



Quality Account 2015-16 Update for Dudley HOSC

Performance

There are nationally set standards for ambulance services to achieve as a service

Red 1: Respond to 75% of calls within 8 mins

These are for life threatening conditions, the most time critical patients

Red 2: Respond to 75% of calls within 8 mins

These calls may be life threatening but less time-critical and should receive an emergency response within 8 minutes irrespective of location in 75% of cases.

Red 19 Mins: Respond to 95% of calls within 19 mins

Green 2: Respond to 90% of calls within 30 mins

Green 4: Triage 90% of calls in 60 mins

Referral Target: Target 90% achieved

Category	Dudley CCG YTD (April 2015 – Jan 2016)	Trust YTD (April 2015 – Jan 2016)
Red 1(75%)	82.7	79.1
Red 2 (75%)	76.1	76.0
Red 19(95%)	99.0	97.3
Green 2 (90%)	90.8	90.8
Green 4 (90%)	99.8	99.8

The nationally agreed target of 30 minutes turn around to free ambulances back from delivery of patient in Emergency Department to fully operational. It is agreed that for the high percentage of cases, it is reasonable to take 15 minutes to carry out clinical hand over of patient into the care of the hospital, leaving a further 15 minutes for the ambulance crew to complete their patient documentation and tidy the vehicle in preparation for the next call/patient.

WMAS recognises the great improvement in turnaround at RHH and continues to work with RHH colleagues to improve further.

Hospital	Average Turnaround Time YTD (mins)	Hours lost over 30 mins YTD (hours)	Longest Turnaround YTD	Over hour delays YTD
Russells Hall	28:09	925	3:22:40	57
Feb 2015	31:25	1996	2.22.27	466



Incident Disposition for 999 calls

This is a breakdown in percentage of how calls are managed by

- telephone triage (hear and treat)
- attendance and discharged at scene(see and treat)
- attended and conveyed to an appropriate treatment centre (see and convey)

(Apr 15 - Jan 16)	Dudley CCG YTD	Trust YTD
Hear & Treat	4.8	4.7
See & Treat	32.0	35.3
See & Convey	63.1	59.8

Staffing, skill mix in ambulances in Dudley CCG Area

Number of staff	224
Paramedic skill mix	47%
Training completed/planned	100%
Staff Appraisals completed/planned	100%

Patient Experience

	Complaints	PALS	Compliments
Total	31	101	213
Highest reason for contact	Aspects of Clinical care (17)	Lost property (42)	

Ambulance Quality Indicators

April –November 2015	Black Country	WMAS
ROSC At Hospital (Overall Group)	30.68%	30.90%
ROSC At Hospital (Comparator Group)	56.96%	51.35%
PPCI Treatment within 150 minutes	*	85.53%
STEMI Care Bundle	82.33%	77.76%
Stroke Care Bundle	97.69%	96.09%
Stroke Stroke FAST + patients transported to Hyper Acute Centre within 60 minutes	*	56.18%
Cardiac Arrest Survival to Discharge (Overall Group)	8.11%	9.41%
Cardiac Arrest Survival to Discharge (Comparator Group)	29.11%	25.23%

*Data not possible by area



Quality Account Priorities 2015/16

Patient Experience

Priority 1: Improved engagement with Learning Disabled Service Users

Trust Web Page

The Trust has taken steps to engage with learning disabled service users by attending the National Autism & LD event in Birmingham 2015. Leaflets were distributed to all organisations that attended. The Easy Read material has been placed on the Trust web page within its own site and incorporates the following:

- Calling 111 advice
- What happens when you call an ambulance
- What to do if you are badly hurt or very unwell
- Going to hospital for an appointment
- What to do if you are unhappy or concerned
- Safeguarding adults patient information
- Five year forward view
- Trust membership Form

Training for call centre staff

Training for call centre staff has been provided both for 111 staff and our own EOC's through Enav package which is interactive and requires a pass mark to achieve the certificate and comprises of the following:

- Autism Spectrum Disorder
- Learning Disabilities training information
- Learning Disabilities Awareness
- National Ambulance Communicating with People with Learning Disabilities
- NHS Learning Disabilities prompt card
- MENCAP How to guide to health
- WMAS Safeguarding
- Carers Rights guide
- Equality Act 2010 carers rights
- The MIND Guide to communicating with people with a learning Disability

Community Engagement

Various community events have been attended across the region with the added advantage of the Trust Engagement Ambulance being available for all to view and learn more about the Trust.

