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| **AGENDA ITEM** |
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| **EMERGENCY AMBULANCE SERVICES COMMITTEE** |

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| **CHIEF AMBULANCE SERVICES COMMISSIONER’S UPDATE REPORT** |

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| **Date of meeting** | 14/07/2020 |

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| **FOI Status** | Open/Public |

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| **If closed please indicate reason** | Choose an item. |

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| **Prepared by** | Chief Ambulance Services Commissioner |
| **Presented by** | Chief Ambulance Services Commissioner |
| **Approving Sponsor** | Chief Ambulance Services Commissioner |

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| **Report purpose** | FOR DISCUSSION / REVIEW |

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| **Engagement (internal/external) undertaken to date (including receipt/consideration at Committee/group)** | | |
| **Committee/Group/Individuals** | **Date** | **Outcome** |
| (Insert Name) | (DD/MM/YYYY) | Choose an item. |

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| **ACRONYMS** | |
| AQI  CASC  EMRTS  WAST | Ambulance Quality Indicators  Chief Ambulance Services Commissioner  Emergency Medical Retrieval and Transfer Service  Welsh Ambulance Services NHS Trust |

1. **SITUATION/BACKGROUND**
   1. The purpose of this report is for the Committee to receive an update on key matters related to the work of the Chief Ambulance Services Commissioner (CASC).
2. **SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)** 
   1. Since the last Committee meeting progress has been made against a number of key areas which for ease of reference are listed below:

* Year End Accounts and Annual Governance Statement
* Ministerial Ambulance Availability Task Force
* EASC Integrated Medium Term Plan
* Ambulance Quality Indicators
* Seasonal Planning
* Ambulance provision for the coming months
* Reviewing the Emergency Medical Services (EMS) Framework
* Meetings with WAST
  1. **Year End Accounts and Annual Governance Statement**

Members will be pleased to note that no issues were identified in respect of the accounts or any key risks and they were approved at the Audit & Risk Committee at Cwm Taf Morgannwg University Health Board on 29 June 2020 and the full set are available at this link:

[https://cwmtafmorgannwg.wales/how-we-work/audit-committee/?drawer=Audit%20Committee\*021%20JUNE%2029%202020](https://cwmtafmorgannwg.wales/how-we-work/audit-committee/?drawer=Audit%20Committee*021%20JUNE%2029%202020)

The Annual Governance Statement was also approved at the same meeting and has been circulated to Members. Looking ahead the Committee has committed to:

* Continuing to examine the governance and internal controls of the EASC
* Reviewing the format of the risk register and take into account of the set of context perspectives
* Overseeing the implementation of the Demand and Capacity plan for emergency medical services (EMS)
* Continuing to refine and review the commissioning intentions for EMS, NEPTS and EMRTS
* Considering the development of commissioning arrangements for a dedicated national transfer and discharge service
* Delivering the Strategic Commissioning Intentions
* Supporting the monthly publication of the Ambulance Quality Indicators
* Commissioning EMRTS and WAST to deliver the critical care transfer service
* Delivering the Ministerial Ambulance Availability Taskforce and its recommendations
* Delivering alternative pathways in line with the Ministerial request
* In light of the Covid 19 pandemic, revising the EASC IMTP to reflect the anticipated future.
  1. **Ministerial Ambulance Availability Taskforce**

Members will recall that the work of the Ministerial Ambulance Availability Taskforce was suspended due to the initial response to the Coronavirus pandemic. It is now time to reconvene the work of the Taskforce and Professor David Lockey and I are discussing how best to facilitate this. It is likely that this will involve the Taskforce meetings less frequently than originally intended and adopting an approach which will critique specific pieces of work rather than the traditional meeting approach.

I have held some discussions with the Chair and Chief Executive of the Welsh Ambulance Services NHS Trust who are supportive of this new approach and the Minister is aware of the work to date.

It is still the intention to produce an interim report and the timing of this will align with key dates previously agreed by EASC in respect of the Demand and Capacity review work discussed and agreed at previous committee meetings. I will share the revised work programme of the Taskforce with Committee members as soon as it is available.

* 1. **EASC Integrated Medium Term Plan IMTP**

Members will be aware of the revised approach being taken by Welsh Government in respect of the IMTP process this year. In view of this and the development of quarterly operational framework delivery returns there is a need to revise the EASC delivery plan for 2020-2021 and the plans for 2021-2022 and beyond. As health boards and WAST have only recently been asked to submit their Quarter 2 & 3 returns and the relationship between the returns and the EASC delivery plan it is my intention to discuss this in detail at the next EASC Management Group on 27 July 2020 and bring the plan back to the Committee for approval.

