Opportunities & Challenges in transforming NHS Ambulance Services

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28th June 2016
Context

FYFV / UEC Review

Ambulance Service 2020 & Beyond

Challenges in Transformation

Overcoming Challenges
Association of Ambulance Chief Executives (AACE)

- AACE is the central body & voice for NHS ambulance services
- Membership = all 10 English NHS Trusts + Trusts in Devolved Administrations, Islands and Crown Dependencies
- AACE is Corporate Member of NHS Confederation and also works closely with NHS Providers
- Support development & implementation of nationally agreed policies and clinical priorities in trusts - national groups
- Advise and lobby DH, NHSE, NHSI
- Close collaboration with other emergency response representative organisations (ACPO & CFOA)
- Key role in NHS England UEC Review Programme
National picture 2015/16

- 10 English NHS Ambulance Services

- Demand has increased by 43% in past eight years and >15% in past two years

- 10.6 million 999 calls

- Includes 1.2 million 111 > 999

- 52% conveyed / 38% treated at home / 10% telephone advice
10% Life threatening
- Advances in cardiac care, stroke, major trauma, cardiac arrest
- Alternative destinations - Trauma Centres, PPCIs, Stroke Units
- Acute service reconfigurations - maternity, paediatrics, surgery
- Better performance measures (AQIs)

90% Urgent care
- Ambulance clinicians working alongside community, primary care, social care, mental health...
- Advanced and specialist paramedic roles - expanded clinical decision making, advanced clinical assessment, diagnostic skills, prescribing
- Increase care closer to home
- Public health role
- Alternative destinations - UCCs

Resilience for major incidents & mass casualties - working with other emergency services and specialist response agencies
Five Year Forward View & UEC Review

► “Helping patients get the right care, at the right time, in the right place...” (FYFV)

► “Ambulance services empowered to make more decisions, treating patients and making referrals in a more flexible way...” (FYFV)

► “Ambulance Services should maintain clinical hubs in their EOCs to ensure appropriateness and timeliness of responses...staffed by range of clinicians” (SFB)

► “Ambulance Service & CCGs should develop mobile urgent treatment service capable of dealing with more people at scene and avoiding unnecessary journeys to hospital” (SFB)

► “Clinicians working in the 999 system - through ‘H&T’ or ‘S&T’ models - should have unrestricted referral rights to all other services in the UECN, including social care services, with free flow of information and feedback” (CMAS)

► “Effective urgent care services will be supported by the immediate availability of relevant patient information” (CMAS)

► “We cannot deliver the necessary change without investing in our current and future workforce” (FYFV)
NHS Ambulance Service 2020 & Beyond


Role of NHS Ambulance Services in Transforming Urgent & Emergency Care

Four domains of care response:
- Emergency Care - life threatening
- Hear & Treat - clinical advice hubs / SPOA
- See & Treat - Mobile treatment services
- Urgent Care - alternative pathways

Through improvements to H&T and S&T rates, ambulance services in England during 2015/16 avoided over half a million ED attendances that would have occurred under arrangements that were in place in 2013/14
Ambulance service new models of care
Transforming the Ambulance Service

- Developing & retaining the right skill mix & capacity across ambulance workforce
- Enhance current, & develop new, models of care
- Changing NHS culture - building trust across professions
- New pathways and smoother integration across providers
- Interoperable technology and timely data sharing

Improved patient safety, outcomes & experience and happier, healthier workforce and more sustainable systems & services
Challenges in Transformation

- Unprecedented rates of increase in demand on 999
- Baseline funding not proportionate to demand
- Handover delays
- Little or no investment for transformation
- Conflicting priorities & expectations at national level
- Planning & commissioning structures
- Workforce pressures
- Not healthy, sustainable or fit for purpose
Overcoming challenges

- Political clarity of strategy and system leadership
- Focus on transformation vs operational performance
- NHSE and CCGs need to invest for transformation rather than prop-up and plaster
- National quality framework - safe staffing levels?
- Integrated commissioning
- Parity of paramedic role and new workforce models
- Hospital leadership in management of handovers
Thank You