List of events in the Black Country area to be confirmed at March WMAS Engagement Events



Patient Experience

Priority 2: Working with Public Health England to reduce Health Inequalities

The Trust has set up a joint working group with key representatives from West Midlands Public Health England (PHE) team.

Three joint meetings have taken place, with a further two task and finish groups on:

*Data sharing

*Drug and Alcohol abuse.

A joint plan has been developed to look at key areas

*Prevention related to cardiovascular disease amongst vulnerable communities.

*Drug and Alcohol Abuse

*Mental Health

*Making every contact count

*Data sharing

*Healthy workforce

The Trust will agree the key measures for success under each of the above priority areas with PHE colleagues, for measurement during 2016/17 (year 3 of the work)

Patient Safety

Priority 3: Reduce the risk of avoidable harm from delays in ambulance attendance.

The Trust has improved its operational response times which have proven to reduce reported incidents or complaints relating to harm due to delays in ambulance attendance.

Final report to be published April 2016

Priority 4: Publicise lessons learnt and good practice from incidents, claims and complaints.

The Trust Learning from incidents claims and complaints is published in the form of the Learning Review Group Report (attached document).

The Trust website is in the process of being updated to include a Patient Safety zone which we expect to go live in March 2016. The zone will include more details of how the Learning Review Group works and more detailed reports relating to our more serious incidents.



Clinical Effectiveness

Priority 5: Ensuring the care delivered on scene is timely and effective

Safe on Scene Project

The Trust has introduced a project team to

1. To describe the change in job cycle time, time on scene and multiple vehicle utilisation ratios over the last 5 years
2. To identify the reasons why there have been changes
3. To understand how job cycle time, and time on scene impact on patient care and clinical outcomes
4. To map current ways of working and how these impact on job cycle time, time on scene
5. To make recommendations on changes to the current ways of working that maximise resource utilisation by optimising the impact of job cycle time and time on scene
6. To ensure that the time on scene is not putting patient care at risk

The group is working with colleagues and Commissioners in order to achieve these objectives. A position statement on the project progress will be available for the Trust HOSC/ Healthwatch engagement events planned for early March.

Priority 6: Continue to improve all clinical outcomes

Ambulance Quality Indicators / Clinical Performance Indicators	14-15	15-16 (Apr-Nov 15)	
ROSC at time of arrival at hospital (Overall)	28.71%	30.90%	✓
ROSC at time of arrival at hospital (Utstein Comparator group)	45.57%	51.35%	✓
PPCI < 150 minutes	88.14%	85.53%	✗
STEMI Care Bundle	72.49%	77.76%	✓
Percentage of FAST Positive Stroke Patients potentially eligible for stroke thrombolysis who arrive at a Hyper Acute Stroke Unit within 60 minutes of call	46.93%	56.18%	✓
Percentage of suspected stroke patients who receive an appropriate care bundle	94.00%	96.09%	✓
Cardiac Arrest Survival to discharge (Overall survival rate)	8.29%	9.41%	✓
Cardiac Arrest Survival to discharge (Utstein Comparator group survival rate)	20.62%	25.23%	✓
Asthma Clinical Performance Indicator Care Bundle	86.00%	99.78%	✓
Single Limb Clinical Performance Indicator Care Bundle	26.92%	40.65%	✓
Febrile Convulsion Clinical Performance Indicator Care Bundle	83.40%	76.47%	✗
Elderly Falls Clinical Performance Indicator Care Bundle	6.08%	2.33%	✗