In the meantime ongoing discussions and meetings are taking place with WAST to ensure that the key deliverables described earlier in my report are progressing.

* 1. **Ambulance Quality Indicators (AQIs)**

**Members should note that the position remains unchanged in relation to the publishing of AQIs. Releases of official statistics and research on Wales can be found at the following link:**[https://gov.wales/statistics-and-research](https://gov.wales/statistics-and-research%20)

However, as requested, work has commenced to present the information in a clearer and more transparent way.

* 1. **Seasonal Planning**

Discussions have started with WAST on their seasonal planning arrangements. Members will be aware of the specific guidance on unscheduled care in the Quarter 2/3 Operating Framework information. Opportunities for WAST and health boards to work closely together across the whole unscheduled care system will be discussed and developed at the EASC Management Group which will be presented for discussion at the next Committee meeting.

* 1. **Ambulance service provision in the coming months**

Members will be pleased to note that helpful discussions have been taking place at the EASC Management Group in terms of the health boards and NHS Trusts plans to return to pre-Covid working arrangements. The discussions have identified that even small changes to services can have significant effects on the ambulance services provided by WAST, even where activity remains the same.

At this time, where all NHS services are in unchartered territories I would emphasise to you that your organisational representatives at all of the EASC Sub Groups have never been more important or vital to ensure that the right services can be provided locally.

The importance of the operational information for the planning and securing of appropriate ambulance provision for your resident populations is essential and the sub groups are working hard to ensure that this takes place.

* 1. **Reviewing the Emergency Medical Services (EMS) Framework**

In line with the discussions at previous Committee meetings work has commenced on reviewing the EMS Framework.

This work will take into account the Covid 19 pandemic and the ambition and re-establishment of performance management arrangements particularly taking into account quality, safety and outcomes. In addition the framework will enable WASTs contribution to the pre-hospital unscheduled care system to be defined. The EASC Management Group will discuss the revised framework in detail prior to its presentation to the Committee in due course. It is anticipated that the new Framework will be in place for Quarter 3 in this financial year.

* 1. **Meetings with WAST**

Members should note that I have continued to hold weekly meetings with the Chief Executive of WAST since the last Committee meeting.

Members of the EASC Team have had regular contact with WAST executive directors and attended and supported meetings with the WAST team on matters of key importance including the Demand and Capacity Programme Board, Clinical Prioritisation and Assessment Software Group, Field Hospital Transportation and the Non-Emergency Patient Transport Services Delivery Assurance Group. Since the last EASC meeting, Quality and Delivery Meetings took place on 12 June and 3 July.

Members will be pleased to note that I was able to provide comments to WAST on their Quarter 2/3 Operating Framework return prior to its submission to the Welsh Government.

As we continue to adapt to the current situation these arrangements will change to reflect the need to effectively collaboratively commission ambulance services.

1. **KEY RISKS/MATTERS FOR ESCALATION TO THE COMMITTEE**
   1. The review of the Emergency Medical Services Framework to be in place during Quarter 3.
   2. The key deliverables for this financial year as described above
   3. Reconvening of the Ministerial Ambulance Availability Taskforce
   4. Implementation of the Demand and Capacity Review for EMS
2. **IMPACT ASSESSMENT**

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| **Quality/Safety/Patient Experience implications** | Yes (Please see detail below) |
| Specific areas identified will impact quality safety and patient experience matters |
| **Related Health and Care standard(s)** | Governance, Leadership and Accountability |
| All health and care standards apply. |
| **Equality impact assessment completed** | Not required |
| **Legal implications / impact** | There are no specific legal implications related to the activity outlined in this report. |
| **Resource (Capital/Revenue £/Workforce) implications /**  **Impact** | Yes (Include further detail below) |
| There are ongoing implications which are identified within the report |
| **Link to Main Strategic Objective** | The Committee’s overarching role is to ensure its Commissioning Strategy for Emergency Ambulance Services utilising the five step patient pathway outlined within the National Collaborative Commissioning Quality and Delivery Agreement and the related outcomes for each care standard aligned with the Institute of Healthcare Improvement's (IHI) ‘Quadruple Aim’ are being progressed.  This report focuses on all the above objectives, but specifically on **providing** strong governance and assurance. |
| **Link to Main WBFG Act Objective** | Provide high quality care as locally as possible wherever it is safe and sustainable |

1. **RECOMMENDATION** 
   1. The Emergency Ambulance Services Committee is asked to

* **DISCUSS** and **NOTE** the information within the report.