

Agenda Item

4.3

Quality Safety and Outcomes Sub-Committee
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Director of Commissioning for Ambulance Services & 111 Report
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Dyddiad y Cyfarfod / Date of Meeting	31/03/2025
Statws Cyhoeddi / Publication Status	Open/ Public Not Applicable
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Noddwr Gweithredol yr Adroddiad / Report Executive Sponsor	Ross Whitehead, Director of Commissioning for Ambulance and 111, NWJCC

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
(Insert Details)	Click or tap to enter a date.	Choose an item.

Acronyms / Glossary of Terms	
CSP	Clinical Safety Plan
DHCW	Digital Health and Care Wales
ED	Emergency Department
EMRTS	Emergency Medical Retrieval and Transfer Service
ePCR	Electronic Patient Clinical Record
IG	Information Governance
JCC	NHS Wales Joint Commissioning Committee
NRI	National Reportable Incident

ROSC	Return of Spontaneous Circulation
UCS	Urgent Care Service
WAST	Welsh Ambulance Services NHS University Trust

1. SITUATION/BACKGROUND

The purpose of this report is to provide members with an update on quality and safety matters within the Ambulance Services and 111 commissioning portfolio.

The Quality 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. This is attached as **Appendix 1** to this report.

2. SPECIFIC MATTERS FOR CONSIDERATION

2.1 999 Services

Members will note the Red 8-minute performance continues to remain below the 65% target, increasing marginally during December 2024 to 47.59%.

In December 2024, 160 ambulances were stopped due to Clinical Safety Plan (CSP) alternative transport and 474 were stopped due to Clinical Safety Plan (CSP) 'Can't Send' options. In addition, 10,528 ambulances were cancelled by patients (including patients refusing treatment at the scene), a decrease from 11,154 in November 2024.

In December 2024, of the 6,506 patients who waited outside an Emergency Department (ED) for over an hour to be handed over to the care of the hospital, it could be assumed that 15% (975 patients) would experience no harm, 53% (3,448 patients) would experience low harm, 23% (1,496 patients) would experience moderate harm and 9% (585 patients) would experience severe harm.

2.2 111 Services

The 111-call abandonment rate increased to 14.5% in December 2024 from 6.4% in November 2024. The percentage of 111 calls answered within 60 seconds decreased, from 46.2% in November 2024 to 36.3% in December 2024 and continues to remain below the 95% target

The highest priority calls, P1CT, achieved the 90% target, recording 93.4% in December 2024.

2.3 Ambulance Care Services

Members will note there is a continued focus on the use of digital technology for messaging communications and booking scripts to improve patient experience and a new tighter code set of Urgent Care Service (UCS) crews has been introduced to focus on core work and their scope of practice.

2.4 Emergency Medical Retrieval and Transfer Service – Judicial Review

Members will note the significant additional work for the Ambulance Services and 111 Collaborative commissioning team to respond to the judicial review concerning the Emergency Medical Retrieval and Transfer Service (EMRTS) decision. 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.

2.5 Concerns and Patient Safety

Members will note WAST's performance against the target of 75% responses issued within 30 working days has recovered following an exercise to reduce the number of overdue open complaints. Open complaint volumes are, however, gradually increasing again, reflective of WAST receiving more complaints than it closes each month. This will be an area of focus, however operational pressures over the winter period present a risk to maintaining progress.

The number of National Reported Incidents (NRIs) reported and the number of Joint Investigations of Moderate harm or above identified remains at a reasonably consistent level, although it is anticipated that this may increase over the winter months.

2.6 Clinical Model Transformation

Handover delays continue to present patient safety risks and extended waits in the community with a deteriorating red performance being outside of what is acceptable to deliver a safe emergency service. Approximately 10,000 patients per month are cancelling their ambulance requests due to long response times, likely leading to harm and them potentially make their own way to emergency departments. WAST's focus is to implement a change in how it responds to patient demand through the Clinical Transformation Programme (CMT).

2.7 Clinical Outcomes

The Clinical Indicator Improvement Plan is taking effect. Review work in this space identified good clinical practice, however improvements are required to ensure the correct completion of the Electronic Patient Clinical Record (ePCR).

Return of Spontaneous Circulation (ROSC) continues to fluctuate due to the small numbers, but work to connect WAST data to the Welsh Cardiac Database is well advanced.

For the broader intention of linking patient-level data, WAST and Digital Health Care Wales (DHCW) information governance (IG) 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.

WAST 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.

2.8 Quality and Safety Reporting

The Ambulance Services 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.

3. KEY RISKS/MATTERS FOR ESCALATION

Members have regularly discussed the challenges in commissioning the provision of safe, effective and timely emergency ambulance services.

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.

4. ASSESSMENT

Objectives / Strategy	
Dolen i Amcan (au) Strategol CBC / Link to JCC Strategic Objectives(s)	Not Applicable
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
	If more than one applies please list below: A more equal Wales
Dolen i Hwyluswyr Ansawdd <i>(Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) / Link to Enablers of Quality</i> (Duty of Quality Statutory Guidance (gov.wales))	Data to Knowledge
	If more than one applies please list below: Whole systems perspective Leadership Learning, improvement and research
	Effective

Dolen i Feysydd Ansawdd <i>(Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) /</i> Link to Domains of Quality <i>(Duty of Quality Statutory Guidance (gov.wales))</i>	If more than one applies please list below: Efficient Equitable Patient centred Timely Safe
	Effaith Amgylcheddol/ Cynaliadwyedd (5R) / Environmental /Sustainability Impact (5Rs)
	No - Not Applicable
	If more than one applies please list below:

Impact Assessment		
Ansawdd <i>Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Ansawdd? /</i> Quality <i>Have you undertaken a Quality Impact Assessment Screening?</i>	Yes: <input type="checkbox"/>	No: <input checked="" type="checkbox"/>
	Outcome:	If no, please include rationale below: Reporting on quality matters from last JCC meeting.
Cydraddoldeb <i>Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Gydraddoldeb? /</i> Equality <i>Have you undertaken an Equality Impact Assessment Screening?</i>	Yes: <input type="checkbox"/>	No: <input checked="" type="checkbox"/>
	Outcome:	If no, please include rationale below: Reporting on performance matters and the impact on the wider health system. Quality and safety matters also considered.
Cyfreithiol / Legal	There are no specific legal implications related to the activity outlined in this report.	
Enw da / Reputational	Yes (Include further detail below)	
	Ambulance performance of significant concern to the public and impacts on health boards reputation	
Effaith Adnoddau <i>(Pobl /Ariannol) /</i> Resource Impact <i>(People / Financial)</i>	There is no direct impact on resources as a result of the activity outlined in this report.	

5. RECOMMENDATIONS

Members are asked to:

- **Note** the content of the Quality and Safety Report; and
- **Discuss** and **note** the impact of performance and the resulting challenges in commissioning the provision of safe, effective and timely emergency ambulance services.

6. NEXT STEPS

Further enhancements of the availability of quality information, with a specific focus on understanding the outcome impact for patients and creating greater alignment between quality and safety and performance reporting.