



Southampton City Council

Health Overview and Scrutiny Panel

5 September 2024

Executive Summary

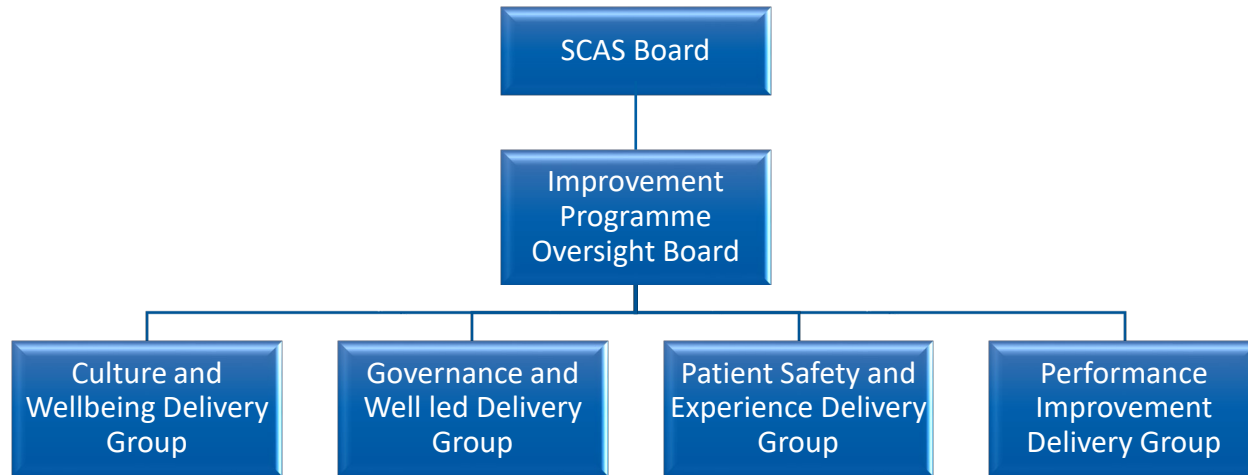


- The CQC published a warning notice following an inspection of South Central Ambulance Service in May 2022 and in August of the same year, it published its report and rated the organisation as inadequate with particular concerns regarding the leadership of the organisation and the safety culture.
- As a consequence of the report, SCAS was placed into NHS Oversight and Assurance Framework Segment 4 and entered the NHS Recovery Support Programme
- Over the last two years, we have remained in the Recovery Support Programme and undergone our own internal improvement programme which continues to support fundamental change
- During that time, we have recruited a new chief executive and seen a number of other changes at executive level. We continue to stabilise our executive team.
- We have delivered significant improvements across the organisation, particularly in the Quality and Patient Safety area, which has effectively been removed from enhanced oversight.
- However, we will remain in the NHS Recovery Support Programme. Our focus will be on delivering longer term strategic and cultural change across the organisation to enable us better to respond to the ongoing financial and operational reality in the NHS.



David Eltringham, Chief Executive

Improvement Plan Overview



- People voice
- Compassionate leadership
- Abuse of power & sexual safety
- Personal development, talent & CPD

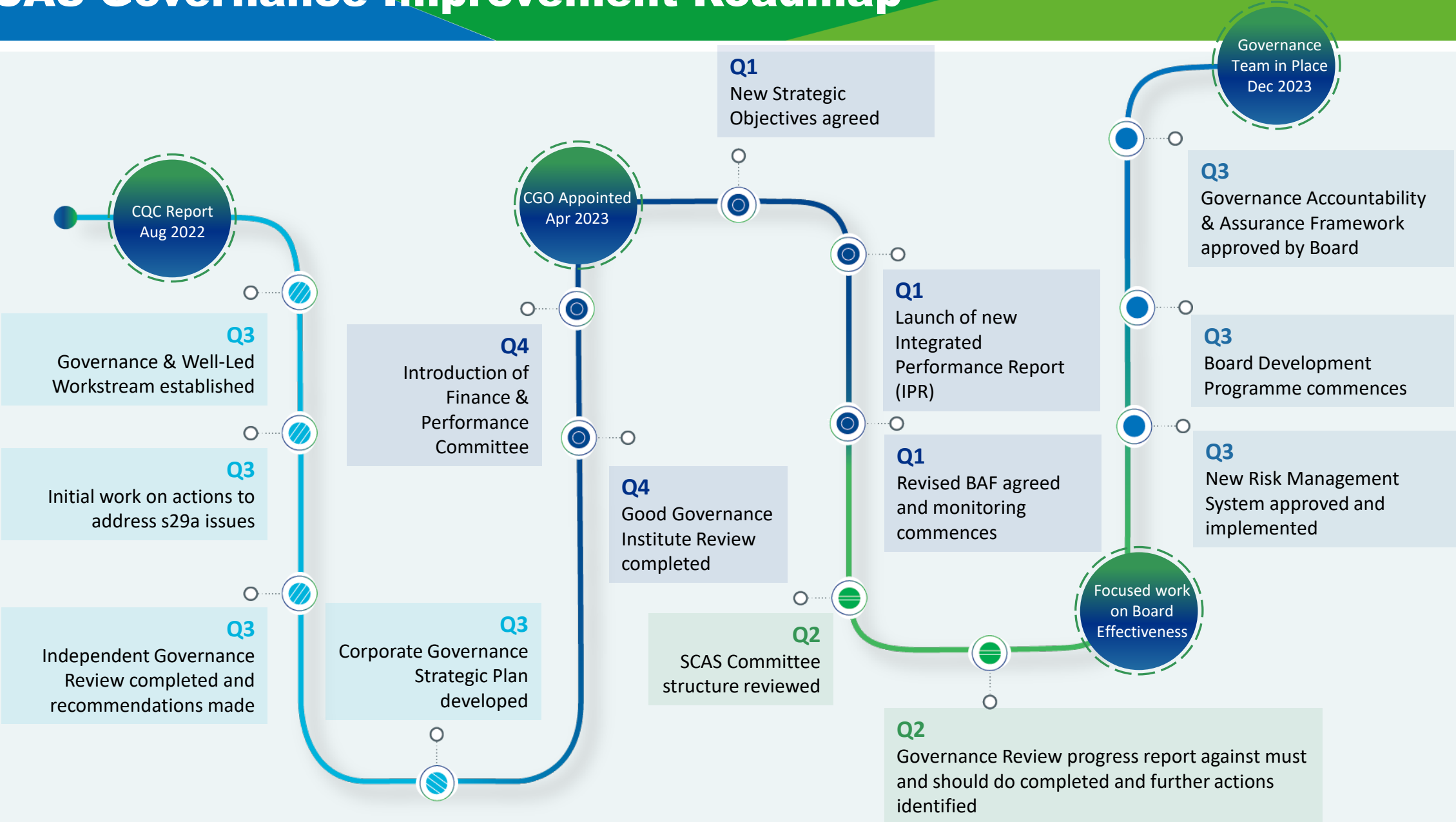
- Board and Committee structures
- Governance information
- Board information
- Risk management
- Communications and engagement

