Welsh Ambulance Services NHS Trust (WAST) Swansea Bay University Health Board (SBUHB) Performance and Quality Report

November 2019

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1. Demand

2. EMS 5 Steps
   - Step 1 - Help Me Choose
   - Step 2 - Answer My Call
   - Step 3 – Come To See Me
   - Step 4 – Give Me Treatment
   - Step 5 – Take Me To Hospital

3. Quality and Patient Safety

4. Resources

5. Developments and Planning

1. 🟢 **Hear and Treat** (H&T) rate in Swansea Bay (SB) higher than the pan-Wales rate. 12% in September 19, compared to 8.5% pan-Wales (slide 6)

2. 🔴 **Red** performance on a gradual decline (slide 7)

3. 🔴 **Amber** response times are longer in Swansea Bay compared to other parts of Wales (slide 8)

4. 🔴 Number of **patients waiting over 12 hours** has increased in SB in August and September 2019 (slide 9)

5. 🟢 Proportion of **patients conveyed to Major Emergency Department (ED)** has decreased since the Bridgend boundary change and has been consistently lower than the pan-Wales rate (slide 11)

6. 🔴 **Hospital handover delays** have increased significantly in SB despite figures removing the Princess of Wales (POW) element from the total from April 2019. Morriston Hospital handover lost hours has increased by 39.95%, compared to a pan-Wales increase of 25% (slide 12)

7. 🟢 **Handover to clear delays** have improved significantly (slide 13)

8. 🔴 **Serious Adverse Incidents** (SAIs) are a significant contributor to the volume of SAIs pan-Wales. They are linked closely to hospital delays and delayed responses, concern for patient safety risk as both elements continue to worsen and expect to further over winter (slide 14)

9. 🟡 **Concerns 30 day response compliance** significantly improved. Volume of concerns expected to continue to increase over winter (slide 15) Emergency Ambulance (EA) % unit hour production (actual hours against planned hours) has gradually decreased, however the actual hours put out has increased. RRV actual hours increased (slide 16)

10. 🔴 **Sickness** higher than pan-Wales position, increasing in 2019/20 up to August 19 but recent decrease in September 19 by 3.04% 9.08%. In September 19, the high rate is attributed to Bridgend locality, Neath and Swansea localities saw a significant improvement from August 19 (slide 17)

Total Verified Incidents*
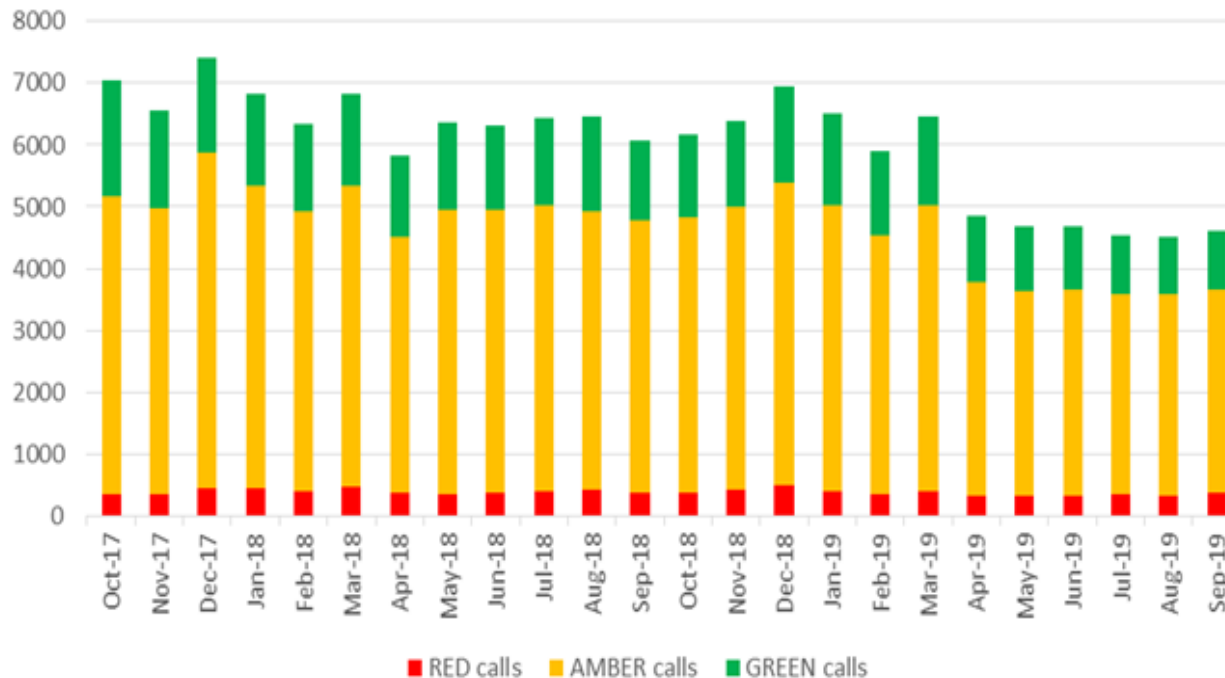
Total Verified Demand split by RED, AMBER, GREEN - Swansea Bay

Analysis

- **Demand levels have decreased from April 2019 as a direct impact of the boundary change of Bridgend and therefore Bridgend activity transferring** from Abertawe Bro Morgannwg and it formally being renamed Swansea Bay.

- Proportionally, demand has remained fairly stable over the two years reported.

- In September 2019, there were 363 Red calls, 3,305 Amber calls and 952 Green calls.

- Demand for the period October – September 2018/19 resulted in 4,398 Red calls, 47,313 Amber calls and 14,536 Green calls.

National Improvement Actions

Other Key Improvement Actions	Completion Date
Demand and Capacity Review	Nov-19
Demand Forecasting	Ongoing

Local Improvement Actions

- Frequent caller management plan in partnership with Morriston Hospital Emergency Department
- Local engagement with Swansea Bay Health Board Primary Care
- Local engagement with the Patient Experience & Community Involvement Team
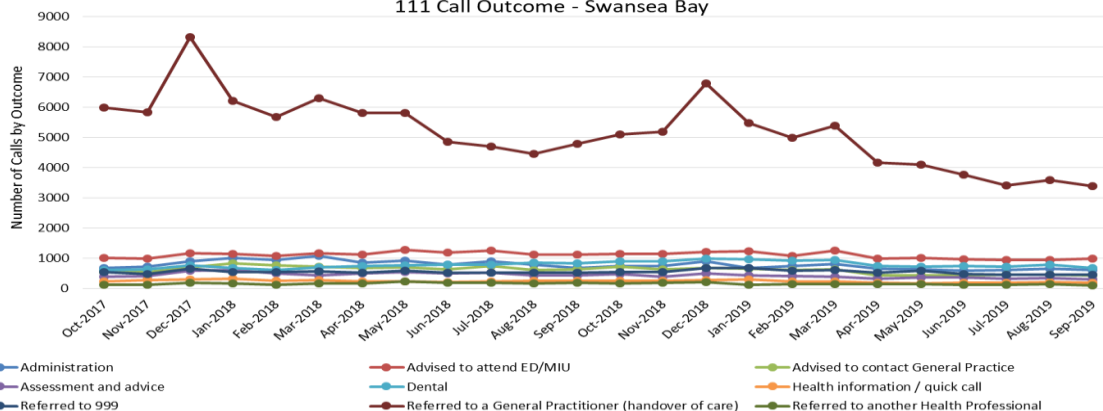
NHS Direct Wales (NHSDW)/Patient Engagement Community Involvement (PECI) for SB

111 Call Outcome - Swansea Bay

Legend:
- Administration
- Advised to attend ED/MIU
- Advised to contact General Practice
- Assessment and advice
- Dental
- Health information / quick call
- Referred to 999
- Referred to a General Practitioner (handover of care)
- Referred to another Health Professional

Timely Clinical Triage of 111 Patients - Swansea Bay

- % of calls prioritised as P1CT that started their first definitive clinical assessment within 1 hour of the end of the first contact
- % of calls prioritised as P2CT that started their first definitive clinical assessment within 2 hours of the end of the first contact
- % of calls prioritised as P3CT that started their first definitive clinical assessment within 4 hours of the end of the first contact
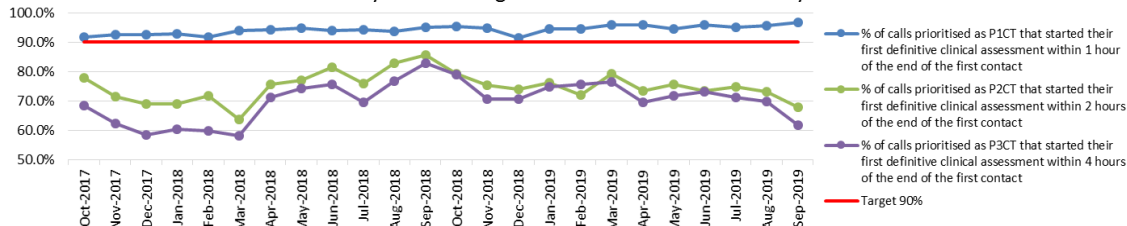- Target 90%

PECI Update

- Attended a number of schools in the area delivering Shoctober schools education campaign.
- Visited a number of groups to discuss people's experiences, Welsh Ambulance Services, basic life saving skills and general choose well messages. Groups attended included: Age Connects, Torfaen; learning disability youth club, Pontypool; Blaenafon Integrated Children's Centre - Baby shower event; Coleg Gwent Health & Social Care Students; Carers rights event emergency first aid demonstrations, Pontypool and; Learning Disability open day, Pontllanfraith.
- PECI team have been promoting its Carer's survey across AB, closing date for the survey is 31st December 2019.
- A number of events have been confirmed for 2020 and we continue to engage with stakeholders across AB.

