

To: The Board

For meeting on: 29 September 2016

Agenda item: 10

Report by: Lyn Simpson, Executive Regional Managing Director

Report on: Operational Performance of Ambulance Trusts

Introduction

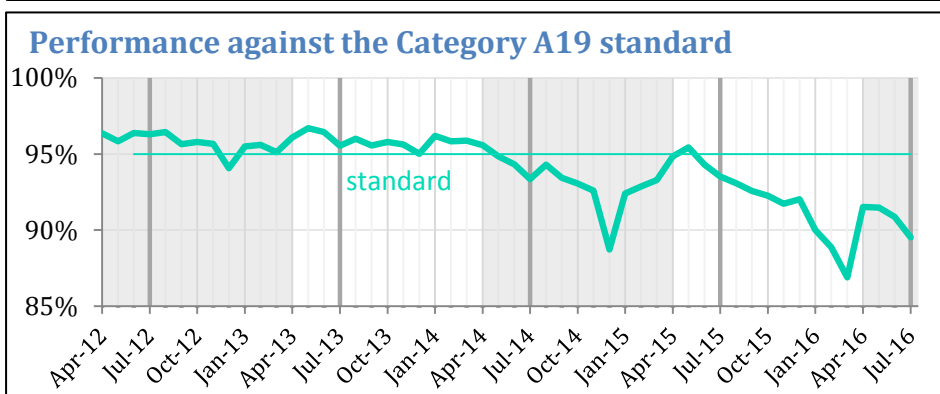
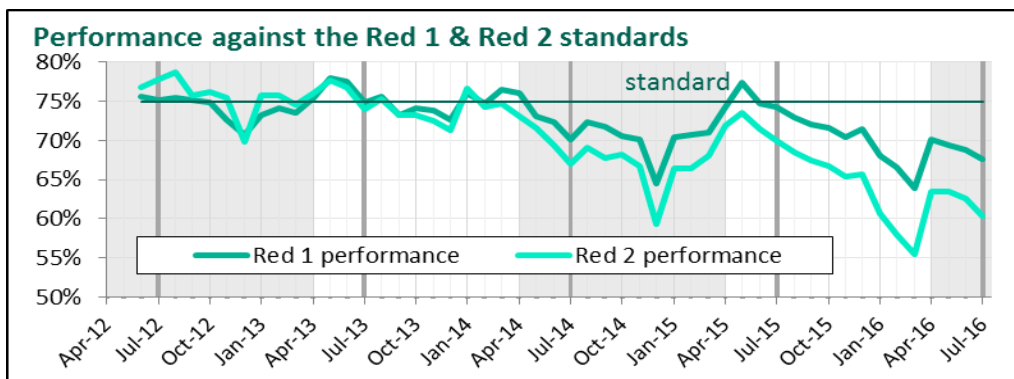
1. This paper sets out the operational performance of Ambulance Trusts against the NHS Constitution standards. It is for information ahead of a future report to the Board on the sustainability of ambulance services which is being developed following intensive work with the ambulance sector.

