



South Central Ambulance Service NHS Trust 

Update to Buckinghamshire Overview and Scrutiny Committee

2nd March 2007

South Central Ambulance Service NHS Trust 

Presentation by
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South Central Ambulance Service NHS Trust

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- **Introducing SCAS**
 - new structure of the service
 - Buckinghamshire overview
- **Operational Performance Update**
 - current performance
 - delivery against key national targets
- **Future Strategy Issues**
 - key challenges for service delivery
- **Partnership working with the acute trust**



Introducing SCAS

- New structure of the service overall





Introducing SCAS

- One of ten new regional Ambulance Services established 1st July 2006
- Coterminous with SHA except Isle of Wight, Fleet and Shrivenham
- 2500 staff overall
- 65 sites, 179 A&E vehicles, 120 cars, 253 PTS
- 4 Control centres (and admin/corporate departments)
- 999 annual call volume –387,122 approx
- GP Out of Hours – National Pilot Site for NHS Pathways
- Non Emergency Services





Baseline

	2005/6 Rating	VFM	Vehicles	Estates	Staff	Resourcing
Bucks	Fair	98	Poor	Poor	Excellent	Fair
Hants	Fair	108	Good	Poor	Excellent	Poor
Oxon	Fair	95	Poor	Good	Excellent	Poor
Berks	Fair	101	Fair	Fair	Excellent	Good



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Introducing SCAS - Buckinghamshire Overview


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Buckinghamshire

- External Report across whole of South Central (and most country)
- Found Buckinghamshire deployment strategy could be improved
- Standby points need establishing
- Estates strategy requires attention
- Requirement for increased relief establishment
- Part of "Call Connect" project – negotiations with commissioners
- Remain "on financial targets" for 2006/07
- Overall performance improving


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Operational Performance

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Operational Performance – Response Times

- **Category A:**
Definition: "Presenting conditions which may be immediately life threatening"
Target: 75% receive emergency response within 8 minutes
Target: Where transport required must back up with ambulance in 19 minutes 95% of the time
- **Category B:**
Definition: "Presenting conditions though serious, not immediately life threatening"
Target: 95% responded to in 19 minutes
- **Category C:**
Definition: "Presenting condition neither immediately serious or life threatening"
Target: Local agrees appropriate response

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Performance Profile A8

	Berks	Bucks	Hants	Oxon
Ambulances	56	63	47	49
Response cars	11	7	18	11
Direct Resources	67	70	65	60
Com responders	1	0	6	9
Managers	3	0	0	5
GPs/Other	7	1	4	7
Total indirect	11	1	10	21

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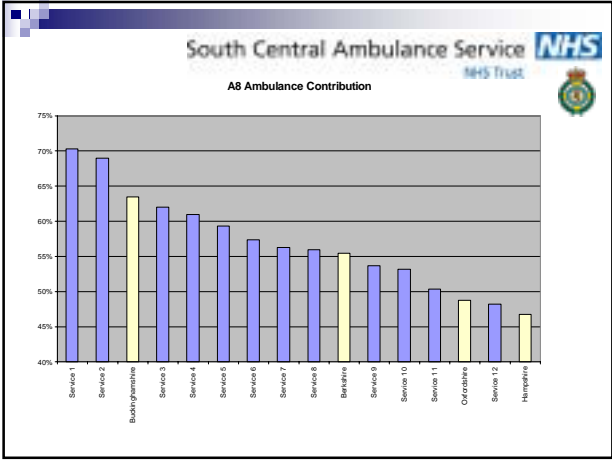
South Central Performance – April-June 06 (pre-merger)

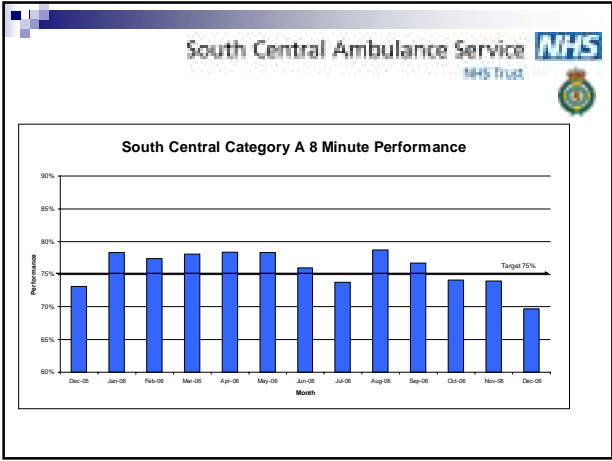
	A's in 8 mins	A's in 19 mins	B's in 19 mins
Berks	79%	99.8%	96.5%
Bucks	69.3%	94.5%	94%
Hants	73.87%	93.9%	90.2%
Oxford	85.4%	93.4%	89.1%
South Central	75.4%	94.8%	92.6%

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Operational Performance

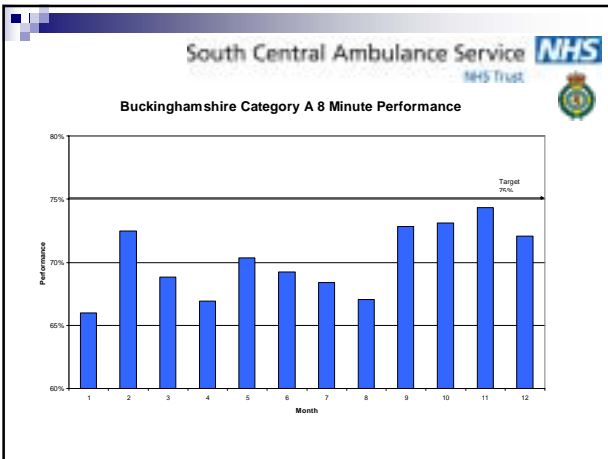
- current performance





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Operational Performance - current performance Buckinghamshire



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Future Strategy Issues

Strategy Issues

- Merger and Integration
- Call Connect – clock starts earlier in the call cycle
- Control Centre Review
- National Radio System and Electronic Patient Report Form
- Transformation : 1 million fewer patients to A&E
Hear and Treat
See and Treat

Recovery Plan

- Detailed recovery plan with trajectories produced for SHA
- Call Cycle
 - Dispatch
 - Activation
 - Drive time to scene
 - Time on scene
 - Drive time to hospital
 - Time at hospital

Key challenges for service delivery – Buckinghamshire

The Main Issues



- Create One Division
- Two Headquarters
- Two Control Rooms
- Two sets of support services and infrastructures
- One still serving another Trust
- A merger within a merger, following a demerger

Short Term

- Virtually joining Control Rooms
- Review call take process to consider bottlenecks and improvement opportunities
- Matching operational staffing levels to demand – rota review – modular self governing team concept – relief percentage
- Review deployment locations
- Establish community responder schemes

Medium Term

- Unpick, rework and recast SHS provision to Bucks Hospitals
- Modernise fleet and move to better type mix
- Station Estate – Business Case
- Single Divisional HQ
- Single Control Room



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Actions Taken – In hand or complete

- Divisional “Top Operations team” meetings
- VPN between HQs (intranets) established
- Both controls have real time access to each CAD (3 phase)
 - View real time activity
 - Interrogate each CAD for information
 - Input “jobs” onto each CAD
- Joint Demand map being “run”

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Partnership working with the acute trust

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- Re-work SHS Ambulance provision
- Joint Bed-Manager/PTS Control
- Provision of IT into Acute Trust
- Re-visited PTS contractual arrangements