Dementia Update

- In the UK we have Emergency Services Strategic Commitments on Dementia. As part our joint work on improving the skills of our workforce, we have delivered telephone skills and awareness sessions to nearly 800 call takers across Police, Fire and Ambulance services.
- These training sessions are delivered with people living with dementia alongside us. Sessions have been provided to Gwent Police Call takers early 2019, and Community Support Officers will receive the training in December 2019.
- The feedback from the sessions was overwhelming, with participants reporting: one of the best inputs on a training day; I can honestly say hand on heart - the best input I've personally had; and having someone living with dementia to share their experiences and points of view was beneficial.
- When asked about their biggest learning point, participants said: being able to understand what a person with dementia experiences and gaining a better understanding of how I can help them; to speak slower and allow more time for people to answer questions; better understanding of feelings and emotions; and adapting your speech and use of words to try and understand what is happening in their reality.

Analysis

- **Referred to General Practitioner (handover of care) continued to be the top outcome for NHS Direct calls in SB since 111 was rolled out in October 2016**. Followed by advised to advised to attend Emergency Department (ED)/ Minor Injuries Unit (MIU) as the second top outcome.
- The total number of calls has gradually declined over the period displayed, in September 19 there were 7,205 calls compared to September 2018 at 9,492.
- The **highest priority calls, P1CT, continue to provide a timely response**, within 1 hour, continuously achieving over the 90% target.
- The lower priority calls, P2CT and P3CT, continue to be below the 90% target for providing a response within 2 hours and 4 hours respectively.

National Improvement Actions

IMTP Deliverable	Completion Date
Complete rollout of 111 service across Wales	2020/21

Other Improvement Actions

Recruitment Plans for Paramedics and Band 5 nurses to NHSDW	Ongoing
Review of 111 demand	2020/21

Hear & Treat*

Bridgend data included until April 2019 only

Hear & Treat - Swansea Bay

Legend:
- Hear & Treat Volumes (Through Clinical Support Desk & NHSDW)
- % calls ended following WAST telephone assessment through Clinical Support Desk & NHSDW (hear & treat) AQI9i
- Target
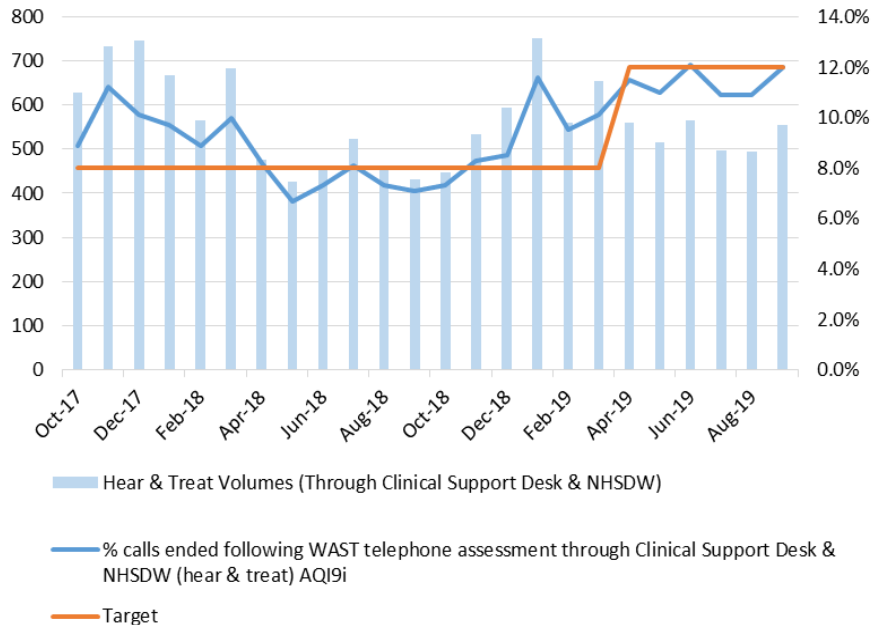
Local Improvement Actions

- 'Hear and Treat' is delivered through the Clinical Support Desk (CSD) which exists as a virtualised pan-Wales function.

- The investment in the new Computer Aided Dispatch (CAD) enables Clinicians across five sites to focus on patients across Wales reflecting where their skills and capability can be utilised to best effect.

- Improvement in Hear and Treat is being centred on the Clinical Contact Centre (CCC) Clinical Review.

- This review is undertaking full review of the clinical functions across Wales and identifying opportunities for quality and performance improvement.

- The review team are due to conclude and provide recommendations in November 2019.

- Singleton Hospital Acute GP Unit (AGPU) accessing WAST 'live' stack to deal with appropriate calls over the telephone.

Analysis

- In SB, the **Clinical Service Desk (CSD) and NHSDW achieved 12% Hear & Treat** performance in September 2019, compared to 7.1% in September 2018, **an increase of 4.9%.**
- In SB, the volumes of hear and treat have increased, despite Bridgend activity moving to Cwm Taf in April 2019. 555 ambulances were stopped in September 2019, compared to 432 in September 2018.
- The All Wales Hear & Treat rate in September 2019 was 8.5% however this did not meet the internal performance target for 2019/20 of 12%.

National Improvement Actions

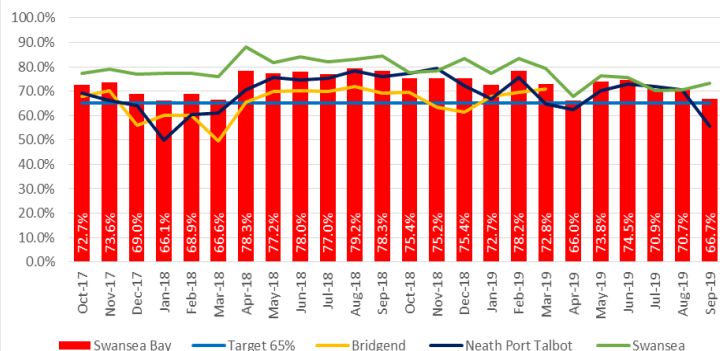| Key Improvement Actions	Completion Date
Additional Clinicians for the Clinical Service Desk (CSD)	Jun-19
Full cross-directorate Clinical Review of the Clinical Contact Centre Functions.	Nov-19
Winter Planning (Welfare Calls and C3 Remote Working)	Oct-19
Review of activity flows	Sept-19

Red Performance*

Bridgend data included until April 2019 only

% of Emergency Responses to red Calls Resulting in an 8 minute Emergency Response - Swansea Bay

Values: 72.7%, 73.6%, 69.0%, 66.1%, 68.9%, 66.6%, 78.3%, 77.2%, 78.0%, 77.0%, 79.2%, 78.3%, 75.4%, 75.2%, 75.4%, 72.7%, 78.2%, 72.8%, 66.0%, 73.8%, 74.5%, 70.9%, 70.7%, 66.7%

Legend: Swansea Bay, Target 65%, Bridgend, Neath Port Talbot, Swansea

Local Improvement Actions

- Daily review of missed Red calls and dynamic action management
- Additional St John Cymru Wales (SJCW) level 1 falls vehicle funded by Swansea Bay UHB
- Working towards providing an intermittent levels 2 falls service vehicle in partnership with Swansea Bay UHB
- Working towards placing a paramedic and an Advanced Nurse Practitioner (ANP) in an Rapid Response Vehicle (RRV) to target calls involving the frail elderly in the care home setting or at own home
- Promoting the GoodSam alerting system
- Community First Responder (CFR) development programme
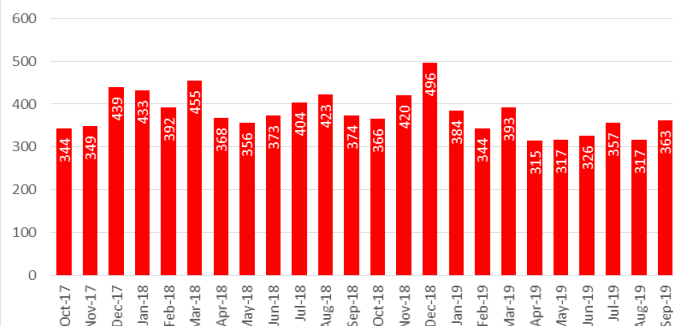- Reviewing Status Plan Management (SPM) standby locations

