

# **Welsh Ambulance Service NHS Trust**

## **The Performance Report**

**2019/20**

DRAFT

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This document is available in Welsh on request.

# 1. Overview of our Performance in 2019/20

## 1.1 Statement from the Chief Executive Officer

The Trust prides itself on being amongst the most transparent ambulance services in the World. As per last year's report, there is good news in this Performance Report, but the Trust is also clear that there were some significant challenges in 2019/20. The very end of the year saw the Trust trigger its Pandemic Influenza Plan on 04 Mar-20 in response to the CoVID-19 pandemic.

RED 8 performance, i.e., responses to immediately life threatening incidents, was maintained above the Welsh Government's target: to respond to 65% of these incidents in 8 minutes, in nine of the 12 months of 2019/20, compared to all 12 months in 2018/19. RED performance pan-Wales was 61.4%, 62.0% and 64.5% in Nov-19, Dec-19 and Mar-20 respectively. The Trust took remedial actions in response to these performance challenges. RED incidents increased by 20% (May-19 to Mar-20 compared to the same period last year), due to a patient safety change within the Medical Prioritisation Dispatch System (MPDS) in May-19.

The Trust increased the amount of ambulance hours (all resource) that it produced in 2019/20, but 2019/20 saw unprecedented levels of pressure in the unscheduled care system which, for the Trust, manifested itself in lost hours to delayed handover of patients at emergency departments. The Trust lost 112,058 ambulance hours to handover in 2019/20, compared to 66,521 in 2018/19, which was already considered high. On 15 Jan-20 the Minister for Health & Social Housing, Vaughan Gething, announced the establishment of a Ministerial Ambulance Availability Taskforce. The Taskforce was just getting underway when CoVID-19 struck.

2019/20 involved the Trust working in partnership with the Chief Ambulance Services Commissioner (CASC) on delivering the recommendations from the Amber Review. The key strategic action arising from the Amber Review was a collaborative independent Emergency Medical Services (EMS) Demand & Capacity Review. The Review was completed and reported to EASC in Jan-20 with an implementation programme established in Mar-20. EASC agreed to fund additional front line staff in 2020/21, which is good news, and the Trust hopes this will be the first tranche of further investment by EASC. When the Minister announced the Ambulance Availability Taskforce he identified that the Taskforce would lead on the implementation of the recommendations from the Review.

During 2019/2020 WAST reported 44 Serious Adverse Incidents (SAIs) compared to 50 in 2018/19. Whilst a reduction, this is too high. The number of patient safety incidents increased to 2,081 compared to 1,748 in 2018/19; and the number of patient concerns increased to 1,610 compared to 1,460 in 2018/19. The Trust responded to 64% of concerns within 30 days (target 75%).

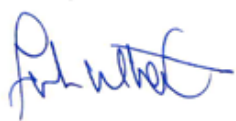
Throughout 2019/20 we continued to roll out a number of key initiatives, for example prescribing for paramedics within the Advanced Paramedic Practitioners (APP) workforce, the continued roll out of the 111 service, a focus on digitalisation and further transformation of our Non-Emergency Patient Transport Services (NEPTS).

The Trust did not achieve its 2019/20 sickness target (6.30%) in 2019/20, but did start to see a significant reduction towards the end of the year, until CoVID-19 began to take effect. The Trust took a significant step in its staff health and well-being agenda during 2019/20 with the appointment to the new Organisational Culture & Workplace Well-Being Lead (Consultant Clinical Psychologist).

Throughout 2019/20 the Trust continued to make improvements to the way we manage risks, in particular, the launch of an in-house developed e-risk management system. At the end of the year the Trust had 13 risks on its corporate risk register.

The Trust achieved financial balance in 2019/20, with a small revenue surplus of £0.045m and was deemed to have met its three year statutory duty to breakeven during this first three year assessment period.

Finally, quality is at the heart of what the Trust does. It is critical that quality, safety and patient experience underpin every aspect of the Trust's business. The Trust produces a separate Annual Quality Statement which provides a detailed, plain English assessment of the Trust's quality in this year.



