

OVERVIEW & SCRUTINY COMMITTEE – CONSIDERATION OF AMBULANCE RESPONSE TIMES MOTION

Summary: This report is written for the Committee to consider its response to resolutions reached by Council with regards to an ‘Ambulance Response Times’ motion. It will identify the key issues and responsibilities that require consideration, with an aim to establish a recommended course of action for the Committee.

Options considered: Options considered include establishing a Working Group to monitor and review ambulance response times, requesting that NHOSC continue to closely monitor ambulance response times for North Norfolk, to invite representatives of EEAST and the North Norfolk CCG to explain service deficiencies, consider how best to support community first responders, or do nothing.

Conclusions: This report suggests that whilst it is not the responsibility of the NNDC Overview & Scrutiny Committee to monitor ambulance response times, which is a core responsibility of NCC’s NHOSC Committee, it is still within the public’s interest for the Committee to invite representatives to provide an explanation for service deficiencies. Furthermore, the Committee may be able to identify steps to help support and improve the work of Community First Responders to help alleviate issues caused by waiting times.

Recommendations:

- 1. That the Committee invite representatives of EEAST and the North Norfolk CCG to provide a briefing on the poor performance of ambulance response times and the efforts being made to address the issue.**
- 2. That the Committee works closely with NHOSC and the NNDC appointed representative to monitor and review ambulance response times.**
- 3. That the Committee consider the role of Community First Responders and options to support/improve the service.**

Reasons for Recommendations: To provide guidance to the Committee on the most appropriate course of action

LIST OF BACKGROUND PAPERS AS REQUIRED BY LAW

(Papers relied on to write the report, which do not contain exempt information and which are not published elsewhere)

Cabinet Member(s): Ward(s) affected:
All

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2.1 Introduction

1.1 At a meeting of Council held in November 2019, a motion was passed regarding increasing concerns around ambulance response times within the district. It was suggested that even the best performing areas across the district, a response to the most urgent calls was received within 8 minutes 35% of the time, whilst in the worst performing areas it was 2% of the time.

1.2 It was suggested within the motion that ambulance response times in Wells-next-the-Sea were amongst the worst in the Country. This statement is supported by BBC research undertaken in March 2019, that suggests that people in Wells-next-the-Sea wait on average 21 minutes, compared to the national rural average of 11 minutes for serious conditions, such as heart attacks or breathing issues <https://www.bbc.co.uk/news/uk-england-norfolk-47456439>.

1.3 The motion was amended so that the voluntary community first responders that support the ambulance services, be offered additional training and support. The motion was passed with the following resolutions:

“1. That Council request that voluntary community first responders be offered additional training and support in order to aid the ambulance service in North Norfolk.

2. This Council therefore asks the Head of Paid Service to write to the CEO of EEAST asking what specific actions will be put in place so that response times improve significantly in the next six and then 12 months. Additionally what steps are they taking to address the issues raised in their last CQC report.

3. This Council writes to the government Minister responsible and asks what steps government are taking to address the continued failings of the EEAST including:

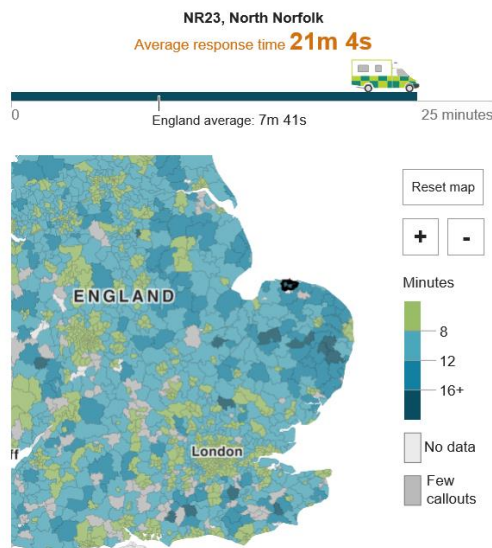
- What steps are they taking to improve waiting times?
- What the Government intend to do to address the shortages of vehicles and staffing in the Ambulance Service to alleviate the current problems in existence, and to make the Service efficient for the 21st Century ensuring that it meets its required times
- What the government intend to do to resolve the issue surrounding ambulances being delayed at hospitals and being unable to hand patients over for care in a timely manner.