- Safeguarding
- Patient safety and incident management
- Medical devices
- Medicines management
- Infection prevention and control

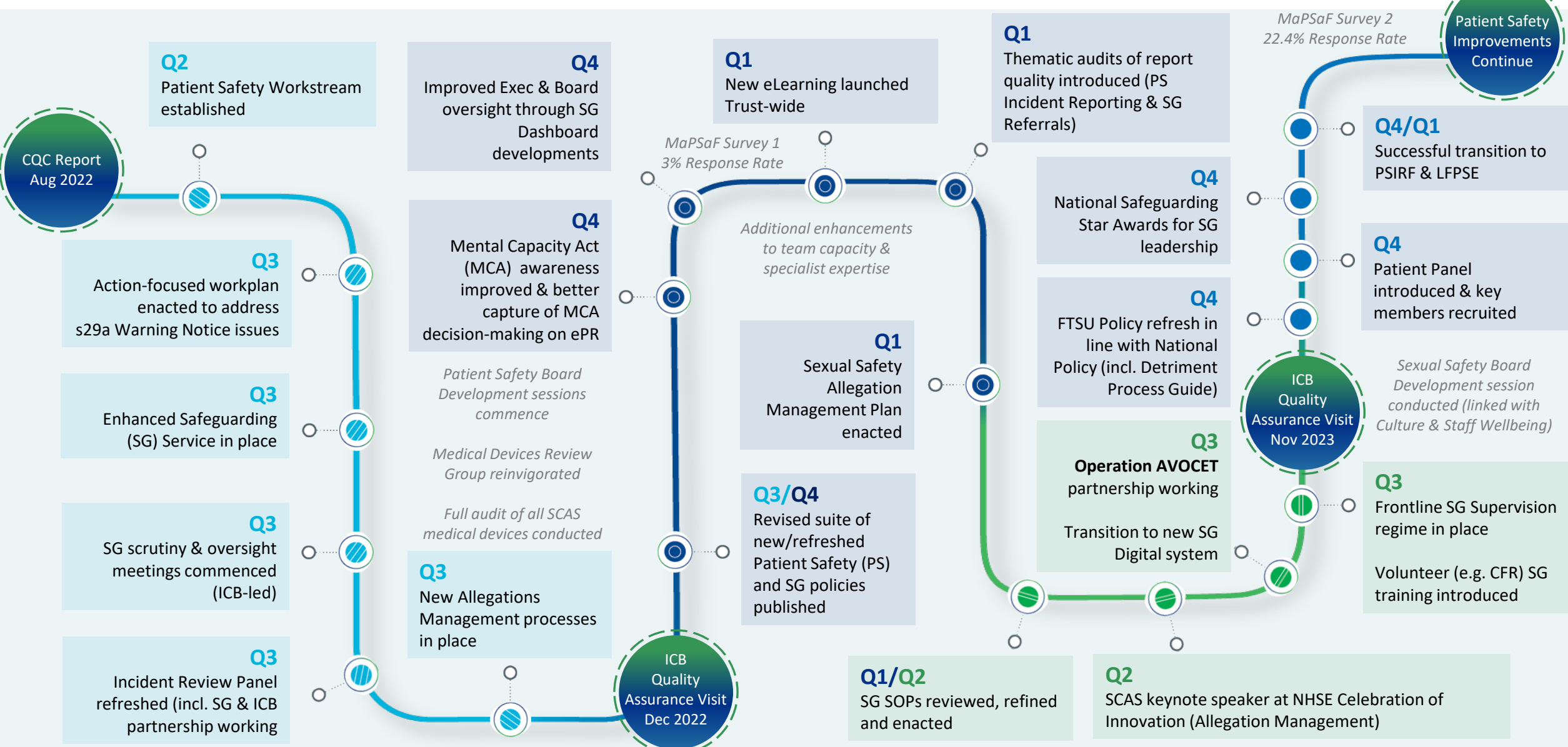
- Response / waiting times
- Demand / capacity
- Staffing:
- Training / support
- Recruitment / retention