National Improvement Actions

Key Improvement Actions	Completion Date
Red Improvement Plan	Weekly updates ongoing, Mechanism to cease enhanced performance management is yet to be agreed with NCCU.
Weekly Performance, Demand and Capacity Review meeting	Weekly ongoing
Immediate Release Requests Process Revision	Aug-2019

Other Improvement Actions

Due to the deterioration in Red performance, the Trust moved into enhanced performance management via the National Collaborative Commissioning Unit (NCCU) and as a result of an instruction to do so from Welsh Government. Red performance is being closely monitored, with the current improvement focus being on overproducing on RRV unit hours, more effective deployment of existing resource, incident upgrades and overnight performance.
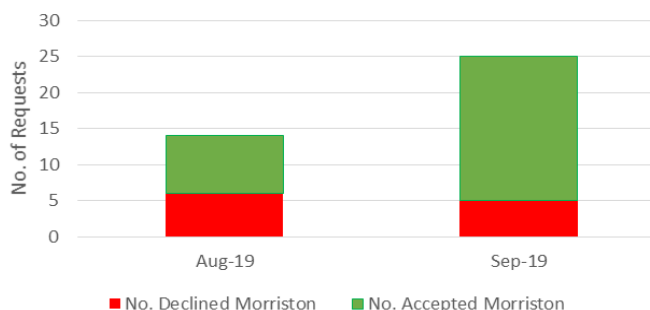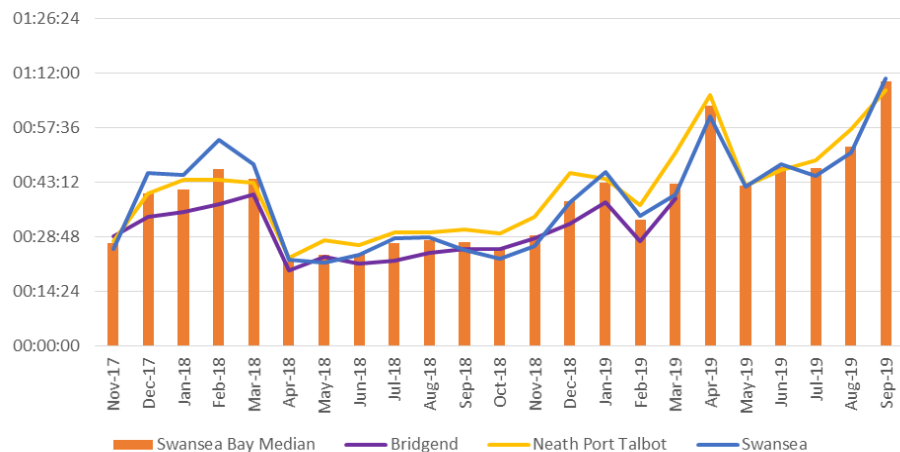
Analysis

- **% of emergency responses to Red calls within 8 minutes, has consistently remained above the 65% target** over the last 12 months for SB.
- September 2019, Red 8 minute performance was 66.7%, compared to 78.3% for September 2018.
- Performance for Neath Port Talbot (55.6%) did not meet the 65% performance in September 2019.
- Overall there has been **a gradual decline in the monthly performance**, linked in part to the increase in red incident demand.
- **Red immediate release request for SB** were all to Morriston, 11 **of 28 requests in Swansea Bay were declined** in in the period reviewed in the graph below.

Total Verified RED Demand Calls - Swansea Bay

Values: 344, 349, 439, 433, 392, 455, 368, 356, 373, 404, 423, 374, 366, 420, 496, 384, 344, 393, 315, 317, 326, 357, 317, 363

SB Red Immediate Release Requests

Legend: No. Declined Morriston, No. Accepted Morriston

Amber Performance*

Bridgend data included until April 2019 only

SB Amber Median Response Times

Legend: Swansea Bay Median, Bridgend, Neath Port Talbot, Swansea

Amber 1 Median, 65th & 95th Percentiles - Swansea Bay

Legend: Median, 65th, 95th

Amber 2 Median, 65th & 95th Percentiles - Swansea Bay

Legend: Median, 65th, 95th

National Improvement Actions

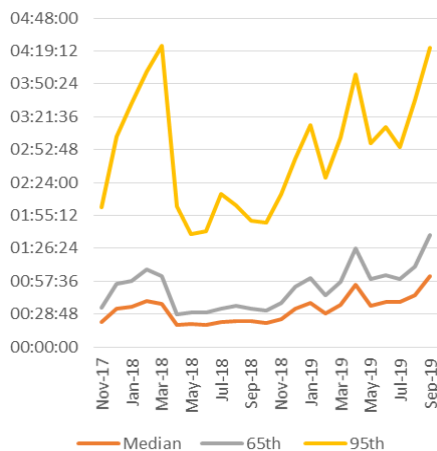| IMTP Deliverable	Completion Date
Implement the recommendations of the Amber Review	Nov-19
Roll out the Trusts Falls Framework	Mar-20

Analysis

- As demonstrated in the graph, **Amber performance is an area of concern and continues to worsen**.
- The graph shows that Amber median, 65th and 95th percentiles are on a upward trend.
- Performance has already been worse over spring/summer than that seen in the winter of 2017/18 when conditions were particularly challenging.
- The median response time for SB in September 2019 was 1 hour, 9 minutes and 53 seconds. This is significantly higher that the All Wales Amber median in September 2019, which was 30 minutes 50 seconds.
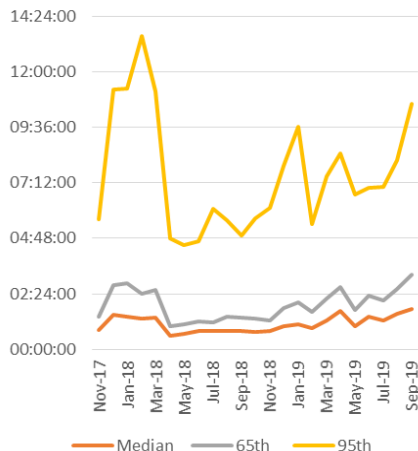
Local Improvement Actions

- Additional SJCW level 1 falls vehicle funded by Swansea Bay UHB
- Working towards providing an intermittent levels 2 falls service vehicle in partnership with Swansea Bay UHB
- Working towards placing a paramedic and an ANP in an RRV to target calls involving the frail elderly in the care home setting or at own home
- Promoting the GoodSam alerting system
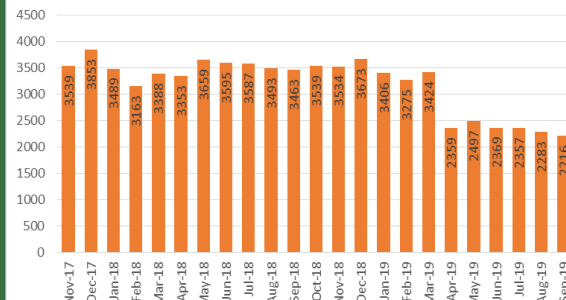- CFR development programme
- Reviewing SPM standby locations

SB Amber Incidents Resulting in Attendance at Scene

Longest Waits*

Bridgend data included until April 2019 only

Month	SB No. of Patients Waiting by Hours																	Grand Total
	12	13	14	15	16	17	18	19	20	21	22	23	26	27	29	34	41	
Oct-18	1	2	1	2	1	2	1								1			11
Nov-18	10	3	4	4	3	1	1		3	1				1				31
Dec-18	12	7	8	6	5	4	3		1	2	2							50
Jan-19	13	9	5	7	7	6	10	4	2	3	2			1	1		1	71
Feb-19	4	6	3	4	3		2	2		2								26
Mar-19	5	8	6	5	2	3		2	1									32
Apr-19	12	14	9	4	3	2	4	2										50
May-19	9	4	6	1	2	3	1	1										27
Jun-19	5	3	3	4		3	4	4				1						27
Jul-19	8	8	4	3		1		2										26
Aug-19	10	7	2	6	3	2	1	1	1	1								34
Sep-19	12	10	6	6	3	5	3	1		2	1	1		1		1		52
Grand Total	101	81	57	52	32	32	30	19	8	9	7	1	1	3	2	1	1	**437**

