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| **AGENDA ITEM** |
| 3.6 |

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| **EMERGENCY AMBULANCE SERVICES COMMITTEE**  |

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| **INTEGRATED PERFORMANCE DASHBOARD** |

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| **Date of meeting** | (10/03/2020) |

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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** | Ross Whitehead, Assistant Director of Quality and Performance Management |
| **Presented by** | Ross Whitehead, Assistant Director of Quality and Performance Management |
| **Approving Executive Sponsor** | Stephen Harrhy, 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** |
| EASC Management Group  | 21/02/2020 | DISCUSSED NO DECISION |

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| **ACRONYMS** |
| AQIEMSWAST | Ambulance Quality IndicatorsEmergency Medical ServicesWelsh Ambulance Services NHS Trust |

1. **SITUATION/BACKGROUND**
	1. Members have previously requested the development of an Integrated Performance Dashboard that provides bespoke information related to each health board.
	2. Progress with the development of these dashboards has been limited due to difficulties in establishing sufficient access to relevant data and informatics expertise within the EASC Team.
	3. These issues have now been resolved and development of this work has recently accelerated.
2. **SPECIFIC MATTERS FOR CONSIDERATION BY THIS MEETING (ASSESSMENT)**
	1. Members will receive an interactive presentation on the early draft of the integrated dashboard with examples of health board specific information.
	2. The dashboard is intended to provide information across the 5 step ambulance pathway and where possible building on the linked data set from the Amber review to provide a broader understanding of flow through the system.
	3. The EASC Management Group will be engaged with the ongoing development and refinement of the dashboard.
3. **KEY RISKS/MATTERS FOR ESCALATION TO THE COMMITTEE**
	1. Health Board engagement in defining the local information requirements
	2. Continuation of information availability.
4. **IMPACT ASSESSMENT**

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| **Quality/Safety/Patient Experience implications**  | There are no specific quality and safety implications related to the activity outined in this report. |
| However, the subject matter relates to quality indicators for patient safety and experience |
| **Related Health and Care standard(s)** | ALL are relevant to this report |
| **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** | There is no direct impact on resources as a result of the activity outlined in this report. |
| **Link to Commissioning Intentions** | 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.  |
| **Link to Main WBFG Act Objective** | ALL are relevant |

1. **RECOMMENDATION**
	1. The Emergency Ambulance Services Committee is asked to:
* **DISCUSS** and **NOTE** the contents of the report.