

Emergency Ambulance Services Committee – Emergency Ambulance Services Commissioning Intentions 2022-23

This document sets out the revised approach and guiding principles to the Emergency Ambulance Services commissioning intentions for 2022-23 and beyond.

These intentions aim to reflect the direction from Committee members to limit the additional asks on commissioned organisations this year including, but not limited to, minimising meetings, reporting and developments in order to allow for commissioned organisations to focus on the pandemic response, stabilisation and recovery of services.

Intentions aim to support the implementation of the new commissioning framework and transition of performance management arrangements to focus on outcomes, value, quality and safety of service delivery.

These commissioning intentions are not intended to set out all activity that will be undertaken this year by commissioners or the provider, but to provide a clear indication of the strategic priorities of the Committee for the provider of Emergency Ambulance Services in Wales for 2022-23.

Guiding Principles for 2022/23

- Intentions will:
 - be at the strategic level and will be extant for a minimum of 3 years
 - focus on outcomes, value, quality and safety of service delivery
 - support the delivery of the quadruple aims
 - have annually agreed aim(s), product(s) and indicator(s) that will provide an outline of what will be provided within each intention
 - ensure reasonable expectations for the improvement of Emergency Ambulance Services
 - recognise the challenges of resetting in the post-covid environment and the opportunities to fast track service transformation
- Ongoing engagement and review between WAST and Commissioners will allow the detail of each intention to be refined during the period, if required
- Intentions will not replace or override extant requirements within the commissioning framework or statutory targets or requirements

Development and monitoring

- In line with the agreed commissioning cycle, organisations have been asked for their view on the priorities for next year and consequently a principle of the incremental development of existing commissioning intentions has been adopted.
- Intentions have been developed in alignment with the 6 Goals for Urgent and Emergency Care
- EASC Management Group will hold ultimate responsibility for the development and monitoring of progress against intentions to ensure the strategic intent is achieved
- Regular updates will be provided against commissioning intentions to EASC Management Group
- Future intentions will continue to be developed in a collaborative and timely manner in line with the agreed commissioning cycle

Commissioning Intention – CI1: Clinical Response Model

The Emergency Ambulance Service and its Commissioners will seize the opportunities afforded by the Welsh Clinical Response Model and the 5 Step Ambulance Pathway (EMS).

Commissioning Statement

The 5 step Ambulance Pathway (EMS) provides a simplified framework for health systems to collaborate to optimise the care patients receive at each step. A high performing health system will enable services and practitioners at each step to resolve a patient episode of care without the need to progress further along the pathway. Maximising the potential of this opportunity will require system wide collaboration that transcends traditional organisational and professional boundaries.

Aims

CI1-A1	Increase the proportion of activity resolved at Step 2 – Using the activity within the demand and capacity review as a baseline, this aim requires the proportion of activity resolved at step 2 to increase. The improvement trajectory will be included in the new commissioning framework that will be collaboratively agreed ahead of 1 st April 2022.
CI1-A2	Right response first time – Optimising multiple responses at Step 3 – Using activity within the demand and capacity review as a baseline, this aim requires an improvement in the multiple response rate and the resolution of that episode of care by a single resource (excluding red response as multiple responses are expected). The improvement trajectory will be included in the new commissioning framework.

Products

CI1-P1	Remote Clinical Support Strategy – The first element will be to finalise an integrated remote clinical support strategy and infrastructure that outlines the organisational ambition for remote clinical support at the forefront of ambulance service care.
CI1-P2	Optimising Conveyance Improvement Plan – Development and implementation of an improvement plan or programme that supports the optimisation of decisions about conveyance. This will include non-conveyance as well as improving conveyance destination decisions and reducing variation for example.

Indicators

CI1-I1	Clinical Support Desk Outcomes – The development of quarterly reports that describe the patient level outcomes for clinical support desk care episodes.
CI1-I2	Outcome by Response Type – The development of quarterly reports will be available that describe the patient level outcomes for different response types.

Commissioning Intention – CI2: Availability

The Emergency Ambulance Service and its Commissioners will optimise the availability and flexibility of front line resources to meet demand.

Commissioning Statement

The Emergency Ambulance Services Committee holds statutory responsibility for the planning and securing of sufficient ambulance services for the population of Wales. Discharging this responsibility requires close collaboration between commissioners and the provider to ensure that all available resources are used effectively.