- Over the last two years we have maintained our improvement programme and governance arrangements based around four workstreams, each led by an executive director and a senior responsible officer.
- We report monthly to the Board and to the Executive Management Committee.
- We meet with NHS England and Hampshire and Isle of Wight ICB regularly to review our progress.
- As we move forward on our improvement journey, we are working on building improvement into our core business, enabling us to stand down our bespoke programme arrangements.

SCAS Governance Improvement Roadmap

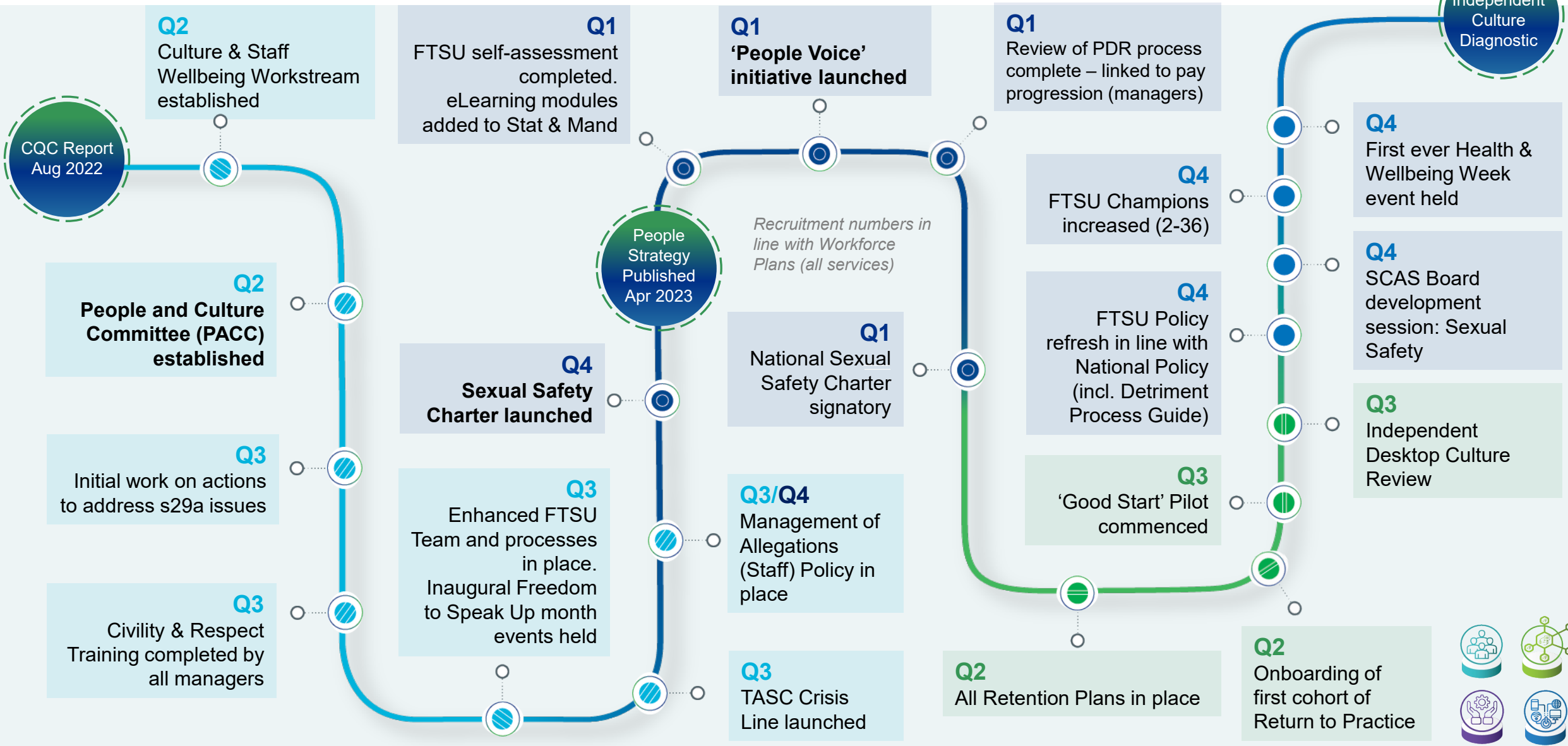


Patient Safety & Safeguarding Improvement Roadmap

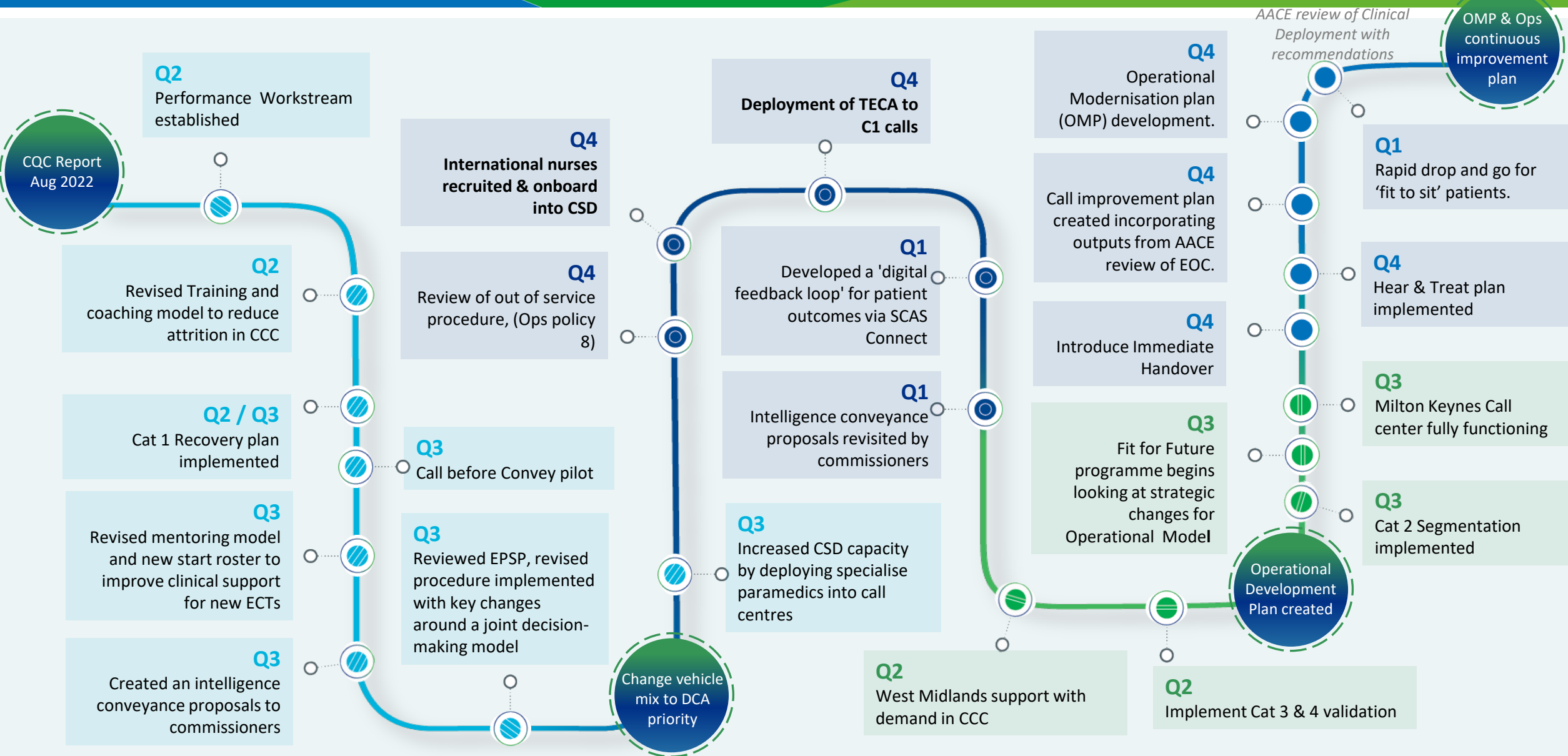


Culture & Staff Wellbeing Improvement Roadmap

International recruitment increase (34 nurses / 49 paramedics)



Performance Improvement Roadmap



CQC Report
Aug 2022

Q2
Performance Workstream
established

Q2
Revised Training and
coaching model to reduce
attrition in CCC

Q2 / Q3
Cat 1 Recovery plan
implemented

Q3
Revised mentoring model
and new start roster to
improve clinical support
for new ECTs

Q3
Created an intelligence
conveyance proposals to
commissioners

Q4
International nurses
recruited & onboard
into CSD

Q4
Review of out of service
procedure, (Ops policy
8)

Q3
Call before Convey pilot

Q3
Reviewed EPSP, revised
procedure implemented
with key changes
around a joint decision-
making model

Change vehicle
mix to DCA
priority

Q4
Deployment of TECA to
C1 calls

Q1
Developed a 'digital
feedback loop' for patient
outcomes via SCAS
Connect

Q1
Intelligence conveyance
proposals revisited by
commissioners

Q3
Increased CSD capacity
by deploying specialise
paramedics into call
centres

Q4
Operational
Modernisation plan
(OMP) development.

Q4
Call improvement plan
created incorporating
outputs from AACE
review of EOC.

Q4
Introduce Immediate
Handover

Q3
Fit for Future
programme begins
looking at strategic
changes for
Operational Model

Q2
West Midlands support with
demand in CCC

Q2
Implement Cat 3 & 4 validation

AACE review of Clinical
Deployment with
recommendations

Operational
Development
Plan created

OMP & Ops
continuous
improvement
plan

Q1
Rapid drop and go for
'fit to sit' patients.

