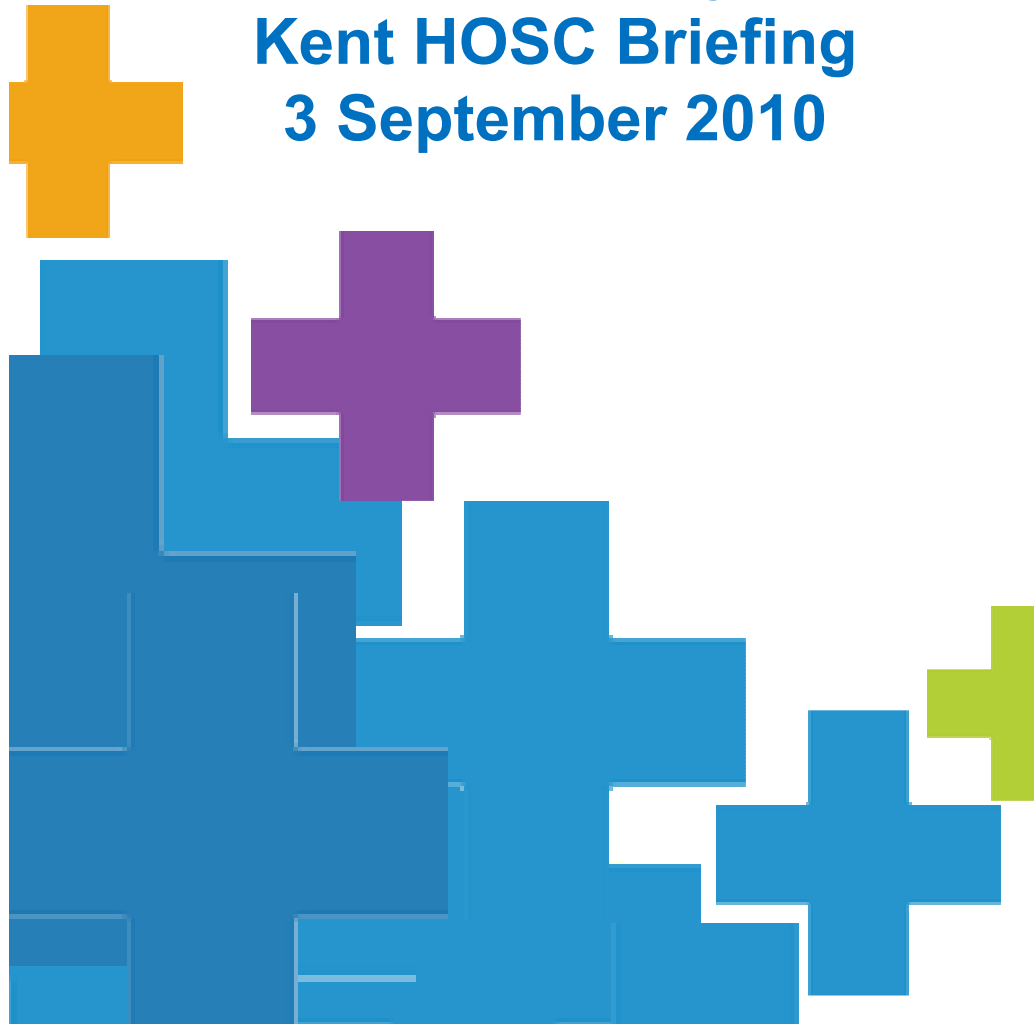




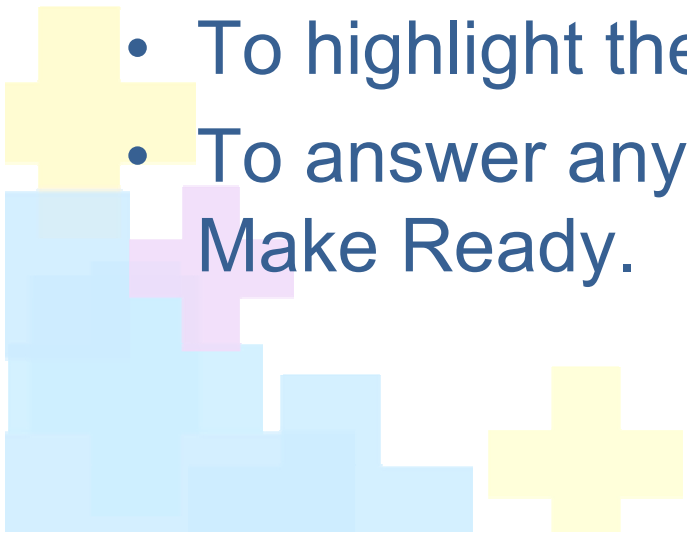
Make Ready Kent HOSC Briefing 3 September 2010





Aim

- To provide you with an overview of Make Ready and how it will be rolled out throughout SECAmb.
- To up-date you on our plans to introduce Make Ready in Kent and what it means for staff and patients.
- To highlight the benefits Make Ready brings
- To answer any questions you may have on Make Ready.

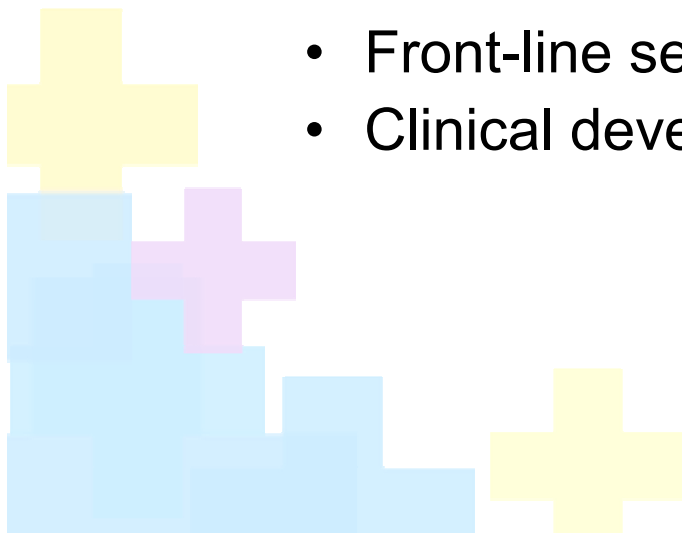




Drivers For Change

Why are we doing it?

