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| Emergency ambulances se#289 | **AGENDA ITEM ??**  **12th Nov 2019** |

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| **Emergency Ambulance Services Committee Report** |
| **Progress report on Non-Emergency Patient Transport Services**  **(NEPTS)** |

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| **Executive Lead:**  Commissioning | Julian | Baker | – | Director | of | National | Collaborative |
| **Author:** James Rodaway / Jonathan Jones | | | | | | | |
| **Contact Details for further information:** [Julian.Baker@wales.nhs.uk](mailto:Julian.Baker@wales.nhs.uk) | | | | | | | |

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| **Purpose of the Emergency Ambulance Services Committee Report** |
| The purpose of this report is to outline for EASC the progress made and the work currently underway to transform Non-Emergency Patient Transport Services in Wales; deliver the Ministerial expectations and implement the 2015 business case “the Future of NEPTS in Wales”. |

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| **Governance** | |
| **Link to the Commissioning Agreement** | 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) ‘Triple Aim’ are being progressed. This report focuses on all the above objectives, but specifically on **providing** strong governance and assurance. |
| **Supporting evidence** | The Collaborative Commissioning Quality and Delivery Framework for Non-Emergency Patient Transport Services. |
| **Engagement – Who has been involved in this work?** | |
| WAST NEPTS team, WAST Planning & Performance Directorate; NEPTS Delivery Assurance Group | |

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| **Emergency Ambulance Services Committee Resolution to:** | | | | | | | |
| **APPROVE** |  | **ENDORSE** |  | **DISCUSS** | **√** | **NOTE** | **√** |
|  | | The Emergency Ambulance Services Committee is asked to:   * **DISCUSS & NOTE** progress made and the work currently underway to transform Non-Emergency Patient Transport Services in Wales; deliver the Ministerial expectations and implement the 2015 business case “the Future of NEPTS in Wales”. | | | | | |
| **Summaries the Impact of the Emergency Ambulance Services Committee Report** | | | | | | | |
| **Equality and diversity** | | There are no implications arising directly from this report. | | | | | |
| **Legal implications** | | There are no implications arising directly from this report. | | | | | |
| **Population Health** | | No impact | | | | | |
| **Quality, Safety & Patient Experience** | | Ensuring the Committee and its Sub Groups make fully informed decisions is dependent on the quality and accuracy of the information presented and considered by those making decisions. Informed decisions are more likely to impact favorably on the quality, safety and experience of patients and staff. | | | | | |
| **Resources** | | No direct impact | | | | | |
| **Risks and Assurance** | | Identified within the report. | | | | | |
| **Health & Care Standards** | | The 22 Health & Care Standards for NHS Wales are mapped into the 7 Quality Themes:  Staying Healthy; Safe Care; Effective Care; Dignified Care; Timely Care; Individual Care; Staff & Resources [http://www.wales.nhs.uk/sitesplus/documents/1 064/24729\_Health%20Standards%20Framework](http://www.wales.nhs.uk/sitesplus/documents/1064/24729_Health%20Standards%20Framework_2015_E1.pdf)  [\_2015\_E1.pdf](http://www.wales.nhs.uk/sitesplus/documents/1064/24729_Health%20Standards%20Framework_2015_E1.pdf)  The work reported in this summary and related annexes take into account many of the related quality themes in particular timely care. | | | | | |
| **Workforce** | | Identified within the report. | | | | | |
| **Freedom of information status** | | Open | | | | | |

**Progress report on Non-Emergency Patient Transport Services** **(NEPTS)**

**1. SITUATION / PURPOSE OF REPORT**

The purpose of this report is to outline the current progress and the work currently underway to transform Non-Emergency Patient Transport Services in Wales; to deliver the Ministerial expectations and implement the 2015 business case “the Future of NEPTS in Wales”.

**2. BACKGROUND / INTRODUCTION**

As a result of performance challenges across Emergency Medical Services and NEPTS, a review into the provision of these services was undertaken. The initial focus of this work was to identify a NEPTS model that would facilitate improvements in EMS,

The McClelland Review articulated the key points:

* Identifying the need for clear agreed vision for delivery of ambulance services.
* NEPTS should be locally responsive, cost effective and provided on clear eligibility and accessibility criteria.
* NEPTS should be considered a high priority for whoever is responsible for their delivery.
* Work should begin to disaggregate NEPTS from the EMS element of WAS, with NEPTS becoming a routine function of Local Health Boards‟ (LHBs) business.
* Consideration should be given to providing a form of national co-ordination to ensure the resilience and benchmarking of effective NEPTS across Wales.

