

Kent Health Overview and Scrutiny Committee (HOSC)

Update on non-emergency patient transport services July 2019

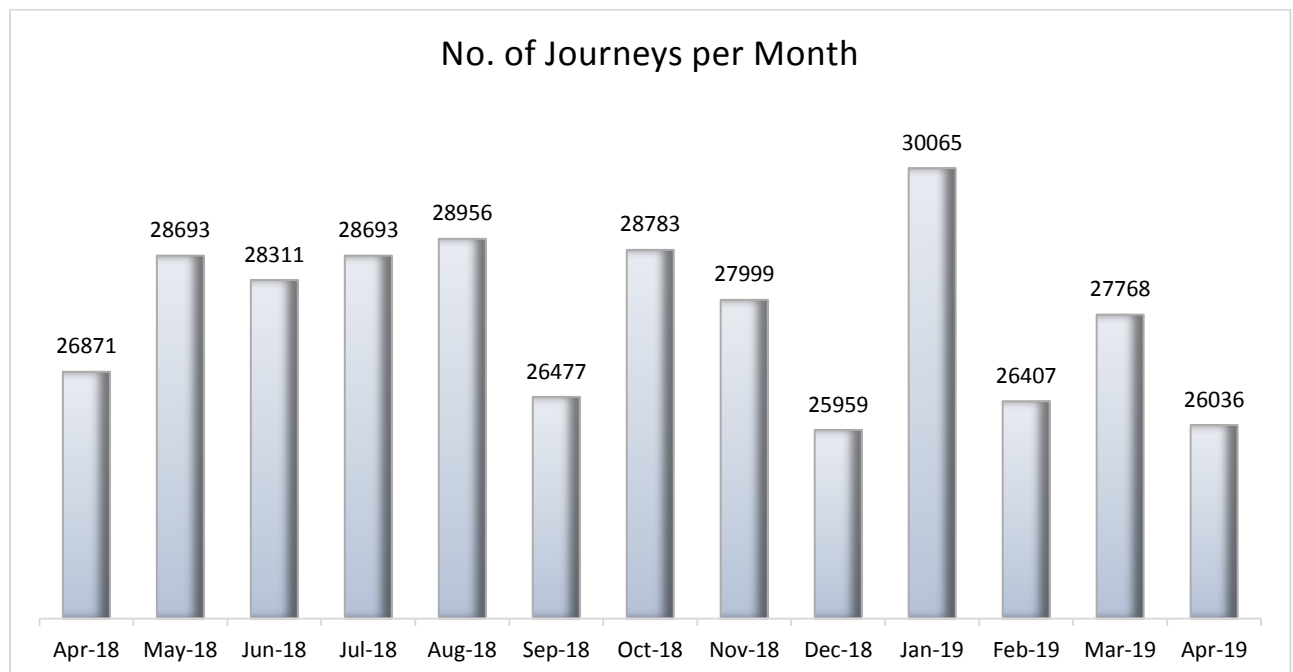
Executive Summary

The non-emergency patient transport service (PTS) has been provided by G4S across Kent and Medway CCGs since July 2016. A rebasing exercise was finalised in March 2018 with the deployment of additional staff and vehicles. This was supported by the CCG agreeing to the consolidation of all contract lots, instead of previously individual services and with a revised set of key performance indicators (KPIs) that was felt to hold a better focus on key indicators of patient experience and safety. These changes allowed for greater flexibility and efficiency, which in turn have resulted in improved service levels and performance stabilization.

This report aims to give an overview of current performance and ongoing improvement initiatives up to April 2019.

