





Brighton & Hove City Council Health Overview & Scrutiny Committee

Jon Amos, Director of Strategy







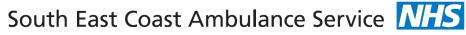


The Leadership Team

Daren Mochrie - Chief Executive	Richard Foster - Chairman			
David Hammond Director of Finance & Corporate Services	Graham Colbert Deputy Chair			
Joe Garcia Director of Operations	Terry Parkin Independent Non-Executive Director			
Steve Lennox Interim Chief Nurse/Director of Quality & Safety	Lucy Bloem Independent Non-Executive Director			
Steve Graham Director of HR	Tim Howe Independent Non-Executive Director			
Dr Fionna Moore Medical Director	Al Rymer Independent Non-Executive Director			
Jon Amos Director of Strategy	Angela Smith Independent Non-Executive Director			







NHS Foundation Trust

CQC

- **+** 15th − 18th May
- → 30 inspectors
- 40 staff interviews
- + Focus groups
- Potential further unannounced visits

- Immediate Actions:
 - Medicines
 - Patient Clinical Record (PCR)
 - Call Recording in the Emergency Operations Centre (EOC)
- Positive Feedback:
 - Electronic Patient Clinical Record(ePCR)/iPads
 - Recognition of caring staff
 - Good staff engagement





Quality

- Medicines Management
- Infection Control
- Key Skills
 - Operational
 - Non Operational
- Datix
- Safeguarding level 3
- ♣ Statutory & Mandatory Training IG etc.







Recovery Plan

- 5 CoreProgrammes
 - Governance
 - + Culture
 - Performance
 - ClinicalOutcomes
 - Financial Stability

- 4 Key Enablers
 - Operational Restructure
 - Electronic Patient Clinical Record (ePCR)
 - New HQ & Emergency Operations Centre relocation (EOC)
 - New Dispatch System







Unified Recovery Plan - Performance

- ♣ In Sep' 16 SECAmb completed a review of the projects in the 999-URP to enable a revised performance trajectory to be agreed.
- ★ The Trajectory was based on:
 - A consistent Unit Hours Utilisation (UHU) rate of 0.377 for remainder of the year, giving the baseline expected performance.
 - ★ The expected performance improvements from the 999-URP projects giving the 'uplift'.
- ★ Trajectory was achieved for May'17 for all three KPIs.
 - Red 1, Red 2 & Red 19

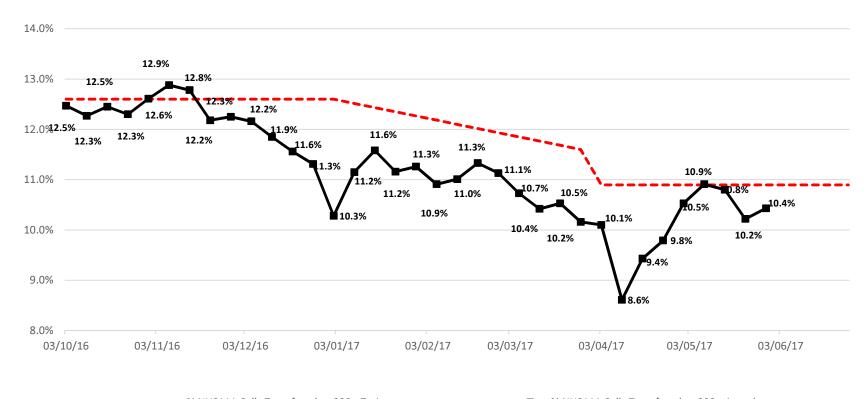






Improved NHS 111 - 999 Interface

(% of calls taken by 111 transferred to 999)











Ambulance Response

Programme

CQC

Blue Light Collaboration

Ambulance Collaboration

Sustainability
Transformation Plans (STP)



Continuous Improvement

Values

Strategic Objectives

Unified Recovery Plan including CQC action plan / Quality Improvement Plan

Primary and Community Care

Urgent

Emergency

Enablers – resources, governance, informatics

Engagement and Communications





Continuous Improvement

Year 1

Year 2

Year 3- 5

- Unified Recovery Plan
- Quality Improvement
- Getting fit for purpose
- Two-year Operating plan
- System wide solutions with partners
- Consolidation
- Continued improvement
- Innovation
- Diversify
- Growth
- Expansion





Bullying and Harassment

- Professor Duncan Lewes University of Plymouth/Director of Longbow Associates Ltd
 - Staff Survey
 - ♣ 1,900 people participated in the survey
 - Focus Groups
 - 150 hours of telephone interviews





NHS Foundation Trust

Finance

- + 16/17 deficit £7.1m
- ◆ 17/18 target deficit £1m
- Cost Improvement Programme (CIP) -£15.1m
 - Operational efficiencies
 - Trust efficiencies
- Capital Expenditure
 - Fleet programme
 - Change in ratio of Ambulance vs Car's







Performance

♣ Brighton & Hove: Best performing CCG in Sussex in 1718 and across KMSS in 1617.

