

<b>Subject:</b>	<b>Patient Transport Services (PTS): Update</b>		
<b>Date of Meeting:</b>	<b>01 February 2017</b>		
<b>Report of:</b>	<b>Executive Lead Strategy, Governance &amp; Law</b>		
<b>Contact Officer:</b>	<b>Name:</b>	<b>Giles Rossington</b>	<b>Tel: 29-5514</b>
	<b>Email:</b>	<b>Giles.rossington@brighton-hove.gov.uk</b>	
<b>Ward(s) affected:</b>	<b>All</b>		

**FOR GENERAL RELEASE****1. PURPOSE OF REPORT AND POLICY CONTEXT**

- 1.1 A new contract for Sussex Patient Transport Services (PTS) – non-emergency transport of eligible patients to and from hospital – was introduced in April 2016. From the outset there were significant problems with the new service which have previously been detailed to the HOSC. A Remedial Action Plan (RAP) was implemented which did result in an improvement in the service and this improvement has since been maintained. However, the investment required from Coperforma to maintain this improvement is unsustainable longer term which ultimately resulted in Coperforma seeking a managed exit from the contract on economic grounds.
- 1.2 This was unforeseen and required urgent action by the CCGs to introduce their contingency arrangements to maintain service provision to patients and allow a managed and orderly transfer of the service to a new provider.
- 1.3 Following a transparent award process, South Central Ambulance NHS Foundation Trust (SCAS) agreed to deliver the service over the remainder of the contract term from 1<sup>st</sup> April 2017.
- 1.4 Governance arrangements are in place to provide oversight and scrutiny of the transfer and this incorporates the lessons learned from the independent report into the transition and mobilisation of the Coperforma contract which the CCGs commissioned from TIAA Ltd. This has also been circulated to the HOSC.
- 1.5 The HOSC has been receiving regular updates on PTS from commissioners since the spring of 2016. This is the latest of these updates and presents an opportunity for members to question commissioners about the current performance of PTS and about progress of the handover arrangements.

**2. RECOMMENDATIONS:**

- 2.1 That the report be noted; and that members determine how they wish to monitor this issue going forward.

**3. CONTEXT/ BACKGROUND INFORMATION**

- 3.1 The NHS provides a non-emergency patient transport service (PTS) for patients who meet eligibility criteria for PTS. Patients are transported via pre-booked journeys for arrival at their destination from 7.00am Monday to Friday and from 8.00am on Saturdays and Sundays and Bank Holidays. The service accounts for approximately 0.5% of total spend by CCGs.
- 3.2 High Weald Lewes Havens Clinical Commissioning Group (HWLH CCG) coordinates the PTS service on a Sussex-wide basis on behalf of all Sussex CCGs. Individual CCGs nonetheless remain accountable for patient transport provision to their populations. There are similar collaborative arrangements across Sussex and beyond for services such as 999, 111 and out of hours GP services.
- 3.3 The previous provider of the service was South East Coast Ambulance Service (SECamb) who informed the CCGs in 2014 that it did not want to extend the patient transport service contract under the current terms beyond the scheduled end date of 31<sup>st</sup> March 2015. They agreed to a one year contract extension until 31<sup>st</sup> March 2016, to give commissioners time to procure the new service using a competitive process that was compliant with procurement law and NHS Regulations.
- 3.4 HWLH CCG established a project team comprising representatives from each of the seven Sussex CCGs, and experts from procurement and finance to develop and consult with stakeholders on the new service specification. Following a competitive tendering process, Coperforma were awarded the contract in November 2016 and commenced delivery of the PTS on 1<sup>st</sup> April 2016.
- 3.5 There were problems with aspects of the PTS service from the outset, and although performance subsequently improved, the additional investment required to achieve and maintain this made the contract uneconomic in the long term. On this basis Coperforma sought a managed exit from the contract. This was accepted by the CCGs which immediately activated contingency arrangements to secure long term service provision in the interests of patients and staff involved in service delivery. Following a transparent contract award process SCAS will provide the service of the remainder of the contract term and a handover process is underway
- 3.6 Coperforma and SCAS are working collaboratively to minimize disruption to patients during the transfer process.

#### **4. ANALYSIS & CONSIDERATION OF ANY ALTERNATIVE OPTIONS**

- 4.1 Not relevant to this update report.

#### **5. COMMUNITY ENGAGEMENT & CONSULTATION**

- 5.1 This report has been shared with HWLH CCG.

#### **6. CONCLUSION**

6.1 Not relevant to this update report.

**7. FINANCIAL & OTHER IMPLICATIONS:**

Financial Implications:

7.1 None to this report for information.

Legal Implications:

7.2 None to this report for information.

Equalities Implications:

7.3 None to this report for information.

Sustainability Implications:

7.4 None to this report for information.

Any Other Significant Implications:

7.5 None to this report for information.

**SUPPORTING DOCUMENTATION**

None

