 80 mins	100%	78.2%	0.4%	Same	0	88.9%	81.3%
KPI 5	Fast track journeys collected within 60 mins	100%	81.8%	16.6%	Better	1	100.0%	69.1%
KPI 6a	Renal patients to arrive no more than 30 mins early	95%	58.6%	-0.8%	Same	0	75.0%	62.7%
KPI 6b	Patients to arrive no more than 60 mins early	95%	67.0%	-0.1%	Same	0	75.3%	67.7%
KPI 7	Journeys to arrive on time	85%	74.0%	-1.2%	Worse	0	83.8%	74.5%
KPI 8	Patients time on vehicle to be less than 60 mins	85%	75.5%	1.6%	Better	0	87.3%	74.1%
KPI 9	% discharge patients re-bedded where TASL have failed to collect within 2 hours of agreed pick up time	0%	3.5%	-1.6%	Worse	0	0.0%	2.4%
KPI 10a	% Patients waiting longer than 2.5 hrs for their outpatient or renal return journey	5%	2.5%	-0.1%	Same	28	0.8%	3.0%
KPI 10b	% Patients waiting longer than 4 hrs for their outpatient or renal return journey	0%	0.7%	-0.2%	Same	0	0.1%	0.5%