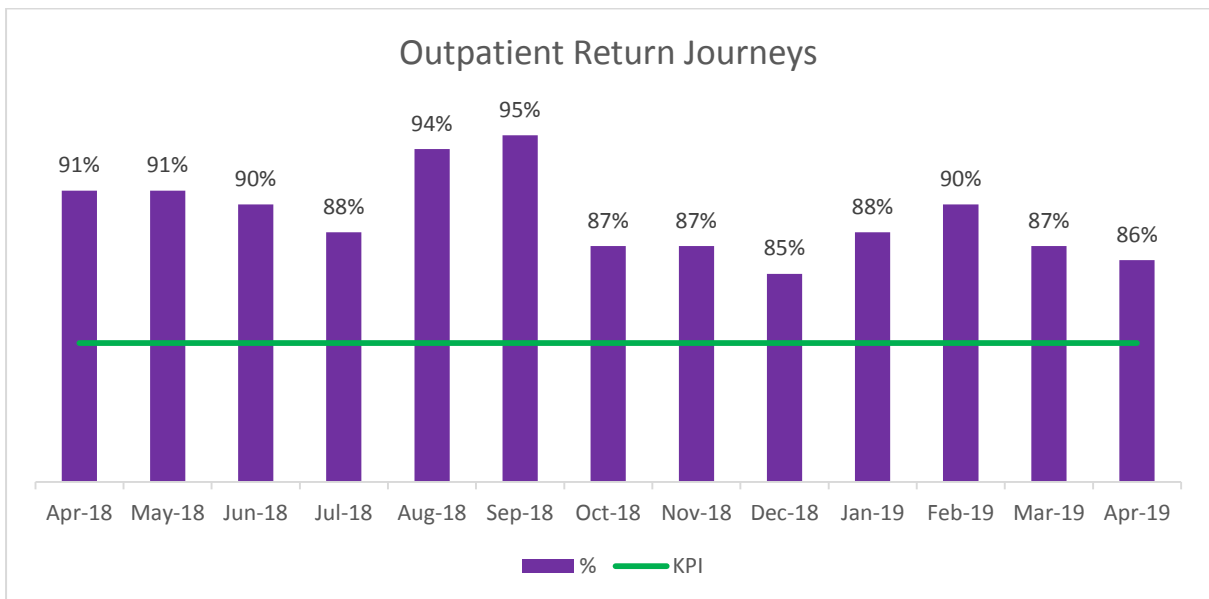
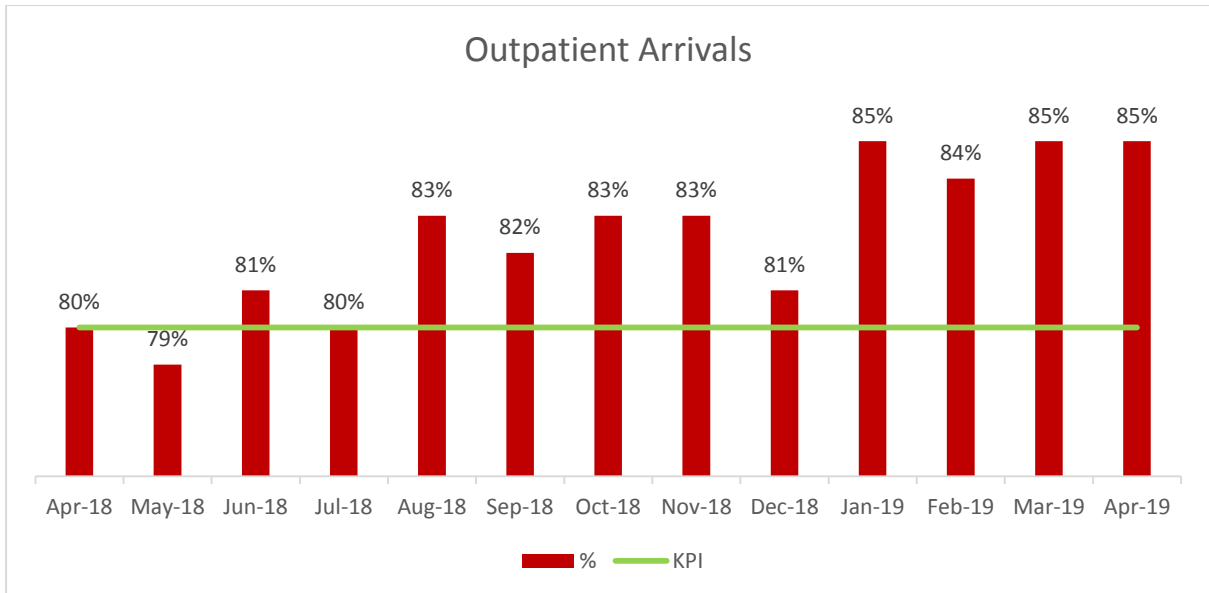
Patient journeys

The chart below shows the Kent and Medway journey activity by month.



Service Delivery

The tables below show the percentage of patient arrivals and outpatient return journeys against Service Level KPI. In most months, performance has exceeded the KPI.



