



London Ambulance Service



NHS Trust



# North West London Joint Health Overview and Scrutiny Committee 20 April 2017



# How we care for the capital



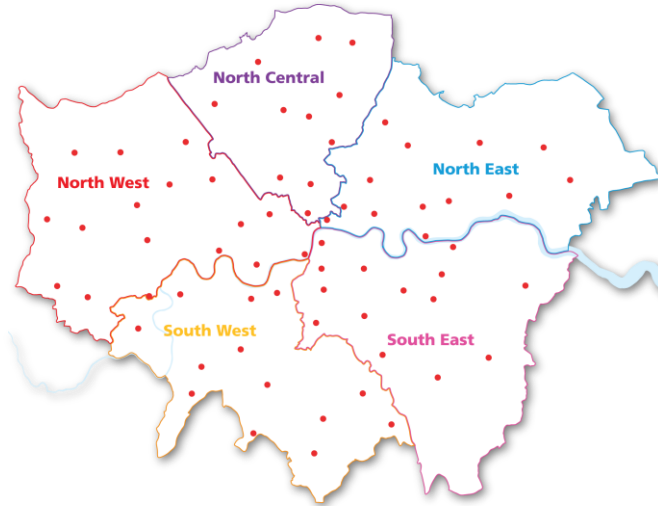
**2 Emergency  
Operations Centres**



**Patient Transport  
Service**

(contracts ending in July 2017)

**Operating out of over 70 sites**



**Motorcycle response unit**



**111 Services**

(recently rated as Good by CQC)



**Cycle response unit**



**2 HART teams**



# Some facts about London



**Multicultural**  
Capital city



**300**  
languages



- CRITICAL**  
An attack is expected imminently
- SEVERE**  
An attack is highly likely
- SUBSTANTIAL**  
An attack is a strong possibility
- MODERATE**  
An attack is possible but not likely
- LOW**  
An attack is unlikely

**On severe alert**



**Tourism**  
Population swells everyday



Seat of Government & Monarchy



**5**  
STPs in London



**5**  
Police forces



**32**  
Clinical Commissioning Groups



**3**  
Airports

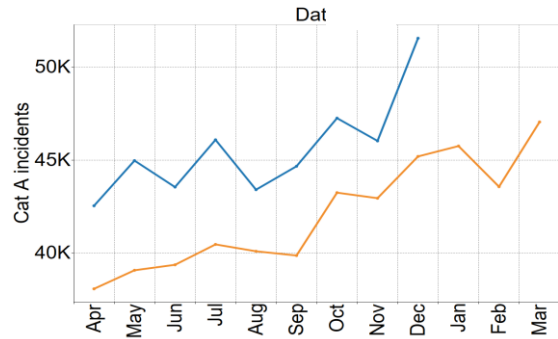


# The London Ambulance Service today

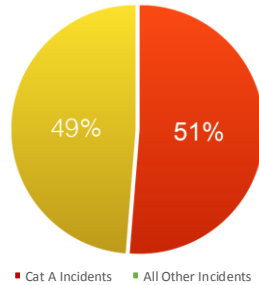
## Demand is increasing

Total incidents – **up 8.2%** from last year  
(April to December)

Cat A incidents – **up 11.3%** from last year  
(April to December)



Total Incidents - Cat A Share



## 1.9m calls

Demand for our services increase year on year, last year we responded to over 1.9m calls and 1.1m incidents



Growing number of frail elderly people with complex health needs are living alone, and therefore more likely to call upon the LAS



## 4,893 staff

63% of which are frontline  
Our staff are changing – more graduates, more women, higher expectations, no longer a “job for life”



Average job cycle time is **85min 46sec**

Average time with a patient is **42min 41sec**

## Pan-London Service



Patients with dementia, mental health needs and obesity provide increasing challenges for our services



# Demand for our services keeps increasing



- Eight of the top ten busiest weeks ever have been in 2016
- Eight of the top ten busiest months ever have been in 2016
- 2015/16 – significant increase in demand we attended 20,000 more incidents than 2014/15
- Three specific areas of growth have been reviewed; 111 referral to 999, health care professional (GPs) calls and incidents reported via the Metropolitan Police Service (MPS)
- These three areas represent 27% of total call volume in 2016/17 but 46% of the total increase seen in year.



# Managing demand



- We are working with wider NHS to reduce pressure on our Service- frequent callers, health care professional calls, GP admissions and NHS 111 requests for assistance
- We are working closely with MPS to understand increase in activity
- We had more people and vehicles out in 2016 compared to 2015 - increased the hours our ambulance and solo responders are available – equating to an additional 10,200 hours a week
- We have taken a proactive approach to demand management on social media.