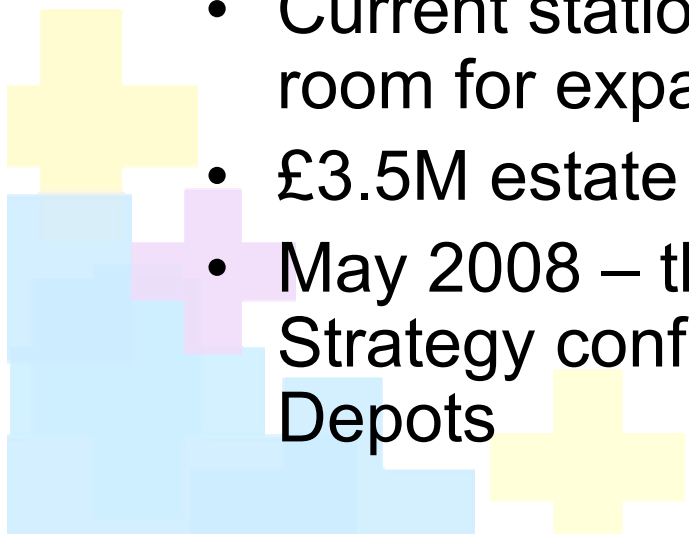
- A key part of our vision & our commitment to providing the best possible services to patients
- Helps to tackle the challenge of Infection Control
- Reduces risk – to staff, vehicles and equipment
- Release efficiencies to permit investment in:
 - Front-line services and staff
 - Clinical developments and innovation





Context for Change

- Old estate (68% built pre 1974)
- Often mal-located, which impedes response.
- Speed of response is key to clinical outcomes
- Patient demand/location changes – static stations cannot and do not reflect these changes
- Current stations are often “bulked out”, with no room for expansion
- £3.5M estate backlog maintenance
- May 2008 – the approval of the Trust’s Estate Strategy confirmed the move to Make Ready Depots



So, what is the definition of Make Ready?

A photograph taken from the driver's perspective inside a vehicle. In the center, an ambulance is driving away on a multi-lane road. The ambulance has 'AMBULANCE' written on its rear and features high-visibility yellow and red diagonal stripes. The background shows a clear sky, streetlights, and some trees. The foreground shows the dashboard and a rearview mirror of the vehicle from which the photo was taken.

“A crew friendly quality assurance vehicle and equipment preparation programme designed to minimise cross infection and maximise patient safety.”

NHS
South East Coast

**best of
health
awards**
2009

The South East Coast regional heat of the
Health and Social Care Awards 2009
Passionate People Innovative Ideas Transforming Care

South East Coast Ambulance Service **NHS**
NHS Trust



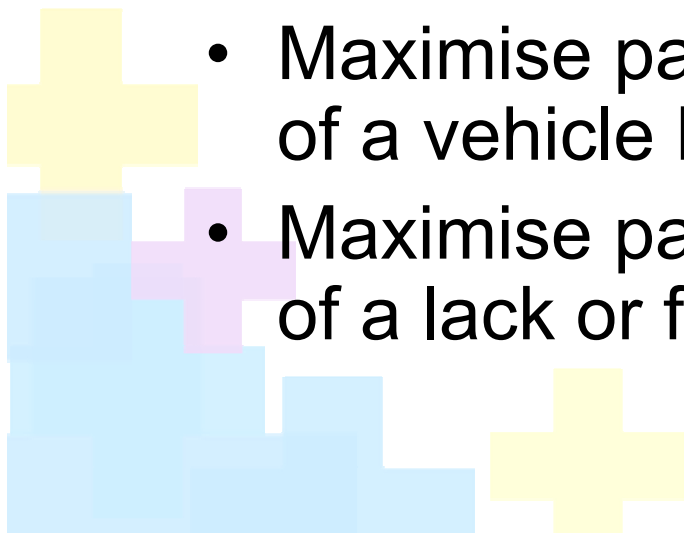
Award Winning

- 2009 Regional Winner Best of Health Awards for Patient Safety.
- 2009 – commended by CQC and recommended for roll out across the English ambulance services.
- 2009 – visits by, NPSA, UK ambulance services, BF Cyprus.



Benefits - maximise patient safety

- Maximise patient safety through a rigorous vehicle and equipment cleaning and infection control regime
- Maximise patient safety by maximising the hours clinicians can see patients
- Maximise patient safety by minimising the risk of a vehicle breaking down en route
- Maximise patient safety by minimising the risk of a lack or failure of key clinical equipment





Concept

- All resources start and ends their shift at large central depots
- Depots are supported by a network of Ambulance Community Response Posts (ACRP)
- ACRPs are aligned with patient demand and provide locations from where crews will respond during their shifts
- The move to Make Ready will see staff responding from more, not less, locations (more ACRPs than stations)
- Some ACRPs will be former stations, if in the right, patient-led location.
- All ACRPs have an agreed set of crew facilities
- ACRPs can be moved in response to changes in demand



Planning Assumptions – Depot Locations May 10





Depot Locations

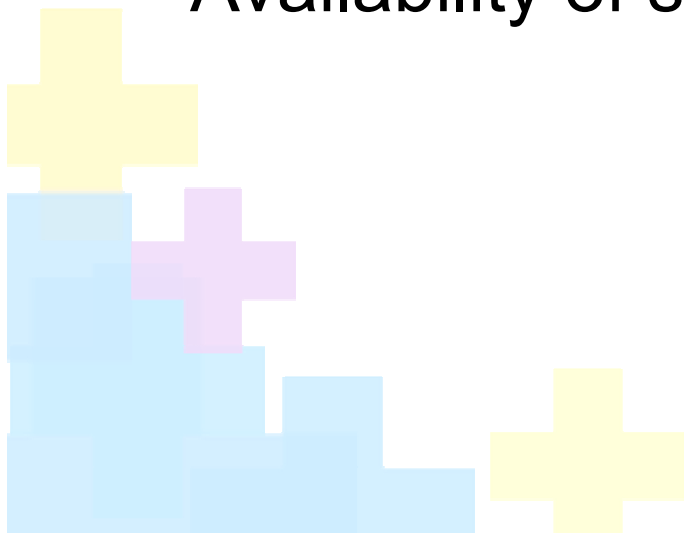
- Chertsey (Open)
- Hastings (Open)
- Thanet (Open)
- Paddock Wood (Summer 11)
- Ashford (Autumn 11)
- Polegate
- Medway
- Brighton
- Redhill
- Crawley
- Guildford
- Arundel

