



| Agenda Item |
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| 4.2 |

Quality Safety and Outcomes Sub-Committee

Director of Commissioning for Ambulance Services and 111

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| Dyddiad y Cyfarfod / Date of Meeting | 03/02/2025 |
| Statws Cyhoeddi / Publication Status | Open/ Public |
| | Not Applicable |
| Awdur yr Adroddiad / Report Author | Sian Lane, Senior Lead Nurse, Quality and Delivery Frameworks |
| Cyflwynydd yr Adroddiad / Report Presenter | Carole Bell Director of Nursing and Quality |
| Noddwr yr Adroddiad / Report Sponsor | Ross Whitehead, Director of Commissioning for Ambulance and 111 |

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| Pwrpas yr Adroddiad / Report Purpose | For Noting Choose an item. |
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| Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/Group) | | |
|-------------------------------------------------------------------------------------------------------------------|-------------|----------------|
| Committee / Group / Individuals | Date | Outcome |
| Ambulance and 111 Commissioning Group | 17/10/2024 | Noted |

| Acronyms / Glossary of Terms | |
|-------------------------------------|--------------------------------------------------|
| EMERTS | Emergency Medical Retrieval and Transfer Service |
| HB's | Health Boards |
| JCC | NHS Wales Joint Commissioning Committee |
| NEPTS | Non-Emergency Transport Service |
| NRI | National Reportable Incident |
| QSO | Quality, Safety and Outcomes Sub-Committee |

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| PTR | Putting Things Right |
| RSCO | Return of Spontaneous Circulation |
| SCIF | Serious Case Incident Forums |
| STEMI | ST- Elevation Myocardial Infarction |
| WAST | Welsh Ambulance Services NHS University Trust |

1. SITUATION/BACKGROUND

The Joint Commissioning Committee (JCC) plans and commissions ambulance and 111 services on behalf of Local Health Boards (LHB). The purpose of this report is to provide Quality Safety and Outcome Sub Committee (QSOC) members with an update on quality and safety matters on issues across the commissioning portfolio.

Specifically, this report will update members on:

- Emergency Ambulance Pressures
- Quality and Safety Dashboard
- Ambulance Measures Review.

2. EMERGENCY AMBULANCE PRESSURES

Members of the former committee have previously been cited on the challenges in commissioning the provision of safe, effective and timely emergency ambulance services. Ambulance commissioning remains the highest risk for the JCC, with ongoing operational challenges and performance delivery, which are likely to compound the harm and quality levels of service delivery. Members will note the recent significant pressures across the urgent and emergency care system, including the declaration of a critical incident by the Welsh Ambulance Services University NHS Trust (WAST) on 30 December 2024.

This pressure has continued into January, with significant community and handover waits across Wales. Operational actions continue to be developed collaboratively between WAST and Health Boards. The commissioning team will continue to work with WAST and health board colleagues to understand the level of harm within the system and to develop additional processes for the committee to assure itself that it is discharging its statutory responsibilities for the planning and securing of emergency ambulances.

A JCC Strategy Workshop took place on the 10 December 2024 to develop an improvement plan across the ambulance patient journey that will support the Committee's ambition for the delivery of ambulance services in Wales.

3. QUALITY AND SAFETY DASHBOARD

A Quality and Safety Dashboard has been produced in line with the requirements of the Duty of Candour and the Duty of Quality and reports around the Six Quality Domains. The dashboard is attached as **Appendix 1** reporting to the end October

2024. This has been due to some technical issues to access the data from Qlik wprk is ongoing to resolve this and will be picked up as part of the reporting outlined in section 4 of the report. The following points highlight the areas for escalation to the committee and the actions taken. They are presented under the headings of the domains of the Duty of Quality Health and Care Standards.

3.1 Safe, Timely and Efficient Care

3.1.1 The 999 Service

- The Trust has not reached the 65% red response target, but is reaching more red patients in 8 minutes, as overall red demand increases (18.6% higher than same period last year).
- Ambulance production is good (93%) with abstractions as benchmarked at 32%.
- Handover levels remain extreme. The Trust lost >20,000 ambulance hours in Sep-24, higher than Apr-23. Rosters are predicated on 6,000 hours.
- Members will note the significant avoidable patient harm caused by extended community waits and waits outside ED's. In the reporting period:
 - c16,000 waits over 1 hour outside ED
 - 23 serious cases passed to HBs through joint investigation framework
 - Significant unmet demand with between a third and a quarter of incidents cancelled by the patient or 'can't send'.
 - 28 NRIs reported by the Trust to WG, during first seven months of 24/25.

3.1.2 The 111 Service

- There has been significant improvement in call answering and clinical ring back times, through focus on improving production and productivity.
- Members will note the range of actions being deployed through winter, including medicines management, access to EMS pathways and access to GMS services (health board hubs).

3.1.3 Ambulance Care

Renal and oncology performance is **stable**, but Ambulance Care is coming under more pressure from high demand. This position will continue to be monitored.

3.1.4 Emergency Medical Retrieval and Transfer Service

There is significant additional work for the Ambulance and 111 Services Commissioning Team to respond to the judicial review which remains ongoing. Committee Members have previously been appraised of the limited capacity in the team for its 'business as usual' requirements. The team alongside the wider JCC team is working to mitigate this but capacity will be fragile in the short to medium term until the Occupational Change Process is complete and the structure agreed.

There are public and political expectations on the delivery of Recommendation 4, (the bespoke road based model). The sub-committee will need to recognise this

whilst it progresses this work alongside its broader commissioning responsibilities.