4. This Council also requests that the Overview & Scrutiny Committee explores the option of creating a working group to track progress on this item and to engage with EEAST on an improvement programme.”

2.2 Background

2.1 Clustered data on ambulance response times across the country is available at various sources such as those collated by the BBC, or by organisations such as Totally Communications. In either case, heat mapped data confirms that there is a clear cause for concern across much of the county and in North Norfolk specifically.

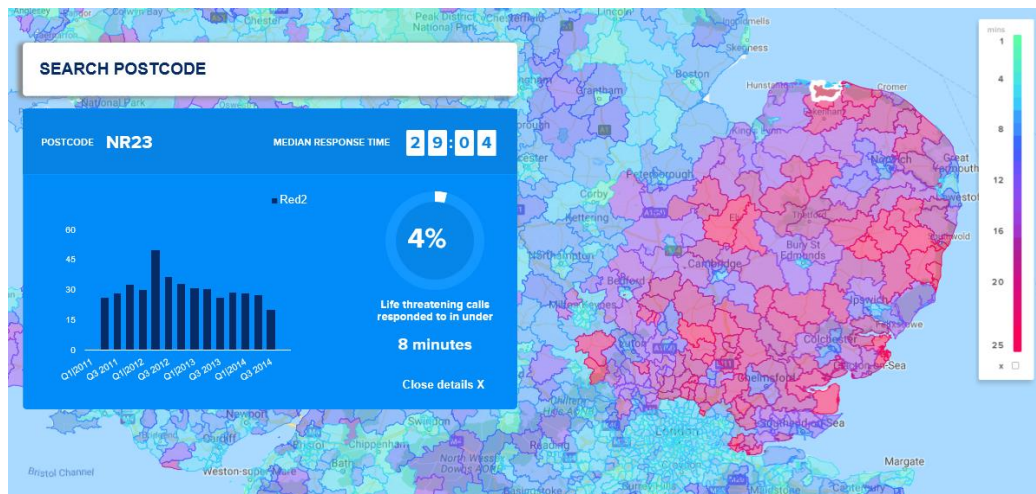
2.2 Source: <https://www.bbc.co.uk/news/health-47362797>



Contains OS data © Crown copyright and database rights 2018. Source: Ambulance trusts. Data is shown for postcode districts with more than nine highest category callouts in January-October 2018. Districts with 10-49 callouts are labelled "low numbers". Northern Ireland does not use comparable categorisation.

2.3 Using FOI requests, BBC News obtained the average response times for the most life-threatening callouts in more than 2,700 local communities across Britain. These times cover the point at which a trained person reaches the patient, so it could be an ambulance or volunteers trained by the service to respond to these highest-priority cases.

2.4 Source: <http://www.ambulanceresponsetimes.co.uk/>



2.5 Totally Communications sent 14 FOI requests to each ambulance trust in the country. The response time of each 999 call since 2011 was requested, including the category of the call and postcode district. The colour of each polygon is based on the median response time for the financial year 2013-2014 and it only considers those postcode districts where there are more than five calls in the whole period. The percentage of calls responded within eight minutes is also based on the data for this year.

- 2.6 After consultation with the Scrutiny Team Manager responsible for managing the Norfolk Health Overview & Scrutiny Committee (NHOSC) at Norfolk County Council, it was confirmed that NHOSC do monitor ambulance response times across Norfolk on an annual basis. Furthermore, due to increasing concerns over the extent of waiting times, it is possible that the frequency of review could increase at the request of Committee Members.
- 2.7 The overall remit of NHOSC is to consider all matters relating to the needs, health and health related-services of the population of Norfolk. It scrutinises services that have an impact on the health of Norfolk's citizens and challenges the outcomes of interventions designed to support the health of Norfolk people. Subsequently it is clear that all aspects of emergency response are covered by NHOSC, which suggests that it may not be an effective use of time for the NNDC O&S Committee to establish a Working Group to monitor an issue that is already being reviewed elsewhere.
- 2.8 A further issue worthy of consideration in relation to emergency response times, is to look at the bigger picture. Both the work of NHOSC, and weekly NHS 'Sitrep' reports on ambulance turnaround times suggest that response times are significantly affected by turnaround delays at A&E Departments. This could suggest that a further cause of emergency response delays beyond those of rurality or too few emergency vehicles could be systemic, with A&E departments across the country facing severe pressures.
- 2.9 In response to the known issues, NHOSC has made the following recommendations over the past five years:
- That EEAST reviews the number and location of ambulance bases in Norfolk in relation to travelling times to the hyper acute stroke units with a view to achieving the Stroke 60 standard in all parts of the county.
 - That the Norfolk and Waveney Stroke Network seeks assurance from the three acute hospitals in Norfolk that they report back to EEAST on failures to provide pre-alerts of the arrival of stroke patients so the problem can be quantified and appropriately addressed and that EEAST identifies a lead for stroke with whom the hospitals can liaise consistently.
 - That the NNUH, JPUH, QEH and EEAST consider what more could be done to enable the ambulance service and the acute hospitals to work together to shorten the diagnosis time for stroke.
 - That EEAST focuses on improving its performance by ensuring that double staffed ambulances are first on scene to a higher proportion of suspected stroke patients and that patients are transported to hospital without delay.
 - Asked EEAST to consider involving service users in a workshop currently being arranged on the conveyance of mental health patients to hospital & other facilities.
 - Asked NN CCG to ensure that the outstanding FOI requests from Cromer Town Council regarding fine monies relating to EEAST and Norfolk & Norwich Hospital under the former financial penalties regime receive a response.