Background

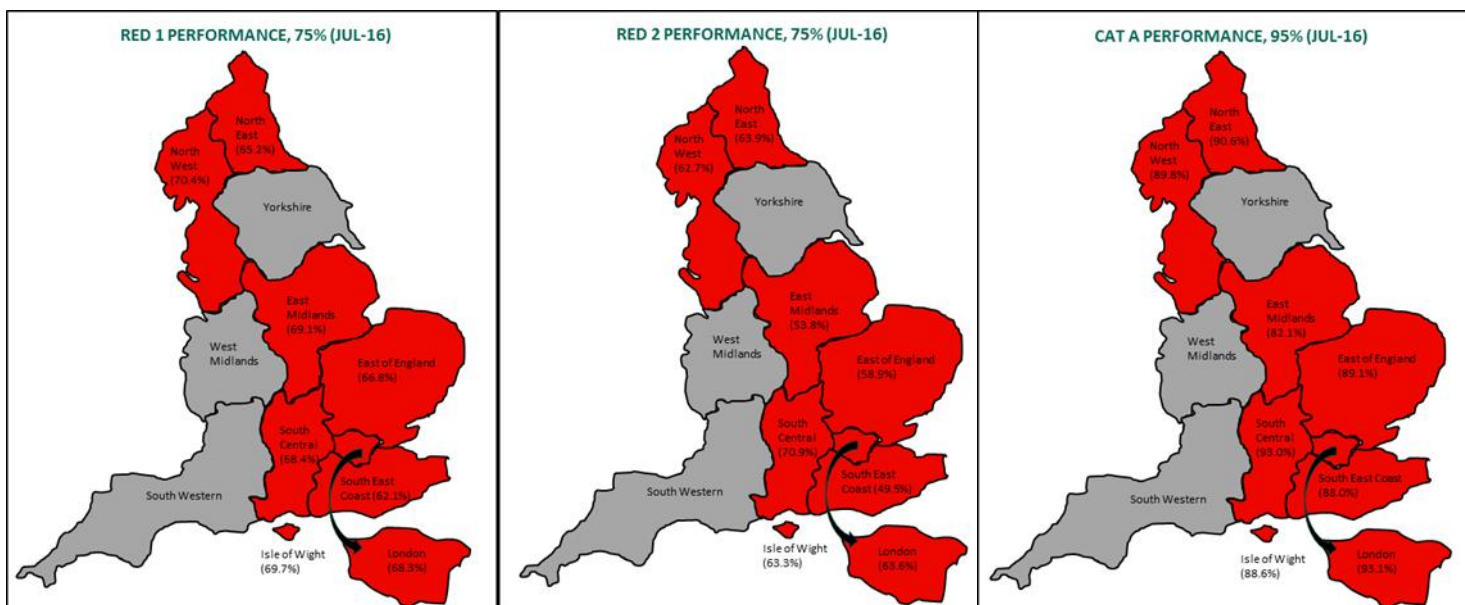
2. Historically, Ambulance Trusts have been measured against three operational standards: Red1, Red2 and A19. Under tight definitions, Red1 is for the most urgent calls with Red2 also urgent but with lower priority than Red1. Both of these have a standard of 75% of calls to be responded to within 8 minutes (ie 8 minutes from call to ambulance arriving on scene). A19 is a backstop aggregate measure where 95% of Red1 and Red2 calls need to be responded to within 19 minutes.
3. Performance measures have evolved recently with NHS England determining that five Ambulance Trusts (North West, East Midlands, East of England, South East Coast and Isle of Wight) should use the established counting method, three Ambulance Trusts (London, North East and South Coast) should use the same method but count differently to allow greater triage time and three Ambulance Trusts (Yorkshire, South West and West Midlands) should use a different system for which there are no agreed performance standards.
4. Given the different measures and counting methods, comparing Ambulance Trusts with each other can prove troublesome although each Ambulance Trust itself can be assessed in terms of whether its performance is improving or deteriorating.

Performance

5. The performance of Ambulance Trusts is set out below. Due to SWAS, YAS and WMAS participating in the ARP clinical coding pilot, all data below excludes these three trusts.



