



Chief Ambulance Services Commissioner

EMRTS Service Review

Summary of Options Appraisal Process

12 January 2024



GIG
CYMRU
NHS
WALES

Pwyllgor Gwasanaethau
Ambiwans Brys

Emergency Ambulance
Services Committee

Presentation:

Welcome and introductions were made, followed by a presentation that included:

- History of EMRTS Cymru and the Wales Air Ambulance Charity
- What the service provides
- Current base operational arrangements
- Base workload
- Utilisation
- Unmet need
- Modelling
- Options modelled
- Short list of options
- Agreed factors and weightings
- A focus on each factor
- Key metrics per option against each factor
- Presentation of scores and discussion regarding this outcome
- Request for participants to provide feedback regarding the session
- Next steps
- Opportunity to ask questions

Description of the session:

The options appraisal took place with Health Board and NHS Trust colleagues representing a broad range of disciplines that included clinical and medical (see **Appendix 1**). The role of these NHS Wales representatives was to participate in the options appraisal to assist the Commissioner arriving at a recommendation for EASC.

The process leading up to the session included the sharing of information with all attendees to help them prepare. This included the Option Appraisal Process Document that included indicators and metrics, benefits and drawbacks for each option against all of the factors.

The short list of options was scored during the session using the agreed evaluation framework.

On the day, the CASC welcomed attendees and thanked them for making themselves available to take part in the option appraisal exercise. A presentation provided background and context, a description of the partnership arrangement between EMRTS Cymru (NHS Wales) and the Wales Air Ambulance Charity and how the EMRTS service works.

It was explained that the role of NHS Wales representatives would be to score each option against each factor.

Subject matter experts from EMRTS and the Wales Air Ambulance Charity were on hand to help answer any technical queries raised. These did not participate in the scoring and did not influence the process in any way.

The EASC Team facilitated the session, answered any questions on the process followed to date but did not participate in the scoring.

Each of the shortlisted options were described including the operational model (numbers of teams, number of resource hours per option) and the EMRTS management team's operational view.

Attendees were split in to two breakout groups including NHS Wales representatives, subject matter experts and the EASC Team. These groups were facilitated by members of the EASC Team.

NHS Wales representatives were asked to score each option individually using the 'data packs' provided. Individual scores were discussed and a group score agreed for each option against Factors 1 Health Gain, 2 Equity and 3 Clinical and skills sustainability. Group scores were reported back to the main group.

In the main group, NHS Wales representatives were then asked to score each option individually against Factor 4 Affordability and Factor 5 Value for money, using the 'data packs' provided. Individual scores were discussed and a group score agreed for each option against Factors 4 and 5.

The following table contains the agreed group scores:

Agreed Group Scores:

	Short List Option 1: 2A) Welshpool 14-02	Short List Option 2: 2B) Caernarfon 14-02	Short List Option 3: 3D) Rhuddlan 08-20 + 14-02	Short List Option 4: 4C) Impr 3D, add car shift 20-08 (Wrexham)	Short List Option 5: 5C) Improve baseline, add air and car shift 20-08 Caernarfon	Short List Option 6: 6C) Impr 2B, add car shift 20-08 (Rhuddlan)
Health Gain	2	2	4	5	3	5
Equity	2	2	3	5	4	3
Clinical and skills sustainability	2	2	5	2	2	1
Affordability*	4	5	4	2	2	1
Value for money*	2	4	5	3	1	2
Group 1 Score	12	15	21	17	12	12
Health Gain	2	2	4	4	3	5
Equity	2	2	3	4	4	3
Clinical and skills sustainability	3	3	5	3	2	2
Affordability*	4	5	4	2	2	1
Value for money*	2	4	5	3	1	2
Group 2 Score	13	16	21	16	12	13

*Factors 4 & 5 scored as one large group

Total Scores and Total Weighted Scores:

	Short List Option 1: 2A) Welshpool 14-02	Short List Option 2: 2B) Caernarfon 14-02	Short List Option 3: 3D) Rhuddlan 08-20 + 14-02	Short List Option 4: 4C) Impr 3D, add car shift 20-08 (Wrexham)	Short List Option 5: 5C) Improve baseline, add air and car shift 20-08 in Caernarfon	Short List Option 6: 6C) Impr 2B, add car shift 20-08 (Rhuddlan)
Health Gain	4	4	8	9	6	10
Equity	4	4	6	9	8	6
Clinical and skills sustainability	5	5	10	5	4	3
Affordability	8	10	8	4	4	2
Value for money	4	8	10	6	2	4
Total Score	25	31	42	33	24	25
Health Gain (x25)	100	100	200	225	150	250
Equity (x25)	100	100	150	225	200	150
Clinical and skills sustainability (x20)	100	100	200	100	80	60
Affordability (x15)	120	150	120	60	60	30
VFM (x15)	60	120	150	90	30	60
Total Weighted Score	480	570	820	700	520	550
Ranking	6	3	1	2	5	4

Ranking of Shortlisted Options:

Option No.	Option Description	Total Weighted Scores:	Ranked Position:
3	3D) North Central Wales near A55 0800-2000 + 1400-0200.	820	1
4	4C) Improve 3D, adding car shift 2000-0800 in Wrexham.	700	2
2	2B) Caernarfon 1400-0200. Change the Caernarfon shift to 14:00 - 02:00 hours.	570	3
6	6C) Improve 2B, adding car shift 2000-0800 in North Central Wales near A55.	550	4
5	5C) Improve the baseline, adding air and car shift 2000-0800 in Caernarfon.	520	5
1	2A) Welshpool 1400-0200. Change the Welshpool shift to 14:00 - 02:00 hours.	480	6

It was agreed that Options 3 and 4 would be taken forward to Phase 3.