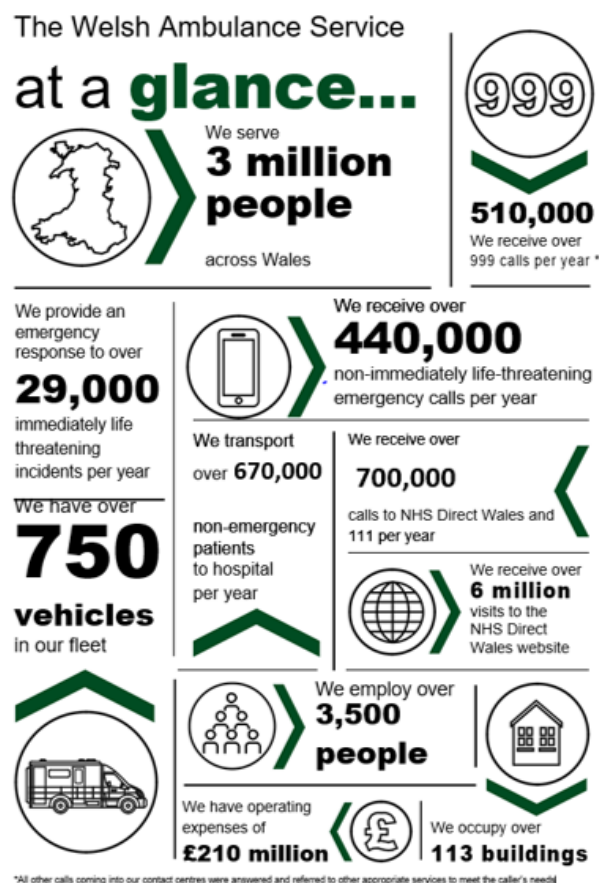
Jason Killens  
Welsh Ambulance Service NHS Trust Chief Executive Officer

## 1.2 What the Welsh Ambulance Service provides

The Trust provides ambulance services for people across the whole of Wales, delivering high quality and patient-led clinical care wherever and whenever needed.

Services include:-

- The blue light ambulance services: including call taking, hear and treat, see and treat and if necessary, conveyance to an appropriate hospital.
- The Non-Emergency Patient Transport Service (NEPTS): taking patients to and from hospital appointments and transferring them between hospitals.
- The NHS Direct Wales service: a health advice and information service available 24 hours a day, every day, including an online and telephone offering.
- The 111 service: a free-to-call service which incorporates the NHS Direct Wales service and the call taking and first stage clinical triage for the out-of-hours service. This is now live in the Swansea, Neath, Bridgend, Carmarthenshire, Pembrokeshire, Ceredigion and Powys areas. The Trust continues to provide the NHS Direct Wales service in other parts of Wales.
- The Trust also supports Community First Responders, Co-Responders and Uniformed Responders to provide additional response resource.



## 1.3 Our Behaviours, Purpose, Vision, Strategic Aims and Priorities

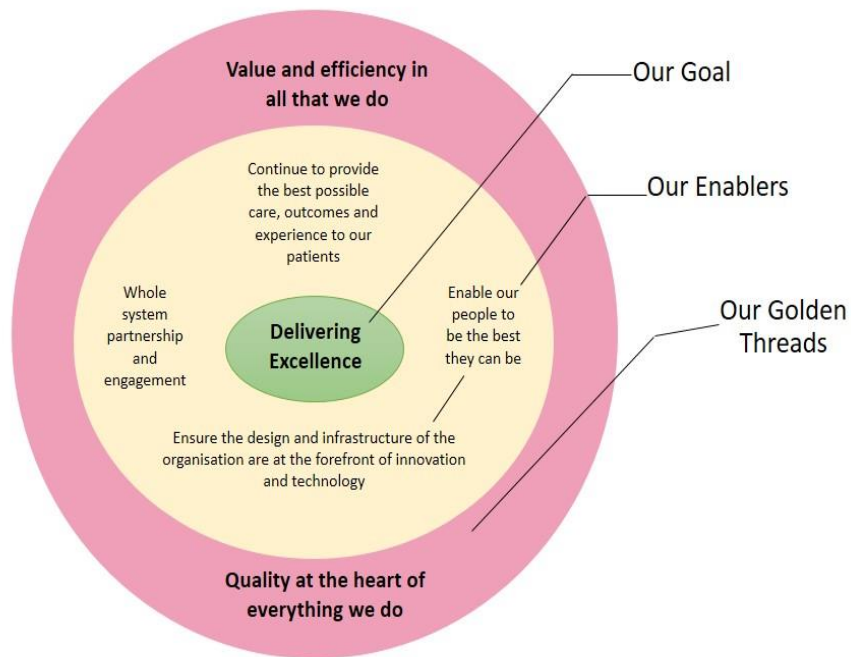
Our purpose is *to be a caring and responsive ambulance service for people in Wales.*

