

Minutes

EXTERNAL SERVICES SCRUTINY COMMITTEE

17 June 2015

Meeting held at Committee Room 5 - Civic Centre,
High Street, Uxbridge UB8 1UW



HILLINGDON
LONDON

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| | <p>Committee Members Present: Councillors John Riley (Chairman), Ian Edwards (Vice-Chairman), Tony Burles, Brian Crowe, Phoday Jarjussey (Labour Lead), Allan Kauffman, John Oswell and Michael White</p> <p>Also Present: Zoe Packman - London Ambulance Service Pauline Cranmer - London Ambulance Service</p> <p>LBH Officers Present: Nikki O'Halloran</p> |
| 3. | <p>EXCLUSION OF PRESS AND PUBLIC (<i>Agenda Item 3</i>)</p> <p>RESOLVED: That all items of business be considered in public.</p> |
| 4. | <p>MINUTES OF THE MEETING ON 28 APRIL 2015 (<i>Agenda Item 4</i>)</p> <p>Consideration was given to the minutes of the meeting held on 28 April 2015. It was agreed that the Committee would request further information from The Hillingdon Hospitals NHS Foundation Trust to be presented at a future meeting in relation to the schools outreach work that had been undertaken by the Paediatric Diabetes team. It was noted that this work had clear links to the work undertaken by other bodies such as Public Health in relation to obesity, healthy eating, sport engagement and Members would be able to enquire about how this work was joined up.</p> <p>It was agreed that Healthwatch Hillingdon would be asked to provide the Committee with an update at a future meeting in relation to its review of the CAMHS service in the Borough.</p> <p>RESOLVED: That:</p> <ol style="list-style-type: none">1. THH be asked to provide the Committee with an update on the schools outreach work undertaken by the Paediatric Diabetes team;2. Healthwatch Hillingdon be asked to provide an update on its CAMHS review; and3. the minutes of the meeting held 28 April 2015 be agreed as a correct record. |
| 5. | <p>MINUTES OF THE MEETING ON 12 MAY 2015 (<i>Agenda Item 5</i>)</p> <p>The Chairman noted that this had been a useful meeting and that the Committee would look forward to the update that would be forthcoming as a result.</p> <p>RESOLVED: That the minutes of the meeting held on 12 May 2015 be agreed as</p> |

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| | <p>a correct record.</p> |
| <p>6.</p> | <p>MINUTES OF THE MEETING ON 14 MAY 2015 (<i>Agenda Item 6</i>)</p> <p>RESOLVED: That the minutes of the meeting held on 14 May 2015 be agreed as a correct record.</p> |
| <p>7.</p> | <p>ANNUAL QUALITY ACCOUNT 2014/2015 AND UPDATE - THE LONDON AMBULANCE SERVICE NHS TRUST (LAS) (<i>Agenda Item 7</i>)</p> <p>The Chairman welcomed those present to the meeting.</p> <p>Ms Zoe Packman, Director of Nursing and Quality at the London Ambulance Service, apologised for not having attended a previous Committee meeting to discuss the Trust's draft quality report but thanked Members for the feedback that they had provided. She advised that a copy of the final version of the report would be forwarded to Members for their information.</p> <p>Members were advised that the report had been produced in a standard format and, as such, the LAS was somewhat constrained on the content that it could include. Ms Packman noted that the report had set out the Trust's quality priorities for the forthcoming year which had included the appointment of a consultant midwife (three days per week) to provide training, support and expert advice. Work had also been planned in relation to the extensive number of frequent callers which put additional pressure on the limited resources of the Trust. To this end, a Darzi fellow had been appointed to review this issue from September 2015. Members were advised that the LAS worked closely with the Metropolitan Police Service, Urgent Care Centres and clinics to triangulate information and share intelligence about common frequent callers. In addition, the LAS had an information sharing agreement in place with social services - although these agreements needed to be in place before information could be shared, Members were assured that this was not an onerous process.</p> <p>Concern was expressed that information sharing in relation to persistent callers was not as joined up as it could be. Ms Packman advised that, once the Darzi fellow was in post, consideration could be given to attending a future meeting to discuss the matter further with Members</p> <p>As mental health continued to feature prominently in the work of the LAS, six mental health nurses had been appointed to support the teams from the clinical hub. The review of the mental health pathway was a continuing area of work and, to this end, mental health focus groups were being organised to better understand how the service could be improved. In addition, work had been undertaken to ensure that the staff voice was considered (for example, there were a large number of individuals training to become paramedics and, as possible future members of staff, it was thought important to listen to their feedback).</p> <p>It was acknowledged that staffing had been a big issue for the LAS and that this was likely to continue, given the current shortage of paramedics. Members were advised that the LAS had put together a robust recruitment and retention plan and that, reassuringly, the Trust now had more joiners than leavers. The LAS worked closely with the Open University and four other universities (Hertfordshire, Greenwich, St Georges and Anglia Ruskin) that offered the Paramedic Science degree, as well as offering placements for these students. There had been an increase in the 2014/2015 university cohort but it was acknowledged that this would take time to come to fruition.</p> |

Members suggested that more information about this recruitment work needed to be included in the quality account report.