Number of Patient Waits over 12 Hours by Final Priority Type Cumulative Position over 12 months (Oct 18 - Sep 19)

Legend: AMBER1, AMBER2, GREEN2, GREEN3
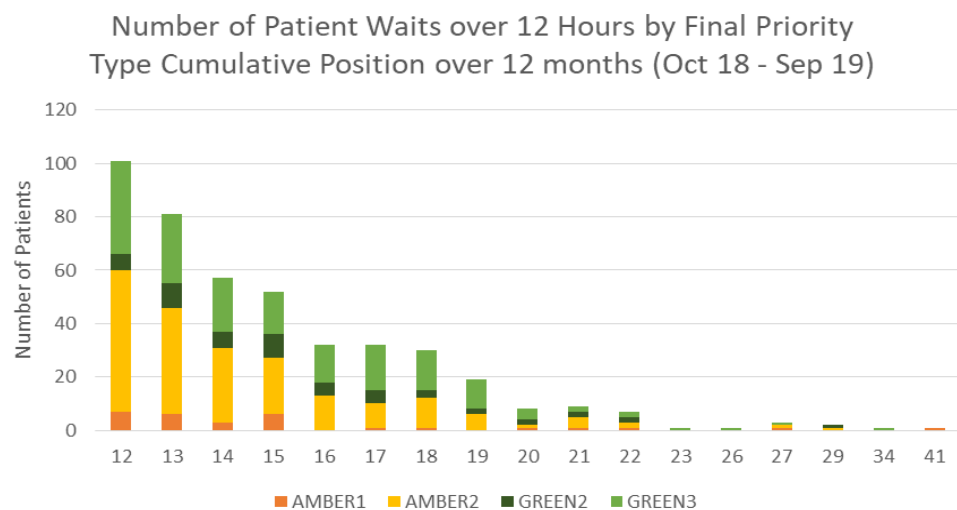
Analysis

- The table above shows the number of patients per month that have waited over 12 hours for a response split by number of hours waited.
- The data demonstrates that 52 patients waited over 12 hours in September 2019, an increase from August 2019.
- The graphs show the number of waits over 12 hours, split by category.
- The graph shows the cumulative position over the last 12 months, October 2018 to September 2019.
- The data demonstrates that the **majority of patients waiting over 12 hours fall into the Amber 2 and Green 3 categories**.
- In the last 12 months, of the patients waiting over 12 hours: 43.4% were Amber 2; 37.9% were Green 3; 11.8% were Green 2; and 6.6% were Amber 1.

Local Improvement Actions

- Singleton Hospital Acute GP Unit (AGPU) accessing WAST 'live' stack to deal with appropriate calls over the telephone and either signposting to alternative sources or resolving the call
- Supporting the Advanced Paramedic Practitioner (APP) rotational model
- Local daily conference calls to review all elements of ambulance operations
- Local performance improvement plans

National Improvement Actions

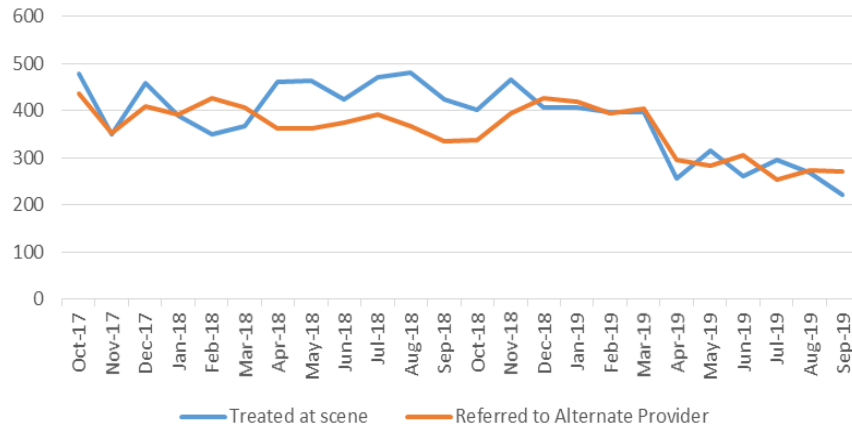| Other Key Improvement Actions	Completion Date
Actions to reduce the very longest waits	Ongoing
Patient Safety Team Reviews of Longest Responses	Ongoing

Treatment at Scene and Pathway Referrals*

*Bridgend data included until April 2019 only

Incidents Treated at Scene vs Incidents Referred to Alternative Providers - Swansea Bay

Legend: Treated at scene — Referred to Alternate Provider

Referrals to Falls and GP Pathways - Swansea Bay

Legend: Referred to Falls Pathway — Referred To GP Pathway

Analysis

- Number of incidents treated at scene and the number of incidents referred to alternative providers has decreased for SB since April 2019 due to the direct impact of the Bridgend boundary change, which moved Bridgend activity from Swansea Bay (Formerly Abertawe Bro Morgannwg) to Cwm Taf. In reality, the actual numbers have remained somewhat stable.

- Incidents treated at scene was 221 in September 2019. Incidents referred to alternative providers was 270 in September 2019.

- The second graph shows the volumes of two of the referral pathways. Referrals to the falls pathway has remained stable, whereas referrals to General Practitioners (GPs) increased significantly in April 2019, remaining somewhat stable at the increased level since.
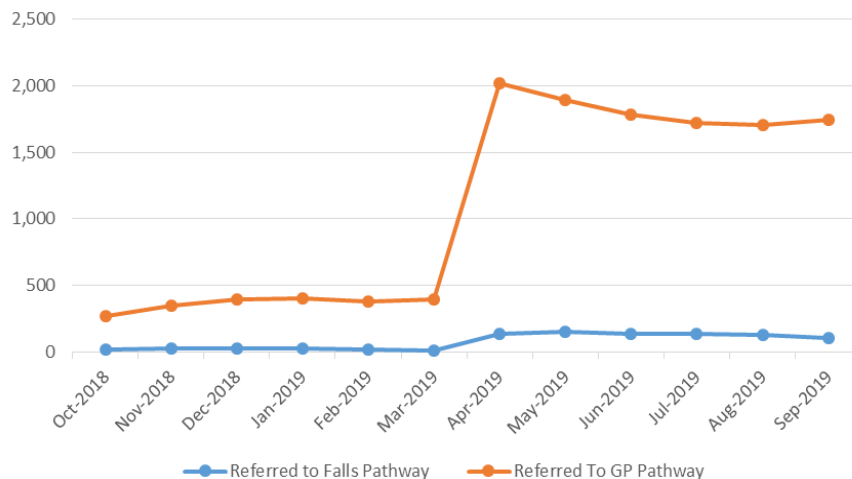
National Improvement Actions

IMTP Deliverable	Completion Date
Develop new pathways with Health Boards	Baseline assessment and review Sept-19.
Introduction of new pathways	Oct – March 20

Local Improvement Actions

- Singleton Hospital Acute GP Unit (AGPU) accessing WAST 'live' stack to deal with appropriate calls over the telephone and either signposting to alternative sources or resolving the call
- Supporting the APP rotational model
- Working towards providing an intermittent levels 2 falls service vehicle in partnership with Swansea Bay UHB
- The vehicle Pathways Directory has been fully reviewed with amendments made where necessary

Conveyance*

Bridgend data included until April 2019 only

Conveyance to Major ED - Swansea Bay

Legend: Conveyance to Major ED AQI19ii | Total Verified Incidents | % Patients Conveyed to Major ED
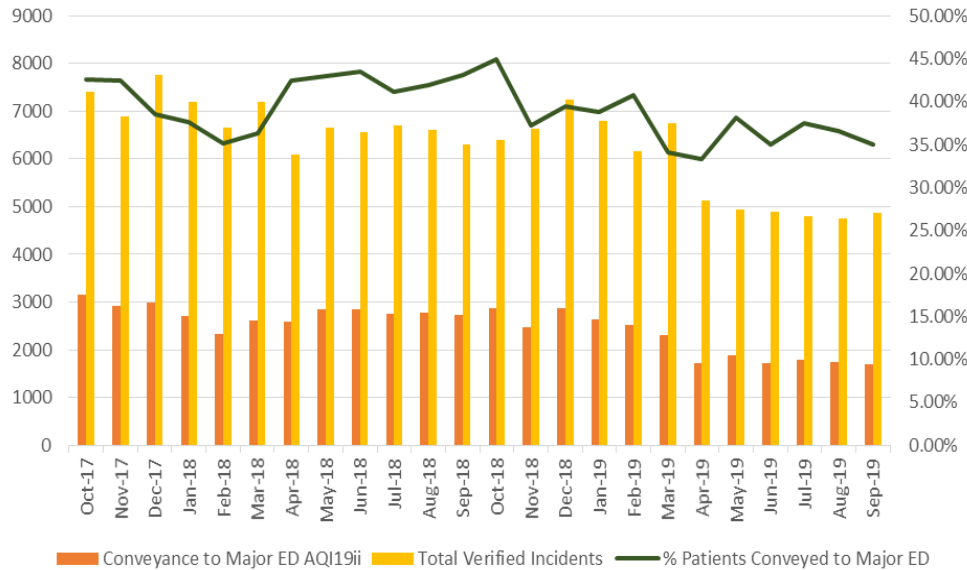
Analysis

- The graph to the left demonstrates that the **volumes of both conveyance to major emergency departments (EDs) and total verified incidents has decreased,** this is as a result of the Bridgend boundary change and Bridgend activity no longer being included from April 2019 onwards.

