

<b>Agenda Item</b>
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<b>Joint Commissioning Committee</b>
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<b>Ambulance Services Developments</b>
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<b>Dyddiad y Cyfarfod / Date of Meeting</b>	17/09/2024
<b>Statws Cyhoeddi / Publication Status</b>	Open/ Public Not Applicable
<b>Awdur yr Adroddiad / Report Author</b>	Ross Whitehead, Director of Commissioning for Ambulance and 111
<b>Cyflwynydd yr Adroddiad / Report Presenter</b>	Ross Whitehead, Director of Commissioning for Ambulance and 111
<b>Noddwr yr Adroddiad / Report Sponsor</b>	Abigail Harris, Interim Chief Commissioner

<b>Pwrpas yr Adroddiad / Report Purpose</b>	For Noting
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<b>Engagement (internal/external) undertaken to date (including receipt /consideration at Committee/Group)</b>		
<b>Committee / Group / Individuals</b>	<b>Date</b>	<b>Outcome</b>
JCC Development Session	20/08/2024	Noted

<b>Acronyms / Glossary of Terms</b>	
HBs	Health Boards
NWJCC	NHS Wales Joint Commissioning Committee
WAST	Welsh Ambulance Services University NHS Trust
AfC	Agenda for Change
RICS	Remote Integrated Care Service

## 1. INTRODUCTION

This report updates members on specific areas related to the developments of the Welsh Ambulance Service University NHS Trust (WAST) in relation to the delivery of Emergency Medical Services:

- Evolution of the Clinical Response Model
- Emergency Medical Technician Job Profile – Business Case
- Manchester Arena Inquiry – Recommendation Report.

## 2. SITUATION /BACKGROUND

### 2.1 Evolution of the Clinical Response Model

At the Joint Commissioning Committee (JCC) Development Session on 20 August 2024 members received a presentation on a proposed evolution of the clinical model delivered by the WAST.

Members will recall that the aim is to improve the delivery of ambulance services through the enhancement of clinical assessment and appropriate care planning for patients based on their needs in order to improve clinical outcomes and reduce clinical risk and harm in our communities.

The proposed evolution of the model has been developed in response to the changing landscape of ambulance delivery since the model was originally introduced in 2015, including:

- A significant increase in the number and proportion of calls categorised as Red (immediately life threatening), from 4-5% of all 999 incidents in 2015 to over 15% currently
- 999-case mix has changed with the greatest proportion of calls for urgent health care needs related to an older, frail population with multiple long standing chronic diseases
- Pressures across the wider health and care system have been exacerbated due to increasing patient demand, staff vacancies and financial pressures impacting service delivery with up to 40% of ambulance capacity being lost each day as a result of hospital delays.

The proposed model primarily delivers enhanced clinical input and assessment much earlier in a patient's 999 journey and aims to ensure patients receive the right care at the right time for their specific needs.

The proposed model would introduce:

- **Rapid Clinical Screening** - A service for the majority of 999 calls, where immediately after the call handler stage a rapid review of the clinical information obtained in the call will be undertaken to allow the Clinical Navigator to prioritise those calls that need an ambulance dispatch and conveyance to hospital
- **Remote Integrated Care Service (RICS)** – A service that would bring together clinicians who currently separately support 111 and 999 into one

service. They will undertake more thorough clinical assessments for patients flowing into their service regardless of which number patients called and, in partnership, will create a personalised care plan that meets the patient's specific needs. This could include deploying volunteers to the patient's home for an eyes-on assessment and to take basic clinical observations to support remote clinical decision making or working with Health Board (HB) clinicians who can undertake a more specialist assessment using locally agreed pathways.

The evolved model will take time to fully develop, and WAST is developing a phased implementation plan, with some elements able to be in place for this winter.

The effectiveness of the proposed model will depend on close collaboration between the Trust and HBs to ensure that patients are able to access the clinical services that they need. A full engagement programme is being developed by WAST to support this.

Due consideration will also need to be given as to how the evolved model is measured in order to demonstrate the effectiveness of earlier clinical input and care planning on the outcomes and experience for patients.