Aims

CI2-A1	Workforce Stability - Maintaining the increased staff base following closure of the relief gap identified in the ORH Demand and Capacity Review (2019). Maximising the availability of these staff through reducing sickness levels and absences by ensuring that their wellbeing needs are appropriately supported.
CI2-A2	Workforce Availability - Grow the workforce in line with the strategic ambition, agreed forecasting and modelling and within financial allocation when made available by Commissioners.
CI2-A3	Rosters Aligned to Demand - The current demand profile is not matched by available resource. This has a significant impact on quality of service for patients and wellbeing of staff. Roster reviews have been undertaken with partners throughout 2021-22 to agree core principles and working parties have progressed the design and building of rosters. Rosters aligned to demand will be available for each area in 2022-23 and an implementation programme will be developed and delivered.

Products

CI2-P1	Forecasting and Modelling Framework - A collaboratively developed forecasting and modelling framework that underpins a demand and capacity approach that will set out the ongoing arrangements for proactively undertaking this work for the next decade, this will include demand-led iterative forecasting and modelling and health economic evaluations. This will ensure the required strategic, tactical and operational focus to plan and forecast seasonal fluctuation and to ensure resource and resilience during times of system pressure.
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Indicators

CI2-I1	Workforce Additionality Measure – A collaboratively agreed baseline and workforce additionality requirement will continue to be reported and refined, including vacancy factors, turnover and other confounders.
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Commissioning Intention – CI3: Productivity

The Emergency Ambulance Service and its Commissioners will maximise productivity from resources and demonstrate continuous improvement.

Commissioning Statement

Ensuring appropriate levels of productivity from the resources available is a key component of delivering an effective ambulance service. There are a number of external and internal drivers leading to suboptimal productivity. Addressing these areas has the potential to deliver significant gains for emergency ambulance provision and the wider emergency and urgent care system.

Aims

CI3-A1	Reducing Post-Production Lost Hours – Post-production lost hours have long been a significant contributor to reduced productivity. Using an agreed baseline measurement period, post-production lost hours will be reduced in line with a quarterly agreed improvement trajectory. The improvement trajectory will be included in the new commissioning framework that will be collaboratively agreed ahead of 1 st April 2022.
CI3-A2	Reducing Notification to Handover Time – NHS Wales is a significant outlier in the UK and internationally for lost productivity due to extended notification to handover times. EASC is committed to delivering less than 150 hours per day across Wales and 95% of handovers completed within 1 hour, with a backstop of no handover taking more than 4 hours. Individual improvement trajectories will be agreed for each site and will be included in the new commissioning framework.

Indicators

CI3-P1	Modernising Workplace Practices Implementation Plan – There will be an implementation plan and supporting structures in place to ensure workforce practices and policies are reviewed, modernised and improved. The wellbeing of the workforce and safety of patients will be paramount within this. The improvement trajectory will be included in the new commissioning framework.
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Indicators

CI3-I1	Unit Hour Utilisation Metric – continue to refine the approach and reporting in order to actively improve patient safety, performance and efficiency.
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Commissioning Intention – CI4: Value

The Emergence Ambulance Service and its Commissioners will develop a value-based approach to service commissioning and delivery, which enables an equitable, sustainable and transparent use of resources to achieve better outcomes for patients.

Commissioning Statement

Value is created when we achieve the best possible healthcare outcomes for the Welsh population with the most efficient and effective use of available resources. We also recognise that value can be depleted and therefore the development of a value-based strategy will need to identify ways to effectively manage and mitigate the risks of value depletion in addition to identifying opportunities for value creation.

Aims

CI4-A1	Value-Based Healthcare for the Welsh Ambulance Service Building on the engagement already undertaken, develop and embed a value-based approach for the Welsh Ambulance Service which enables better collective decision making across the whole urgent and emergency care system and accounts for WAST's use of, and impact on, economic, social and environmental resources over the short, medium and long term. This will include: <ul style="list-style-type: none">• Development of WAST's strategy and approach to Value-Based healthcare which links outcomes, patient experience and use of resources• Implementation of a costing model for "5 step" pathway• Improvement in ability to identify areas of unwarranted variation in service delivery across Wales
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Products