Q4
Hear & Treat plan
implemented

Q3
Milton Keynes Call
center fully functioning

Q3
Cat 2 Segmentation
implemented

Safeguarding and S29a

ICB Quality Assurance Visit / OFSTED



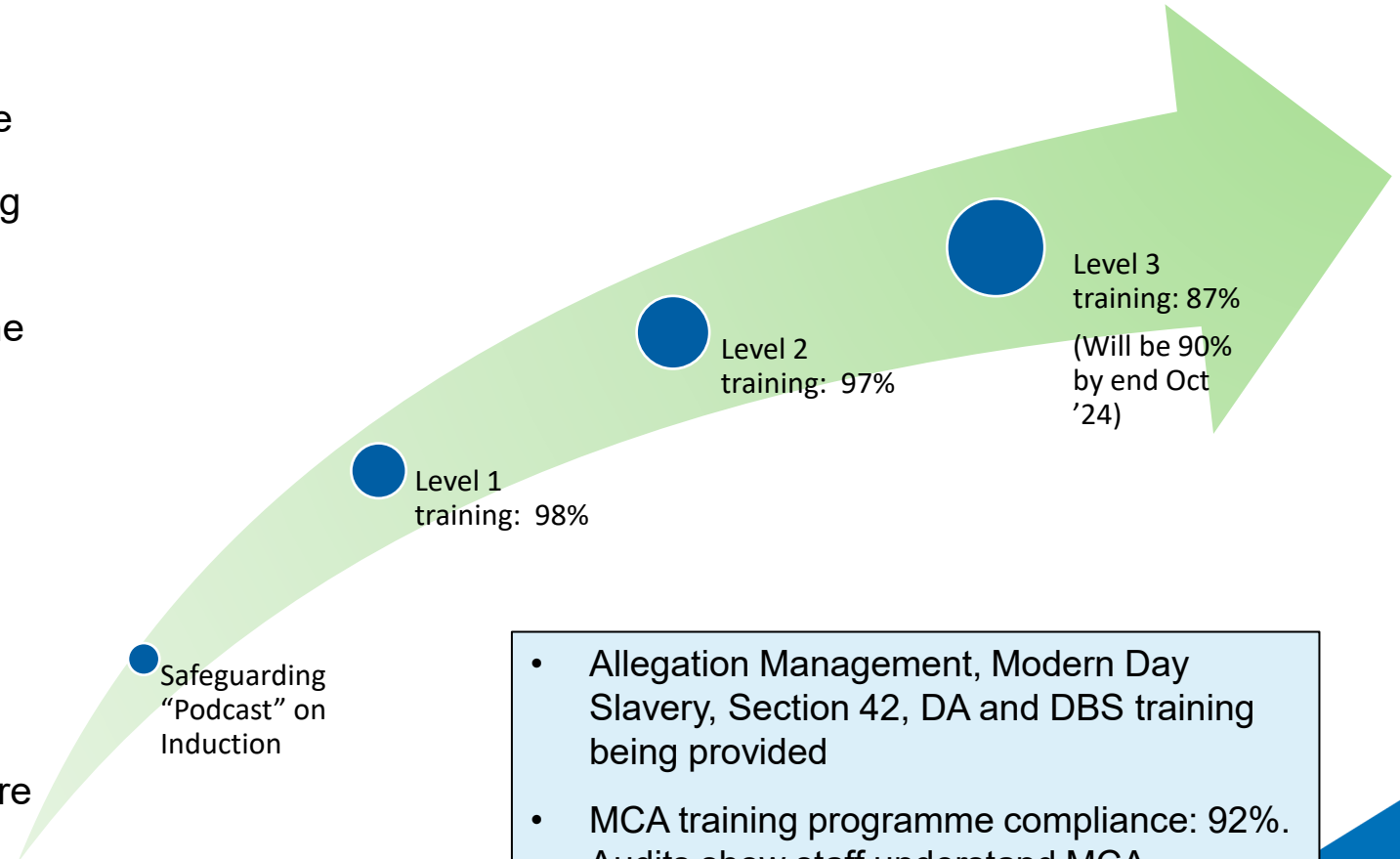
- In December 2022, Hampshire and Isle of Wight ICB undertook a Quality Visit to ‘test’ the evidence of improved safeguarding provided by SCAS at scrutiny meetings.
- The visit provided additional assurance that SCAS have delivered in full the foundation improvements in the quality areas identified within the Section 29a notice.
- A follow up visit by the ICB in November 2023 was positive on the progress made as part of SCAS Improvement Journey.
- The Ofsted report of January 2023 that looked at apprenticeship training stated:

“The arrangements for safeguarding are effective. Appropriately trained safeguarding staff understand current and emerging s/g trends well. They ensure staff complete mandatory safeguarding training and are kept up to date about safeguarding concerns.”

