# HEALTH OVERVIEW & SCRUTINY COMMITTEE

# Agenda Item 10

**Brighton & Hove City Council** 

Subject: NHS Patient Transport

Date of Meeting: 25 May 2016

Report of: The Head of Law

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Ward(s) affected: All

#### FOR GENERAL RELEASE

#### 1. PURPOSE OF REPORT AND POLICY CONTEXT

- 1.1 This report provides an update on the Sussex Patient Transport service following the recent implementation of a new contract.
- 1.2 High Weald Lewes Havens Clinical Commissioning Group (HWLH CCG) will present an overview of the background and current position regarding the patient transport service (PTS) at the meeting. Representatives of Coperforma, the current Patient Transport provider, will also be present to answer questions.

#### 2. **RECOMMENDATIONS:**

- 2.1 That members consider and comment on the information provided within this report; and
- 2.2 Determine whether additional scrutiny of this issue is needed.

# 3. CONTEXT/ BACKGROUND INFORMATION

- 3.1 The NHS provides a non–emergency patient transport service (PTS) for eligible patients who meet the clinical criteria for PTS and are unable to arrange their own travel to and from hospital services. 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.
- 3.2 The PTS is distinct from the emergency ambulance service which is commissioned separately. 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 within their locality.
- 3.3 The booking element of the service was previously provided by the Patient Transport Bureau and hosted by HWLH CCG, and the transport function was delivered by South East Coast Ambulance Foundation Trust (SECAmb), private and voluntary providers.

- 3.4 SECAmb informed the CCG 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.
- 3.5 HWLH CCG established a project team comprising representatives from each of the 7 CCGs, and experts from procurement and finance to develop and consult on the new service specification. Following a competitive tendering process Coperforma, a large independent sector organisation specialising in patient transport, were awarded the contract in November 2016 and commenced delivery of the PTS on 1<sup>st</sup> April 2016.
- 3.6 Unfortunately, since 1<sup>st</sup> April 2016 when Coperforma assumed responsibility for the patient transport service there have been unacceptable levels of performance, with many patients experiencing severe delays or not receiving services at all. More details on the up to date performance of the patient transport service will be presented to HOSC members at the meeting.
- 3.7 High Weald Lewes Havens Clinical Commissioning Group has commissioned an independent enquiry into the Patient Transport Service in Sussex. It has engaged TIAA, an independent company and one of the leading providers of assurance services to the public sector, to carry out the enquiry and has asked for a draft final report to be available for review by mid-June. The investigation will examine the transition and mobilisation of the PTS contract from SECAmb to Coperforma, and is supported by all three organisations (CCGs, Coperforma and SECAmb).
- 3.8 As this investigation is ongoing, and because some aspects of contracting arrangements may be subject to commercial confidentiality, it may be that representatives of the CCGs, Coperforma and other organisations involved are unable to publicly discuss certain details of the service handover and launch at the current time.
- 3.9 In determining what, if any, further scrutiny of this issue is required, members may wish to bear in mind the level of disruption caused to patients in this instance, and also the potential for Sussex CCGs to use learning from these events to improve subsequent contracting.

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

None to this report for information.

# 5 COMMUNITY ENGAGEMENT & CONSULTATION

None to this report for information. A draft version of this report was shared with CCG colleagues.

#### 6. CONCLUSION

6.1 Members are asked to consider what, if any, further scrutiny action is required with regard to this issue.

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
	SUPPORTING DOCUMENTATION
Appendices:	
None	
Documents in Members' Rooms	
None	
Background Documents	
None	