

ENFORCEMENT UNDERTAKINGS

NHS TRUST:

East of England Ambulance Service NHS Trust
Whiting Way
Melbourn
Cambridgeshire
SG8 6EN

DECISION:

On the basis of the grounds set out below and pursuant to the powers exercisable by NHS Improvement under or by virtue of the National Health Service Act 2006 and the TDA Directions, NHS Improvement has decided to accept undertakings from the Trust.

DEFINITIONS:

In this document:

"the conditions of the Licence" means the conditions of the licence issued by Monitor under Chapter 3 of Part 3 of the Health and Social Care Act 2012 in respect of which NHS Improvement has deemed it appropriate for NHS trusts to comply with equivalent conditions, pursuant to paragraph 6(c) of the TDA Directions;

"NHS Improvement" means the National Health Service Trust Development Authority;

"TDA Directions" means the National Health Service Trust Development Authority Directions and Revocations and the Revocation of the Imperial College Healthcare National Health Service Trust Directions 2016.

GROUND:

1. The Trust

The Trust is an NHS trust all or most of whose hospitals, facilities and establishments are situated in England.

2. Issues and need for action

2.1. NHS Improvement has reasonable grounds to suspect that the Trust has provided and is providing health services for the purposes of the health service in England while failing to comply with the following conditions of the Licence: FT4(5)(a) and c).

2.2. In particular:

- 2.2.1. Following an Internal Service Review (ISR) by Deloitte in March 2018, the Trust agreed a performance improvement trajectory for 2018/19 for ambulance response times with clinical commissioning groups, NHS England and NHS Improvement. The Trust has missed its C1, C2 and C3 mean response time trajectories for Q1 and is behind trajectory for Q2.
- 2.2.2. The ISR made recommendations in relation to the Trust's capacity gap, which includes the need for additional frontline staff and fleet availability.
- 2.3 These demonstrate failings by the Trust to establish and effectively implement systems or processes to ensure compliance with the Trust's duty to operate efficiently, economically and effectively and to ensure compliance with healthcare standards binding on the Trust.
- 2.4 Need for action:

NHS Improvement believes that the action which the Trust has undertaken to take pursuant to these undertakings, is action required to secure that the failures to comply with the relevant requirements of the conditions of the Licence do not continue or recur.

UNDERTAKINGS

NHS Improvement has agreed to accept and the Trust has agreed to give the following undertakings.

1. Ambulance Response Times

- 1.1. The Trust will take all reasonable steps to deliver ambulance response times performance in line with its performance improvement trajectory as set out in the ISR.
- 1.2. The Trust will take all reasonable actions to meet its recruitment and fleet procurement trajectories in line with the ISR recommendations and implement its management restructure.
- 1.3. If risks to performance articulated in the ISR and outside the Trust's control materialise, such as acuity levels or handover delays above those modelled in the ISR, the Trust will report on the impact of those factors at the end of the quarter in which the risk arose. The impact analysis will be reported to NHS Improvement and should be aligned with existing performance discussions with commissioners. These requirements apply each time a relevant risk emerges.
- 1.4. The Trust will engage effectively with key stakeholders to ensure appropriate planning to enable the Trust to manage risks from system partners that will impact on the Trust's ability to deliver its 2018/19 winter plan.

2. Programme Management

- 2.1. The Trust will implement sufficient programme management and governance arrangements to enable the delivery of these undertakings.
- 2.2. Such programme management and governance arrangements must enable the Board to:
- 2.2.1. obtain a clear oversight over the progress in delivering these undertakings;
 - 2.2.2. obtain an understanding of the risks to the successful achievement of the undertakings and ensure appropriate mitigation; and
 - 2.2.3. hold individuals to account for the delivery of the undertakings.

3. Meetings and reports

- 3.1. The Trust will attend meetings or, if NHS Improvement stipulates, conference calls, at such times and places, and with such attendees, as may be required by NHS Improvement.
- 3.2. The Trust will provide such reports in relation to the matters covered by these undertakings as NHS Improvement may require.

Any failure to comply with the above undertakings may result in NHS Improvement taking further regulatory action. This could include giving formal directions to the trust under section 8 of the National Health Service Act 2006 and paragraph 6 of the TDA Directions.

THE TRUST

Signed 

(Chair or Chief Executive of Trust)

Dated 27/11/18

NHS IMPROVEMENT

Signed



Frances Shattock – Delivery and Improvement Director (East of England) and member of the Regional Provider Support Group (Midlands and East)

Dated 28/11/18

