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Dear Colleague

Subject: Third Quarter Stakeholder Report

I am writing as part of my regular stakeholder briefing programme with an overview of the Trusts performance over the last quarter together with an update on ongoing developments. I hope you find the information of interest and as always I would welcome any comments as to how we might develop this briefing to better suit your needs.

Emergency Performance April – December 2009

	National Target	April – June 2009	July – Sept 2009	Oct – Dec 2009	Annual performance to 31 st Dec 2009
A8	75%	77.6%	74.7%	70.7%	74.1%
A19	95%	94.9%	95.0%	93.3%	94.3%
B19	95%	89.7%	89.0%	82.2%	88.0%

The last quarter has been the most difficult ever faced by the ambulance service in terms of performance. In October we experienced a significant increase in calls for serious life threatening conditions (Category A) averaging 21% above the norm for the time of year. Many of the calls related to respiratory conditions which we suspect were in many cases linked to pandemic flu.

This high volume of demand continued throughout November and December and was further exacerbated by a protracted period of adverse weather commencing with heavy snowfalls and ice from the 21st December which has now extended well into January.

Icy conditions in Hampshire on 23rd December led to unprecedented call volumes which necessitated the declaration of a Major incident.

I would like to put on public record our thanks to our staff, community and co-responders, our colleagues in the other emergency services and the numerous volunteers and agencies who have supported the Trust through this period. In line with our plans for situations such as this we have focussed our resources on those patients most in need of an ambulance. Whilst it has not been possible to operate a 'normal' service we are proud that we have been able to operate the best service possible in the conditions.

As a direct consequence of the weather and in line with most other ambulance trusts across England, our year to date performance has suffered. We are working to maximise recovery. The past few months have been extreme, both in terms of call volumes and weather conditions, which has highlighted the importance of the Trust continuing to strengthen its operational capacity and resilience.

In order to provide a local perspective I have attached a table (Appendix 1) showing performance within each PCT, it is important to remember however that the Trust is commissioned to achieve the targets on a SCAS wide basis not by individual locality.

Lightfoot B19 Review

Ambulance Trusts are required to respond to serious but non life threatening cases within 19 minutes. The SCAS Board has been concerned for some time that some patients wait too long for an ambulance. Such delays impact on patient care and can place additional pressures on our clinical staff and those working in our control centres. In order to reach a contract settlement with our Commissioners for 2009-10 it was jointly agreed that an independent review would be commissioned with "all parties agreeing to abide with the outcomes"

- The key objective of the review was to make recommendations on the future delivery of a resilient Cat B performance and the level of resources necessary to achieve this

The key findings of the report were published in December 2009. The report identifies that the Trust has a significant shortage of ambulance resources necessary to achieve the Cat B national target with the largest shortfall being in Hampshire.

	Shortfall - hours per week
Hampshire	5013
Oxford / Bucks	785
Berkshire	1278
Total	7076

SCAS is currently in discussions with our Commissioners regarding how we can bridge this gap. Clearly this will be challenging in the current financial climate. Further efficiency opportunities have been identified for SCAS which are being implemented.

Increasing Demand

Activity levels continue to increase with SCAS as a whole seeing a 4.52% increase in all calls over the first three quarters of the year compared to 2008. The following table shows growth in demand by PCT for the same period.

Berkshire East PCT	9.59%
Milton Keynes PCT	9.39%
Berkshire West PCT	7.39%
Oxfordshire PCT	5.56%
Buckinghamshire PCT	4.65%
Hampshire PCT	4.1%
Southampton City PCT	-1.66%
Portsmouth PCT	-3.84%



Activity more than 5% for past 3 months



Activity more than 5% above plan



Activity over 2% above plan

It is pleasing to note that both Portsmouth and Southampton have seen declining month on month call volumes.

It is perhaps worth reiterating at this point that the primary demand pressures we have experienced over the last quarter has been in Category A calls which have increased by around 20%. Independent research developed nationally in preparation for Pandemic Flu indicates that demand at this level will generate a drop in performance of approximately 10%.