The Trust has previously engaged with staff at all levels and across Wales on developing an agreed set of behaviours, a clear organisational purpose and an agreed vision. The Trust has a Long Term Strategy (LTS) which articulates our goal, to be reached by 2030:-

***An ambulance service which is delivering excellence.***

We have identified four enablers which we believe will help us to achieve this goal and two golden threads which are the guiding principles in all that we do in the course of delivering our goal.

The graphic below summarises this:-



Underpinning this strategic framework we have 10 Integrated Medium Term Priorities (IMTP), each one of which is supported by a set of key deliverables:-

	IMTP Priority	Deliverables 2019-2022	Theme	Benefits for our staff and users	Headline Outcomes / Measures
Goal <i>Delivering Excellence</i>	Help patients and staff to stay healthy	<ul style="list-style-type: none"> <li>Develop and implement a Public Health Plan</li> <li>Develop an Older Person's Framework, strengthening our role in supporting frailty, loneliness and isolation</li> <li>Collaborate with Health Boards to develop a range of referral pathways</li> <li>Support resilient communities through programme of engagement and education</li> </ul>	3 1 8 8	<ul style="list-style-type: none"> <li>We will use our thousands of daily contacts with people to improve their health and wellbeing</li> <li>Our contacts with older people will help to reduce loneliness and isolation</li> <li>More of the public will have been exposed to education which will make them more confident in managing their health</li> </ul>	<ul style="list-style-type: none"> <li>Outcome measures to be developed</li> </ul>
	Help patients more easily access our services at the right time	<ul style="list-style-type: none"> <li>Engage and involve users with sensory loss to improve accessibility</li> <li>Utilise video and other technologies to enhance the way our services can be accessed</li> <li>Develop access to services online and through internet applications, including online portal for NEPTS bookings, linked to hospital systems</li> </ul>	1 2 2	<ul style="list-style-type: none"> <li>People with sensory loss will be able to access all of our services with ease</li> <li>Patients will increasingly be able to access services online and systems will be linked together</li> </ul>	<ul style="list-style-type: none"> <li>Outcome measures to be developed</li> </ul>
	Provide right care in the right place, wherever and wherever it is needed	<ul style="list-style-type: none"> <li>Complete roll out of 111 service across Wales, and formalise role as provider</li> <li>Articulate opportunities to be call handler of choice</li> <li>Continue expansion of the Advanced Practitioner Paramedic role (if funded and agreed with commissioner)</li> <li>Roll out Trust's Falls Framework</li> <li>Evaluate and implement APP / non-medical prescribing framework (if funded)</li> <li>Implement Mental Health and Dementia Improvement Plans</li> <li>Secure approval for and procurement of the Electronic patient clinical record system</li> </ul>	3 5 3 3 3 1 3	<ul style="list-style-type: none"> <li>Public will have just one number to call if they need help with an urgent medical problem</li> <li>Patients who call 999 will increasingly be able to be given advice, seen and treated by our staff or referred on to other appropriate community services, and will not need to be taken to hospital</li> <li>Reduced pressure on EDs mean that there will be fewer patient in ambulances waiting for long period outside hospitals</li> <li>Staff will benefit from increased opportunities in an expanded career framework</li> </ul>	<ul style="list-style-type: none"> <li>More calls to '111' and NHSDW / more hits to website- <i>Commissioning Intention (CI)</i></li> <li>Proportion of clinical desk calls assessed and closed (Hear and Treat) to reach and be sustained at 12%- <i>CI</i></li> <li>Proportion of verified incidents conveyed to a major ED to decrease- <i>CI</i></li> </ul>
Strategic Enablers	Continue to provide best possible care, outcomes and experience to our patients of our core service	<p>EMS</p> <ul style="list-style-type: none"> <li>Deliver EMS commissioning intentions</li> <li>Implement recommendations of the Amber review</li> <li>Collaboration and co-production with Commissioner and Health Boards on delivery of a 5 year Demand and Capacity Review</li> <li>Deliver prioritised actions from the Carter Review</li> </ul> <p>NEPTS</p> <ul style="list-style-type: none"> <li>Deliver NEPTS commissioning intentions</li> <li>Deliver full benefits of the NEPTS Business Case</li> <li>Complete transfer of work from Health Boards and Trusts</li> </ul>	1 1 1 1 5 5 5 5	<ul style="list-style-type: none"> <li>Patients will receive a timely and appropriate response to their emergency call, and there will be no excessive delays for ambulances</li> <li>Fewer patients will have to wait outside hospitals in ambulances</li> <li>More resources will be available for front line services as WAST uses its resources more efficiently</li> <li>Patients will receive a high quality service that meets their transport needs</li> <li>It will be simple for patients and HCPs to book their service</li> </ul>	<p>Red to improve Amber median, 65<sup>th</sup> percentile and 95th percentile to reduce across all Health Board areas- <i>CI</i></p> <p>Improved performance against clinical indicators- <i>CI</i></p> <p>Reduction in lost handover to clear hours- <i>CI</i></p> <p>Increase in planned v actual UHP to 95%</p> <p>Reduction in complaint response times</p> <p>Achievement target for dementia training of staff</p> <p>Reduction in number of serious incidents relating to time delays</p> <p>Increase in the proportion of journeys undertaken for eligible patients- <i>CI</i></p>