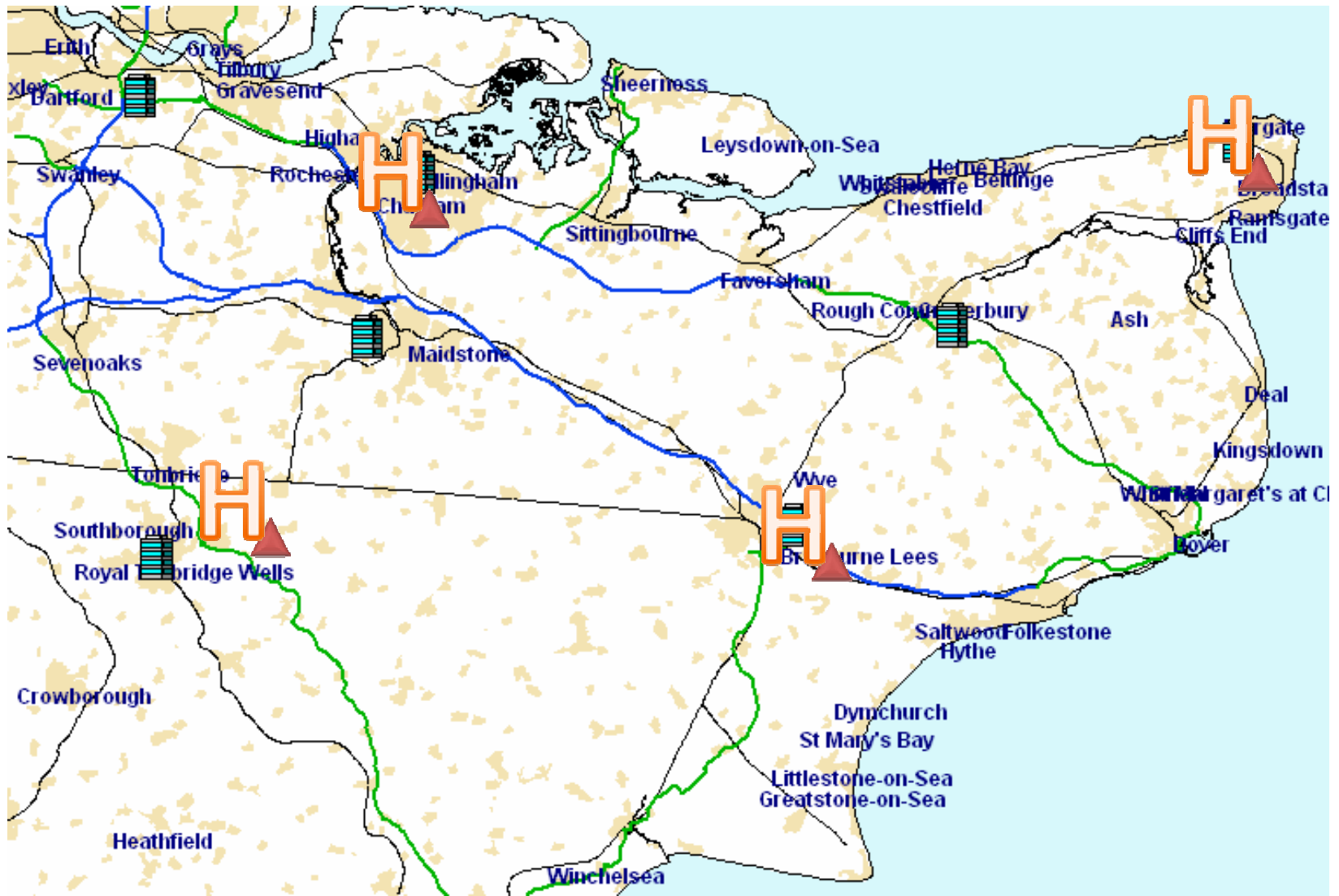




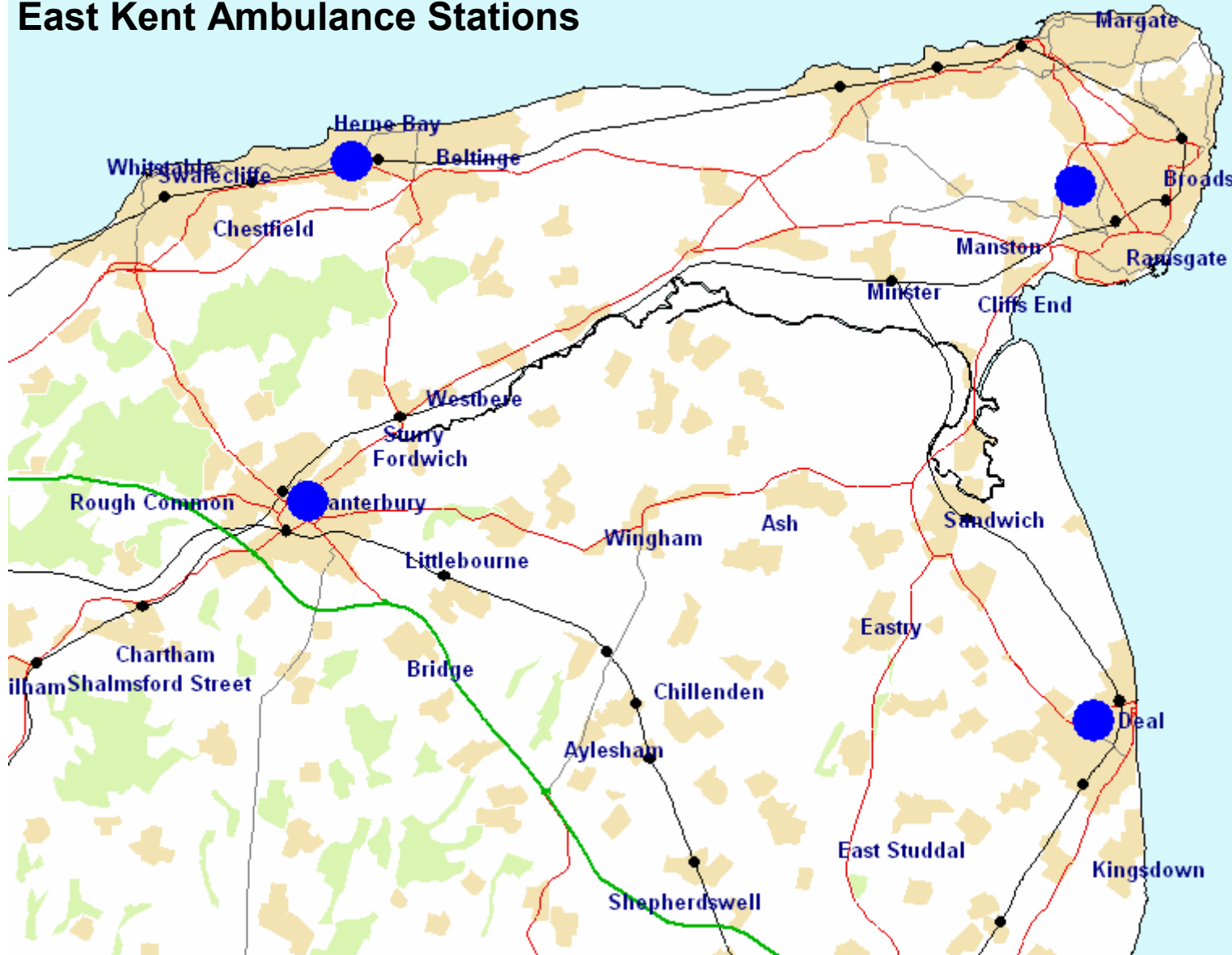
How are depot locations chosen?