Safeguarding Governance, Oversight and Outcomes



- Safeguarding Committee Established and operational, chaired by Chief Nursing Officer, reporting to the Quality and Safety Board Committee
- Regular Board training and updates on Safeguarding issues
- Safeguarding stories included in patient stories to the Board
- Weekly updates on Safeguarding to the Executive Management Committee
- An Executive-Led Task and Finish Group managing remaining risks
- ICS and NHS Oversight Safeguarding Meetings
- Update Reports to SG Boards via the Integrated Care System (ICS) named safeguarding nurses
- Safeguarding Annual Report produced covering all safeguarding activity and progress

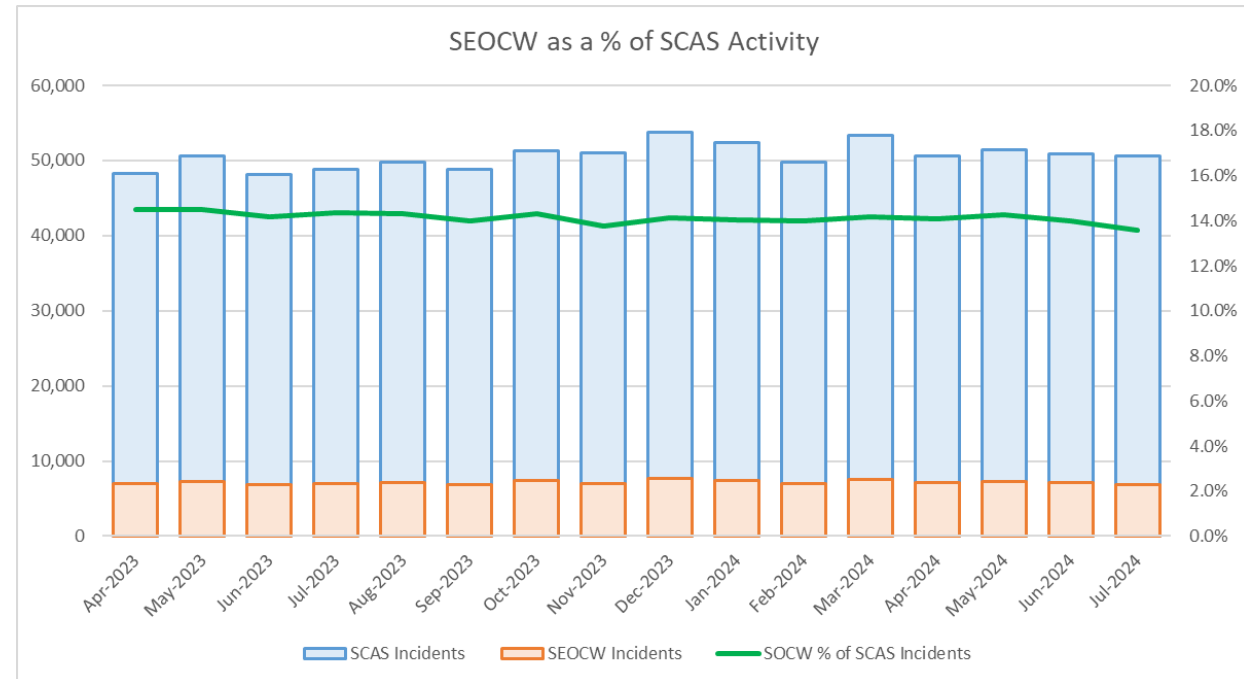


Performance

SCAS Performance in the South West



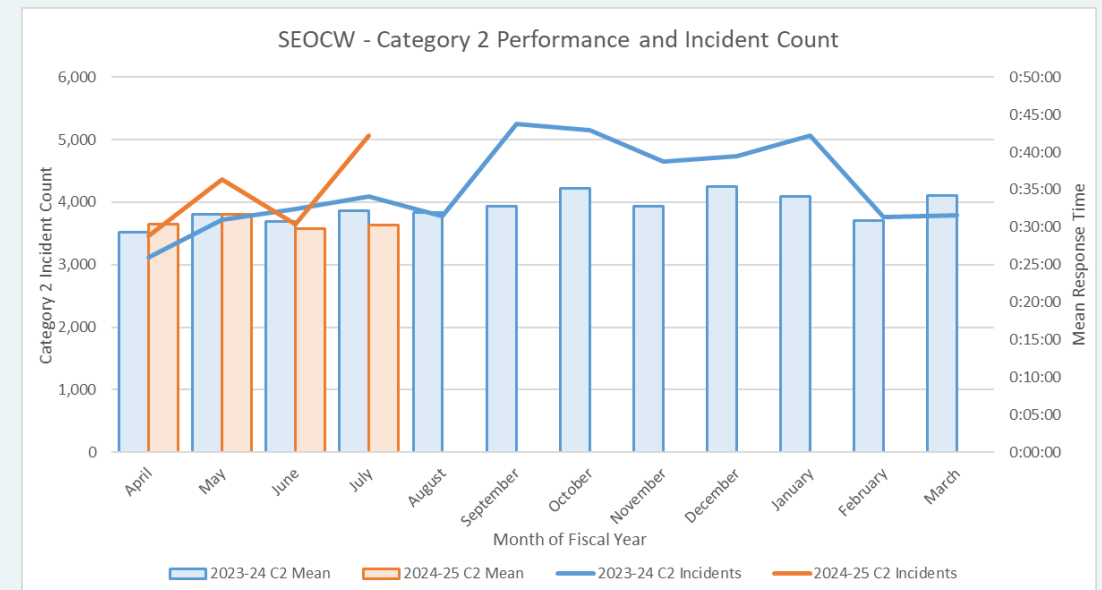
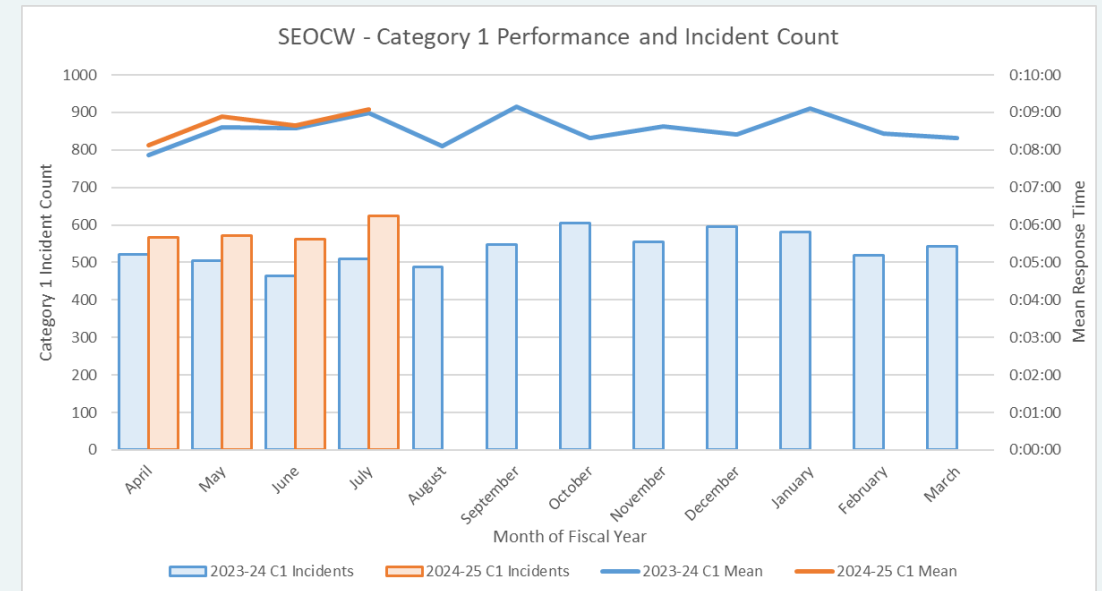
- The South West Node of SCAS covers Southampton City and the New Forest geography, conveying patients mainly to Southampton Hospitals, but also on occasion to Bournemouth and Poole.
- It is responsible for c.8,000 incidents a month out of a total of c.50,000
- It represents 14.1% of SCAS total activity