	IMTP Priority	Deliverables 2019-2022	Theme	Benefits for our staff and users	Headline Outcomes / Measures
		<ul style="list-style-type: none"> <li>Design and implementation of improved booking and call taking processes and procedures</li> <li>Articulate and start to deliver a transfer and discharge model/service for Wales</li> </ul>	5	<ul style="list-style-type: none"> <li>Health Boards will receive a high quality service that meets their needs and the needs of their patients</li> </ul>	Increase in the proportion of ineligible patients who are helped to find alternative transport solutions- <i>CI</i> Reduction in the number of aborted and cancelled journey- <i>CI</i>
	Whole system partnership and engagement	<ul style="list-style-type: none"> <li>Understanding, agreeing and quantifying impacts of Health Board strategic service change</li> <li>Development and implementation of engagement plan, including work with Regional Partnership Boards (RPB)</li> <li>Development of new pathways with Health Boards</li> </ul>	8 8 8	<ul style="list-style-type: none"> <li>WAST plays a full part in delivery of A Healthier Wales and the further integration of health/social care, with a focus on out-of-hospital care delivery</li> </ul>	<ul style="list-style-type: none"> <li>Increase in number of new pathways with Health Boards- <i>CI</i></li> <li>Membership of at least three RPBs</li> <li>Increased number of shared facilities with other public service/third sector partners</li> </ul>
	Support our people to be the best they can be	<ul style="list-style-type: none"> <li>Deliver an improvement in resource availability levels</li> <li>Implement a Leadership and management development and succession strategy</li> <li>Approve and implement a Health &amp; Wellbeing Strategy</li> <li>Approve and implement a Transforming Education Strategy (Clinical practice and education), which will include delivery of any enabling capital requirements</li> <li>Refresh our commitment to volunteering and approve strategy</li> </ul>	4 4 4 4 4	<ul style="list-style-type: none"> <li>More staff available at work, giving greater resilience to respond to demand in a timely way</li> <li>Staff will have more equitable access to development opportunities</li> <li>Staff will have a great colleague experience, safer working environments, and will feel valued and cared for</li> <li>Staff will have better access to local, quality education and training, and will maintain and improve their skills and practice at the top of their scope of practice</li> <li>Our volunteers will feel valued and engaged</li> </ul>	<ul style="list-style-type: none"> <li>Achieve sickness reduction to 6.3% March 2020- <i>CI</i></li> <li>Maintain low levels of frontline vacancies (below 5%) and improved UHP and relief capacity / overtime reduction</li> <li>Reduction in incidence of bullying and harassment.</li> <li>Improvement in key indicators related to staff personal safety and attendance and wellbeing</li> <li>Improvement in CPD rates and delivery of Band 6 competence requirements.</li> <li>Maximised contribution of volunteers, improvements to volunteer numbers</li> <li>Overall improvements in staff engagement (survey) score and achievement of workforce KPIs</li> </ul>
Strategic Enablers	Ensure the design and infrastructure of the organisation are at the forefront of innovation and technology	<ul style="list-style-type: none"> <li>Launch of the WAST Improvement &amp; Innovation Network (WIIN) and by the end of Year One, a database of improvement ideas that are being progressed or have been delivered.</li> <li>Development of NEPTs CAD business case</li> <li>Development of a digital transformation strategy</li> <li>Improve the capture, sharing and utilisation of information through implementation and roll out of Qlik sense and Optima Predict</li> <li>Explore and pilot opportunities to utilise cutting edge technology to improve and enhance care e.g. use of video, telehealth, AI and drone technology and clinical diagnostic equipment</li> <li>Utilise technology to improve communication with staff</li> </ul>	7  4 2 2  2  2	<ul style="list-style-type: none"> <li>More of our staff will be confident about using the model for improvement and will actively use this to make improvements in their areas of service</li> <li>Patients will more readily be able to use new technology to improve how they are able to access our service</li> <li>Staff will more readily be able to use new technology, and will be able to be more agile and efficient in their work</li> <li>Staff will feel more connected with and informed about what we are doing</li> <li>Patients will receive more timely responses as a result of Optima modelling</li> </ul>	<ul style="list-style-type: none"> <li>Growth in both capability and capacity of our workforce in applying the 'model for improvement'</li> <li>Number of improvement ideas being progressed</li> <li>Board approved NEPTs CAD business case</li> <li>Baseline Trust's position against an agreed digital maturity model (Year One) and track progress in subsequent years, linked to delivery of agreed Trust strategy</li> <li>% of operational staff with mobile device over the life of this plan</li> </ul>