- Central to the operational dispatch areas geographically
- Located close to main hospitals
- Enabling good access for all staff in the area
- Availability of suitable sites



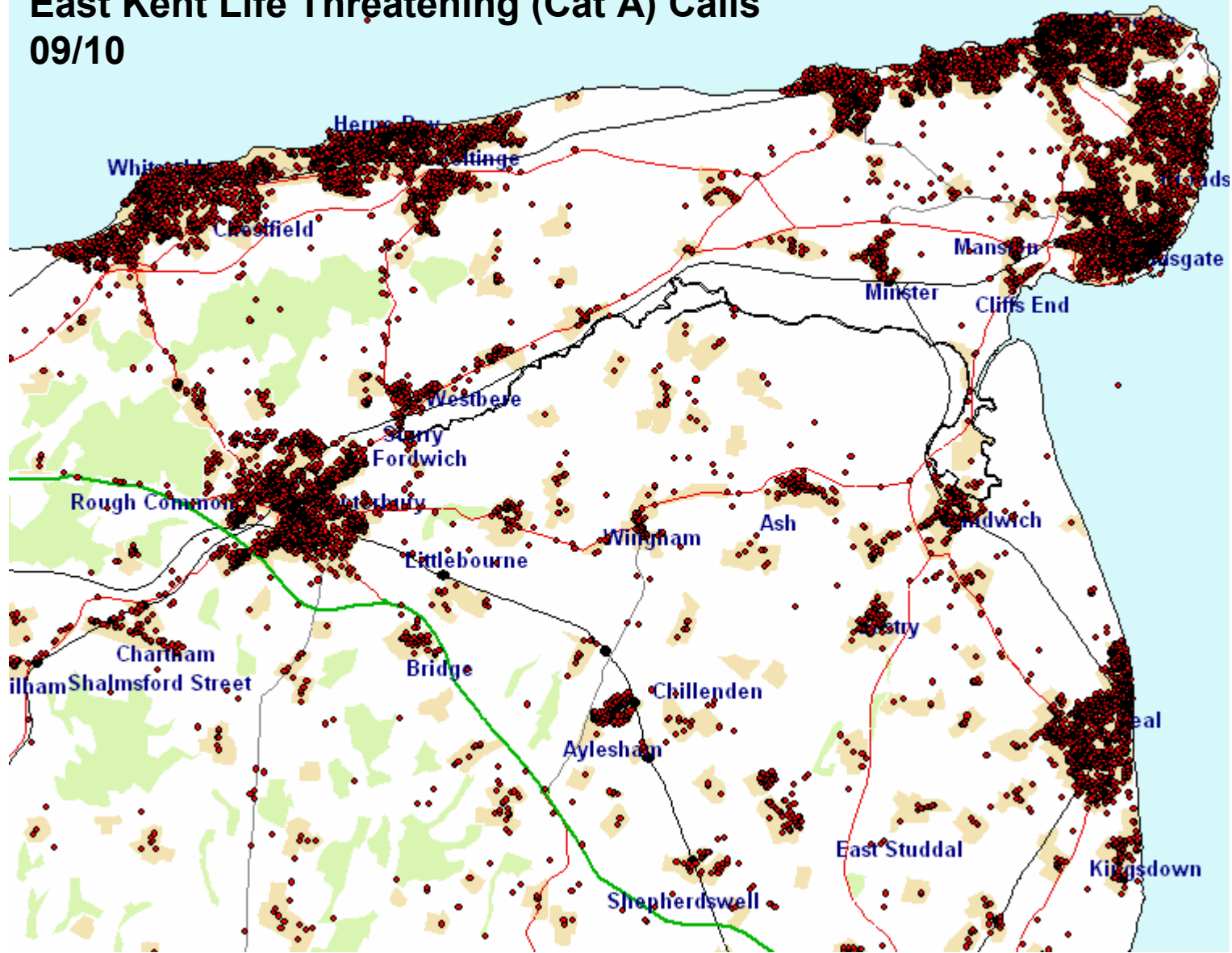


East Kent Ambulance Stations

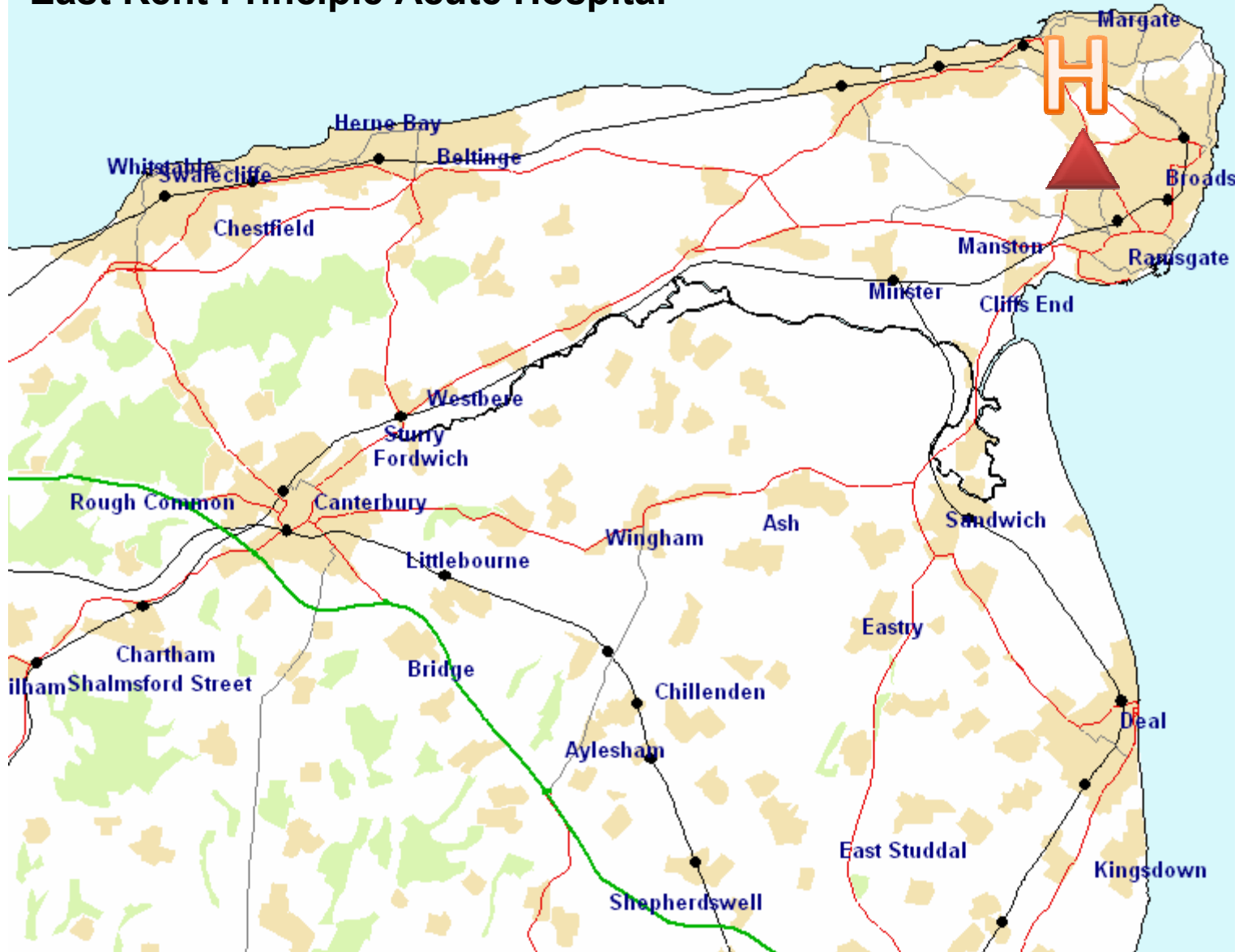


East Kent Life Threatening (Cat A) Calls

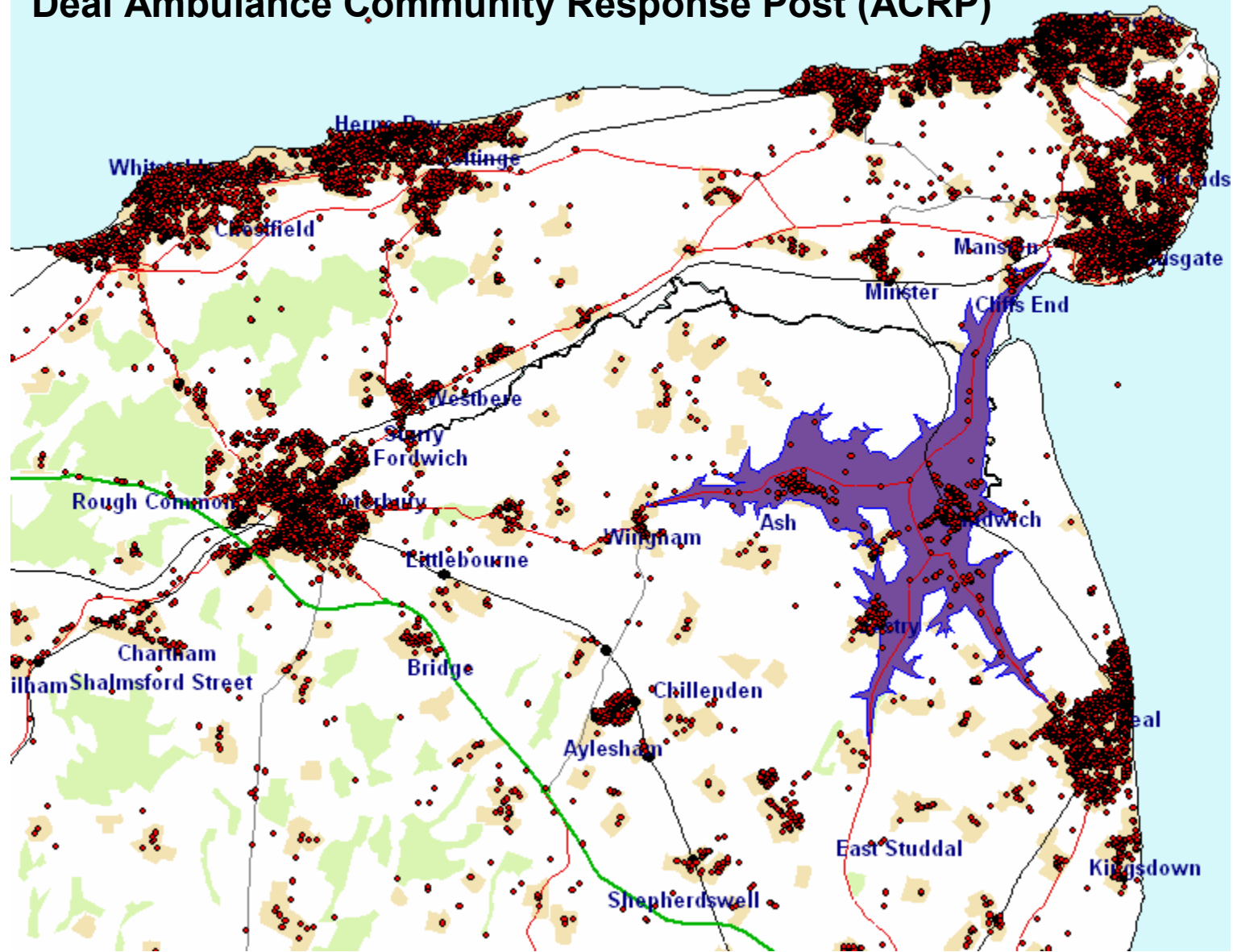
09/10



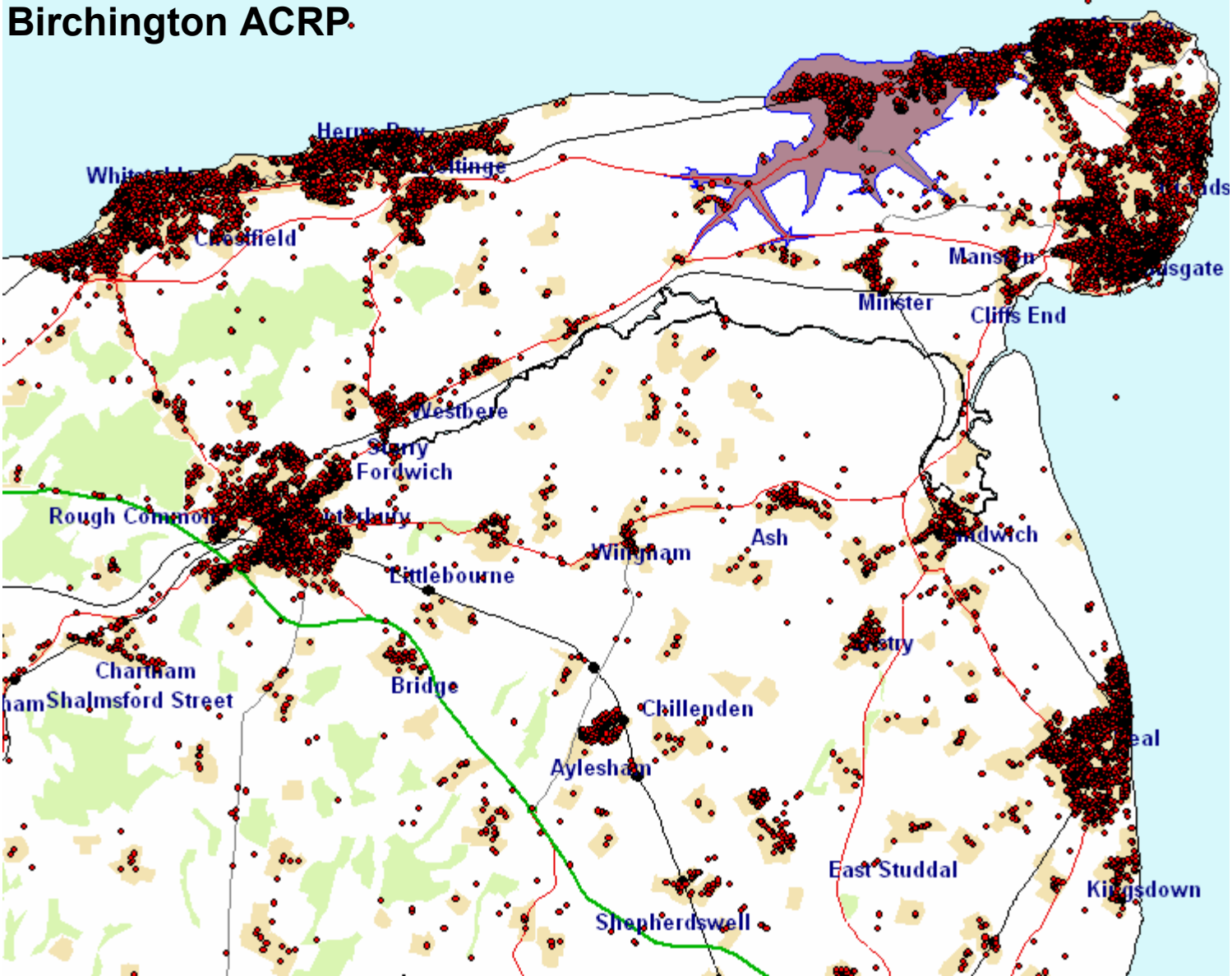
