Healthier Communities Select Committee				
Title Emergency services review:		Item	3	
Contributor	Overview and Scrutiny Manager			
Class	Part 1 (Open)	Date	29 May 2013	

1. Purpose of paper

- 1.1 The Overview and Scrutiny Committee has agreed that its select committees will carry out a review of emergency services in Lewisham. The Healthier Communities Select Committee has been tasked with determining the potential impact of changes in relation to Hospital Accident and Emergency Services and the London Ambulance Service.
- 1.2 At its meeting in March, the Committee requested that officers provide further information about how it might approach this task. A scoping report was considered by Members at their meeting on the 16th April 2013 and it was agreed that the Committee would invite a relevant senior officer/clinician from Lewisham Healthcare NHS Trust, and Lewisham CCG, and Graham Norton, Ambulance Operations Manager Lewisham to attend the meeting. This paper sets out some of the key information required for the Committee's consideration of the fire service proposals.

2. Recommendations

The Committee is asked to:

- consider the content of the report and appendices, and direct questions to:
 - Graham Norton and Kevin Brown, London Ambulance Service
 - Lewisham CCG representative
 - Lewisham Healthcare NHS Trust representative

3. Background

- 3.1 Significant changes are being implemented, or are planned, to the way in which emergency services are delivered across London. This includes the three local emergency services in Lewisham: Metropolitan Police, London Fire Brigade and the London Ambulance Service; and also the provision of accident and emergency services across South-East London.
- 3.2 At its meeting on the 11 February 2013 the Overview and Scrutiny Committee considered a scoping report, which set out the terms of reference for a review into emergency services in Lewisham. At the meeting, it was decided that the review would be co-ordinated across all select committees. Members of the O&S Committee considered the proposed terms of reference and they agreed that the review would aim to:
 - clarify the key policy initiatives and financial constraints impacting on emergency services locally
 - identify the local implications for services
 - consider the potential impact of any service changes

- 3.3 As part of the review, the Committee resolved that the Healthier Communities Select Committee would:
 - Clarify the policy initiatives and financial circumstances impacting on the London Ambulance Service and A&E provision in Lewisham
 - Identify the related impact on services and performance locally
 - Consider the potential impact of any service changes

4. Key lines of enquiry

- 4.1 The terms of reference for the review have been established by the Overview and Scrutiny Committee. The terms agreed for the Healthier Communities Select Committee are to:
 - Clarify the policy initiatives and financial circumstances impacting on the London Ambulance Service and A&E provision in Lewisham
 - Identify the related impact on services and performance locally
 - Consider the potential impact of any service changes
- 4.2 The scoping paper agreed by the Committee in April 2013 suggested that these key questions could be asked as part of the review:

Perception

- How will people be reassured that they will continue to be safely treated at the most appropriate location?
- How will information about potential service changes be effectively communicated to people?
- How is information about the appropriate place to go to for healthcare needs effectively distributed and communicated?
- How will perception of proposed changes be effectively dealt with?
- How will the maternity proposals impact on emergency provision in relation to maternity circumstances
- Will the emergency maternity changes impact on routine ante natal care and patient choices in relation to ante natal care

Response

- Has modelling been carried out on patient flows and patient numbers across Lewisham A&E and other South East London A&Es to map expected service usage over coming years?
- Do neighbouring A&E services have the capacity to take on a potential increased number of patients from Lewisham?
- Could the proposed changes have a negative impact on A&E services across South East London, and particularly at neighbouring hospitals?
- Could the proposed changes have a negative impact in relation to maternity services provision across South East London?
- How might increased travelling to A&Es out of the borough impact on the LAS response times?
- How are LAS responding to the proposed changes to Lewisham Hospital A&E in terms of service planning?

<u>Partnership</u>

- Would there be any impact on effective discharge planning and after care if a greater number of patients are treated outside of the borough in an emergency?
- How will work be undertaken to ensure effective working is developed with a range of hospitals in relation to discharge and ongoing care?
- Will the "outstanding" safeguarding procedures and partnership working currently in place be impacted by changes to the Lewisham hospital A&E?
- Will local commissioners be able to effectively influence service design and delivery in emergency care across a number of trusts in a number of neighbouring boroughs?

<u>Travel</u>

- What might be the travel implications for people travelling to A&E under their own steam?
- What would be the impact on traffic and congestion on the roads with people travelling further for services and to visit relatives?