Non Conveyance

This is a key strategic priority for SCAs and our partners. We continue to take advantage of 'hear and treat' and 'see and treat' models of care as an alternative to conveyance to hospital emergency departments. We are continuing to increase the capacity of our Clinical Support Desks which is contributing to a reduction in the number of patients conveyed to hospital. From April – December 106,000 patients calling 999 (36%) were not conveyed. This compares well with other ambulance services nationally.

There is however significant variation across the PCT areas as shown in the following table. This may indicate scope for further joint investigation with our health and social care partners.

	% Non conveyed
<i>Berkshire East PCT</i>	41%
<i>Berkshire West PCT</i>	46%
<i>Buckinghamshire PCT</i>	37%
<i>Hampshire PCT</i>	33%
<i>Milton Keynes PCT</i>	27%
<i>Oxfordshire PCT</i>	38%
<i>Portsmouth PCT</i>	33%
<i>Southampton PCT</i>	33%

Joint HOSC Rural Review

The Trust has welcomed and participated fully with the Rural Review undertaken jointly by the Hampshire, Oxfordshire and Buckinghamshire HOSCs. Public meetings were held on the 27th November and 3rd December in Oxford and Winchester respectively. The Trust recognises the concerns relating to rural performance and has produced a discussion document on our website. We are currently waiting for the publication of the final report from the Review which we believe will be available towards the end of January.

West Berkshire Council undertook their own review of rural performance and their report was presented to their meeting on 19th January. A copy of their report, recommendations and the actions taken will shortly be made available on our website.

New SCAS Website

We have in the last few weeks launched our new website at www.southcentralambulance.nhs.uk considerable effort has gone into the website design and I hope that you will find the site much more user friendly.

Stakeholder engagement

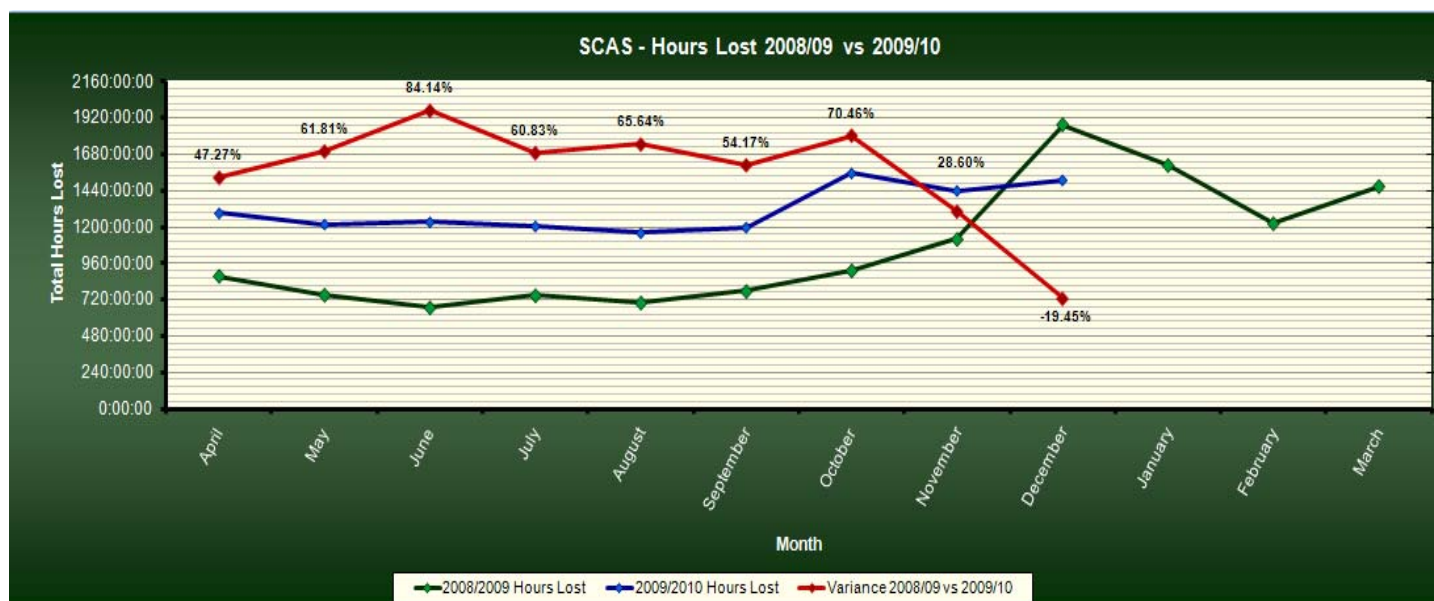
Over the past quarter the Trust has presented at a number of stakeholder meetings the most notable being:-