The opportunities available to paramedics had increased, enabling them to work for GP surgeries, the police, acute hospitals, etc, as well as for other ambulance trusts which meant that the LAS had significant competition for new staff. Although it could be said that the LAS had not been cognisant quickly enough to see this competition coming, it had anticipated there being a potential significant cohort of retirees in the near future and was planning accordingly. The £18.9m CCGs funding had enabled an extensive transformation programme where the LAS had worked extensively with the CCGs in Harrow, Brent and Ealing (these were the CCGs that hosted the LAS on behalf of the whole of London).

Ms Packman advised that the Care Quality Commission (CQC) had undertaken an inspection of the LAS from 1 June 2015 to 6 June 2015 but that unannounced inspections were still being undertaken. It was anticipated that the LAS would receive the CQC final report in September 2015 and that representatives from the External Services Scrutiny Committee would be invited to attend the quality summit meeting.

Members were advised that patient and public engagement had featured high in the LAS priorities and that the organisation had participated in more than 600 events across London in the last year. These events had been wide ranging and included engagement with the Brownies and other clubs. As this work was mostly undertaken in their own time, Members commended LAS staff for attending these community events and for the valued service that they provided. However, it was noted that people's good experience of the front line service was not necessarily reflected in their view of the whole organisation.

It was noted that the Shockingly Easy campaign had resulted in more defibrillators being available in high footfall areas (for example, shops and gyms) and more people trained to use them. This campaign had saved many lives and the LAS was grateful to the community responders that had been involved. It was noted that Hillingdon had installed defibrillators in all primary and secondary schools within the Borough but it was not clear whether or not these units were included within the LAS total. Members were advised that work was underway to map out the location of all defibrillators in London to provide the LAS with a broader picture to enable identification of the closest equipment at the time it was required.

Although Members understood that the quality report was required to follow a specific format and include certain information, concern was expressed that it was difficult to read and understand. It was suggested that the LAS provide information relating to Hillingdon in an appendix to ensure that the organisation continued to comply with Monitor's requirements - this information would then enable the Members to see the impact of the Trust's quality priorities on the Borough. Ms Pauline Cranmer, Assistant Director of Operations - North West Sector for the London Ambulance Service, advised that she would ensure that this information was forwarded to the Committee.

Insofar as the information provided within the table of National Clinical Performance Indicators, Members advised that they were unable to glean anything from the data provided as there were no comparators and no information about survival rates and how these compared with other boroughs. It was noted that the LAS was driven to include this information as it was a national requirement and was in relation to clinical indicators that had to be reported. However, the LAS did collect data to enable a monthly comparison with other ambulance trusts and provided quarterly reports on this

to the CCG to demonstrate the safety of the service. Ms Cranmer advised that, as her role covered Hillingdon, Harrow and Brent, she would be able to provide Members with this comparative data. For example, Hillingdon had achieved 40% ROSC (the return of spontaneous circulation) compared to the London average of 30%. Members noted that this level of detailed information would help them to build a clearer picture of the effectiveness of the services provided by the LAS which would enable more accurate reporting to the Health and Wellbeing Board and Cabinet.

Members noted that the LAS was responsible for providing the South East London 111 service. This service was based in Beckenham and had been very successful with well developed paths between the 111 service and the 999 service. The service covering Hillingdon was provided by Harmoni.

Ms Packman advised that interviews had been undertaken for the appointment of a substantive Chief Executive. Although the post had been offered, the Department of Health notification was awaited to enable the appointment to be shared publicly. Members were assured that the LAS' leadership had been instilled locally and that it had been mapped to that of organisations such as the CCGs to enable the development of local issues.

Members were advised that calls to the LAS were triaged to determine the level of response that they required. For example, a cardiac arrest or a major road traffic accident would result in an auto dispatch of a single responder and an ambulance. Fast response cars were not required for all calls as they tended to only be used to deal with critical issues. There were times when a call may have been deemed to be critical and a fast response car dispatched but that, as the call progressed, more detail about the situation came to light and it transpired that the car was not required. However, as the cars were not always recalled in these situations, work was now underway to rectify this use of resources.

In the quality report, the information in relation to arrival at hospital against appointment time table showed a marked decrease between December and February/March 2015 which then quickly returned to a more 'normal' level. Ms Packman advised that she would look into this and report back to Members.