The Director of Commissioning for Ambulance Services and 111 has been closely involved with the development of these proposals by the Trust and a series of meetings are scheduled with colleagues across the system, including the NHS Executive, Welsh Government and HBs over the coming weeks to further explore the opportunities for delivery of these proposals. All parties will be briefed and engaged on the proposals and measures.

## **2.2 Emergency Medical Technician Job Profile – Business Case**

In November 2023 a number of new Agenda for Change (AfC) role profiles were published by NHS Employers. These included a number of ambulance sector-specific profiles in support of national UK-wide consistency.

Two of these new profiles are relevant to the Emergency Medical Technician workforce within WAST. They are the Ambulance Practitioner at AfC band 4, which has level 3 education as a key feature of its banding, and the profile for the Higher Ambulance Practitioner at AfC band 5, which has level 4 education as its basis.

Education to level 4 is the current basic entry training for Emergency Medical Technicians within the Welsh Ambulance Service.

Trade Unions representing Welsh Ambulance Service staff have been seeking a review of the existing Emergency Medical Technician job description since 2019. Given the adoption of these new profiles nationally Trade Union colleagues have refreshed their calls for the revision of the Emergency Medical Technician AfC banding within Wales. NHS Employers Wales have also advised the ambulance

service that a number of similar re-banding exercises are taking place in England and Scotland following the publication of new role profiles.

At the end of August 2024, the WAST CEO shared a business case with the Interim Chief Commissioner for funding an uplift to the current Emergency Medical Technician (EMT) workforce from a band 4 A4C grade to a band 5 based on an agreed national profile for the role.

Whilst the case seeks central funding from Welsh Government for this, in line with the previous case for the uplift of Paramedics to band 6 in 2017, there are potentially commissioning implications for the JCC should funding not be available.

The Interim Chief Commissioner and the Director of Commissioning for Ambulance Services and 111 will now work with the Trust and WG colleagues to scrutinise the case with the Ambulance and 111 Management Group and to bring forward any recommendation for the JCC to a future meeting of the Committee.

### **2.3 Manchester Arena Inquiry – Recommendation Report**

The Manchester Arena Inquiry Volume 2: Emergency Response report published on the 3 November 2022 made 149 recommendations.

Recommendations 105, 106 and 107 are particularly relevant for the Committee as follows:

- **Recommendation 105** - Ambulance service trusts should review their capacity to respond to a mass casualty incident. That should include an assessment of whether they have an adequate number of trained specialist personnel to respond effectively to a mass casualty incident
- **Recommendation 106** - Having carried out that review (rec 105), the trusts should make recommendations to their NHS commissioners about the additional and/or different resources they require in order to ensure that they are able respond effectively to a mass casualty incident in the numbers they require
- **Recommendation 107** - The Department of Health and Social Care should give urgent and close consideration to any recommendations made by the trusts and the NHS commissioners.

WAST has now completed its work in relation to these recommendations and in line with recommendation 106 has, at the end of August 2024, submitted a report to the Interim Chief Commissioner for consideration by the JCC.

Members should note that due to the complexity of the report and the specialised nature of some areas, the Ambulance and 111 commissioning team will need to draw on HB expertise to support the consideration of the report.

The Interim Chief Commissioner and the Director of Commissioning for Ambulance Services and 111 will now work with the Ambulance and 111 Management Group, Trust, HBs and Welsh Government to consider the report

and bring forward any recommendations for the JCC to a future meeting of the Committee.

### 3. KEY RISKS / MATTERS FOR ESCALATION

#### 3.1 Evolution of the Clinical Response Model

- The JCC team will provide future briefings to ensure that members can be assured that there is sufficient collaboration between the ambulance service and HB clinical and operational teams to manage any unintended consequences as a result of the proposed model. This includes the system understanding of the future measures for the model.

#### 3.2 Emergency Medical Technician Job Profile – Business Case

- There is a significant financial ask within the case that the JCC team will now scrutinise and consider. As described in the paper the risk is being managed through discussion with WG but if this avenue is not fruitful the consequences will need to be considered and prioritised by the JCC
- There are potentially significant commissioning risks should the case not be progressed, both from a financial and operational delivery perspective.