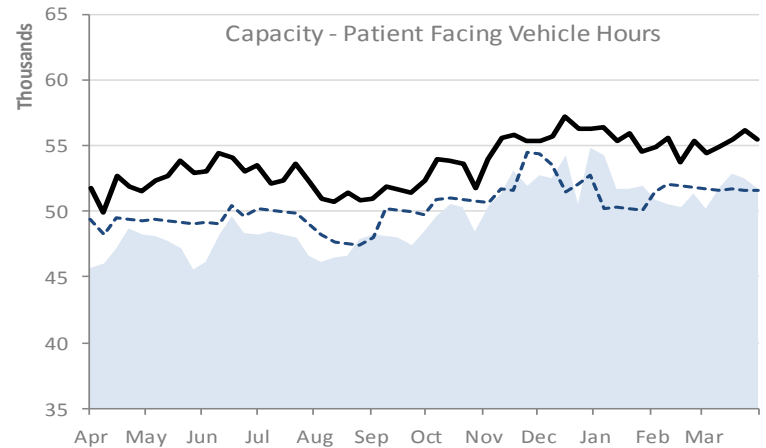
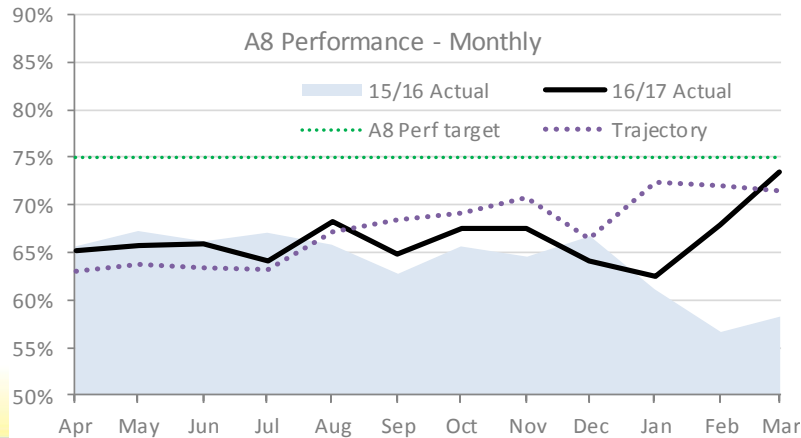
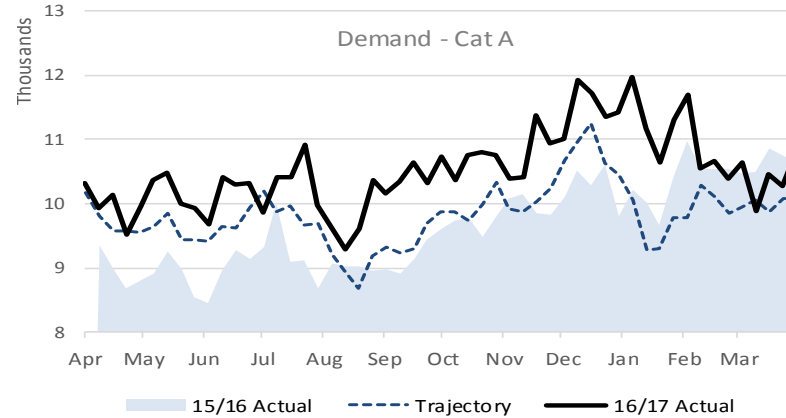
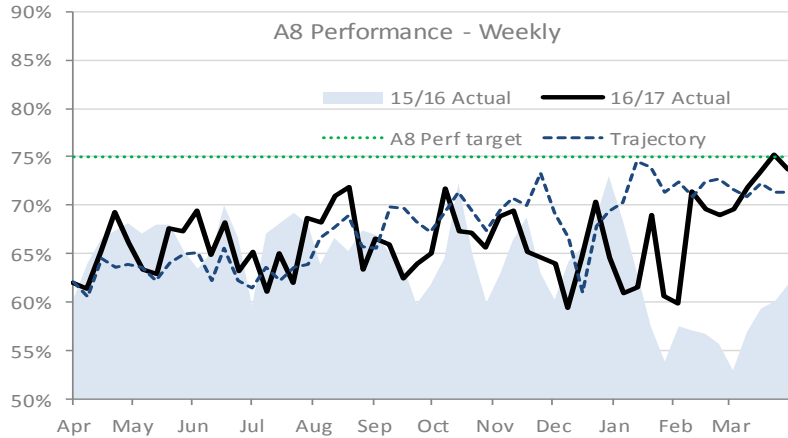