3.2 Concerns and Patient Safety

The improvement in complaints timescales continues with WAST exceeding the minimum target of 75% 30 working day compliance for the first time in several years.

Acknowledgement of formal complaints is also fully compliant with the national timescales. It is anticipated that 30 working day compliance will begin a temporary decrease as the team begins to focus on resolving long-standing complaints and the total number of open cases.

Serious Case Incident Forums (SCIF) themes consistently relate to delayed response and call categorization, predominately ineffective breathing which is being discussed at national ambulance forums as a consistent theme.

All patient safety incidents graded moderate or above will continue to be reviewed by the Patient Safety Team, who will consider the requirement to enact the Duty of Candour and contact patients and families as appropriate.

3.3 Effective Care

The Trust is making rapid progress on transforming the model of care with aspects of it going live. The model includes rapid clinical screening, a remote integrated care service and improved urgent care response at scene.

The Clinical Indicator Improvement Plan is taking effect. Review work in this space identified good clinical practice, but required improvements to ensure correct completion of the ePCR.

The ROSC continues to fluctuate due to the small numbers, but work to connect WAST data to the Welsh Cardiac Database has advanced.

For the broader intention of linking patient-level data, WAST and DHCW Information Governance experts have crafted a document which will set out the legal basis and IG requirements for sharing identifiable data for analysis of whole patient journeys.

The Trust continues to report call to door times as part of its duty of candour. These are too long, in line with longer amber response times.

4. AMBULANCE MEASURES REVIEW

Members will note that on 26 November 2024, the Cabinet Secretary outlined in an oral statement to assembly members of the intention to establish a National Group to review the appropriateness of emergency ambulance response measures and targets.

The group will consider the Health and Social Care Committee's recommendation in the context of the strategic priorities. This means a focus on measuring the quality and safety of the service, as set out in the NHS Wales health and care quality standards, and standards in the NHS Wales performance framework. The Group will also consider the appropriateness of the national target in the context of the ongoing evolution of the Trust's clinical model.

The Group is due to produce options in January with advice to the Cabinet Secretary to follow in February, both the Director of Commissioning for Ambulance and 111 Services and the Interim Chief Commissioner are members of the Group.

5. QUALITY AND SAFETY REPORTING

The Ambulance and 111 commissioning team will look to evolve the existing quality and safety reporting practices, creating greater alignment between quality and safety and performance reporting. Updates on this work will be provided to members as the work progresses.

Further work is planned with the Welsh Ambulance Service (WAST) regarding the reporting of Complaints and Concerns related to commissioned services. This will be aligned to the NHS Executive weekly brief and the newly developed Beacon dashboard for consistency in approach. Since the establishment of the JCC former monitoring groups have been paused with the aim of reinstating them following discussions.

6. ASSESSMENT

| Objectives / Strategy | |
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| Dolen i Amcan (au) Strategol CBC / Link to JCC Strategic Objectives(s) | Ensure Quality |
| | Improve Equity and Population Health |
| Dolen i Ddeddf Llesiant Cenedlaethau'r Dyfodol – Nodau Llesiant / Link to Wellbeing of Future Generations Act – Wellbeing Goals 150623-guide-to-the-fg-act-en.pdf (futuregenerations.wales) | A Healthier Wales |
| | A More Equal Wales |
| Dolen i Hwyluswyr Ansawdd | Learning, Improvement & Research Leadership |

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| <p>(Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) /</p> <p>Link to Enablers of Quality</p> <p>(Duty of Quality Statutory Guidance (gov.wales))</p> | |
| <p>Dolen i Feysydd Ansawdd</p> <p>(Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) /</p> <p>Link to Domains of Quality</p> <p>(Duty of Quality Statutory Guidance (gov.wales))</p> | Effective |
| | Efficient Equitable Person Centred Timely Safe |
| <p>Effaith Amgylcheddol/ Cynaliadwyedd (5R) / Environmental /Sustainability Impact (5Rs)</p> | No - Not Applicable |
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| Impact Assessment | | |
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| <p>Ansawdd</p> <p><i>Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Ansawdd? /</i></p> <p>Quality</p> <p><i>Have you undertaken a Quality Impact Assessment Screening?</i></p> | Yes: <input type="checkbox"/> | No: <input checked="" type="checkbox"/> |
| | Outcome: | Individual Quality Impact Assessments are carried out as necessary and can be requested. |
| <p>Cydraddoldeb</p> <p><i>Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Gydraddoldeb? /</i></p> <p>Equality</p> <p><i>Have you undertaken an Equality Impact Assessment Screening?</i></p> | Yes: <input type="checkbox"/> | No: <input checked="" type="checkbox"/> |
| | Outcome: | Individual Equality Impact Assessments are carried out as necessary and can be requested. |
| Cyfreithiol / Legal | Yes (Include further detail below) | |

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| | The ongoing Judicial Review may have legal implications which will need to be considered by the Committee in the future |
| Enw da / Reputational | Yes (Include further detail below) |
| | Reputational impact of delivering those activities delegated to the NHS Wales Joint Commissioning Committee |
| Effaith Adnoddau <i>(Pobl / Ariannol) /</i> Resource Impact <i>(People / Financial)</i> | Yes (Include further detail below) |
| | Any resource implications are identified in the in the paper are described within the body of the text. This is specifically related to the structure going forward to support the service. |

7. RECOMMENDATIONS

The Quality Safety Outcomes Sub Committee is asked to:

- **Note** the updates summarised in this report; and
- **Note** the risks described and escalate as necessary.

8. NEXT STEPS

Further updates will be provided at future meetings.