*Slight downward trend shown Feb-19 to Apr-19 – Although still above KPI, 2 lanes of the M20 have been closed off and speed restrictions put in place as part of Project Brock in preparation for Brexit. Accumulative delays experienced throughout the day are effecting afternoon activity. Engagement initiatives have been put in place to try to mitigate this.



Kent & Medway Journeys Performance Report

Version

April 2019

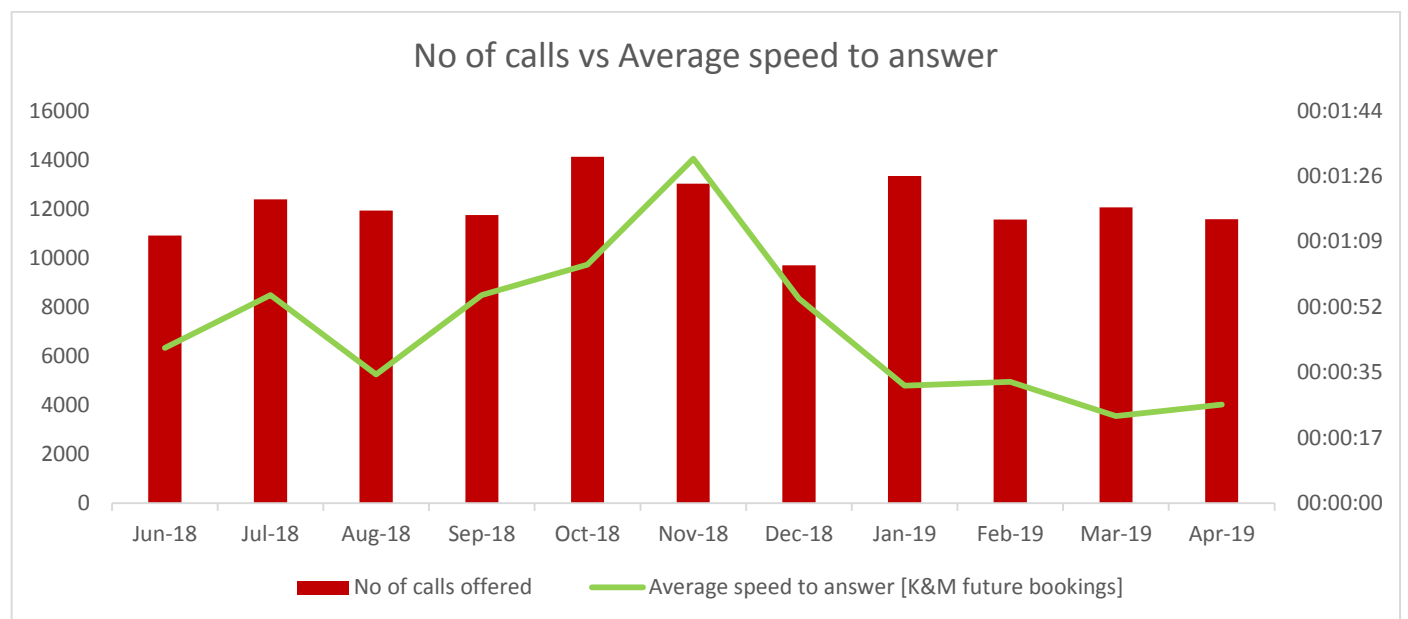
Total Journeys	25980
-----------------------	--------------

Journey Type	Definition	Required Standard	Minimum Standard	Percentage Performance	Total No. of Journeys
Outpatient	All outpatient arrivals.	Patients to arrive on time and no more than 75 minutes prior to their appointment time.	80%	84.95%	5932
Outpatient	All outpatient pre-booked return journeys.	All patients to be collected within 75 minutes of the booked or made ready time whichever is greater.	80%	86.37%	4027
Outpatient	All outpatient on the day booked return journeys.	All patients to be collected within 75 minutes of the made ready time providing a minimum of 2 hours' notice of the booking.	80%	96.74%	1688
Outpatient	All outpatient on the day booked return journeys.	No more than 1% of patients waiting over 4 hours.	1%	0.00%	0
Outpatient	All outpatient booked in advance return journeys.	No more than 1% of patients waiting over 4 hours.	1%	0.09%	14
Outpatient Renal	Patients to arrive on time and no more than 15 minutes prior to or later than their scheduled appointment.	Patients to arrive on time and no more than 15 minutes prior to or later than their scheduled appointment.	80%	86.66%	4169
Outpatient Renal	Return Journey patients to be collected within 30 minutes of the identified booked ready time.	Return Journey patients to be collected within 30 minutes of the identified booked ready time.	80%	92.14%	4031
Discharge	Discharge journey booked in advance.	All patients to be collected within 75 minutes of booked time.	80%	71.43%	259
Discharge	Discharge journey booked on the day.	All patients to be collected within 120 minutes of booked ready time.	80%	76.84%	3342
Discharge	Discharge journey booked in advance.	No more than 1% of patients waiting over 4 hours.	1%	0.02%	3
Discharge	Discharge journey booked on the day.	No more than 1% of patients waiting over 4 hours.	1%	0.88%	131
Transfer	Journey booked in advance - transfer of care.	All patients to be collected within 75 minutes of booked ready time.	80%	90.91%	22
Transfer	Kent and Medway bound journey booked on the day - Transfer of care.	Patient to be transported within 120 minutes of the identified booked ready time.	80%	74.67%	379