East Kent Principle Acute Hospital



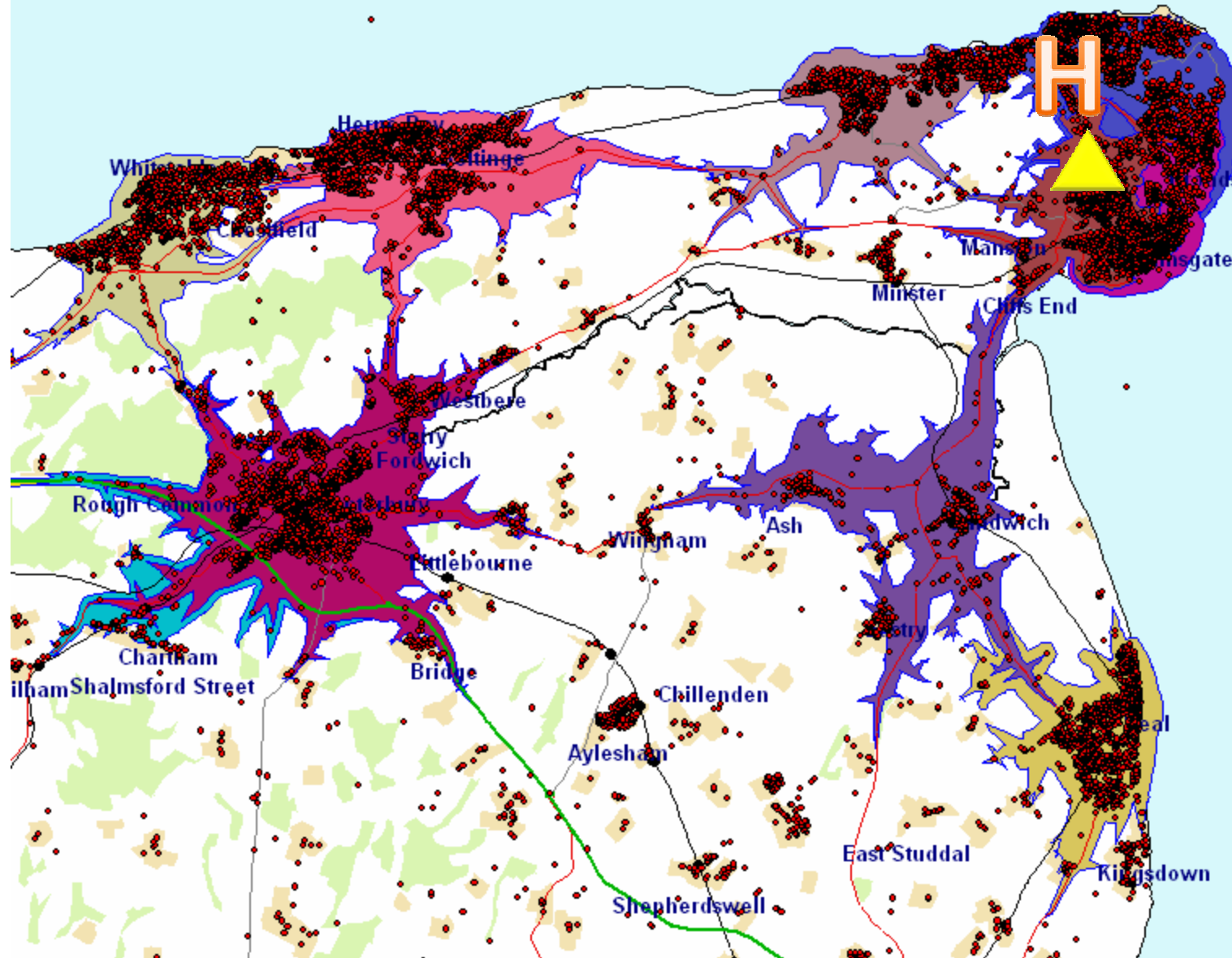
Deal Ambulance Community Response Post (ACRP)



Birchington ACRP



10 ACRPs Located In Line With Patient Demand








Improved infection control through deep cleaning programme

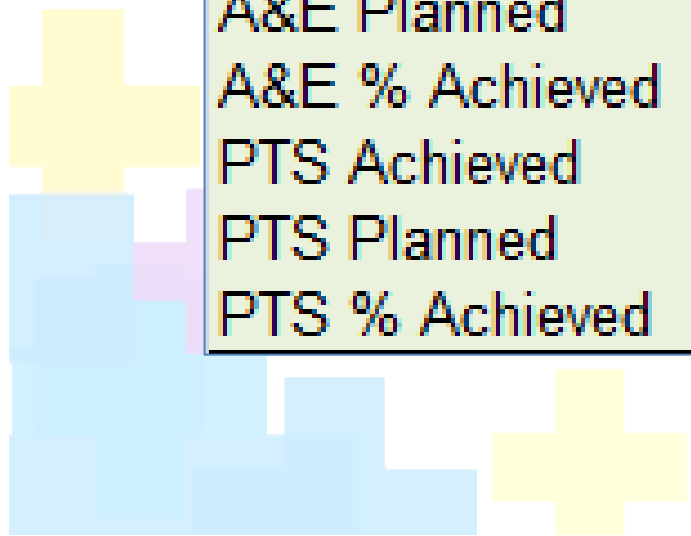
- Undertaken every six weeks
- Linked to vehicle servicing schedule
- All equipment removed
- Vehicle serviced