# Performance – across London



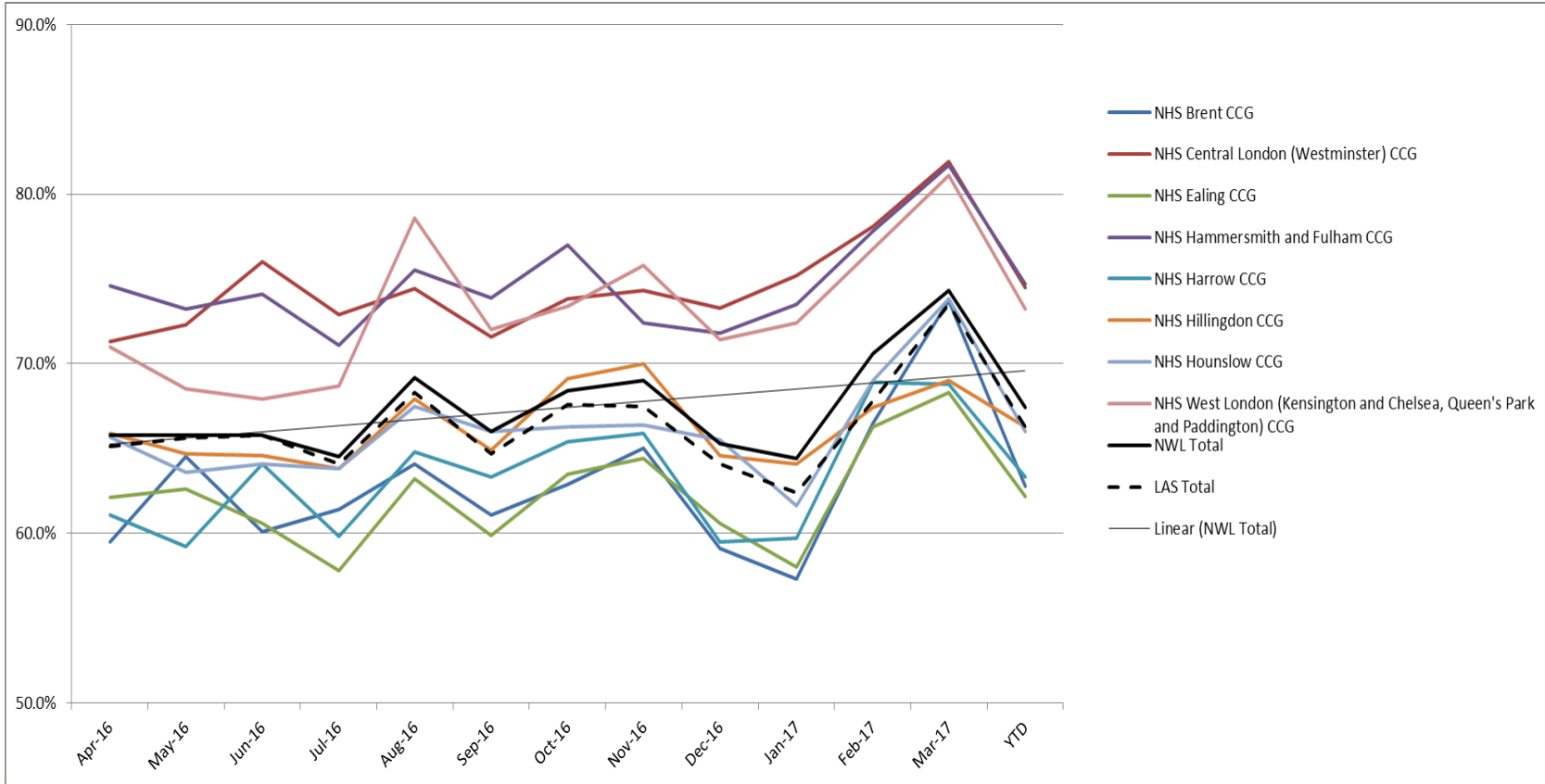
- Performance increased from 59.2% in 2014/15 financial year to 63.3% in 2015/16 financial year for Cat A8 calls (seriously ill and life threatening)
- We've seen improvement in our performance in 2015/16 however this has been challenging to maintain given the unprecedented demand we have been facing
- Cat A8 performance has improved and we are now one of the best performing Ambulance Trusts nationally.

# Performance – London YTD Overview





# Performance – response to patients NWL



# Performance – working with hospitals



- Emergency Departments (ED) have been particularly busy over winter period
- LAS conveyances to ED's have increased this winter, however, in proportion to number of calls attended this has reduced
- High stakeholder engagement with NWL ED's
- Engagement re ED re-development across NWL
- Daily NWL cluster teleconference
- Review of hospital flow and handover processes