- In September the % of total verified incidents conveyed to major ED in SB was 35.01%. The pan-Wales position was 46.25%

- The average % of total verified incidents conveyed to major ED was 40.87% in the 12 months up to April 2019, therefore pre-boundary change. From April 2019 to September 2019, without the addition of Bridgend the average was 35.94% suggesting that Swansea and Neath localities have a lower conveyance rate to Major ED than Bridgend as well the All Wales. The target for this indicator is a reduction trend.

- 1,701 patients were conveyed to major EDs in September 2019. Pan-Wales the Trust conveyed 17,934 of patients to major EDs in September 2019.

- Graph below shows the volume of incidents conveyed by type of receiving hospital, other than a major ED.
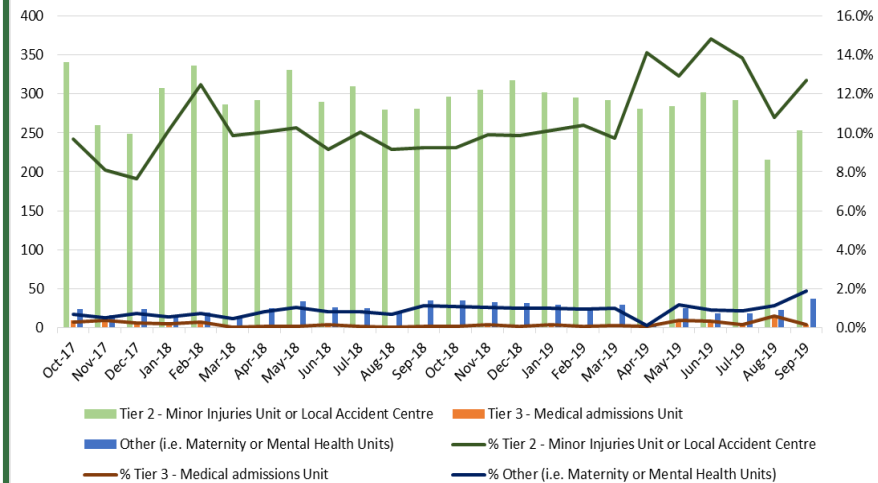
National Improvement Actions

IMTP Deliverable	Completion Date
Continue expansion of APP role (If funded and agreed with Commissioner)	Sep-19
Evaluate & implement APP/non-medical prescribing framework	Mar-20

Local Improvement Actions

- Refreshed the Neath Port Talbot (NPT) Hospital MIU pathway
- Refreshed the Singleton Assessment Unit (SAU)/Acute General Practitioner unit (AGPU) pathway
- Review and amend the Red/Amber immediate release process in the Emergency Department at Morriston Hospital
- The vehicle Pathways Directory has been fully reviewed with amendments made where necessary
- Assist with the provision of a patient flow coordinator at Morriston Hospital

Patients Conveyed to Hospital by Type -Swansea Bay

Legend: Tier 2 - Minor Injuries Unit or Local Accident Centre | Tier 3 - Medical admissions Unit | Other (i.e. Maternity or Mental Health Units) | % Tier 2 - Minor Injuries Unit or Local Accident Centre | % Tier 3 - Medical admissions Unit | % Other (i.e. Maternity or Mental Health Units)

Hospital Handover Delays*

Bridgend data included until April 2019 only

Notification to Handover Lost Hours against Amber Median Response Times - Swansea Bay

Notification to Handover Lost Hours against Red Median Response Times - Swansea Bay
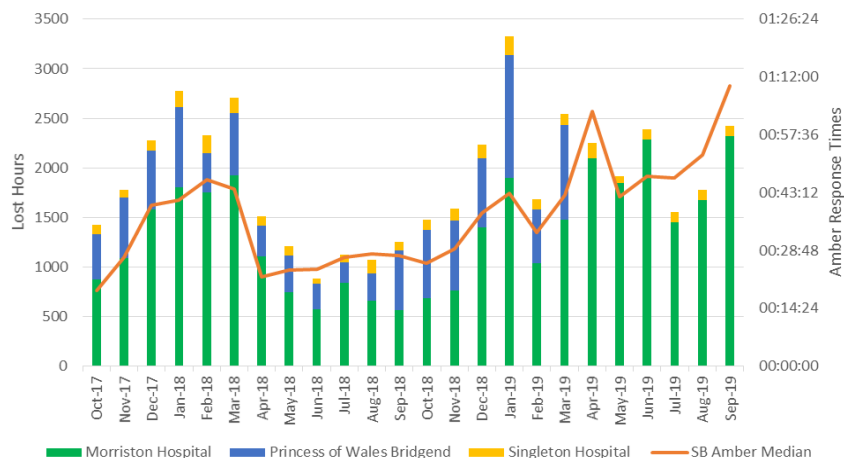
National Improvement Actions

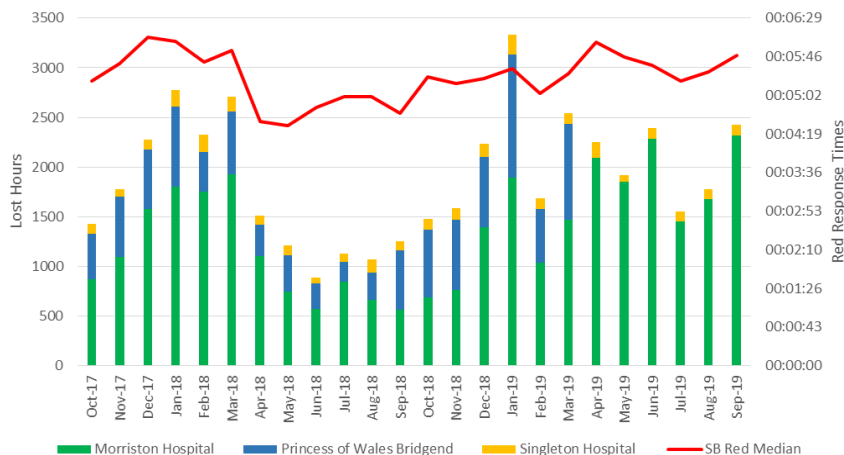| Key Improvement Actions	Completion Date
Work with HBs to support unscheduled care system to reduce hospital handover	Ongoing

Local Improvement Actions
- Constant local Health Board engagement
- Assist with the provision of a patient flow coordinator at Morriston Hospital
- Dual PIN HAS handover process complete
- Handover to clear improvement plan introduced