Category 1 and 2 (higher acuity) Incidents

South West Node to July 2024

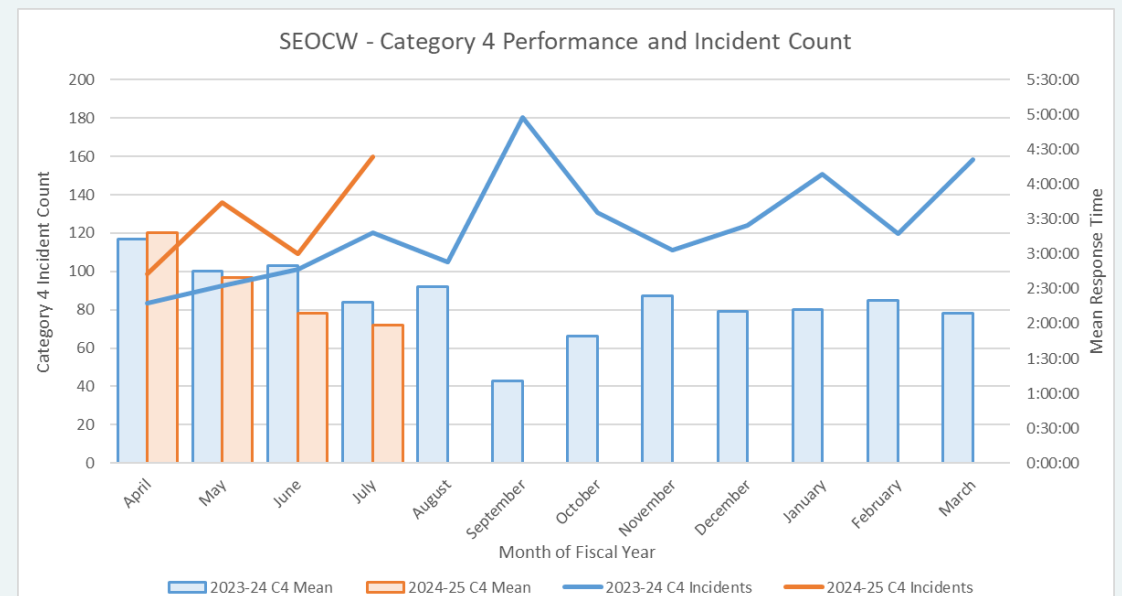
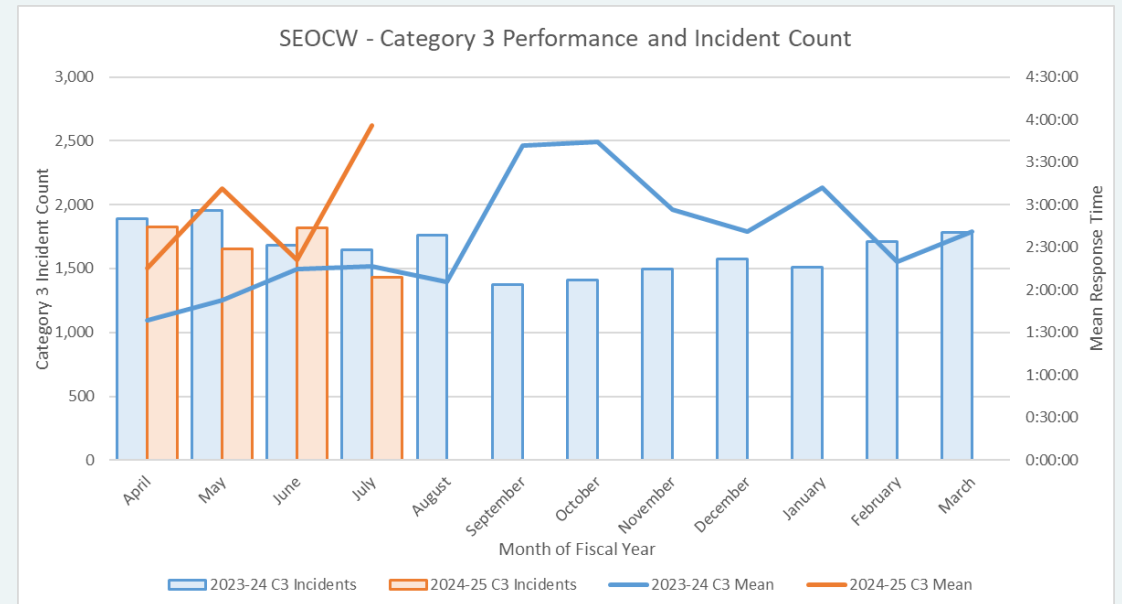
- The number of Category 1 incidents between April and July is 16.1% higher than expected year to date.
- This has been a key contribution to mean response times being higher than planned at between 8 and 9 minutes (target 7 minutes).
- The increase in Category 1 incidents has a knock-on effect on other categories of response.
- The number of Category 2 incidents have been closer to our plan; however, response times have been higher than planned. In particular, in July, we exceeded our target by 8 minutes 7 seconds (the in-year target for mean cat 2 response times is <30 minutes).
- We expect to enter winter pressures soon with demand increasing from to October.



Category 3 and 4 (lower acuity) Incidents

South West Node to July 2024

- The number of Category 3 incidents in the South West node is highly variable ranging from a low of <1,500 a month in September to a high of just under 2,000 in May.
- This variability is highlighted this year - in May and July we saw a reduction of 15.2% and 12.9% respectively against expected activity levels whereas in June there was an increase of 8.1%.
- Response times are equally variable, with patients waiting on average around 2½ hours for an ambulance in June, rising to nearly 4 hours in July. (target – 90th centile 2 hours).
- With the smaller numbers of Category 4 incidents, ranging from just over 40 planned in September up to a high of 120 in actual figures in April, any change in demand is more noticeable in terms of the percentage change, although overall activity has been close to plan. Patients were waiting around 4½ hours for an ambulance in this category in July (target - 90th centile 3 hours).



Glossary

Glossary



Acronym		Acronym	
AACE	Association of Ambulance Chief Executives	IPR	Integrated Performance Report
BAF	Board Assurance Framework	LFPSE	Learning from Patient Safety Events
Cat 1/2/ 3/4	Category of ambulance response, 1 being the most acute and in need of quick response and 4 being lowest	MaPSaf	Manchester Patient Safety assessment framework (tool for assessing the maturity of patient safety culture)
CCC	Clinical Coordination Centre (covers all telephone activity within SCAS, including EOC and CSD – see below)	MCA	Mental Capacity Act
CFR	Community First Responder	OMP	Operational Modernisation Programme
CGO	Chief Governance Officer	PACC	People and Culture Committee
CPD	Continuous Professional Development	PDR	Personal Development Record
CQC	Health and Care Quality Commission	PSIRF	Patient Safety Incident Response Framework
CSD	Clinical Support Desk, provides additional clinical advice to crews on the road	SAAF	Safeguarding Accountability and Assurance Framework
DCA	Direct Conveyance Appliance (i.e. Ambulance) (as opposed to RRV – rapid response vehicle such as a car)	SG	Safeguarding
EOC	Emergency Operations Centre – where 999 calls are answered	SOP	Standard Operating Procedure
ePR	Electronic Patient Record	S29a	CQC warning notice to NHS Trusts related to a requirement for significant improvement in the quality of care
EPSP	Enhanced Patient Safety Protocol (used when the service is under extreme pressure from demand)	TASC	The Ambulance Services Charity
FTSU	Freedom to Speak Up		