- Berkshire West PCT Board
- Bracknell Forest HOSC
- Reading Borough HOSC
- East Berkshire Joint HOSC
- Portsmouth City HOSC

Partnership Working

Towards Excellence – A&E Turnaround Project

SCAS has been working with all of the major hospitals across the region to reduce A&E Turnaround delays and there are early signs that real improvement is beginning to be made.



Delays at hospital have been increasing over the last two years but in December 09 they reduced by a total of 19.45% across SCAS. The following reductions were achieved by hospital:

John Radcliffe Hospital	-26.01%
Queen Alexandra Hospital	-19.85%
Wexham Park Hospital	-34.64%
Royal Berkshire Hospital	-20.66%
Southampton General Hospital	-8.76%

Progress at the John Radcliffe Hospital is particularly worth mentioning as this has shown a sustained reduction in turnaround times over a number of months. This success has been as a result of the hospital, PCT and SCAS working together, and making individual commitments to address the issues.

A number of factors have contributed:

- The introduction of the electronic handover system introduced in September – increased awareness of the need for timely handover and clear up
- Strong hospital leadership
- Improved procedures in ED – Triage system and improvements in patient flow
- Improved procedures in MAU – Triage system and seated waiting area
- Introduction of management of clear up exceptions with SCAS staff – daily reporting provides identification of crews who have exceeded the 15 minute clear up target and they are emailed by their line managers to ask for a reason for the delay.
- Both SCAS and ORH have congratulated staff on these achievements and the relationship between the two organisations is excellent.

It is believed that the JRH model will soon be available for roll out to other hospitals providing an example of good practice.