| Performance | | Jul-16 | Jul-15 | Change |
|--|---|---------|---------|---------|
| Category A Red 1 call responded to within 8 minutes (75%) | | 67.6% | 74.3% | -6.8ppt |
| Category A Red 2 calls responded to within 8 minutes (75%) | | 60.3% | 70.1% | -9.7ppt |
| Category A (Red 1 & Red 2) calls responded to within 19 minutes of a request for an ambulance vehicle to transport the patient (95%) | | 89.5% | 93.5% | -4.0ppt |
| Number of months since any standard last met | | 14 | | |
| Number of months any standard missed in last 12 months | | 12 | | |
| Demand and activity | | Jul-16 | Jul-15 | Change |
| Monthly total | Category A Red 1 calls responded to | 10,103 | 8,920 | 1,183 |
| | Category A Red 2 calls responded to | 203,068 | 171,997 | 31,071 |
| | Cat A calls that resulted in an ambulance arriving at the scene | 212,236 | 180,071 | 32,165 |
| Per day | Category A Red 1 calls responded to per day | 326 | 288 | 13.3% |
| | Category A Red 2 calls responded to per day | 6,551 | 5,548 | 18.1% |
| | Cat A calls that resulted in an ambulance arriving at the scene | 6,846 | 5,809 | 17.9% |



| | Red 1 | | | | Red 2 | | | | A19 | | | |
|------------------|--------|--------------------|---------------|-------------------------|--------|--------------------|---------------|-------------------------|--------|--------------------|---------------|-------------------------|
| | Jul-16 | Change from Jul-15 | 2016-17 (YTD) | Change from 2015-16 YTD | Jul-16 | Change from Jul-15 | 2016-17 (YTD) | Change from 2015-16 YTD | Jul-16 | Change from Jul-15 | 2016-17 (YTD) | Change from 2015-16 YTD |
| EAST MIDLANDS | 69.1% | ▼ | 67.7% | ▼ | 53.8% | ▼ | 56.5% | ▼ | 82.1% | ▼ | 84.9% | ▼ |
| EAST OF ENGLAND | 66.8% | ▼ | 64.7% | ▼ | 58.9% | ▼ | 57.7% | ▼ | 89.1% | ▼ | 88.9% | ▼ |
| ISLE OF WIGHT | 69.7% | ▲ | 61.8% | ▼ | 63.3% | ▼ | 71.2% | ▼ | 88.6% | ▼ | 92.9% | ▼ |
| LONDON | 68.3% | ▼ | 70.1% | ▲ | 63.6% | ▼ | 64.7% | ▼ | 93.1% | ▼ | 93.9% | ▼ |
| NORTH EAST | 65.2% | ▼ | 66.8% | ▼ | 63.9% | ▼ | 67.7% | ▼ | 90.6% | ▼ | 91.8% | ▼ |
| NORTH WEST | 70.4% | ▼ | 73.6% | ▼ | 62.7% | ▼ | 65.6% | ▼ | 89.8% | ▼ | 91.2% | ▼ |
| SOUTH CENTRAL | 68.4% | ▼ | 72.7% | ▼ | 70.9% | ▲ | 72.7% | ▼ | 93.0% | ▼ | 94.6% | ▼ |
| SOUTH EAST COAST | 62.1% | ▼ | 64.5% | ▼ | 49.5% | ▼ | 54.4% | ▼ | 88.0% | ▼ | 89.9% | ▼ |

6. In essence, all Ambulance Trusts are facing challenges on operational performance to varying degrees. NHS Improvement is working with them both individually and collectively to identify issues and how they might be resolved.

7. Reasons for underperformance are multifarious but do include:

- increasing in demand, particularly from older people;
- primary care availability;
- out of hours provision; and
- public understanding of the availability of alternative services.

Conclusion

8. Ambulance performance remains challenged as we are entering the winter period and the pressures it will bring. NHS Improvement is working with Ambulance Trusts on the underlying factors to identify how we can secure a step change in performance. We should also continue to test NHS England's appetite to agree a single set of performance measures against which all Ambulance Trusts can be assessed.

Public Sector Equality Duty

NHS Improvement has a duty under the Equality Act 2010 to have due regard to the need to eliminate unlawful discrimination, advance equality of opportunity and foster good relations between people from different groups. The Act protects against discrimination on grounds of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, religion and belief, gender and sexual orientation. We have thought about how the issues dealt with in this paper might affect protected groups.

We believe the paper will not have any adverse impact upon these groups and that NHS Improvement has fulfilled its duty under the Act.