Call Centre

Call centre operations continue to perform at required levels.

Details of Service Levels and KPIs [Inbound calls]	KPI	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19
No. of calls answered		10463	11870	10979	11189	12717	11767	9010	12770	10979	11597	11178
Average Handling time [seconds]		372	304	312	285	215	337	322	362	362	333	333
Average speed to answer [overall]		00:00:42	00:01.2	00:47:00	00:01:02	00:01:23	00:01:29	00:00:53	00:00:30	00:00:32	00:00:22	00:00:25
Average speed to answer [K&M future bookings]	<20 secs	00:00:41	00:00:55	00:00:34	00:00:55	00:01:03	00:01:31	00:00:54	00:00:31	00:00:32	00:00:23	00:00:26



Patient Engagement

In line with our commitment to improving patient experience, we have developed a 2019/20 Patient Engagement Strategy. G4S accept that to confidently understand the needs and challenges that patients' face, active engagement needs to be encouraged, supporting patients to share their views.

The initial response to this approach was hugely positive and the dedicated G4S Relationship Manager has continued to spend time at each renal dialysis unit, capturing views from patients about their experiences and their suggestions. This is a quarterly commitment and outcomes from the sessions are formally shared with all patients to demonstrate continuous improvement.

In addition to the renal dialysis engagement, G4S have met with Healthwatch Kent and have agreed regular planned meetings quarterly to establish relationships and utilize their expertise for objective feedback.

The Patient Engagement Strategy has been formed using outcomes from existing patient feedback. The strategy is a 'live' plan, which continues to evolve in line with themes and trends from the patient survey, complaints data and patient forums.

Engagement Initiatives

Engagement continues to grow between G4S, hospitals and community trusts with regular meetings now set to consistently review progress and collaborative working opportunities.

Where patient journeys may be running late, processes are in place to liaise with the clinics to ensure there is no effect on the appointment and the patient is re-assured.

An evolving process in partnership with the Acute Hospital Site Coordinators has been introduced where Patient Transport Liaison Officers (PTLOs) proactively encourage morning discharges. Part of their role is to liaise with key stake holders within the hospital to ensure all discharges and transfers are mobilized as soon as possible. The PTLOs also attend bed meetings and work in conjunction with pharmacists to plan and chase medication prescriptions, ensure all booking details are correct and work with key stakeholders in ensuring patient packages of care are in place and met. This is to assist in reducing backlogs of discharges at the end of the day; this trial was very successful within William Harvey Hospital and has been rolled out across Kent.

New control methods have been introduced that allow G4S to be more proactive and flexible with resources across Kent. This is part of our business wide intrinsic initiative where we have Logistics Experts whom support our local control with an overview of our entire service. These individuals can then identify support and opportunities to improve the patient experience.

Regular meetings take place with Care Quality Commission (CQC) leads. This is Matthew Carmody for Kent and Catherine Haynes for London. These meetings range from face to face to conference calls.

Specific relationship meetings are in place with Renal Unit Managers and patients to understand current trends and perspectives from both parties and staff.

Participation in Listening into Action (LIA)group initiatives.

Drop in clinics have continued to take place with the Relationship Manager and representatives from the G4S Chelmsford Team, providing hospital staff the opportunity to ask any questions they may have about bookings, the process and the contract in general.

Our Relationship Manager has been invited by NHS providers to offer her expertise and experience in participation and support of a special project for the Mental Health units in Kent.