Analysis
- **Notification to handover delays lost hours have increased overall in SB despite the Bridgend boundary change in April 2019** which resulted with the move of Princess of Wales (POW) Hospital to Cwm Taf from Abertawe Bro Morgannwg. The largest proportion of handover delays were from Morriston Hospital.
- **In SB,** in the last 12 months, 25,159 hours have been lost.
- **In Morriston**, in the last 12 months, 18,923 hours were lost compared to 13,521 the pervious year, **an increase of 39.95%. In Singleton,** in the last 12 months, 1,388 hours were lost compared to 1,342 the pervious year, **an increase of 3.42%.** September 2019 levels for Morriston were similar to the levels normally seen in winter at 2,316 lost hours, compared to 564 in September 2018.
- Lost hours have also experienced a year on year increase pan-Wales, but not to the same extent as Morriston: 25% over the same period.
- At an All Wales level there is significant correlation between handover delays and Red and Amber median response times, as handover lost hours increase, so do response times. This is also true for SB and is also a contributing factor to the increasing number of patients waiting over 12 hours for a response.
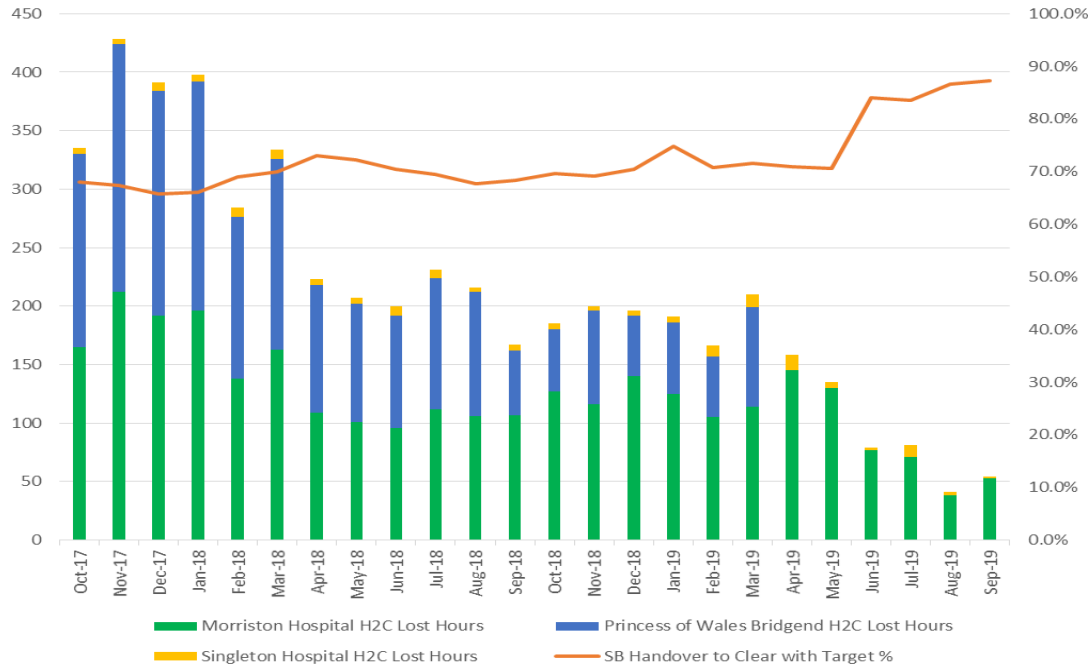
Handover to Clear*

Bridgend data included until April 2019 only

Handover to Clear Lost Hours - Swansea Bay by Hospital

Legend:
- Morriston Hospital H2C Lost Hours
- Princess of Wales Bridgend H2C Lost Hours
- Singleton Hospital H2C Lost Hours
- SB Handover to Clear with Target %

Analysis

- *Handover to clear* delays are on an overall decreasing trend.
- **1695 hours were lost** in the last 12 months, period October 2018 to September 2019.
- In September, a total of 54 hours were lost to handover to clear delays. A significant improvement when compared to the previous year where there were 112 lost hours for Morriston and Singleton (excludes POW).
- Pan-Wales the same picture is shown; **the Trust lost 9,528 hours** in the last 12 months, period October 2018 to September 2019, compared to 11,227 hours in the same period the previous year.
- In September, a total of 300 hours were lost to handover to clear delays. A significant improvement compared to the previous year where there were 888 lost hours in September 2018.
- The **percentage of handover *to clear* within 15 minutes** of transfer of patients to hospital staff was 87.2% in September 2019.
- Pan-Wales the percentage was 88.6% for September 2019, compared to 74.5% in September 2018.
- The commissioning intention is an improvement.

National Improvement Actions

| Key Improvement Actions	Completion Date
Handover to Clear Improvement Plan	ongoing
Implementation of Dual PIN Process of the Hospital Arrival Screen (HAS) system or alternative technology. (A specific element of the H2C Plan above)	August 2019

Local Improvement Actions

- Dual PIN HAS handover process complete
- Handover to clear improvement plan introduced

Serious Adverse Incidents (SAIs)

Number of Serious Adverse Incidents Reportable to Welsh Government
All Wales vs Swansea Bay

Legend: ■ Pan Wales ■ SBHB
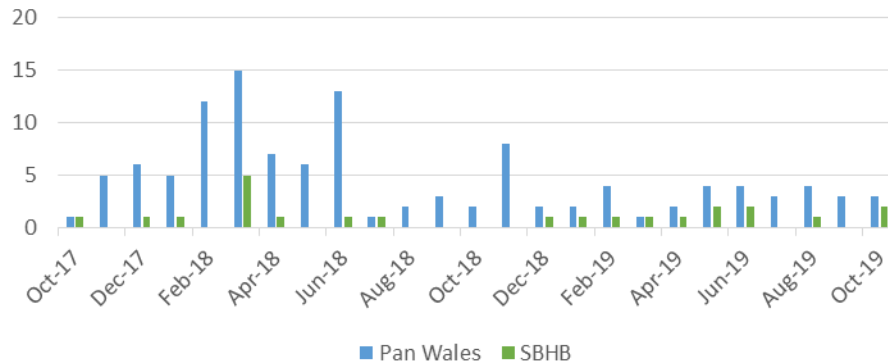
Analysis

- The volumes of serious adverse incidents (SAIs) in SBUHB are a contributor to the proportion of the SAIs all Wales.
- The Trust continues to liaise with SBUHB on a regular basis to review joint SIs and Patient Safety related incidents.
- The Trust continues to review and discuss high volumes of potential Serious Adverse Incidents (SAIs) at its Serious Case Incident Forum. The themes and trends from those cases reported as SAI's are long handover and response delays, call categorisation, missed allocation and clinical practice issues.
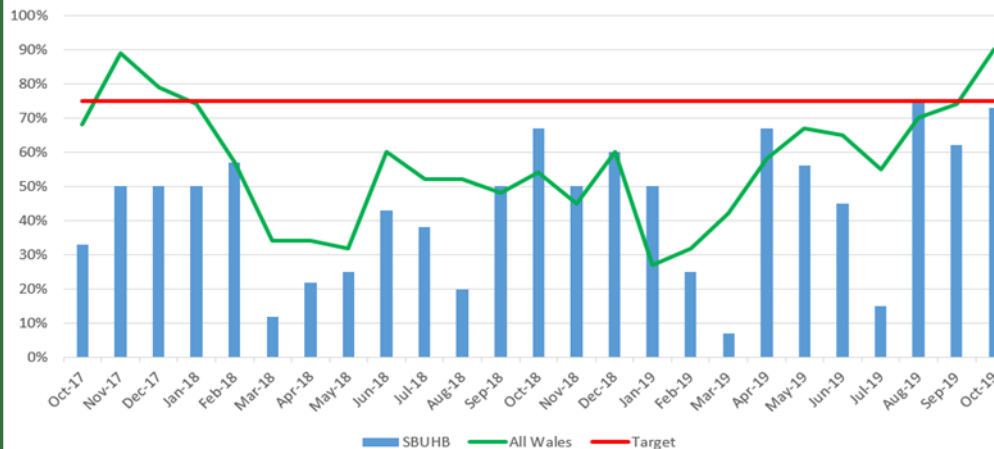
Coroners Activity

The Trust continues to receive large numbers of requests for information from coroners. The impact of the numbers received through winter of 2017/18 is still being felt. The majority of cases relate to incidents where there was a delayed ambulance response to a patient in the community. We are currently undertaking a review of Datix and reconciling out data quality.

Date Coroners Request Received		2017/18	2018/19	2019 to date
Total Number of Coroner Requests	All Wales	229	238	146
	SB	82	71	48
Date of Incident Coroner Request Refers to		Incident 2017/18	Incident 2018/19	Incident 2019 to date
Total Number of Coroner Requests	All Wales	244	220	108
	SB	84	65	35

National Improvement Actions

Key Improvement Actions	Completion Date
Creation of a Patient Safety and Experience Learning and Monitoring Group (PSELMG).	Complete
Reconfigure Serious Incident Process.	Mar-20
Implementation of Serious Incident Joint Investigation Framework	Oct-19

Local Improvement Actions

- Dedicated Operations and Clinical Contact Centre (CCC) Concerns leads
- Monthly Management Team meeting focusing on risk, and concerns
- Incidents escalated and reviewed in partnership with SBUHB colleagues
- Learning from Serious Incidents (SIs) are monitored through the Patient Safety Monitoring and learning Group.
- Regular update meetings with the SBUHB SI Team

Concerns

30 Day Concerns Compliance Performance by Percentage: Swansea Bay University Health Board

National Improvement Actions

Key Improvement Actions	Completion Date
Winter Planning 2019/20	Sep-19
Introduce training and opportunity to resolve a larger proportion of concerns received "at source"	Jan-20
Redesign Investigation report templates and provide mechanism for earlier patient / family contact.	Sep-19
Ensuring consistency of up to date information relating to improvements that align to the concerns raised.	Complete

Analysis

- For Swansea Bay (SBU), the **percentage of responses to concerns** within 30 working days has shown an overall increase since July 2019. Whilst the 75% Tier One performance target remained challenged in relation to SBU, the overall pan-Wales position shows an improving position, with September and October 2019 performance concluding in excess of 75%.

