

Report to Kent HOSC on 8 April 2016 From NHS Swale CCG regarding South East Coast Ambulance Service NHS Foundation Trust (SECamb)

Background information

Following an unauthorised call handling project carried out by NHS South East Coast Ambulance NHS Foundation Trust (SECamb) between December 2014 and February 2015, the regulator Monitor requested a forensic review be undertaken into the circumstances, governance and decision-making surrounding the project. This review, undertaken by Deloitte UK, is now complete and was published on 15 March 2016, (available at www.secamb.nhs.uk). A further independent review, to identify the impact the project had on patients, is underway and due for completion later this year.

We, as the lead commissioner for Kent and Medway, will continue to stringently monitor SECamb's progress and further support the Trust to strengthen internal governance arrangements, towards a safer and more effective ambulance service.

The Kent Health Overview and Scrutiny Committee have specifically asked three questions of commissioners:

1 The commissioners' response to the reviews and next steps

As lead commissioners of ambulance services across Kent and Medway, in conjunction with our colleagues in Surrey and Sussex, NHS Swale CCG's priority is to ensure a safe and high quality service for patients. We are working closely with the new Chair at SECamb, and regulators, so that the Trust is fully supported to deliver the necessary improvements with pace, in line with the findings of the reports.

We have written to the Trust to formally require a Remedial Action Plan to address the governance issues in the report, and to also ensure that Response Performance is improved and that the actions to improve quality and safety are all delivered within one overall prioritised plan. This plan is being finalised at the time of writing this report.

This plan will be scrutinised by commissioners through regular review meetings at executive level, detailed investigations into specific areas and ongoing testing to check that changes have been put into practice at an operational level. Overall accountability will be part of the formal contract and performance management will be carried out by the accountable officers in the Strategic Partnership Group as described below.

2 The commissioners' plans to improve oversight

Since the initial review last year, the commissioners have improved the oversight and assurance processes for managing Trust performance. The actions include:

- Locally focussed contract management arrangements to ensure closer scrutiny from co-ordinating commissioners and their respective local commissioning associates in for each contract area:
 - Kent and Medway
 - Surrey
 - Sussex
- Formal governance for the lead commissioners for each of those contracts to collaborate and ensure a single focus for the Trust on areas which require consistency. This is established through a formal Strategic Partnership Group at Accountable Officer level, and a joint Clinical Quality Review Group and is supported by a clear process to facilitate clarity of decision-making
- Visibility of all proposed Trust projects and pilots with a process of ensuring that projects and pilots requiring formal approval are scrutinised and decisions are recorded
- Co-ordination of contract management processes to enable a consistent focus on key issues, with improved use of contractual mechanisms in holding the Trust to account
- Review of Performance Review Meetings' structure and delivery to ensure clarity of decision-making.

3 The commissioners' plans to develop Trust/Commissioner engagement

The commissioners recognise that senior executive engagement with the Trust needs to be broader, ensuring the wider Trust Executive Team is involved in performance management. This has already been improved and will be developed further through the Remedial Action Plan process. Current progress is outlined below:

- The Trust Executive Team is invited to the Strategic Partnership Group with the commissioners' accountable officers
- Clinical executive directors are involved in the Clinical Quality Review Group
- Board to Board meetings have been held to engage the Trust's non-executives with the NHS Swale CCG Governing Body
- The Chief Operating Officer for the Trust has been leading the R1 and R2 response Remedial Action Plan
- The commissioners' quality leads (including Surrey and Sussex colleagues) have been working with the relevant Trust leads to undertake detailed reviews of the changes that have been put in place.