Future

- How will the potential future population increases and demographic changes influence emergency service requirements and provision across the borough?
- Has future population growth been factored into service planning for the future?
- How might the current proposed changes influence the future sustainability of healthcare services at the hospital site and in the borough?

5. London Ambulance Service proposals

- 5.1 On 25 April 2013 London Ambulance Service (LAS) announced it will receive an extra £7.1m this year from its commissioners to recruit 240 frontline staff to help improve levels of care to patients amidst ever increasing demand. Chief Executive Ann Radmore said: "Whilst we have been providing a good service to patients with life-threatening illnesses and injuries, increased demand has meant not everyone is getting the level of care they should from us, and many are waiting too long for our help. We know this needs to change, and that is backed up by what our patients and staff are telling us."
- 5.2 The additional funding will enable the service to continue to work towards having a paramedic on every emergency vehicle. This will be supported by using the additional funding to recruit more A&E support staff to introduce a model of care used in other ambulance services, where paramedics work alongside support staff on ambulances. LAS feel that this way of working will mean more patients will be treated by a paramedic, and it will increase ambulance cover locally so that patient waiting times are reduced."
- 5.3 LAS has developed a range of plans which it feels will enable it to operate more efficiently in the future to help manage anticipated increases in demand, and is planning to make changes to the way it responds to some 999 calls as well as introduce new working arrangements for its frontline staff. Plans include:
 - reducing the number of times more than one vehicle is sent to a call when it is clinically safe to do so
 - providing more clinical advice to callers over the phone when it is the most appropriate way to help them.
 - Changes to staff's shift patterns and annual leave arrangements to ensure sufficient staff are working at times of highest demand and opportunities for training and development are increased.

- 5.4 By bringing in changes that increase capacity, LAS feel they will also be able to reduce the use of private ambulance services to support the provision of patient care. The Service will receive a further £7.7m to help maintain levels of patient care through the year while staff are recruited and the changes are introduced.
- 5.5 LAS have published a document outlining the plans for public consultation, the consultation formally ends on Friday 24 May 2013. The plan is attached at appendix A.

6. Accident and Emergency Services

- On the 31st of January 2013 the Secretary of State for Health decided that the Accident and Emergency Department at Lewisham hospital would be reduced in size, with the most urgent cases being taken to other hospital sites across South East London. It was also decided that Lewisham Healthcare NHS Trust would take over the management of the Queen Elizabeth Hospital, which is currently part of the South London Healthcare Trust which is being dissolved. Those decisions were based on the report and recommendations of the Trust Special Administrator (TSA), Matthew Kershaw, who had been charged with developing recommendations for dealing with the failing South London Healthcare NHS Trust, based in neighbouring boroughs.
- 6.2 Lewisham Council has issued an application for judicial review of the decisions of the Secretary of State for Health and the Trust Special Administrator in relation to the Lewisham Hospital A&E in the High Court and has already succeeded in delaying implementation of any changes to Lewisham Hospital. The Council is asking for the court to review the recommendations of the Trust Special Administrator (TSA) affecting Lewisham Hospital and the subsequent decision to accept those recommendations by the Secretary of State for Health.
- 6.3 The Council has also secured an undertaking that no service changes affecting Lewisham Hospital as a result of the Secretary of State's decision will be implemented before the matter has been dealt with by the court.
- On 15 May 2013, the College of Emergency Medicine published a report entitled: The drive for quality, How to achieve safe, sustainable care in our emergency departments. The report calls for fundamental change in the way emergency care systems are designed, funded and managed. Ten recommendations are made across 4 domains which, the College of Emergency Medicine fee, must be considered and adopted by national policy makers, commissioners, clinicians and Trust Boards in order to "stabilise" emergency medical services and deliver high quality care. A summary of the report is attached at appendix B.
- 6.5 Also on 15 May 2013, the Foundation Trust Network also issued a statement calling for changes to the organisation of and funding of emergency services. The full statement is attached at appendix C

7. Further implications

There are no legal, financial, sustainability, equalities or crime & disorder implications resulting from the implementation of the recommendation in this report, however, there will be implications arising from the changes being proposed.

Appendix

Appendix A: LAS Our plans to improve the care we provide to patients

Appendix B: College of Emergency Medicine report: The drive for quality, How to

achieve safe, sustainable care in our emergency departments Appendix C: Foundation Trust Network statement 15 May 2013

If you have any questions about this report please contact Salena Mulhere (Overview and Scrutiny Manager) on 0208 314 3380.