April 2017 - June 2017 @2017-06-07	ccg	Red1 <8min perf	Red2 <8min perf	R <19min Perf
NHS Brighton & Hove CCG	Sussex	82.3%	74.7%	98.0%
NHS Coastal West Sussex CCG	Sussex	68.7%	53.8%	90.8%
NHS Crawley CCG	Sussex	81.6%	75.5%	92.3%
NHS Eastbourne, Hailsham and Seaford CCG	Sussex	76.3%	58.7%	92.8%
NHS Hastings & Rother CCG	Sussex	68.0%	55.6%	88.2%
NHS High Weald Lewes Havens CCG	Sussex	43.3%	25.7%	75.4%
NHS Horsham and Mid Sussex CCG	Sussex	52.3%	42.1%	85.6%
Totals		69.2%	54.0%	90.3%



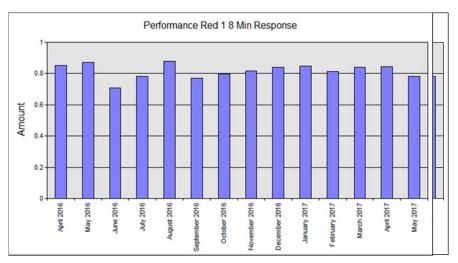


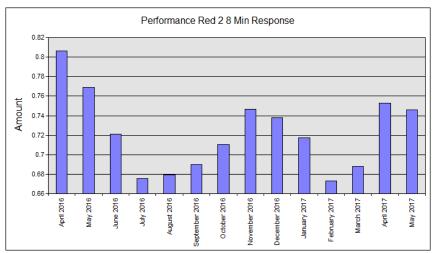


999 Performance – The City

RED 1 Performance

RED 2 Performance



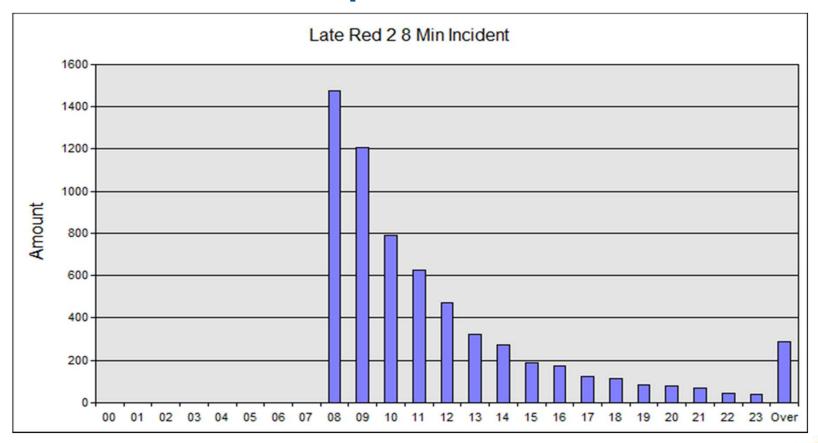








Fractile Response RED 2 tail









Partnership Work - Handovers

- + Handovers
 - New Standard Operating Procedure at RSCH in Apr'17 and turnaround delays > 30 minutes have reduced.
 - Almost elimination of Nursing/Cohorting by ambulance staff in ED, previously a daily occurrence
 - Escalation procedures where LHE works together positively for patients
- Streaming
- Community Pathways





Your service,

SECAmb in the City

- ★ We have instigated a new Cardiac Arrest Survival Partnership to co-ordinate activities to save lives in NHS, Blue Light Services, Voluntary Groups, Charities, Community Groups and businesses
- ★ The Argus Newspaper Save-a-Life campaign to install more Public Access Defibrillators continues and a life was saved a fortnight ago. Over 125 new PAD sites
- Preparations for PRIDE are at an advanced stage and we have instigated an NHS PRIDE Planning Group





Look ahead to Winter

- Activity Forecasting
 - SECAmb activity predictors recognised by partners
 - Demand Led Rotas
- Successful Christmas & Easter Planning
- ★ Early review of plans for Winter 17/18
- Ongoing review of community pathways to support community pathways.



South East Coast Ambulance Service NHS Foundation Trust













