

Healthwatch Worcestershire's response to the Quality Account (draft sent 18/04/2024) of the West Midlands Ambulance University NHS Foundation Trust (WMAS) for the year 2023/24.

Approved at HWW closed board meeting 20th May 2024.

Healthwatch Worcestershire [HWW] has a statutory role as the champion for those who use publicly funded health and care services in the county. Healthwatch Worcestershire welcomes the opportunity to comment on the West Midlands Ambulance University NHS Fo undation Trust Quality Account [QA] for 2023/24. This has been another challenging year for providers of NHS services and Healthwatch Worcestershire acknowledges the effort and commitment of the staff at the Trust who have been working hard to do their best for patients under difficult circumstances. We note that WMAS is not commissioned to deliver Non-Emergency Patient Transport in Worcestershire.

We have used national Healthwatch England guidance to form our response below. We would make the following comments:

1. Do the priorities of the provider reflect the priorities of the local population?

Progress against 2022/23 Improvement Priorities:

Mental Health:

We welcome the appointment of Head of Clinical Practice for Mental Health and the 24/7 clinician coverage and especially the mental health response vehicles where these have been commissioned by the ICB. It is not stated whether Herefordshire & Worcestershire ICB has commissioned mental health response vehicles.

We also support the aim of WMAS ensuring equity in the delivery of mental health care at the point of need and the use of mental health nurses within the emergency operations centre and its impact on this vulnerable group of patients.

Integrated Emergency and Urgent Care Clinical Governance:

Of note is the transition during 2024, to the Patient Safety Incident Response Framework (PSIRF) and the focus on support of patient safety.

Utilisation of Alternative Pathways

We recognise the establishment of rapid handover escalation process at Worcestershire Emergency departments, Hospital Ambulance Liaison Officers (HALO), Call Before You Convey for patients over the age of 75 with non-life threatening conditions and mental health response vehicles, Same Day Emergency Care (SDEC) and the use of single point of access (SPS). These alternative pathways aim to reduce the pressure on Worcestershire Hospitals.

Developing Role in Improving Public Health

Whilst the actions around public health messaging are welcome. We would ask whether there is an assessment of the effectiveness of the messaging and how this will be carried out?

Reducing patient harm incidents across the Trust

There is a recognition that hospital handover delays remain a significant and increasing problem. The CQC has served WMAS with a Regulation 12 notice in relation to operational performance standards – a Performance Improvement Plan has now been created. Also, as the operational performance of WMAS has fallen behind the performance standards across the West Midlands, it would be useful to see this broken down by county to enable a view on the operational performance of WMAS in Worcestershire.

We note the CQC report published on 23rd February 2024 has upgraded the rating of the WMAS Emergency Operations Centres from Good to outstanding and the rating for Emergency and Urgent Care from Good to outstanding with the overall rating for the Trust is Outstanding for Caring.

Improvement Priorities for 2023/24:

Mental Health

We welcome the continued inclusion of mental health in the improvement priorities as this is an area which is of concern with patients and has been raised with us. We note the actions but are concerned that whilst these are commendable actually evaluating progress will be difficult as there are few objective measurable outcomes.

Patient Experience

The plan to set up a Patient Advisory Committee to include patients, carers as well as Foundation Trust members is clearly welcomed. It's not clear how this committee will draw on individuals to gain representation from counties like Worcestershire and how this will inform the Trust policies and procedures.

Patient Safety Incident Response Framework (PSIRF)

This has been set up as a statutory requirement in 2024 and is transitioned from the previous Serious Incident Framework (SIF). The plans include the use of surveys and focus groups for patient safety

incidents; audit to help reduce complaints and concerns and comparisons of patient response types compared to SIF. We look forward to seeing how this will be implemented and would welcome a breakdown to see the impact in Worcestershire.

Ambulance Handover Delays: The main feedback we receive from patients and carers which is also reflected in the WMAS QA is around response times. We welcome the inclusion of Ambulance Handover Delays as an improvement priority. However, WMAS CQC report, published on 23 February 2024, served a Regulation 12 notice in relation to operational performance standards. In order to maximise operational resourcing to respond to patients in the community a Performance Improvement Plan has been created. The WMAS Quality Report notes that the success of these plans will be determined by a system wide approach in order to achieve a reduction in over 15 minute hospital handovers across the Region.

2. Are there any important issues missed?

Healthwatch Worcestershire's principal concern is that patients who live or work in Worcestershire receive safe and quality services from the Trust.

There has been a change in the delivery of the NHS 111 service. We note that WMAS has handed back the 111 contract it provides for the West Midlands to commissioners. Although this change was announced back in 2022 it went live on 9th April 2023. NHS 111 mobilisation is managed by DHU Healthcare and covers East and West Midlands. There is no reference to the success of the transfer and it is unclear at this time what impact this has had on users of the NHS 111 service in Worcestershire.

There has been a reduction in some CQC ratings that have not been commented on. In the CGQ report on 22nd August 2019 the Trust had achieved an overall rating of Outstanding as a result of five domains achieving Outstanding. In the CQC report published 23'd February 2024 the Trust achieved an overall rating of Good with one domain rated as Outstanding. In one domain 'Is the Service Effective' the rating was downgraded to requires improvement. This was commented on in the WMAS website but not in the Quality Account 2023/24 or the Summary Document.

Healthwatch Worcestershire are aware that there has been discussion between the ICBs and WMAS on the improvement plan to address the CQC ratings. This is also missing from the WMAS Quality Report. We look forward to seeing a report on the impact of this improvement plan in the 2024/25 Quality Report.

Comparing with the 2022/23 QA we are pleased to note that that there has been an improvement in response times in all four categories in 2023/24. However, the 428m 59s achieved against the 120m 90th centile standard for Category 3 and the 502m 20s achievement against the 180m 90th centile standard for Category 4 is quite stark though reflected to some extent in the national figures. We are concerned about the

implications for the rural population of Worcestershire. We note that WMAS has continued to exceed the national average in Category 1 response times.

Reviewing the Ambulance Quality Indicators (AQIs) we are pleased to note that there has been an improvement against previous years for the implementation of the STEMI (95.97% from 77.45%) and Stroke Care (99.44% from 87.15%) bundles. The Cardiac arrest numbers are slightly lower than last year and have a wide variation so unable to determine the clinical performances in Worcestershire. There is no commentary on achievements for the Sepsis bundle.

3. Has the provider demonstrated that they have involved patients and the public in the production of the Quality Account?

There is no other evidence that patients and the public have been involved in the production of the Quality Account beyond the normal feedback gained from compliments and complaints received by WMAS. In particular, we are not aware of the extent of patient engagement by WMAS in Worcestershire but would welcome any contact with the Public Governor representing the county. Maybe the Patient Advisory Committee will have a role in next year's Quality Accounts – further detail on this would be welcomed?

4. Is the Quality Account clearly presented for patients and the public?

The Summary Document that has been provided is a useful overview in an accessible format. It is hoped that that versions will be made available for those who need other presentations. As WMAS covers a number of counties across the West Midlands a breakdown to county level would be useful. The patients, carers and service users across Worcestershire would benefit from being able to compare WMAS performance across the different geographies that make up the West Midlands.

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