	IMTP Priority	Deliverables 2019-2022	Theme	Benefits for our staff and users	Headline Outcomes / Measures
Quality at the heart of everything we do		<p>10 themes of work including:</p> <ul style="list-style-type: none"> <li>Health and Care Standards, Trust Quality Strategy, Quality Assurance, Risk Management Strategy, Health and Safety Improvement plan, Safeguarding annual report and annual plan, Infection Control Improvement Plan, Putting Things Right Improvement Plan - Winter Assurance Panel Improvement Plan, Patient Experience &amp; Community Involvement</li> </ul>	1	<ul style="list-style-type: none"> <li>Higher quality of service for our users</li> </ul>	<ul style="list-style-type: none"> <li>Improvement in relevant clinical and quality indicators as set out by Commissioner and Welsh Government - <i>CI</i></li> </ul>
Value in everything that we do		<ul style="list-style-type: none"> <li>Explore opportunities for further work with ICHOM and the Bevan Commission</li> <li>Maintain strong links with the other UK nations to enable sharing of best practice and collaborative work.</li> <li>Improve understanding of cost base and cost behavior, including benchmarking based on outcomes as well as costs.</li> <li>Maximise procurement efficiencies</li> <li>Improve efficiency in stock inventory and asset tracking, through RFID</li> </ul>	6 6 6 6 6	<ul style="list-style-type: none"> <li>More resources will be available for front line services as WAST uses its resources as efficiently as possible</li> </ul>	<ul style="list-style-type: none"> <li>'Net effect' in terms of activity impact, resource impact and performance impact from initiatives (commissioning intention)</li> <li>Value gained from resources invested</li> <li>Proportion of split of costs / resources relating to steps 4 &amp; 5</li> <li>Proportion of resources available to support front line activity</li> </ul>
Use of our estate and fleet		<ul style="list-style-type: none"> <li>Review of next priorities from Estates SOP, and development of cases for capital funding</li> <li>Delivery of MRD for Cardiff and new workshop for the South East region</li> <li>Delivering a range of specialist vehicles including training and resilience.</li> <li>Review of approach to station cleaning</li> <li>Modernisation of fleet, utilisation of latest technology, step change towards non-diesel powered vehicles</li> </ul>	- - - - -	<ul style="list-style-type: none"> <li>Staff will work from buildings and vehicles that are comfortable, safe and fit for purpose</li> </ul>	<ul style="list-style-type: none"> <li>WG approved MRD and Workshop case</li> <li>Reduction in carbon footprint</li> <li>Reduction in estate backlog maintenance</li> <li>Improvement in estate utilisation</li> </ul>