# Performance – right care, right response

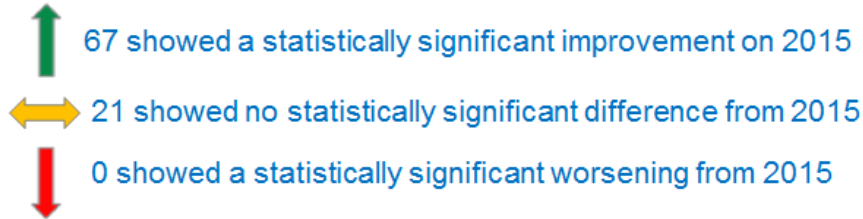


- Working with NWL CCG collaboration 'Demand Management Forum' to improve responses from:
  - Frequent callers – multi disciplinary team reviews and care plans
  - Care / residential homes – ensure appropriate access to the right pre-hospital pathway
  - GP's / Health Care professionals – closer working to meet the needs of both GP and patients
  - 111 – Ensure 111 referrals to LAS are appropriate
- Review of care pathways – with move towards sector standardisation of referral criteria

# Our Staff:

- Improved staffing levels across sector (90%) and Trust (95%)
- Staff survey results

Of the 88 questions in the survey:

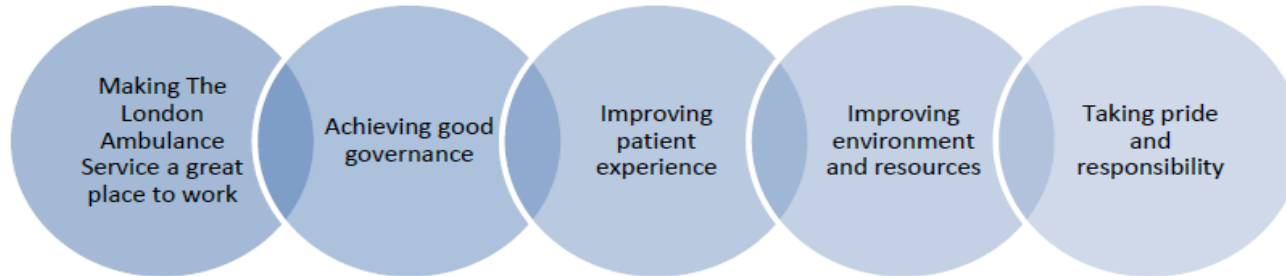


- Appraisals – 78% staff had an appraisal in last 12 months (+40% on previous)
- Key improvements:
  - Appraisals
  - Line manager support and team working
  - Use of patient feedback
  - Incident reporting
  - Training and advocacy





- CQC visited the trust to undertake a comprehensive inspection of the Service on 7,8,& 9 February 2017
- Previously visited in June 2015- Trust was placed in special measures
- Published our Quality Improvement Plan in Jan 2016, setting out the measures to get us out of special measures



# Our rating in 2015

Domain	Rating
Safe	Inadequate
Effective	Requires improvement
Caring	Good
Responsive	Requires improvement
Well-led	Inadequate
Overall	INADEQUATE

## Safe

Frontline staff shortages	Equipment
HART team non-compliant	Vehicles
Medicines Management	Incident reporting and learning

## Well-led

Bullying & harassment	Vision and values
No Board Director responsible for medicines	Appraisal and training
Risk registers	BME staff



# How we have improved

## Strengthened leadership



- New Chairman
- 2 new Non Executives
- 3 New Directors
- Improved committee structure



## Increased our frontline capacity through recruitment

Frontline turnover **16%** → **8%**  
Frontline vacancies **13%** → **8%**  
Paramedic vacancies **28%** → **10%**

Taken action on Bullying and harassment: employing a specialist and speak up Guardian; revising our processes and improving our training so that we address issues and tackle them early



## Improved our systems of Medicines Management

800 new drug packs

Perfect  
Ward



We can now track drugs administered to individual patients, and drug usage by clinician through our new MedMan system

## Improved vehicles and equipment



60 new FRUs



New make ready service in 5 hubs with full roll out by end July 2017

Not experienced harassment, bullying or abuse from managers

2014/15	2015/16
69%	76%



# How we have improved



## Resilience – HART



The NHSE annual assurance review resulted in substantial assurance being given to the Trust



Invested £10m in Quality improvement programme and £20m in new vehicles

Introduced a new appraisal system designed in partnership with staff



11% → 75.3%

Restated our vision and Values and built these into our new appraisal system

Care | Clinical Excellence | Commitment

## Addressed under reporting of risks and incidents

Introduced Datix web and trained managers in risk which has resulted in a 47% increase in incidents being reported and better quality, up to date risk registers more reflective of local issues and worries



Warning notice to requirement notice





# Looking forward

- We are confident that we have demonstrated to the CQC the positive impact over the last year, has made on our clinical care, our capacity and performance and our staff morale and culture.
- We are working to make LAS Great: great for patients; and great for staff
- We are embedding the changes
- We are setting a strategic direction in partnership with our patients/public, commissioners and staff
- Our transformation programme is being created to ensure sustained improvement
- In the face of increasing demand we will deliver an urgent and emergency care service that responds to our patients and STPs needs





London Ambulance Service **NHS**  
NHS Trust



Thank you ... any questions?