- The total number of concerns received for SBU in October 2019 is increased in comparison to September 2019, this is also replicated in the pan-Wales totals. Reviewing previous peaks and troughs in demand within the reporting areas, it can be anticipated that this demand will continue to increase throughout the period of winter pressures, faced by the NHS.

- **It must be noted that the way compliance against the 30 day target is calculated has changed**. The position will be reported based on the number of concerns (formal concerns requiring a regulation 24 letter and On the Spot concerns that have exceeded 2 days are now known as formal concerns suitable for local resolution) closed during the month. Welsh Government requested the change in reporting and have requested historical data is provided for 2018/19. The change in how the data is reported was implemented in Datix in August 2019 and will be amended in this report from September data onwards, including historical data.

Local Improvement Actions

1) Dedicated Operations and CCC Concerns leads
2) Monthly Management Team meeting focusing on Risk, Concerns and key themes in organisational learning.
3) Incidents escalated and reviewed in partnership with SBUHB colleagues as part of the Serious Incident Framework

Number of Concerns (all types) by Received Date: Swansea Bay University Health Board
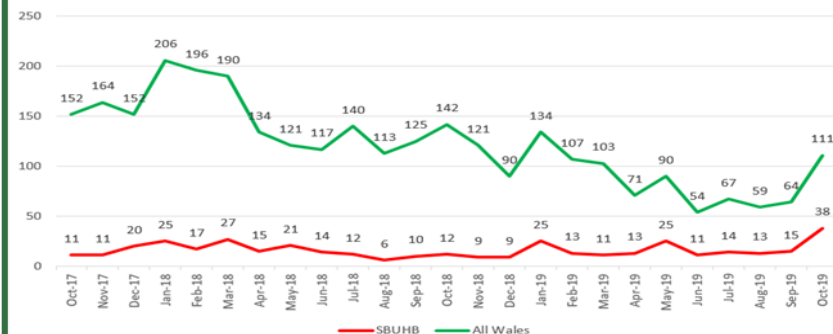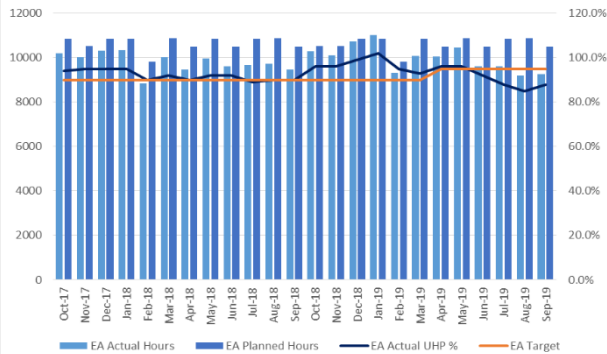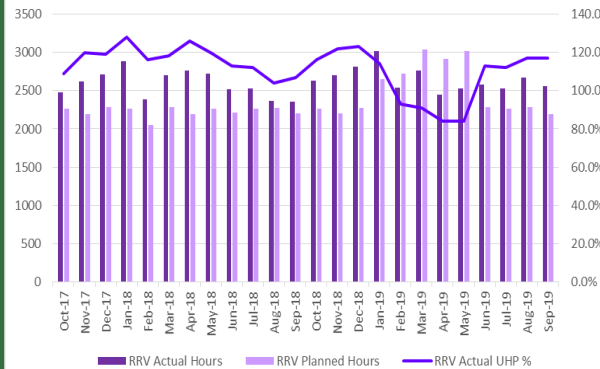
Production and Capacity**

**Refers to the old Abertawe Bro Morgannwg Boundaries therefore includes Bridgend Resources
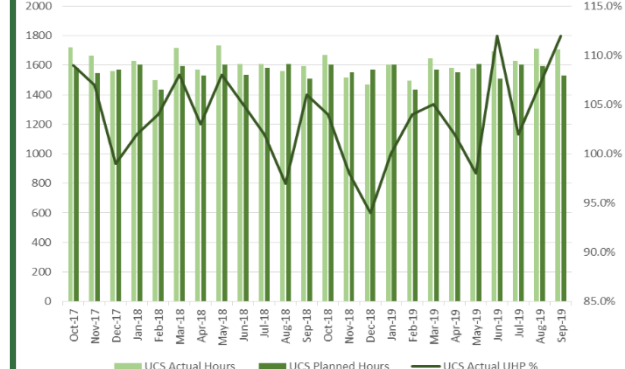

Emergency Ambulance Unit Hours Production. Planned vs Actual - SB

RRV Hours Planned vs Actual - SB

UCS Hours Planned vs Actual - SB

Analysis

- Emergency Ambulance (EA) Unit Hours Production (UHP) increased in September 2019 to 88%, compared to August 2019 at 85%.

- The actual emergency hours available over the last two years shows a year on year increase.

- Linked to this are the actual hours available of Urgent Care Service (UCS) and Rapid Response Vehicle (RRV) crews.

- RRV actual hours have increased year on year. UCS actual hours have decreased year on year.

- One of the commissioning intentions is to improve our EA UHP and actual hours put out.

- The agreed target with the National Collaborative Commissioning Unit (NCCU) is a 95% target for EA UHP as an interim measure pending the Demand and Capacity Review, however SB have not achieved this since May 2019.

Local Improvement Actions

- Directed overtime coverage to provide equitable 24/7 coverage
- Abstractions management
- Key dates management re additional reasons to meet demand
- Source additional resources to provide a ring-fenced Red car when required to boost performance
- Liaison with the CFR management team to increase hours of coverage when needed
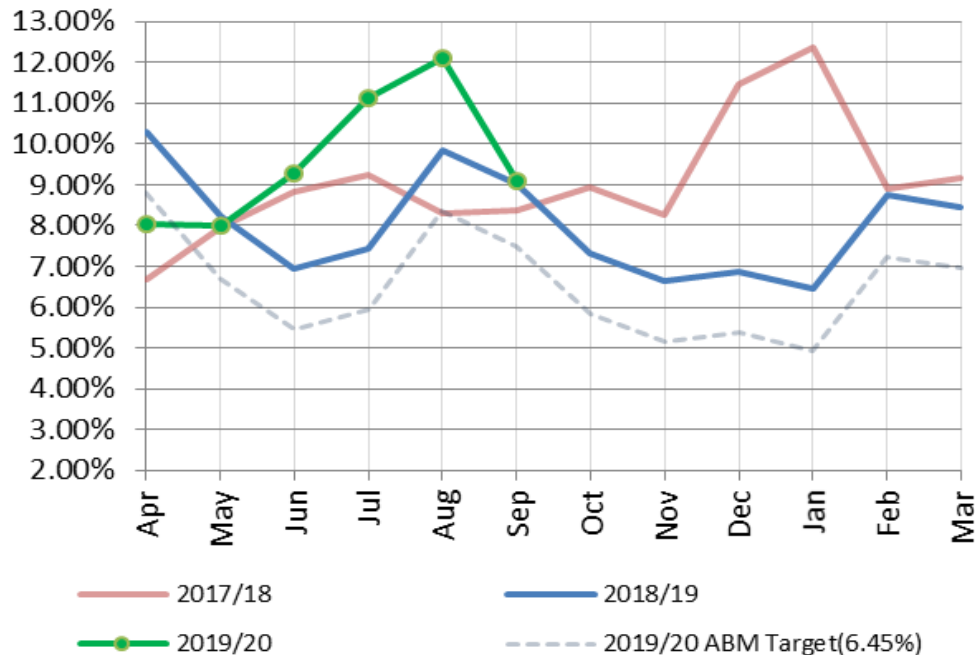
National Improvement Actions

IMTP Deliverable	Completion Date
Deliver an improvement in resource availability levels	Mar-20
Other key Improvement Actions	Completion Date
Demand and Capacity Review	Nov-19
Reduce vacancy levels through Big Bang events	Annually
Roster reviews	Sep-20
New Resource Dashboard	Continuous
Healthier Wales	TBC

Sickness**

SB Sickness Absence

Legend:
- 2017/18
- 2018/19
- 2019/20
- 2019/20 ABM Target(6.45%)

Analysis

- Overall sickness absence increased in SB in 2019/20 to August 19. In September 19 however it decreased by 3.04% to 9.08%.
- Compared to the September 2018 rate of 9.00% we are recording a 0.08% increase.
- Locally, sickness absence rates for SB have fluctuated year on year and are higher than the pan-Wales position.
- Absence for September 2019 in Neath locality was 8.87%; in Swansea locality was 5.82%; and in Bridgend locality was 15.45%.
- Overall Trust wide sickness absence increased in September by 0.32% to 7.19%, this is also an increase when compared to the September 2018 rate of 6.72%.
- Supporting managers and directorates to effectively manage sickness absence and health and wellbeing remains a high priority.