- Vehicle deep cleaned
- Vehicle restocked





Key Performance Indicators

Year	09/10	
Month	(All)	
Sum of HASTINGS		
Vehicle Deep Cleaned		Total
A&E Achieved		152
A&E Planned		158
A&E % Achieved		96.2%
PTS Achieved		431
PTS Planned		454
PTS % Achieved		94.9%





Monthly Swab Testing

Eclipse Scientific Group, Medcalf Way
Bridge Street, Chatteris
Cambridgeshire, PE16 6QZ
Telephone: 01354 695858
Fax: 01354 692215
E-Mail: enquiries@esglabs.co.uk
Web Site: www.eclipsescientific.co.uk



Page 1 of 3

TEST CERTIFICATE

Mr Roland Conn
Lightbridge Support Services
1 Stangate House
Stanwell Road
Penarth
CF64 2AA
Fax: 0208 7560845

Certificate Number: TOHT296774-1 Final

Order Number: Secamb-Kent

Date Analysis Started: 04/09/2008

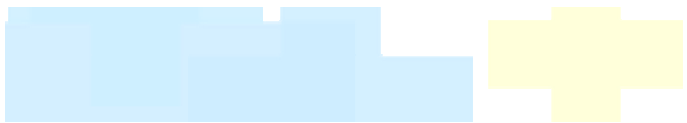
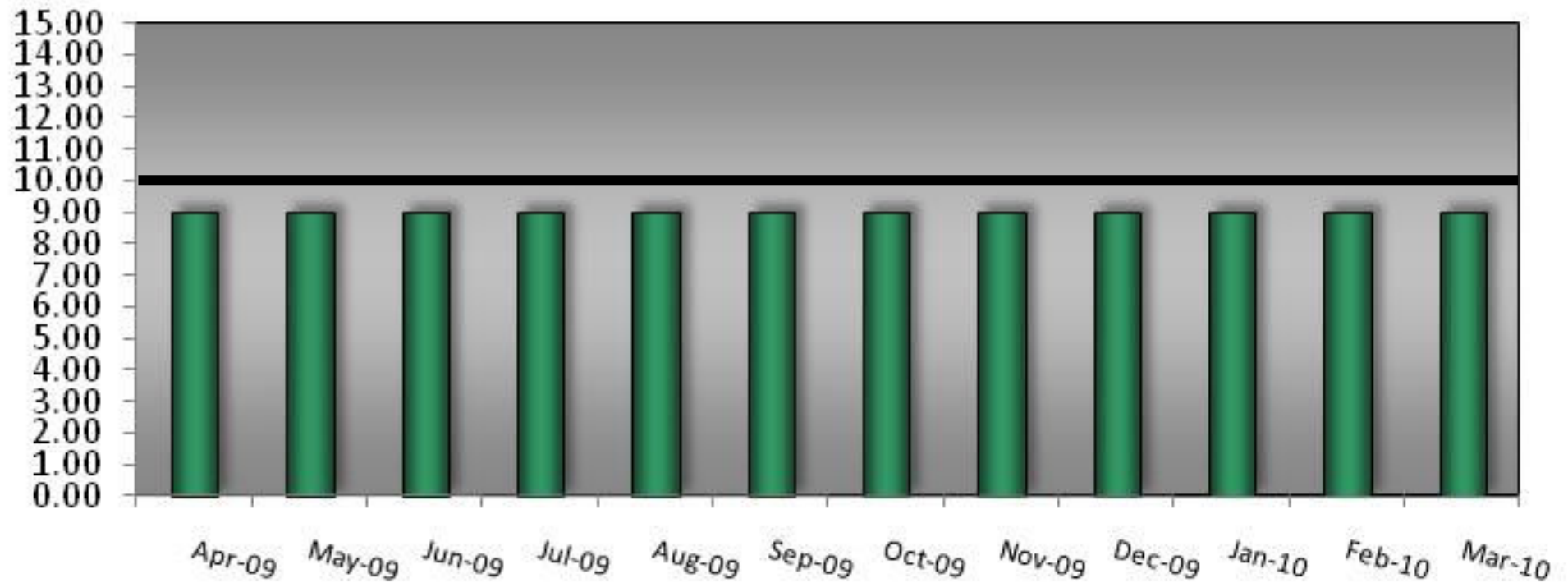
Date Reported: 08/09/2008