The 2019-22 IMTP operationalises the Trust's LTS which is also cognisant of a range of national drivers, strategies and plans, including, for example, the Well-being of Future Generations Act, NHS Outcomes and Delivery Framework, and the work of the Unscheduled Care Board.

Ambulance services in Wales are commissioned on a collaborative basis by the seven health boards through EASC and the CASC. The EMS Commissioning and Quality Delivery Framework was live throughout 2019/20, with the equivalent for NEPTS going live in 2019/20. Both commissioning frameworks are key drivers for the Trust in the development and agreement of our plans and priorities.

Both the EMS Commissioning and Quality Delivery Framework and the NEPTS Commissioning and Quality Delivery Framework focus on managing patient flow across a series of lateral, inter-connected steps in the most prudent manner.

#### Five-Step EMS Ambulance Care Pathway



Designed with permission using the CAREMORE® 5 steps. Copyright, 2017 Welsh Ambulance Service Trust.

#### Five-Step NEPTS Ambulance Care Pathway



Designed with permission using the CAREMORE® 5 steps. Copyright, 2017 Welsh Ambulance Service Trust.

The EMS Commissioning and Quality Delivery Framework has set out a clear strategic aim to “shift left where it is clinically safe and appropriate to do so”, that is, focus on moving from steps 4 and 5 toward steps 1, 2 and 3.

## **1.4 Key Risks and Challenges to Delivery**

The 2019/22 IMTP considered the risks and challenges to delivery that would be encountered during the year. The Trust has put in place mitigating actions in each case, although the impact has not been eliminated. Due to CoVID-19 the Trust did not report on its corporate risk register for Quarter 4 2019/20, instead it reported a 2019/20 and partial Quarter 1 corporate risk register to the QuEST committee on 28 May-20. The corporate risk register at this point in time is shown overleaf:-

CORPORATE RISK REGISTER: Summary					
RISK ID	RISK	RISK CATEGORY	DIRECTORATE	CURRENT RISK SCORE	COMMITTEE
151	Business continuity for recording digital patient clinical records	Business Continuity	Medical and Clinical	20 (4x5)	Finance and Performance Committee
223	Unable to attend patients in community who require See & Treat (CRR58)	Service Delivery	Operations Directorate	10 (5x2)	Quality, Patient Experience and Safety Committee
224	Patients delayed on ambulances outside A&E Depts (CRR57) (Previously described as Patients unable to access secondary care)	Quality & Safety	Operations Directorate	10 (5x2)	Quality, Patient Experience and Safety Committee
69	Lack of preparedness for infectious diseases	Quality & Safety	Quality, Safety & Patient Experience	10 (5x2)	Audit Committee; Quality, Patient Experience and Safety Committee
225	On-call CCA ability to cover 24/7 command (CRR62)	Business Continuity	Operations Directorate	16 (4x4)	People and Culture Committee
78	Tire 1 Compliance for Formal Concerns	Quality & Safety	Quality, Safety & Patient Experience	20 (4x5)	Quality, Patient Experience & Safety Committee
160	High Sickness Absence Rates	Resource Availability	Workforce & Organisational Development	16 (4x4)	People and Culture Committee
217	Cleanliness in Ambulance Stations (CRR27)	Quality & Safety	Operations Directorate	16 (4x4)	Quality, Patient Experience and Safety Committee
88	Continued Availability of Digital Pens	Quality & Safety	Finance and ICT	16 (4x4)	Finance and Performance Committee
201	Trust Reputation	Stakeholder Relationships	Partnerships and Engagement	15 (5x3)	Trust Board
303	delayed initiation of chest compressions (resuscitation)	Quality and Safety	Medical and Clinical	15 (5x3)	Quality, Patient Experience and Safety Committee
166	Staff are currently not being able to access Vaccines for Preventable diseases in a timely manner	Quality & Safety	Workforce and Organisational Development	15 (5x3)	People and Culture Committee
199	Health and Safety	Statutory Duties	Quality, Safety &	15	Audit Committee; Quality, Patient

