



Update for Hillingdon Health and Social Care Select Committee – 23rd January 2024

London Ambulance Service – Hillingdon Group

Work that the organisation has undertaken over the last six months:

1. Hillingdon Group of Ambulance Stations implemented a Trust wide initiative called Teams Based Working (TBW) on 21st August 2023 (Details provided in previous updates). So far the feedback has been extremely positive and we are eagerly awaiting the NHS Staff Survey Results to demonstrably evidence this. 76.1% of staff within the Hillingdon Group completed the survey.
2. The Hospital Withdrawal Procedure (W45) – an agreement between London Ambulance Service and hospital trusts which sees our crews handing over patient care to hospitals within 45-minutes wherever possible – still continues since its implementation in June 23 with significant results. December 2022 saw our crews lose 274 hours as a result of patient handovers that exceeded 45 minutes at Hillingdon Hospital. In December 2023, this reduced to just 12.3 hours as a result of this procedure. We continue to appreciate the support and collaboration from Hillingdon Hospital in maintaining this.
3. The My Clinical Feedback App is now available to all clinicians. This app allows the clinician to review their patient's diagnosis and treatment within the emergency department. This is a significant improvement to help with each member of staff's clinical development.
4. Tactical and Operational Commanders from the Hillingdon Group took part in Hillingdon Council's annual resilience forum exercise (Operation Ignis) on 9th October 2023.
5. The contract with RAF paramedics within the Hillingdon Group has been reviewed. This is a multi-agency approach to providing clinical care to our community whilst developing paramedics from different organisations.

What target your organisation has been working towards

The LAS launched its 2023-2028 Strategy in September 2023. The full document is available online at [Our plans for the future - London Ambulance Service NHS Trust](#). This strategy was the result of extensive engagement both inside our organisation, with our partners and with our patients on how they would like to see us develop. The strategy sets out three missions:

1. Our Care: Delivering outstanding emergency and urgent care whenever and wherever needed.
2. Our Organisation: Being an increasingly inclusive, well led and highly skilled organisation people are proud to work for.
3. Our London: Using our unique pan-London position to contribute to improving the health of the capital.



Your organisation's performance against these targets during the last year and how this compares to recent years

- In North West London, the average response time to category 1 patients in the last six months was 7 mins 21 seconds. This is 7 second improvement from the previous 6 months.
- The Trust is currently operating at REAP (Resource Escalation Action Plan) level 3 (Major Pressure). Between 8/12/23 and 22/12/23 the Trust moved to REAP level 4 (Extreme Pressure). This was as a result of an increase in the number of calls received in our 999 and 111 system. An increase in respiratory illnesses was also observed.

The Resource Escalation Action Plan is to support a consistent ambulance sector approach to strategic escalation pressure levels that provide alignment with the NHS Operational Pressures Escalation Framework (OPEL) whereby the symbolising of pressure levels is consistent and understood across the wider NHS. REAP provides NHS Ambulance Services with a consistent and coordinated approach across the organisation to the management of its response in situations where demand or other significant factors within the ambulance service see an increase and a challenge to the capacity to manage it.

- Staff sickness rates within the Hillingdon Group have reduced from 6.41% to 6.09% in the last six months.
- 88.8% of staff have received an appraisal in the last 12 months. This is a 6% increase from six months ago.
- The average on scene times for our time critical patients is 35.9 minutes (0.2 mins quicker than six months ago). This is compared to a Trust average of 38.5 minutes. This means that we are getting our sickest patients to definitive care quicker than the LAS average.
- We have continued to champion the use of Alternative Care Pathways (ACPs) within the Hillingdon Group and to reduce the conveyance of patients to the Emergency Department and ensure our patients are getting the most appropriate care for their needs. In the last six months 50.6% of patients in Hillingdon were taken to an Emergency Department.
- Clinical Quality continues to be reviewed within the Hillingdon Group and is measured in a number of different ways including Clinical Performance Indicators (CPIs), Cardiac and Stroke Care bundles and Cardiac Arrest Care bundles. This is achieved by reviewing the care provided by our clinicians and ensuring that the appropriate care has been delivered. Some key highlights from recent reports:
 - 87% of staff within the Hillingdon Group have received Clinical Performance Indicator feedback within the last six months.
 - 29% of cardiac arrest patients attended by a Hillingdon Crew sustained a return of spontaneous circulation (ROSC) on arrival at hospital. Downloads of the Defib used in all cardiac arrest patients take place to provide feedback and assurance that all guidelines are followed with cardiac arrest management.
 - 98% of Stroke patients received the appropriate and full care bundle.
 - 89% of STEMI patients received the full care bundle and were conveyed to the appropriate Heart Attack Centre in November 23.