- 2.10 Overall it may be difficult to identify anything more that EEAST and other local NHS organisations could do to improve ambulance response times with available funding, beyond what they are already doing. As a result, it may be more beneficial to seek to reduce pressure on these services by helping to promote the non-emergency services number 111, supporting community first responders, or reducing the number of people using A&E services to improve ambulance turnaround times.

3. Options for Consideration

- 3.1 Within the NNDC constitution it is noted that Scrutiny may take a wider role in examining matters of concern to local communities, such as those related to health. In addition, it is stated that the Committee may invite representatives of public bodies or other from other areas of the public sector to attend meetings. With regards to ambulance response times and community first responders, the most appropriate representatives are:

- Mark Burgis - Chief Operating Officer, North Norfolk CCG
- Terry Hicks - Senior Locality Officer, EEAST
- David Russell - Norfolk & Waveney Patient Engagement Representative with EEAST

- 3.2 It has been confirmed that a key responsibility of NHOSC is to monitor ambulance response times across Norfolk. This data can be fed back to the NNDC O&S Committee via the appointed representative. As a result, rather than establish a Working Group to repeat this process, it would be more beneficial for the Committee to request that the NHOSC increase its current ambulance response times monitoring to six-monthly, to ensure that EEAST and the relevant CCGs across Norfolk are held to account if they fail to meet the target response times.

- 3.3 That consideration be given to the role of community first responders, including information being sought on the number and location of those already active in Norfolk. The Norfolk & Waveney Patient Engagement representative with EEAST should be questioned on how best to support the existing community first responders via training, additional recruitment, or other means.

- 3.4 The Committee could choose to do nothing, on the basis that monitoring ambulance response times is neither a requirement or responsibility. However, in doing so, the Committee could potentially ignore local issues that require district specific knowledge.

4. Conclusion

- 4.1. In conclusion, whilst the NNDC Overview & Scrutiny Committee is not the most appropriate body to undertake continued monitoring of ambulance response times, the issue remains crucially important to the people of North Norfolk.
- 4.2. As noted throughout the report, NHOSC is the most appropriate body to continue monitoring ambulance response times across the region. However, it may still be beneficial for the NNDC O&S Committee to invite the relevant officers from both EEAST and the North Norfolk CCG to explain the reasons for service deficiencies, as well as answer questions on North Norfolk

specifically. This could provide a level of focus on the district of North Norfolk that may be overlooked by NHOSC, when reviewing the issue across the wider county.

5. Implications and Risks

- 5.1. This report has wider implications for the level of service provided by EEAST in North Norfolk. Whilst it is noted in the report that it is not the responsibility of the NNDC Overview & Scrutiny Committee to monitor this service, ignoring the issue could allow for district specific issues to go ignored.

6. Financial Implications and Risks

- 6.1. There are no financial implications or risks as a result of this report.

7. Sustainability

- 7.1 There are no sustainability considerations to note as a result of this report.

8. Equality and Diversity

- 8.1 There are no equality and diversity considerations to note as a result of this report.

9. Section 17 Crime and Disorder considerations

- 9.1 There are no crime and disorder considerations to note as a result of this report.