A Non-Emergency Patient Transport Service Transformation Project Board was formed to deliver the review recommendations. It developed and submitted a business case to address the “Future of NEPTS in Wales” on 13th October 2015.

Under the preferred option, EASC will become lead commissioner for the full NEPTS delivery across Wales.

The collaborative commissioning process utilises a Non-Emergency Patient Transport Services Delivery Assurance Group (NEPTS DAG) as the vehicle to deliver change. The NEPTS DAG meets monthly has representation from EASC, Health Boards, Velindre NHS Trust and Welsh Ambulance Services NHS Trust (WAST).

**3. ASSESSMENT / GOVERNANCE AND RISK ISSUES**

**Non-Emergency Patient Transport Services Delivery Assurance Group (NEPTS DAG)**

The NEPTS DAG remains the vehicle for monthly collaborative discussions around NEPTS Between WAST & Health Boards. Consistent representation from Health Boards and WAST has built trust and enabled highly effective collaborative working. The group has also established the reporting mechanisms into the newly formed EASC Management Group.

**Non-Emergency Patient Transport Services Collaborative Commissioning: Quality & Delivery Framework**

The NEPTS Collaborative Commissioning Quality & Delivery Framework was signed on behalf of EASC and Welsh Ambulance Services (WAST) in October 2019. The Framework delivered Ministerial expectation, is live and covers a period of 3 years.

**Delivery of 2019/20 Commissioning Intentions**

Through the NEPTS DAG excellent progress has been made by WAST and Health Boards on delivery of the 2019/20 Commissioning Intentions. The key work streams initiated through the DAG to support delivery of the Commissioning Intentions are:

**Development of Local Measures**

The development of local measures is a key 2019/20 Commissioning Intention. The ability for each Health Board to provide assurance within their organisation following the transfer of provision to WAST is key to building trust and enabling Health Boards to commission services effectively. This work was piloted between WAST and Hywel Dda UHB and they have delivered a number of key actions:

* Standardisation of the Terms of Reference for the Tier 2 & Tier 3 meeting agenda and structure that take place within each Health Board with WAST around NEPTS.
* Clarity around roles & responsibilities around NEPTS on operational issues.
* Visibility of NEPTS within Health Boards through aligned reporting into governance structures.
* Driving development of Joint Performance Improvements for 2020/12 Commissioning Intentions.

**Performance & Activity**

Through the NEPTS DAG, project teams have been formed and work initiated on the Joint Performance Improvements detailed within the 2019/20 Commissioning Intentions, these are:

Reduction in on the day discharge & bookings

* WAST have developed a national protocol for reducing on the day bookings and discharge requests. Joint project will support the move towards booking planned in advance and improve the efficiency of vehicle utilisation across Wales. In addition to this, all Health Boards have agreed to a national cut off time of 12pm to support the reductions and to help reduce the variation across the system.

Reduction in the number of aborts & cancellations

* Aborted journeys & cancellations account for about 10-14% of the total NEPTS bookings. Improving performance across Wales in these areas will realise significant efficiencies that will improve vehicle availability and improve performance. Working with Health Boards through the EASC Delivery Assurance Group to collaboratively develop plans and interventions focussed on joint-working to reduce aborted journeys.

National Call Taking

* WAST have developed and initiated a ‘Once for Wales’ National Call Taking Service for NEPTS after amalgamating three WAST regional call centres. This model has made significant improvements to patient experience and the standardisation of booking information and processes; reducing the amount of time patients wait for calls to be answered. The model is supported by a national booking process that enables the WAST NEPTS contact centres to answer calls and book transport for patients regardless of where they live within Wales.

Within the first quarter

* Reduced the average wait by the end of quarter 1 by over 50%
* Reduced the number of calls abandoned before being answered by over 30%
* WAST have initiated a single number to contact NEPTS across Wales. This single number makes booking simpler for patients and professionals.

Eradicating fax bookings

* Moving towards telephone and online booking and the cessation of bookings by fax ensures better compliance with audit and increased accuracy and efficiency to ensure the right transport for the right patient the first time. The planned cut-off date is 31 Mar-20. To date, significant work has been undertaken to reduce fax bookings by approximately 50%. Eradicating bookings by fax will improve information governance and reduce risks in relation to sharing patient data.