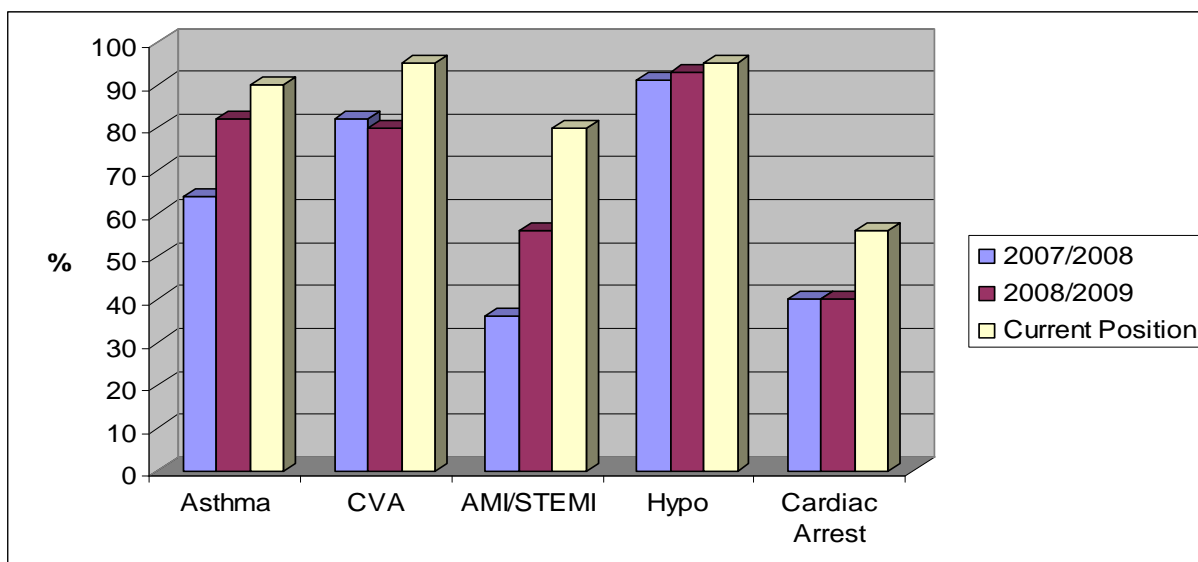
Towards Excellence - GP Triage

A joint GP Triage project involving Hampshire PCT and SCAS has been operating across Hampshire since November is producing some excellent results. The scheme allows ambulance staff to refer patients directly to a GP who will respond within 10 minutes. Between 200 and 300 patients are being referred through this system a month. The system provides real benefit for the patient who receives assessment or treatment in the right place and prevents unnecessary attendance to a hospital A&E Department. The service operates both within and out of hours.

Clinical Improvements.

There is a real focus and drive within SCAS to improve the quality of patient care and patient experience. The Trust benchmarks a range of clinical performance indicators with other English Ambulance Trusts. The following graph illustrates the improvement that have been made in clinical performance using these indicators over the past three years.

Clinical Improvements



Looking Forward

We are focused on recovering our performance to the point where we can exit the year in a strong position albeit we recognise that we will be unable to make up sufficient lost ground to enable us to achieve the year end national targets. We are not the only Ambulance Trust who are suffering in this way; as at week ending 10th January 2010 only two Trusts were achieving the year to date A8 target.

The B19 independent review has identified that SCAS does have significant resourcing issues particularly in Hampshire. It is our priority to address this issue together with our partners as we move into 2010/11.

We are beginning to see some very real and positive results from a number of the 'Towards Excellence' partnership projects and we will need to build on these over the coming months.

We recognise that other areas of the healthcare system are also facing pressures which are clearly unsustainable and the financial position is tightening across the health economy. Whole system solutions are required and SCAS is eager to work with partners across both the health and social care sector to address this problem. We believe that we can make a valuable contribution to managing urgent and unscheduled care demand and would welcome the opportunity to become involved in any future planning meetings.

Yours sincerely

John Divall, FT Project Director

SCAS A8 Performance by PCT to 31st December 2009

Against 75%	A8					A19				B19			
	Agreed Target	1 st Qtr	2 nd Qtr	3 rd Qtr	Y2D	1 st Qtr	2 nd Qtr	3 rd Qtr	Y2D	1 st Qtr	2 nd Qtr	3 rd Qtr	Y2D
Berkshire East PCT	75.0%	86.8%	76.9%	68.3%	76.6%	99.1%	98.4%	94.7%	97.2%	95.3%	93.1%	86.9%	92.2%
Berkshire West PCT	75.0%	79.1%	75.0%	69.9%	73.6%	98.5%	98.1%	94.1%	96.3%	96.7%	93.5%	87.6%	93.0%
Buckinghamshire PCT	65.6%	67.2%	67.0%	61.7%	65.2%	96.0%	95.8%	94.4%	95.3%	94.1%	93.9%	90.3%	92.8%
Hampshire PCT	70.7%	73.0%	69.5%	67.0%	69.7%	88.9%	89.9%	87.8%	88.8%	80.5%	80.7%	78.0%	79.7%
Milton Keynes PCT	75.0%	86.5%	86.2%	83.6%	85.4%	99.8%	99.5%	99.4%	99.5%	98.7%	98.8%	98.4%	98.6%
Oxfordshire PCT	72.5%	75.9%	73.9%	70.9%	73.5%	95.9%	95.4%	95.0%	95.4%	92.5%	92.2%	90.4%	91.7%
Portsmouth PCT	75.0%	85.5%	83.8%	80.5%	83.2%	98.6%	98.7%	97.9%	98.4%	87.4%	88.0%	85.3%	86.9%
Southampton PCT	75.0%	84.7%	83.2%	79.0%	82.1%	96.2%	96.7%	96.1%	96.3%	81.2%	81.3%	76.3%	79.5%

Chairman Mr Neil Goulden – Chief Executive Mr Will Hancock

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