Lab Ref.	Sample Details	Method Number	Test	Result	Units	Flag
OHT1184370	Desc: Medway 394 - Trolley Mattress. Sampled on 03/09/08 @ 02:10. Received Date: 04/09/2008 Order No: secamb-kent ARF No: 151015 Suffit: tvc, ent,staph Contact: Roland Conn	ESGM-M300	Total Viable Count, 3 days 30°C	10	cfu / Area Swabbed	
		ESGM/303	Enterobacteriaceae (presumptive)	<10	cfu / Area Swabbed	
		ESGM-M307	Staphylococcus aureus	<1	cfu / Area Swabbed	
OHT1184371	Desc: Medway 394 - Front Patient Seat. Sampled on 03/09/08 @ 02:12. Received Date: 04/09/2008 Order No: secamb-kent ARF No: 151015 Suffit: tvc, ent,staph Contact: Roland Conn	ESGM-M300	Total Viable Count, 3 days 30°C	<10	cfu / Area Swabbed	
		ESGM/303	Enterobacteriaceae (presumptive)	<10	cfu / Area Swabbed	
		ESGM-M307	Staphylococcus aureus	<1	cfu / Area Swabbed	



Trust Vehicles – CDiff Profile

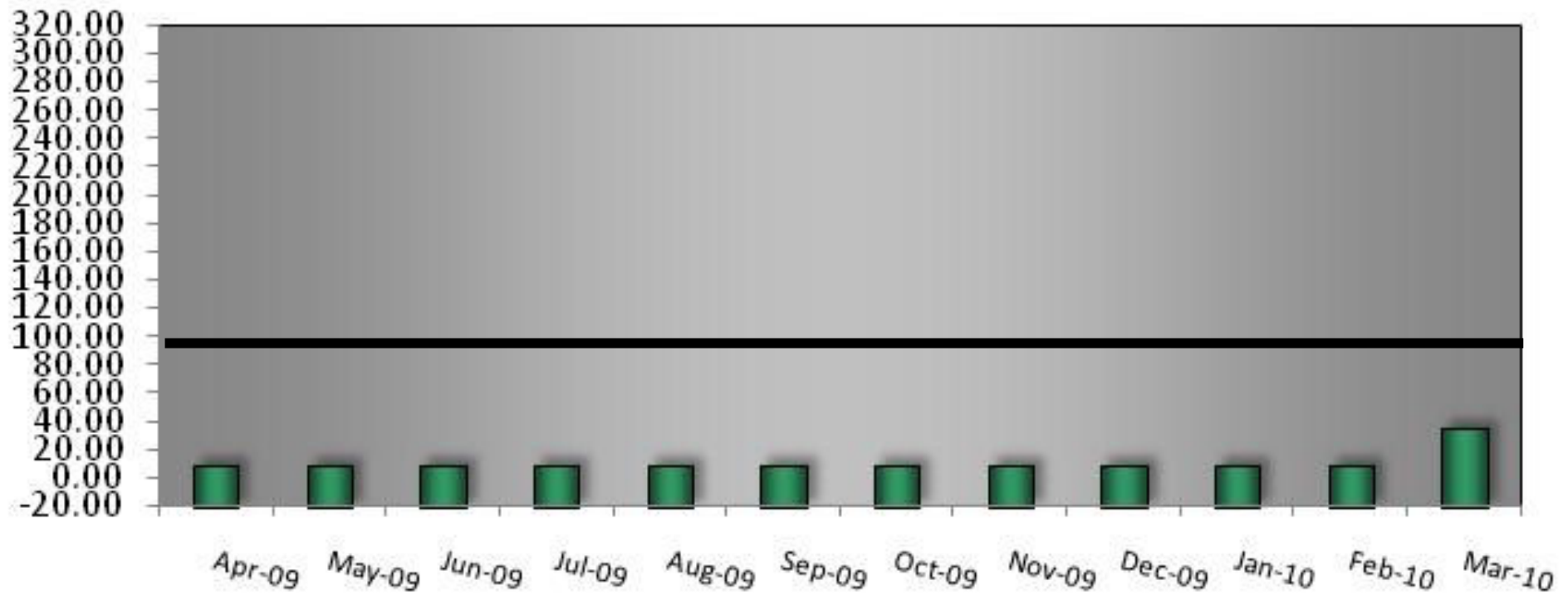
Clostridium Difficile





Trust Vehicles - Enterobacteracea Profile

Enterobacteracea





Benefit Analysis – in summary

- Improvements to patient & staff safety
- “Liberate” clinician time lost currently at start, during and end of shifts
- Reduce stock through improved management and reduced wastage
- Standardise equipment on every vehicle
- Reduce overall fleet size, through better use
- Improve infection control rates
- Reduce vehicle break downs
- Improved management of staff and issues through on site management presence
- Benefits through economies of scale
- Meet environmental standards
- Modernise the estate
- Reduce estates running costs.
- Improve work/life balance for staff through introducing a variety of shift patterns



Q&A Session