There was discussion regarding the public and stakeholder feedback heard throughout Phases 1 and 2 of the formal engagement. There were several consistent emerging themes, some within the scope of the Review. These included:

- Concern about WAST services regularly being pulled out of area and lengthy handover delays adversely affecting ability to respond to communities
- Concerns that mid, rural, and coastal communities are more vulnerable and 'less equal' than those in urban areas located closer to better road infrastructures and general hospitals and therefore need something more bespoke to reflect their rural needs
- Concern that EMRTS is too specialised and could respond to a wider range of conditions for rural and remote areas through a more bespoke clinical model
- Concern about paramedic staffing levels in mid and rural north Wales
- Concerns about EMRTS staff retention with any base moves
- Concerns that the Charity will lose the goodwill of support in base location areas and the impact on charitable donations which could decrease and destabilise this important service provided in partnership
- Concern about vulnerability of rural communities generally ('lost all other services already')
- Current bases perceived as a 'local lifeline' and visual presence is reassuring.

It was agreed that, as the Commissioner of both road and air ambulances, the CASC had the opportunity to address some of these issues to complement Option A. These actions would involve better use of the available commissioning allocation and would not incur additional costs.

The additional benefits of taking these actions were:

- ✓ Provides additional pre-hospital resources and improves the ability to respond to rural and remote/coastal communities
- ✓ Responds to the need for a different model in rural and remote and coastal areas
- ✓ Involves a bespoke clinical model with EMRTS responding to a wider range of conditions in rural and remote and coastal areas, retaining a visual presence in these areas
- ✓ Improves ambulance resources in rural and remote and coastal areas
- ✓ Provides an alternative for EMRTS staff not wishing to work from a centralised base ensuring improved resource in rural and remote and coastal areas
- ✓ This is a service improvement; the Charity has agreed to support the work of the EMRTS Service Review if the evidence supports an improved service for the population of Wales.

All attendees were thanked by the CASC for making themselves available to take part in the option appraisal exercise, scoring each option against all of the Factors and assisting the CASC in developing a recommendation for the EASC Committee.

Feedback regarding the session received from attendees is attached as **Appendix 2.**

Appendix 1

Attendees:

All Health Boards were in attendance (apart from Swansea Bay University Health Board, however apologies were received on the day from them), and Welsh Ambulance Services NHS Trust and Velindre University NHS Trust. The role of the NHS Wales representatives was to score each option against each factor. Attendance included:

- Critical Care Clinical Lead
- Clinical Lead
- Director of Performance and Commissioning
- Director of Operations x2
- Deputy Director of Finance
- Deputy Director Communication and Engagement
- Programme Director
- Associate Director – Operations
- Planning and Partnerships Manager
- Head of Service
- Head of Service (non-scoring)
- General Manager (non-scoring)

- Subject Matter Experts **(non-scoring)**
 - EMRTS
 - Wales Air Ambulance Charity

- Emergency Ambulance Services Committee **(non-scoring)**
 - Chair

- EASC Team **(non-scoring)**

Appendix 2

Anonymised Feedback

Anonymised feedback received about the Options Appraisal process was submitted at the end of the session:

Please tell us what you think worked well about the day...	Please tell us what you think could have been better...	Any other comments can be detailed here...
Good preparation, lots of refreshments	Slightly bigger room but appreciate how challenging that is!	Huge thanks to all for all of the efforts of the team.
Clear paperwork, information in advance, well-structured morning, access to subject experts.	A more central location in Wales ;-)	Thank you again for all of your work on this.
Organisation. Pre-planned paperwork Email with relevant info Face to face	No comment	N/A
Very well organised and logical in presentations through to facilitated groups	Personally, the management comments and insight of the teams are really helpful and helped to add context to the detail Would welcome more of that	
Face to face discussions, good conversations generated.	Info provided a little earlier however totally understand the time and effort put in to gathering it together.	
Very good pre information and correspondence to allow for personal preparedness and an option to score prior to the event. Very well presented and organised on the day.	Not certain it could have been.	Very happy to represent the Service here to assist in determining the future EMRTS Service. Many thanks to all for a very good interactive session.
Pre-course material made decision making more transparent with a higher level of confidence	Not the fault of the Committee, but I didn't have the information until day before. A longer walk through of the appendix including the time to arrival at scene but also the Standard Deviation of those figures.	N/A

Please tell us what you think worked well about the day...	Please tell us what you think could have been better...	Any other comments can be detailed here...
Well organised. Good size groups. Information circulated prior to today made the session much easier to run through.	Some of the information was hard to analyse but having it in advance made that less of an issue.	Understand and recognise the vast amount of time, work and effort that goes into a process like today and so would like to thank the EASC team for making it as easy and painless as could be hoped.
Good pace. Plenty of time provided to explain the situation.	Joining instructions - guidance to how to use the pre workshop materials.	
Impressive work undertaken by the team thus far Robust detailed information on background and process on the service review and modelling work to date, including signposting to the EMRTS service information on intranet this helped prepare ahead of today this was strengthened by a presentation at start of the session to aid discussion and understand the context Group facilitation work well with scoring exercises as I had some anxiety prior to this	Nothing springs to mind	It has been an enlightening informative session for me good to undertake face to face meeting Thanks you for the refreshments and the welcome Good luck with the rest of this work I look forward to hearing the outcome please can we be informed of this once completed.