A specific mental health pathway workshop has been conducted with stakeholders of all levels. A revised and defined process has been agreed for both risk assessment and bookings which has resulted in local arrangements being set up in west and north Kent, providing further information

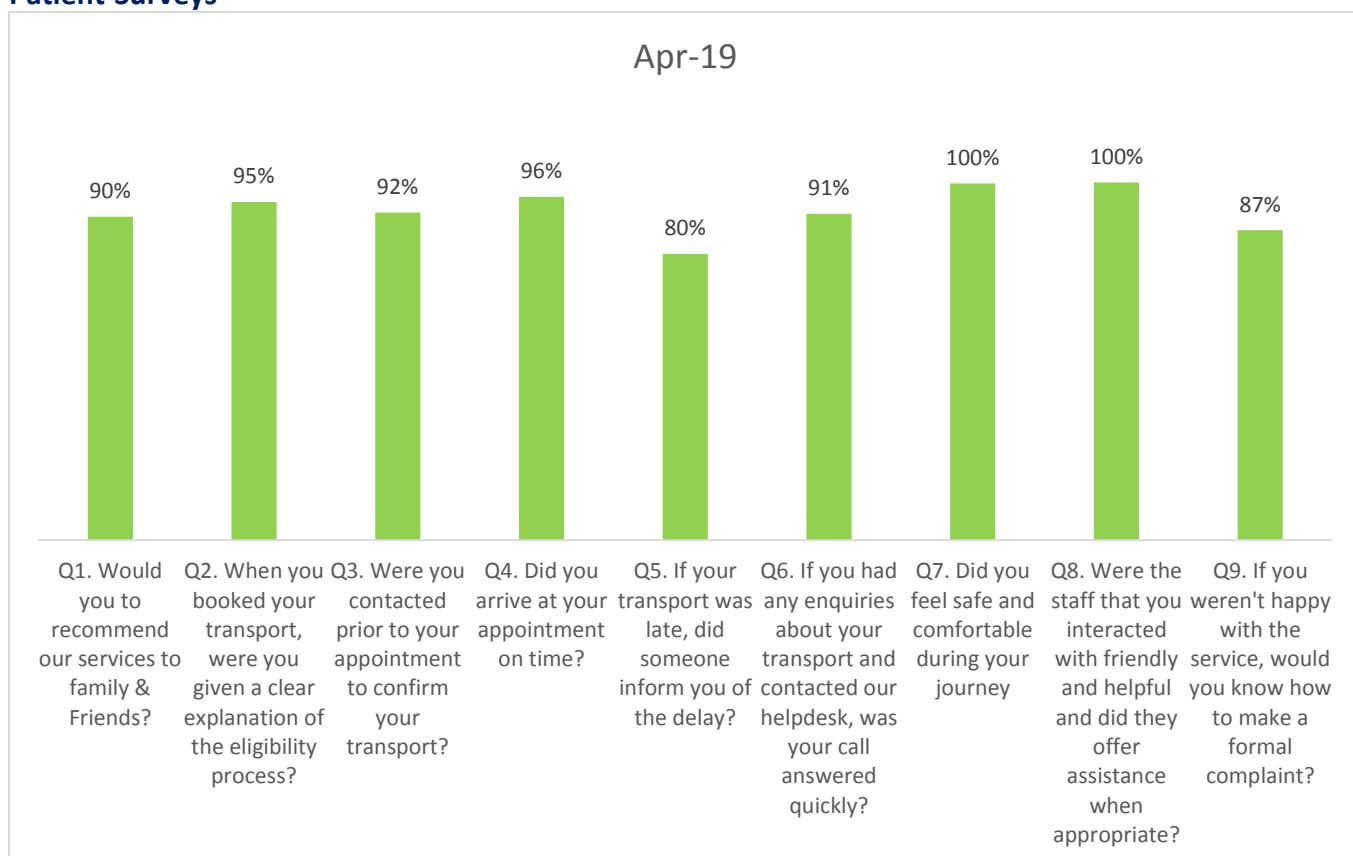
about service developments and required adjustments to resource deployment.

Bi-monthly meetings continue to be held with Strode Park Foundation as part of our continuous improvement initiative, working together to support each other’s service and improve patient experience. One of the outcomes of these meetings has been to enhance the rapport between Strode Park and the Margate base. To achieve this the Strode Park team have direct contact with their local controllers and/or service delivery manager, to allow for improved communication and efficiency regarding the transport of patients. If either service has issues they can be addressed quickly to ensure the patients do not suffer any anxieties regarding therapies or packages of care.

