



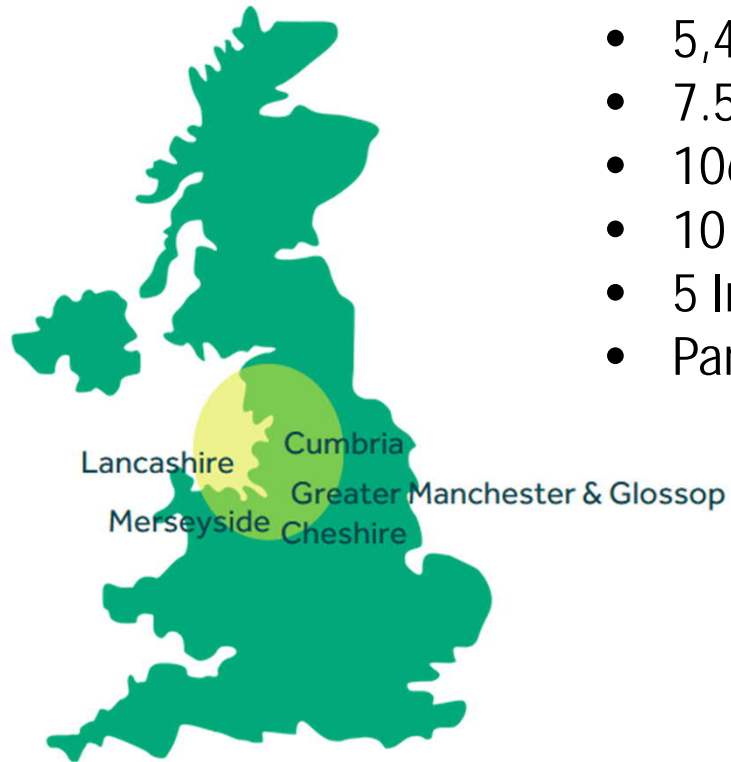
North West Ambulance Service NHS Trust.

Gene Quinn,
Head of Emergency Service
Cumbria and Lancashire Area

18 May 2022

About us.

- 5 counties.
- 5,400 square miles.
- 7.5 million population.
- 106 ambulance stations.
- 10 contact centres (999,PTS and 111).
- 5 Integrated Care Systems (ICS).
- Part of Northern Ambulance Alliance.



1,003 vehicles



7,358 staff



£440m budget



Paramedic
Emergency Service



*Patient Transport
Service



NHS 111



Resilience



Corporate

*Not in Cheshire

Resources.

- 8 ambulance sites
- 13 - 20 ambulances
- 3 response cars
- 191 active Community First Responders



Urgent & Emergency Care.



North Cumbria 1 April 2021 to
29 March 2022:


- Calls received – 69,125
- Incidents attended – 53,977
- Hear & Treat – 3063 (5.67%)
- See & Treat – 17,411 (32.26%)
- See & Convey – 33,503 (62.07%)



Performance standards.

Our emergency performance is measured through the Ambulance Response Programme (ARP), which aims to make sure we are reaching patients as quickly as we possibly can based on the nature and priority of the call.

These performance standards are:

- **Category one** is for calls about people with life-threatening injuries and illnesses. We aim to respond to these in an average time of 7 minutes and at least 9 out of 10 times within 15 minutes.
 - **Category two** is for emergency calls. We aim to respond to these in an average time of 18 minutes and at least 9 out of 10 times within 40 minutes.
 - **Category three** is for urgent calls. In some instances patients may be treated by ambulance staff in your own home. We aim to respond to these within 120 minutes at least 9 out of 10 times.
 - **Category four** is for less urgent calls. In some instances patients may be given advice over the telephone or referred to another service such as a GP or pharmacist. We aim to respond to these at least 9 out of 10 times within 180 minutes.
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Performance 1 April 2021 – 29 March 2022.

NWAS:

Demand				
1,797,764	1,119,922	1,013,895		
Emergency CAD Records	Emergency Incidents	Emergency F2F Incidents		
By Category				
153,458	612,527	201,708	32,352	59,614
C1	C2	C3	C4	C5
Mean Response Time				
00:08:41	00:47:28	02:52:55	06:43:55	04:04:51
C1	C2	C3	C4	C5
90th Percentile Response Time				
00:14:47	01:47:22	07:05:39	14:19:28	10:50:47
C1	C2	C3	C4	C5
Outcome				
9.5%	30.3%	60.2%		
Hear and Treat	See and Treat	See and Convey		

North Cumbria:

Demand				
69,125	53,977	50,914		
Emergency CAD Records	Emergency Incidents	Emergency F2F Incidents		
By Category				
5,454	28,553	10,414	798	3,226
C1	C2	C3	C4	C5
Mean Response Time				
00:09:21	00:20:02	00:46:39	01:51:00	01:22:27
C1	C2	C3	C4	C5
90th Percentile Response Time				
00:17:07	00:39:54	01:48:06	04:24:08	03:10:23
C1	C2	C3	C4	C5
Outcome				
5.7%	32.3%	62.1%		
Hear and Treat	See and Treat	See and Convey		

Comparison with other ambulance services performance for Category 1 (March 2022).

