



September 2016

Patient focused, providing quality, improving outcomes

1 Purpose

The purpose of this report is to review the progress of the new Kent and Medway Patient Transport Service (PTS), procurement and mobilisation.

2 Background

The new and improved patient transport service was launched across Kent and Medway on 1 July 2016. Tough new measures to raise standards have been introduced, with greater emphasis on customer care and getting patient's home from hospital promptly.

Three separate contracts were let during the process to cover the specific geographical scope of Kent and Medway and journeys for renal patients.

The new services are provided by G4S which took over from NSL, whose contract expired on 30 June.

G4S's performance will be measured against a Patient Charter, developed by people who use patient transport services in Kent and Medway. There are tighter timescale targets for collecting and dropping off patients before and after their appointments or when going home after an inpatient stay.

The criteria for eligibility for patient transport services have not changed – these are set nationally.

The procurement and mobilisation of the new service was led by NHS West Kent CCG, and overseen by key stakeholders, which included representatives from all the Kent and Medway CCGS, Kent and Medway Acute and Community NHS trusts and patients. These key stakeholders worked intensively over many months with NSL and G4S to ensure a smooth handover for patients.

The patient transport service provides free transport for people whose medical condition means they cannot get to or from their place of care (a hospital, hospice or clinic) in any other way. Eligible patients can book transport to get them to and from outpatient and inpatient appointments.

For further information about the new patient transport service in Kent and Medway, including a leaflet, poster and feedback form, please visit www.km-pts.co.uk

3 Aims and objectives

Project Aim

The aim of the PTS reprocurement project was to procure a non-emergency patient transport service for Kent and Medway patients from July 2016 to a specification codesigned with stakeholders, that delivered a twenty four seven service with:

- A high level of reliability.
- A quality service for patients, service providers and commissioners.
- Efficient booking and control.
- Value for money.

The high-level objectives supporting these aims were:

- To specify service requirements ensuring that highly effective quality management information, contracting and management processes are put in place to support the service redesign.
- To ensure that the service redesign maximises opportunities for partnership working and is congruent with the whole system and the specific local health economies of West Kent, East Kent, North Kent and Medway including other PTS service providers.
- To ensure that governance, assurance and decision making processes, are transparent and effective.
- To re-procure and mobilise the service with the new operating model effective from the end of the current contract.
- To effectively manage and assure the mobilisation of the new contracts and move to a BAU state in a timely and robust manner.

4 Mobilisation overview

Given the size and complexity of the services commissioned and the considerable improvement in the service standards required, all three contracts mobilised successfully on 1st July.

It is not possible at this early stage to compare how well the G4S contracts are performing against that previously delivered by NSL particularly given the significant changes to service standards. Kent and Medway acute and community trust stakeholders have consistently reported that they feel there has been wide spread improvement since the contracts commenced on July 1.

The transfer of data from NSL was smooth and there were no material impacts to patient journeys.

Stakeholder engagement and communication particularly with acute hospital trusts has been strong throughout the mobilisation process.

The key performance issues of concern during mobilisation included:

- The allocation of a limited amount of resources and planning arrangements to meet some of the activity demand particularly in the west.
- Poor data quality, and some resource and planning arrangements for a number of renal journeys in the west of the county particularly journeys to and from Guys and St Thomas' hospital Trust (GSTT), sites in Tunbridge Wells and Sidcup.
- The availability of resources to continue with the good will transport arrangements
 previously in place with the Hospice in the Weald. These transports are not part of
 the core contract. It was agreed pre mobilisation that these transports would only be
 undertaken if there were sufficient resources available. This has often not been the
 case.

The factors that led to these issues have all been identified and have been or are actively being resolved.

There was some media interest during the first few weeks of the service that was mostly generated by the problems experienced by some dialysis patients in the west. These were all responded to in a timely way. All patients that were known to have received a poor service have received a letter of apology.

A review of mobilisation and lessons to be learnt has been undertaken by the Project Subject Matter Expert (SME). The report is being reviewed by the project board.

Formal contract performance arrangements have now commenced and plans are being developed for the first of the two planned "true up" exercises. The purpose of the true up exercise is to analyse actual active against that included in the data included in the tender and make contract adjustments accordingly.

5 Next Steps

NHS West Kent CCG, in partnership with the Kent and Medway CCGs and key stakeholders, will:

 Continue to assure the mobilisation of the service and support performance improvement to the specified Key Performance Indicators (KPIs).

- Ensure improvement of renal patient journeys to GSTT sites is consistently maintained.
- Ensure each of the three separate contracted services moves to a steady
 Business As Usual (BAU) state.
- Work with stakeholders to embed communication and escalation arrangements for BAU.