To further improve the service and on the back of these meetings bi-monthly meetings have been held with wheelchair services for patients travelling between sites to further learning opportunities.

The Senior Management Team has undertaken appropriate training and are completing a rolling programme of ‘Back to Greens’ working a full shift alongside front line operational employees and patients. The initiative has been designed for senior management staff to gain a first-hand experience of the quality of service provided to patients as well as to provide an opportunity to talk to patients directly about level of care received from their perspective. This initiative is designed to focus thinking from a patient’s point of view.

Patient Surveys



Complaints and Compliments Management

All trends and outcomes including analysis of specific complaints are reviewed at a weekly senior management team meeting. In addition, all service delivery managers in Kent have participated in review days led by the Chief Operating Officer and patient experience team to ensure full understanding, root cause analysis and outcomes.

As a result all operational managers now spend time within the planning and patient experience function to not only be fully immersed but to identify areas for improvement.

Feedback and complaints are known to be the best evidence for bringing about sustainable change and forms the basis for any quality improvement within the service. Patient complaints offer us grassroots level raw data that can be used to change and improve patient experience and outcomes.

Type	Apr-18	May-18	Jun-18	Jul-18	Aug-18	Sep-18	Oct-18	Nov-18	Dec-18	Jan-19	Feb-19	Mar-19	Apr-19
Complaint	64	73	91	103	110	88	67	82	51	52	29	25	27
% against No of Journeys	0.24%	0.25%	0.32%	0.36%	0.38%	0.33%	0.23%	0.29%	0.20%	0.17%	0.11%	0.09%	0.10%

Outstanding Effort and Compliments

PTS crews hailed for their handling of challenging incidents



Six patient transport officers have been praised for their compassion, care and professionalism for the way they handled challenging incidents recently.

The first incident saw Kelly Macdonald and colleague Scott Culley stop at the scene of a serious road traffic accident to give cardiopulmonary resuscitation (CPR) to two members of the public and administer first aid to the driver of one of

the cars involved.

Unfortunately two of the people later died from their injuries, and Kelly and Scott was hailed for “remaining calm and acting with both integrity and professionalism despite the difficult circumstances”.

A few days later, Deborah Augustine and Graham Gibbs were asked to use their vehicle to block an exit barrier at Lewisham Hospital to stop traffic due to a member of the public being on the ground.

When they found an expectant mother who’d been unable to make her way to the hospital’s birthing unit in time, the pair assisted by providing blankets and getting a stretcher to carry her inside – where she later gave birth to a healthy baby girl.

The third incident saw Sharon Wiles and Michelle Mears praised for giving assistance to a lady and her son following a road traffic accident.

After stopping to help they gave the pair blankets and let them wait inside their ambulance for the emergency services, while calming down the young boy after his traumatic experience.

Russell Hobbs, Managing Director, Patient Transport Services, was full of praise for the PTS crews.

“Over the last two years, whilst I have been responsible for our patient transport contracts, I have consistently received reports, commendations and feedback about the care displayed by our employees,” he commented.

“Recently I had the pleasure of recognising these employees for their exemplary performance. These situations are outstanding examples of how our employees look after patients in our care, assist with accidents and deal with incidents concerning members of the public while going about their normal business.

“Given we are a non-emergency provider this makes this feedback and our employees even more important and shows the levels of care we provide on a daily basis to our patients.

Brexit

G4S continue to monitor and participate in any on-going Brexit readiness groups. Contingency plans are still in place and are monitored and reviewed against Government or Local updates. The M20 London bound Project Brock is having an impact on the service. This is resulting in some patients arriving too early for their appointments if they are traveling to north/west Kent or to the London hospital locations.

Third Party

Within the Kent contract we utilise a small proportion of third party support to enable the service to react to the peaks in activity. On average we will use 30 third party vehicles per week which will transport an average of 133 patients within the week. Our third party providers are all subject to the G4S due diligence assessment to ensure their service meets our standards to ensure patient safety.

Summary

This report provides an updated position statement on the performance of the contracts with G4S for non-urgent patient transport.

The report has been based on data available up to April 2019.

G4S are pleased to report that current good performance levels continue in line with expectations. Engagement with patients, service providers and stakeholders remains positive and has led to continuous improvement and development of the service.