Ambulance Service	Number of Incidents	Total (hours)	Mean (hour: min:sec)	90th centile (hour:min:sec)
East Midlands	8,636	1,392	09:40	17:39
East of England	8,571	1,632	11:26	20:49
Isle of Wight	128	21	09:53	18:21
London	11,069	1,331	07:13	12:06
North East	3,062	355	06:57	12:16
North West	14,688	2,222	09:04	15:23
South Central	3,885	678	10:28	18:51
South East Coast	4,702	750	09:34	16:48
South Western	8,970	1,961	13:07	23:25
West Midlands	10,346	1,468	08:31	14:47
Yorkshire	7,800	1,262	09:42	16:52



Making improvements.

- Hospital Handover Safety Checklist

Our Clinical leadership and Quality Improvement Team are working with the Cumberland Infirmary, Carlisle on the implementation of the handover safety checklist and SDEC to reduce long waits.

- NHS Pathways in emergency operations centres for single primary triage
Implemented in North Cumbria on 29 March 2022.

- CHoC as SPoC for 2HUCR

Working with CHoC to improve patient access to 2HUCR

- Silver trauma

Funding received from NTN to work with CIC to improve care for frail and elderly patients suffering trauma.

Patient Satisfaction levels.

Paramedic Emergency Service - Cumbria Area Patient Experience Surveys	2021/2022
	34
	Cared for appropriately with Dignity, Compassion and Respect <i>(Strongly Agree/Agree)</i>
Overall Service Received <i>(Very Good/Good)</i>	91.67%
Patient Transport Service - Cumbria Area Patient Experience Surveys	2021/2022
	108
	Cared for appropriately with Dignity, Compassion and Respect <i>(Strongly Agree/Agree)</i>
Overall Service Received <i>(Very Good/Good)</i>	89.29%
NHS 111 First Service - Cumbria Area Patient Experience Surveys	2021/2022
	142
	Your need for calling NHS 111 First was met <i>(Yes)</i>
Overall Service Received <i>(Very Good/Good)</i>	89.44%

Patient Engagement.

- The trust holds a database of 44 community and specialist contacts for Cumbria including ethnic minority, mental health, learning disability; dementia, dyslexia, visual impairment; deaf and young persons groups.
- All groups receive NWAS' stakeholder news including our quarterly newsletter 'Your Call' and regular public health information bursts to support self-care.
- All face to face engagement was paused during the pandemic but where possible continued on a virtual basis.
- An identified theme included deaf patients accessing ambulance services and communication barriers with staff wearing face masks.
- We targeted engagement with both Cumbria Deaf Association (02 Dec 21) and Barrow Deaf Association (23 March 22) to raise awareness of BSL and the emergency 999 sms text providing access to NWAS services.
- We have supported public engagement in Cumbria with attendance at Cumbria Pride (25 Sept 21) and the Rainbow Stripe launch initiative (01 Dec 21).

Alston Update.

NWAS' objectives are:

- To future proof the provision of safe and reliable care for the Alston Moor community.
- To position Alston as a model of quality.

Current operational model comprises:

- A CFR model with EMT1s.
- Use of A002 vehicle by non blue light trained staff.
- No patients conveyed and NWAS still provide a response to every incident.

Clinical concerns:

- Number and availability of EMT1s resulting in limitations of cover.
- Inability to convey patient.

Alston Update.

NWAS initial proposal discussed via the multi agency working group included:

- Adoption of an ECFR model - Alston to act as a pilot for the proof of concept ECFR course plus additional module to develop a Level 4 award.
- Provision of an all-wheel drive vehicle.
- Agreement of a revised clinical model.

Engagement has also taken place via correspondence and meetings with:

- Local MP and SAMS.
- Parish Council.
- Cumbria CCG and Cumbria Health Scrutiny Committee.
- BASICS and BEEP.
- NEAS (particularly in relation to alternative models).

Latest position:

- Drop in sessions to listen to views, answer questions, present NWAS' proposals and consider alternative models have been organised for the Alston community on the 12th and 13th May . Q and A's will be published following these sessions.



Achievements over the past year.

- Introduced new rotas, based on activity across EOC, PES, Clinical Hub and 111.
- Our unified communications programme went live, successfully bringing the organisation together onto one telephony platform.
- Rolled out a new Electronic Patient Record (EPR) system across the region.
- We have completed the first phase to enable real time sharing of patient data meaning better access patient records and send NWS records to EDs, GPs and other services.
- We are contributing to the CIPHA programme to enable population health management through shared data.
- We expanded our involvement in the national pilot trialing of body worn cameras for crews.
- We launched our Suicide Prevention Toolkit. Our emergency operations centres introduced a new clinical review process for category 3 and below 999 calls to improve patient care and ease pressures on frontline clinicians.
- Our Patient and Public Panel celebrated its second anniversary and hit a milestone 200 members.
- We launched our staff Disability Network.
- Welcomed the trust's first consultant midwife to improve maternity care.

Looking ahead.

- Service delivery model has been completed.

- Digital developments:

EPR Phase 2 – design and development of phase 2 of our EPR product

Digitisation of workforce and medicines management system

Implementation of a new trust wide knowledge management solution

ESMCP project (new national mobile data system) – migration of airwaves in essence

Establishing data science capability and proof of concept with NHSx (AI/ML)

- Introduction of the Ambulance Academy a youth zone on our website to increase engagement with children and young adults.



WORKING TOGETHER.

We work together to understand and value every role in achieving our shared purpose. We live and breathe inclusivity, everyone matters.



BEING AT OUR BEST.

We challenge ourselves to be the best we can be. We are curious and push boundaries to improve everything we do.



MAKING A DIFFERENCE.

We make a difference through doing the right thing by our staff, patients, partners and communities. We act with compassion and kindness.

Comments or
questions?