Ms Packman advised that patient transport was a small part of the work undertaken by the LAS. She noted that consideration would need to be given over the next year as to whether the Trust should concentrate on the emergency part of the business. Members noted that the LAS was constrained by national pay scales whereas private businesses were able to pay whatever salary they saw fit.

With regard to serious incidents, information was shared with the patient concerned and their family. This information was then anonymised and included within a report to the Board. The Trust would then work with other services, for example, the hospital, to address any particular issue of concern and then report on the lessons learnt. To ensure that this information was scrutinised by the local authority, it was agreed that future reports would be shared the Committee and that every effort would be made to attend those External Services Scrutiny Committee meetings that they were invited to.

Concern was expressed that the information contained within the report in relation to time spent on vehicle did not actually tell the reader anything. Ms Packman advised that she would look into this and report back.

Members were advised that ambulances were placed at optimum points around the

Borough to give them the easiest access to major routes through the area to enable a fast response to calls. Although ambulances could sometime be held up at hospital, this tended to be at certain hospital peak points and would affect the availability of turning a vehicle around ready for the next call. To avoid this wait, consideration was given to the queues at hospitals when transporting a patient.

Members were advised that there was an adequate number of vehicles available but that there were just not enough staff to man them. Ambulances tended to need replacing every 5-7 years and would each cost approximately £140k fully kitted. Ms Packman advised that she would be happy to organise for the Committee to visit the control room in Waterloo in small groups of 3 or 4 maximum.

It was noted that the LAS had paused its application to become a Foundation Trust (FT) to ensure that it met 100% of the FT criteria. Ms Packman advised that there was no longer a fixed deadline for the LAS to become an FT and that alternative options were now available to the Trust (for example, an alternative organisational structure). Consideration would need to be given to the best option for the Trust. If the LAS did continue with its FT application, it would welcome the Committee's support.

Ms Packman advised that there were two big drivers for complaints which increased with activity: the time taken for an ambulance to arrive; and callers being referred to another health care provider (as their condition did not require an ambulance). In addition, there had been complaints about staff attitude which was not acceptable and was dealt with on a local level. Ms Cranmer advised that she reviewed all local complaints for Hillingdon and, although there had been a 24% increase in complaints, this had been for the whole of London. She would provide the Committee with the local figures.

Members expressed concern about the challenged posed by Heathrow airport. Ms Cranmer advised that patients at the airport were transient and, as such, often staff spent more time convincing them to go to hospital when appropriate than those patients outside of the airport. LAS staff at Heathrow comprised a regular cohort who travelled around the site on bikes.

It was noted that the demographic composition of the driving population had changed significantly and had possibly contributed to the number of vehicles who did not get out of the way for ambulances when they were travelling with lights and sirens on. It was suggested that the work undertaken by the LAS in schools include some form of education about how important it was for vehicles to clear the way for ambulances so that this would could be fed back to parents as well as being instilled in the young people before they learnt to drive. Furthermore, consideration would be given to using Council facilities to promote this message.

RESOLVED: That the report be noted.

8. **WORK PROGRAMME 2014/2015** (*Agenda Item 8*)

Consideration was given to the Committee's Work Programme for 2015/2016. It was agreed that the Committee's first review would be in relation to alcohol and that consideration would need to be given to whether the review should look at alcohol related admissions (inpatient) or presentations to hospital. Focusing on underage drinkers would enable the Committee to look at what work was undertaken to prevent longer term alcohol abuse and the associated impact on the health service. It was agreed that the Working Group would comprise three Conservative Members and two

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| | <p>Labour Members.</p> <p>Other possible reviews that could be undertaken by the Committee or update reports that could be requested included:</p> <ul style="list-style-type: none"> • Female genital mutilation (FGM); • Child Sexual Exploitations (CSE); • Probation Service; • frequent callers (links between the police, health services and council services); and • Drug treatment and substance misuse update. <p>It was agreed that the updates on previous reviews would be included on the agenda for the meeting on 16 February 2016 rather than 15 March 2016.</p> <p>Members were advised that the Democratic Services Manager had submitted evidence on behalf of the Committee in relation to the CQC inspection of the LAS.</p> <p>RESOLVED: That:</p> <ol style="list-style-type: none"> 1. The scoping report be agreed; and 2. Subject to the changes agreed at the meeting, the report be noted. |
| | <p>The meeting, which commenced at 6.00 pm, closed at 7.55 pm.</p> |

These are the minutes of the above meeting. For more information on any of the resolutions please contact Nikki O'Halloran on 01895 250472. Circulation of these minutes is to Councillors, Officers, the Press and Members of the Public.