Improvement Actions

IMTP Deliverable	Completion Date
Approve & implement a HWB strategy	Apr 2020
Other Key Improvement Actions	**Completion Date**
Improve resources to support line managers	Ongoing
Address shortfalls in Occupational Health Service	Dec 2019
Implement actions to address short term absence	Dec 2019
Monthly review of all Long term Sickness (LTS) cases	Ongoing

Local Improvement Actions

- Manage sickness and support staff in line with the Managing Attendance at Work Policy
- Undertake timely Wellbeing and Occupational Health referrals
- Undertake daily review of short term sickness
- Fortnightly review of long term sickness with Human Resources (HR) and Occupational Health
- Identify alternative duties opportunities for staff returning to work after sickness absence who remain unfit for full operational duties
- Support staff Mental Health with early signposting to TRIM

Non-Emergency Patient Transport Service (NEPTS)

Transport Solution Team

NEPTS has developed an innovative proposal on managing the transport requirements of patients who do not have an eligible medical need for transport. The proposal which will be supported by the Healthier Wales funding, will introduce a system whereby non-eligible patients are supported to find and book alternative transport arrangements to help them access their treatment. This proposal will also ensure the service is operating fully within the guidelines set out by WHC 2007(005). A briefing paper and engagement plan to support the delivery of the proposal has been shared with Welsh Government. WAST is expecting to undertake a separate demand & capacity review of NEPTS in the second half of 2019/20.

National Call Taking

In April 2019, NEPTS virtually merged our 3 regional patient bookings centres. Merging the regional booking centres into a single point of contact has provided an enhanced call taking system, allowing calls to be directed to the next available pan-Wales call taker, ensuring that patient and HCP calls are answered as quickly as possible. The merging of the 3 booking centres has resulted in a significant decrease in the length of time calls are waiting to be answered, with the average waiting time being reduced from 1 minute 30 seconds to 30 seconds. With calls be answered in a timely manner, the number of abandon calls has reduced by 60%. Providing a single point of contact has further enhanced the quality of the service for patients, by ensuring that consistent and updated information is being shared with patients and HCP when making a booking.

End of Life

Non-Emergency Patient Transport Service (NEPTS) has been providing pre-planned transport to End of Life Care (EoLC) patients for many years. However, in the event of a sudden deterioration, clinicians often resorted to calling 999 in the belief this was the quickest way to get transport. However, 999 calls are prioritised so that paramedics attend patients with potentially fatal yet reversible conditions. This results in patients dying from an irreversible terminal illness being given a lower priority, and therefore waiting longer to be transferred to their preferred place of death.

As the service did not have any dedicated resource available for End of Life journeys, a decision was made to implement a service that could utilise existing resources across WAST and its delivery partners. An all-Wales booking number was established and utilised one of the WAST discharge desks as a central booking point for healthcare professionals (HCPs) to contact.

To ensure the required information was captured to achieve the best patient experience, an End of Life booking form was developed in partnership with palliative care clinicians. A NEPTS End of Life guidance document was also established to help HCPs understand what the service is, how it works and which number to use to contact the service.

In August 2017, the NEPTS EoLC Rapid Transport Service was piloted in four sites in Wales. Each of the initial journeys was evaluated for timeliness and to ensure that the relevant HCP's feedback was built into the operation of the service. The service is now available across Wales and has carried out almost 600 journeys. A recent review of the service revealed the median waiting time for an ambulance booked through the EoLC Rapid Transport Service is 52 minutes

Transfer of Work

The 2016 NEPTS business case set out the recommendation to establish a new commissioning process and for WAST to act as the main national provider of NEPTS on behalf of NHS Wales. It was agreed that it would do this through using a mixed economy model of providers to ensure flexibility, quality and value for money.

At the same time, it was confirmed that EASC would act as the commissioner for all NEPTS services provided through WAST and other providers (to be commissioned via WAST), and that a Quality and Delivery Assurance Framework would be designed and implemented in order to support this, in the same way that has been developed for EMS and EMRTS.

To date Cardiff & Vale University Health Board, Velindre NHS Trust, Hywel Dda University Health Board and Swansea Bay University Health Board have transferred the commissioning responsibility for NEPTS to WAST.

The Transfer of Work has taken significant steps forward throughout 2019 with ongoing dialogue with health board leads and the Chief Ambulance Service Commissioners (CASC) office. Over this period there have been extensive conversations with Betsi Cadwaladr University Health Board, establishing a baseline of activity, details of service cover and transferring principles. Additionally the same exercise to establish baseline activity and service details has been taking place with Aneurin Bevan health board. This information is still being developed, with an initial report going to Aneurin Bevan health board Executive Team on Monday 25th 2019.

All Wales Transfer and Discharge Service

The WAST and EASC Integrated Medium Terms Plans (IMTP) articulate a commitment to develop a transfer and discharge service for Wales.

An initial workshop was held in April and a wider workshop on the 09 July 2019, with all health boards invited. An invitation was also extended to the Critical Illness Implementation Group in light of recent investment from the Minister and the NCCU was represented. Internally, there have been two subsequent workshops to develop an outline model for November 2019, based on all the feedback from the workshops and learning from discussion for other areas of strategic change.

Inter-Hospital Transfers

Future versions of the report will include detailed information on inter-hospital transfers

Health Board Service Changes

- There are currently no Health Board level service changes that WAST are directly involved in for SB

Regional service Change

- Implementation of the Major Trauma Network across South Wales, West Wales & South Powys due to go live on the 1st April 2020.
- Development of a Hyper Acute Stroke Unit (HASU) in Morriston hospital, Swansea and re-configuration of regional stroke services. Currently developing the preferred clinical service model. Anticipated implementation date 2021/22.
- Centralisation of Adult Thoracic surgery in Morriston hospital, Swansea. Currently developing the preferred clinical service model. Anticipated implementation date 2023/24.
- Implementation of phase 2 of the Cwm Taf Morgannwg boundary change for the Bridgend locality area. Phase 1 closed down and Phase 2 to commence in Q1 2020/21.

Winter Plan

All Wales Winter Plan

WAST's has a National Winter Plan underpinned by Health Board level plans. The plans are across the five step ambulance care pathway. There is also a NEPTS national winter plan. WAST undertook a lessons learnt exercise after last winter. Two key lessons were to: 1) plan on the basis of winter monies become available 2) extend the operation of the Silver Cell that operated over the festive period into January (and other periods if required).

WAST had agreement from EASC for the funding of the following initiatives that will start in the winter period (and continue beyond the winter period):
- Working with WAST's partner of choice, St John Cymru Wales, increase the Trust's unscheduled care service capacity and help backfill the lost hours from handovers through expanded St John Cymru Wales over the next 12 months i.e. 10 additional shifts per day;
- Improve patient facing colleagues' access to clinical information and senior decision making in support of on scene clinical assessment via the Clinical Support Desk (CSD), in particular, patient clinical records supported by more clinicians in the CSD; and
- The utilisation of alternate providers as an interface at key acute hospital sites where handover delays are particularly prominent (Glan Clywd, Morriston, Prince of Wales and Royal Gwent) to improve handover of WAST patients and provide care under WAST supervision to the point of handover to the hospitals thereby freeing up WAST staff to respond to patients in the community.

The exact start dates of the schemes is to be confirmed. WAST has also offered every health board the option to fund enhanced NEPTS discharge and transfer capacity. Some health boards have expressed an interest (nothing yet from BCU). We have also updated our Resource Escalation Action Plan (REAP) Toolkit and we held a Winter Plan desk top exercise in Oct-19 to test our arrangements. We are also collaborating with the NCCU on improving system/regional escalation arrangements, for examples diverts.

Whilst not part of the winter planning, we also have agreement from EASC to recruit an additional 46 full time equivalents (30 Paramedics, 12 EMT and 4 UCA) via bank staff, retire and returns and Paramedics from other ambulance services, who will come on stream during the Winter Plan period. This recruitment is linked to the current EMS Demand & Capacity Review, the initial findings of which were presented to 12 Nov-19 EASC.

WAST has also been working with Cardiff University Business School on forecasting and the plan is supported by a tactical day by day demand forecast over the period of the plan with the ambition to introduce predictive performance reporting during the winter period.

Swansea Bay Specific Winter Initiatives

The WAST SB winter plan includes all Bank staff being written to, to encourage shift uptake over the festive period. Utilisation of Trust data to identify key dates where there is a predicted increase in demand and increase resources accordingly. Increased the capacity of SJCW level 1 falls service and going to undertake an intermittent level 2 falls service in partnership with Swansea Bay Health Board. Work with Neath / Port Talbot Acute Clinical Team to provide a paramedic and a ANP on an RRV to target the frail elderly demand. Assisting with the provision of a patient flow coordinator at the front door of Morriston Hospital Emergency Department. Fully reviewed and update the Health Board vehicle alternative pathways directory.