CI4-P1	Value-Based Strategy The Trust will develop a strategy to implement a value-based approach across the organisation and outline its role in delivering value across the wider UEC system. The value-based strategy will be integrated with and align to existing organisational strategies (e.g. clinical, quality, long term, digital, environmental etc) and the Commissioning Intentions outlined in this document in order to ensure goal congruence.
CI4-P2	Value-Based Tools and Methods In order to monitor and measure value-based performance, the Trust will need to design, develop and implement a range of tools including, but not limited to, the following: <ul style="list-style-type: none">• Patient Level Costing Model• Benchmarking Dashboard(s)
CI4-P3	Value-Based Reporting WAST will enable a clear line of sight from commissioner allocation through to utilisation and the outcomes delivered by the services. WAST will holistically demonstrate through its reporting all separate revenue streams and associated costs of broader service provision (e.g. 111, NEPTS etc.).

	WAST receives a capital allocation directly from Welsh Government. The utilisation of the capital budget and the use of the ring-fenced depreciation allocation will need to be clearly identified in any report. As a result, WAST will be able to demonstrate how its capital allocation is being invested to deliver on the commissioning intentions.
Indicators	
CI4-11	<p>Value-Based Core Requirement to be agreed with Commissioner by the end of quarter 2:</p> <ul style="list-style-type: none"> • WAST Value Based Strategy • Plan for Value Based Tools and Methods design, development and implementation • Value Based Reports developed for revenue and capital • Value-Based indicators developed in line with broader indicators outlined in CI1 to CI5 • Connections to system-wide urgent and emergency care performance measures as identified in CI6 – Wider Health System

Commissioning Intention – CI5: Harm & Outcomes

The Emergency Ambulance Service and its Commissioners will collaborate to reduce and prevent harm, and improve quality of service and outcomes for patients.

Commissioning Statement

Emergency ambulance services operate in complex and challenging environments. The delivery of a quality ambulance service requires effective, safe and people-centred care. To realize the benefits of quality health care, ambulance services must be timely, equitable, integrated and efficient. A mature health system proactively seeks opportunities to reduce and prevent harm. Continuous improvement based on learning from errors and adverse events must be a cornerstone of emergency ambulance provision.

Aims

CI5-A1	Proactively Identifying Harm – There will be a process for identifying harm/near misses prior to a complaint or report being logged. This will include process for reviewing patient clinical records and engagement with the wider health system (i.e. sharing information around patients impacted by CSP levels).
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Products

CI5-P1	Clinical Indicator Plan and Audit Cycle – Implementation of the clinical indicator plan and audit cycle, this will provide a forward view of the type, content and regularity of clinical indicator and audit reporting. Specific seasonal and responsive (to emerging trends) reports and audits will be included within the plan.
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Indicators

CI5-I1	Call to Door Times – Call to door times for STEMI and stroke will be produced on a monthly basis.
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Commissioning Intention – CI6: Wider Health System

The Emergency Ambulance Service and its Commissioners will collaboratively develop and deliver services that allow the ambulance service to contribute to the wider health system and the ambition to reset services and drive recovery.

Commissioning Statement

The Emergency Ambulance Services has a unique role as the only all Wales operational service. Today, ambulance services provide mobile urgent treatment services with staff educated and trained to deal with a wide range of emergency and urgent conditions. Maximising both of these opportunities will benefit the whole of NHS Wales and will be an important part of the pandemic response.

Aims

CI6-A1	System Flow – Optimise the flow of ambulances in to hospital sites in Wales, reducing batching and increasing the timeliness of patients accessing secondary care. The implementation of rosters aligned to demand for each area in 2022-23 will address this, with the improvement trajectory included in the new commissioning framework that will be collaboratively agreed ahead of 1 st April 2022.
CI6-A2	Transfer and Discharge Service – To reduce the number of transfers and discharges being undertaken by the EMS fleet. This will include the development of a case for a new national transfer and discharge service.

Products

CI6-P1	Aligned Escalation and Clinical Safety Plan – A single WAST escalation and clinical safety plan will be in place that is aligned with system-wide escalation processes, responding to areas of greatest clinical risk.
CI6-P2	National Transfer and Discharge Commissioning Framework – A collaborative commissioning framework for a national transfer and discharge service will be agreed following the development of the business case.

Indicators

CI6-I1	System Pressures Dashboard – WAST and Health Boards will collaborate to ensure that a live system pressures dashboard is in place that enables users to understand current and emerging pressures.
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