**Transfer of Work**

The transfer of work as outlined in the 2015 business case “The future of NEPTS in Wales” detailed the plurality model as the vehicle for delivering future NEPTS provision.

WAST have developed a detailed transfer process for delivery of this element of the NEPTS business case. This process ensures transparency, outlines the responsibility of each organisation and enables constructive discussion and resolution of any issues. Executives and the governance mechanisms are fully engaged with each transfer ensuring deadlines can be met and transfers completed. The process of transfer has seen WAST and Health Boards engaging across the 3rd Sector, voluntary sector and CHC both nationally and locally to deliver a seamless service.

The transfer process has already seen the following Health Board and trust provision transfer to WAST:

* Cardiff & Vale (July 18)
* Velindre (July 18)
* Hywel Dda (April 19)
* Swansea Bay (September 19)

Swansea Bay was the latest health board to transfer non-emergency patient transport activity to NEPTS). The remaining transfers (Aneurin Bevan, Betsi Cadwaladar, Powys and Cwm Taf Morgannwg) are timetabled to be completed by the 31 Mar-20. Each remaining health board has a range of complexities and issues which are being considered and worked through.

Aneurin Bevan University Health Board (ABUHB) is currently undertaking extensive service change through the development of the Grange Hospital. This includes reconfiguration of primary and secondary care services which will impact on transport requirements. ABUHB has some challenges in identifying transport spend across the organisation. This is due to departments booking and funding their own transport requirements with no data capture in place.

Cwm Taf Morgannwg University Health Board (CTMUHB has recently completed the Bridgend boundary change. The Trust played a key role in the analysis of non-WAST transport spend and activity identified as part of the boundary change. CTMUHB have been requested to provide transport activity and spend data, along with copies of contracts and service level agreements. To date, this has not been received. CTMUHB have advised this is in the process of being collated.

PTHB are in contractual cross-border arrangements and two contracts have recently been re-tendered. New contracts are due to commence April 2020. There are a number of other transport providers being utilised by Powys. These have been identified and we are currently analysing activity data and levels of financial spend.

BCUHB remains in discussion with the Trust to resolve an outstanding AS3 issue. This needs to be resolved before the transfer of work can take place

The NCCUEASC Commissioning Team are engaged with the Community Health Council at national level to ensure that the voice of the patients is represented for the transformation of NEPTS across Wales. Each transfer also engages the Community Health Councils at local level to ensure transparency around the provision of local services and the patients’ voice is represented.

**Quality Assurance**

WAST have completed a details procurement process and contracted with a company called 365 as the provider of the framework to support appointed a quality assurance officer to oversee the on boarding of providers to deliver the plurality model. The aim is to achieve efficiency and flow whilst significantly reducing third party costs in the long-term.

To ensure compliance under the Data Protection Act 2018, a Data Protection Impact Assessment (DPIA) was completed on 16th April 2019 to assess if there would be any data protection or privacy risks to individuals in the collection, use and disclosure of personal information as a result of this project. Also as part of the DPIA, the data process flow of information was explored and assigned the relevant principles under the General Data Protection Regulation (GDPR) as reasoning for the processing of information.

Each transfer is driving wider engagement with transport providers, the third and voluntary sector. Providers in each Health Board footprint are supported to complete the required quality assurance requirements to be on the 365 framework. These include legal, financial and vehicle safety and road worthiness checks. This is in line with the expectations in the Wellbeing of Future Generations Act and A Healthier Wales.

**Future Management**

Computer Aided Dispatch (CAD) Development

* WAST through the NEPTS DAG have been developing their CAD System in order to drive through benefits and efficiencies within the system to support improvements in NEPTS provision.

Dynamic Purchasing Framework

* WAST have introduced with the support of the NEPTS DAG a dynamic purchasing framework to support quality assurance and consistent pricing for adhoc activity. The framework works in the same way as 365 with providers being quality assured up front ahead of adding to the framework. This includes transparent pricing and the transport capabilities for each provider driving value for money and better patient experience.

NEPTS Demand & Capacity Efficiency Review

* WAST NEPTS team will initiate a NEPTS Demand & Capacity review in 2019. The scope of this review will be to understand the current demand and plan for the future with all Health Board provision transferred to WAST. It will be a key component in realising the efficiencies outlined in the 2015 business case.

