

Improving the Quality of the Ambulance Response

*Moving from a focus on 8 minutes to
improving outcomes for patients
through a clinically appropriate response*

Tuesday 28 June 2016 ICO Conference Centre London

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Speakers include

Kate Davies OBE

*Head of Armed Forces, Health & Justice
and Sexual Assault Services*

NHS England

Gerry Egan

Chief Executive

College of Paramedics

Supporting Organisations



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“We need to get the right resource to the right patients – an appropriate vehicle with a skilled paramedic to the patients that need it in a timely manner”

“Of particular importance is the need to ensure that the ways in which ambulance services are managed and measured reflect the needs of a 21st century population, and are focused on clinical priorities, rather than response times alone.”

“We have a tendency to send ambulances to patients when we don’t actually know if they need an ambulance or not – we also send multiple vehicles to the same call – there are also other things that start to happen due to the 8 minute response – such as sending a fast response unit to stop the clock – and because we are only measuring half the calls the green calls may have very long waits for an ambulance response. These kinds of behaviours are inefficient but in some ways are a logical response to current measurement – we are losing sight of the reason for the service, improving outcomes for patients”

Prof Jonathan Benger National Clinical Director for Urgent Care, NHS England Professor of Emergency Care, University of the West of England, Bristol Consultant in Emergency Medicine, University Hospitals Bristol NHS Foundation Trust, January 2016

This conference looks at how we can improve the ambulance response – moving away from time based targets – and towards a new way of working, ensuring a clinically appropriate response that will improve outcomes for patients. Through national updates from the National Ambulance Response Programme, to case studies and lessons from the dispatch on disposition pilot sites the conference will update delegates on this important development and the impact in practice. The conference will also look at implications of working differently in terms of workforce, paramedic training, challenging public assumptions around ambulance responses, and looking to the future and implications for both Ambulance Trusts and independent Ambulance Services .

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10.00 Chairman's Welcome

Dr Brendan Lloyd *Medical Director*
Welsh Ambulance Services NHS Trust

10.10 Delivering a more clinically appropriate response to 999 calls

Hilary Pillin
Consultant in Healthcare Response & Preparedness
Association of Ambulance Chief Executives

- changing the way we work to deliver the right care, in the right place, at the right time
- what the ambulance response of the future may look like
- our experience

10.40 The National Ambulance Response Programme: Pilot Site Update

Paul Musticone
Directory of Services Lead
West Midlands Ambulance Services NHS Foundation Trust

- how do we change the focus from 8 minutes to improving outcomes?
- how can we change the way we deliver ambulance services to improve the quality of care and outcomes for all patients?
- How can we ensure that every patient who rings 999 receives a response in a clinically appropriate time?
- ensuring we get the right resource to the right patients in a timely manner
- our experience as a national ambulance response programme pilot
- changing public expectations

11.10 *Question and answers, followed by coffee*

11.50 EXTENDED SESSION: Moving away from time based targets: responding to non urgent calls Learning from the Welsh experience

Dr Brendan Lloyd *Medical Director*
and **Richard Lee** *Director of Operations*
Welsh Ambulance Services NHS Trust
with **Julian Baker**
Director of Collaborative Commissioning
Emergency Ambulance Services Committee

- moving away from time based targets
- responding differently to patients
- delivering care differently through dispatch on disposition
- allocating the most appropriate resource in terms of vehicles and clinical skills to the right patients
- increasing 'hear and treat' and 'see and treat'
- the Welsh experience

13.00 *Question and answers, followed by lunch*

14.00 How do we identify the patients that need an ambulance most urgently?

Susan Tuckett
Clinical Lead
South West Ambulance Service
South West Ambulance Service is a National Ambulance Response Programme Pilot Site

- how we can quickly identify the nature of the emergency call to understand which people need a swift ambulance response
- nature of call key words, algorithms and training of staff
- communications to the public to change expectations that when you call 999 you may not get an ambulance
- our experience

14.30 Working in partnership to improve the response to people in mental health crisis

Kate Davies OBE
Head of Armed Forces and their Families, Health & Justice and Sexual Assault Services Commissioning
NHS England with
Adellah Snape
L&D Board Member and Service User Representative

- developing a partnership approach between ambulance services and the police
- updates from the Liaison and Diversion schemes across the UK
- developing street triage and where should street triage sit? Should street triage be part of 111?

15.00 *Question and answers, followed by tea*

15.50 Paramedic training and developing paramedic roles

Gerry Egan
Chief Executive
College of Paramedics

- working in new ways: implications for paramedics
- developing the paramedic of the future
- developing paramedic roles and paramedic training: what needs to change

16.20 The role of the independent ambulance sector in improving the ambulance response

Mr Kjeld Brogaard
Deputy MD
Falck Emergency

- improving the ambulance response: what can we learn from Europe?
- providing a more clinically appropriate response to 999 calls: what is the role for the independent ambulance service
- our experience and looking ahead

16.50 *Question and answers, followed by close*

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Tuesday 28 June 2016, ICO Conference Centre, London

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Venue

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(The ICO stands for International Coffee Organisation)

Date Tuesday 28 June 2016

Conference Fee

- £365 + VAT (£438.00) for NHS, Social care, private healthcare organisations and universities.
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