#### 3.3 Manchester Arena Inquiry – Recommendation Report

- There will likely be an expectation from the Inquiry for services to report back on their progress with the recommendation, that this is likely to attract both media and political attention
- There are potentially significant financial consequences that will need to be considered and prioritised by the JCC.

Objectives / Strategy	
<b>Dolen i Nod (au) Strategol CC GIG Cymru/ Link to NWJCC Strategic Goal(s)</b>	Not Applicable
	The JCC was established on 1 April 2024. Draft Strategic Objectives are being presented for approval at the Sept Joint Committee Meeting.
<b>Dolen i Feysydd Strategol CC GIG Cymru / Link to NWJCC Strategic Areas</b>	Not Applicable
	Draft Strategic Objectives are being presented for approval at the Sept Joint Committee Meeting.
<b>Dolen i Ddeddf Llesiant Cenedlaethau'r Dyfodol – Nodau Llesiant / Link to Wellbeing of Future Generations Act – Wellbeing Goals <a href="#">150623-guide-to-the-fg-act-en.pdf</a> <a href="#">(futuregenerations.wales)</a></b>	A Healthier Wales
	If more than one applies please list below: A More Equal Wales

<b>Dolen i Hwyluswyr Ansawdd</b> <i>(Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) /</i> <b>Link to Enablers of Quality</b> <i>(<a href="#">Duty of Quality Statutory Guidance (gov.wales)</a>)</i>	Data to Knowledge
	If more than one applies please list below: Learning, improvement and research Whole systems perspective Leadership
<b>Dolen i Feysydd Ansawdd</b> <i>(Canllawiau Statudol Dyletswydd Ansawdd (llyw.cymru)) /</i> <b>Link to Domains of Quality</b> <i>(<a href="#">Duty of Quality Statutory Guidance (gov.wales)</a>)</i>	Efficient All of the domains of quality apply
	If more than one applies please list below: Effective; equitable; person centred; timely and safe
<b>Effaith Amgylcheddol/ Cynaliadwyedd (5R) / Environmental /Sustainability Impact (5Rs)</b>	No - Not Applicable
	If more than one applies please list below:

Impact Assessment		
<b>Ansawdd</b> <i>Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Ansawdd? /</i> <b>Quality</b> <i>Have you undertaken a Quality Impact Assessment Screening?</i>	Yes: <input type="checkbox"/>	No: <input checked="" type="checkbox"/>
	Outcome:	If no, please include rationale below: This relates to the reporting of performance but this is linked inextricably to the quality of services received. The provider will need to undertake the assessment for the service provided
<b>Cydraddoldeb</b> <i>Ydych chi wedi ymgymryd â Sgrinio Asesiad o'r Effaith ar Gydraddoldeb? /</i> <b>Equality</b> <i>Have you undertaken an Equality Impact Assessment Screening?</i>	Yes: <input checked="" type="checkbox"/>	No: <input checked="" type="checkbox"/>
	Outcome:	If no, please include rationale below: The change impact on the service provided to patients should be undertaken by the provider with assurance provided to the commissioners.

<b>Cyfreithiol / Legal</b>	There are no specific legal implications related to the activity outlined in this report.
<b>Enw da / Reputational</b>	Yes (Include further detail below)
	The performance of the ambulance service is of significant public interest and the monitoring of the performance and services is an essential part of the commissioning cycle
<b>Effaith Adnoddau</b> (Pobl /Ariannol) / <b>Resource Impact</b> (People / Financial)	Yes (Include further detail below)
	The performance of the services will be used to develop the IMTP and identify the areas where resources may be required.

#### 4. RECOMMENDATIONS

The JCC is asked to:

- **Note** the contents of the report,
- **Discuss** and **note** the work being undertaken of the development of the proposal for the evolution of the clinical response model,
- **Note** the receipt of Emergency Medical Technician Job Profile – Business Case and the work now required to scrutinise this case; and
- **Note** the receipt of the Manchester Arena Inquiry – Recommendation Report and the work now required to consider and assess the report.

#### 5. NEXT STEPS

A further update will be provided at the next meeting.