**Enhanced provision**

The Welsh Health Circular (WHC) 2007 (005) outlined the delivery of enhanced provision for certain categories of patients eligible for non-emergency patient transport.

*Renal*

Through the NEPTS DAG a project group has been established to develop the following specific improvements in renal transport provision:

* Renal Hub being fully integrated into WAST
* Renal travel reimbursement scheme
* Initiation of the 30-30-30 renal standards
* Development of local measures
* Monthly Renal Performance reports by treatment centre.

*Oncology*

Through the NEPTS DAG a project group will be established to ensure enhanced oncology provision is supported for all patients across Wales. This will include:

* Development of local measures
* Monthly Oncology Services Performance reports.

*End of life*

* WAST will deliver the completed project to support enhanced End of Life provision for this category of patients. The detail about this work will be included in the January 2020 NEPTS performance report.

**Winter Resilience**

The NEPTS contribution to 2019/20 Winter Resilience has been to support the provision of discharge vehicles. WAST wrote out through the DAG in October 19 asking each Health Board to identify how much transfer & discharge provision they required to support operations.

**Transport Solutions: 1% a Healthier Wales**

Through the NEPTS DAG the templates, methodology and process for bidding against the EASC 1% Healthier Wales Commissioning Allocation were developed and tested. Arising from that process, a collaborative bid titled Transport Solutions was developed, submitted and accepted by the Healthier Wales Awarding and Evaluation Panel. This bid was unique in the received submissions in that it focused solely on developing the infrastructure and capability around step1 of the NEPTS patient pathway.

This work will enable:

* Identification of the key messages that patients need to know to allow them to make informed decisions about NEPTS and how they can access healthcare provision. This is turn will help meet the current unmet needs of patients and deliver a system that is clear, well publicised and reflects actual service provision.
* Develop a ‘live’ database of local alternative provisions made available, and reflect actual provision available to ensure a good patient experience.
* Review of the Patient Needs Assessment (PNA) to ensure it correctly identifies medically eligible patients and also supports those without a medical need for transport to identify and secure alternatives.
* Establish a framework to enable conversations with patients to identify what non-medical needs for transport exist and match these to the most suitable available alternative provision.
* Quality Assurance against booking requests and ensure that the operators and the process are most effectively meeting patients’ transport needs.
* Provide daily analysis of actual demand and historical demand to identify shortfalls or surplus of resource in a more timely manner that allows the service to respond appropriately.
* Deliver specific performance improvements, as well as contributing to performance improvements across many of the NEPTS indicators.

Expected Outcomes:

Step 1

* 20% increase month on month for the first 12 months in the number of patients signposted to alternative providers

Step 2

* 50% reduction on 2018-19 levels on the level of abandoned calls
* 100% reduction on 2018-19 levels of bookings taken by fax in year 1

Step 3

* 20% reduction on 2018-19 levels on bookings received after 12 noon the day before travel

**Health Board/Organisation specific developments**

Transport of Community Dentistry Patients

* The NEPTS DAG is engaged with British Dentistry Association (BDA) Cymru in piloting a model to enable community dentistry patients to access non-emergency transport. This work will reduce delays for this cohort of patients in accessing dentistry and enable them to receive treatment in surroundings that are better suited to them.

Clinical Futures Transport work stream Aneurin Bevan University Health Board (ABUHB)

* The EASC commissioning team have been asked by CEO of ABUHB to support the commissioning of transport for the new Grange University Hospital. This work has already seen the commissioning team develop the programme infrastructure to support delivery of this critical work, we have enabled the sharing of activity data to support the development of baselines and have initiated 2 weekly project meetings to drive the work and report into the governance structures.

Mental Health Transport: Powys Teaching Health Board

* Using the 365 framework the EASC Commissioning Team is supporting the onboarding of a range of mental health transport providers to support service delivery within Powys. This work will enable improved quality assurance as the providers will have to meet the quality criteria to be on the portal. It will deliver cost savings as the pricing for each provider is fixed and understood ahead of booking. The wider range of providers will also provide the flexibility to ensure that patients receive the appropriate transport to meet their needs and deliver good experience.

**4. RECOMMENDATION**

Members of the Emergency Ambulance Services Committee are asked to:

* **DISCUSS & NOTE** progress made and the work currently underway to transform Non-Emergency Patient Transport Services in Wales; deliver the Ministerial expectations and implement the 2015 business case “the Future of NEPTS in Wales”.

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