## 1.5 A Performance Summary

### **Strategic Priority 1 – Help Patients and Staff Stay Healthy**

Our implementation of our Public Health Plan has been affected over the last few months by the CoVID-19 Pandemic; however, in light of the pandemic, we will now review our Public Health Plan and our three ambitions, learning from the experience of dealing with CoVID-19 and its subsequent impact on our society.

The Trust was successful in an application for Healthier Wales funding to develop and implement key leadership and support roles to deliver our Older Person's improvement ambitions. In Jan-20, an Improvement Lead for Older People was employed within the Trust. An engagement plan was developed which was a wide, collaborative engagement plan across the Trust's workforce, local authorities, health boards, older people and individuals.

The main headings of Older Persons' Framework will be Co-production, Falls, Clinical, CoVID-19, and Workforce. Each area has a number of themed topics and issues within which have already been identified as continued areas in need of improvement or concern to Older People across the Trust. Frailty is a specific area of clinical focus as there is a need to address this across the Trust in all areas including education. A Frailty Tool is currently being rolled out across the Trust being led by a Regional Clinical Lead (North Wales). There are also key developments around loneliness and isolation in a co-produced manner which will be focused upon with the aim of improving options to assist Older People across Wales.

Clinical developments within the Trust and partner health boards require constant evaluation of existing pathways and the implementation of new patient-centred pathways to health care. In 2019/20 the Pathways Development Group was established to determine which areas of care would benefit from a nationally developed pathway. The work was developed in partnership with the NCCU and Welsh Government as a means by which pressure on secondary care could be reduced by involving speciality support for a pathway development. The initial test of change centred around the respiratory pathway. This pathway was deployed in the Aneurin Bevan Health Board area with plans (that were interrupted by CoVID-19) to deploy across Wales. Future work will concentrate on embedding the respiratory pathway and determining which other clinical areas might offer alternative safe care closer to home.

### **Strategic Priority 2 – Help patients more easily access our services at the right time**

Patient feedback received from people living with a sensory loss has continued to follow recurring themes:-

- Deaf British Sign Language (BSL) users want to communicate with us in their language of choice – BSL. They would appreciate it if our staff only knew some basic signs that could be used to reassure them;

- A better system is required to allow people living with a sensory loss to complain or give feedback about their experience;
- An accessible system that allows someone with a sensory loss the ability to book, amend or query a non-emergency transport booking is needed;
- Awareness needs to be raised about how to support an assistance dog user; and
- We need to produce information about our services in more accessible formats.

These themes are still relevant and continue to be the main areas of feedback and concern that the Trust is continuing to work to address.

The Trust has made progress on the utilisation of video and other technologies to enhance the way our services can be accessed. The NHS Direct Wales website was rebranded to NHS 111 Wales in Mar-20. A number of new developments and features were included within the website:-

- An increase in the number of online self-assessment symptom checkers from 28 to 32;
- The development of a CoVID-19 section including the creation of a chat-bot to enable users to ask questions instead of following a self-assessment algorithm;
- The creation of a range of new public resources that included:
  - A leaflet, 'Seven Vital Signs', that explains what our emergency staff do when responding to patients;
  - A 'mental health services' information leaflet;
  - A video explaining how we respond to calls, '999 – What happens next';
  - A new section on 'dementia' that included a wide range of information for those living with dementia, their families and friends; and
  - A dedicated 'easy read' section with range of pictorial and easy read resources.

Over the course of 2019/20 much work has been undertaken to promote and encourage remote NEPTS bookers to make bookings through the web-based cleric system. The NEPTS system team supported by local management have been actively promoting online systems and have delivered training sessions to numerous sites, particularly in West & Mid Wales. As a result, good progress has been made on increasing the proportion of bookings being made through online systems. In addition, all operating discharge desks now work through the online ebooking system primarily.

### **Strategic Priority 3 – Provide right care in the right place, wherever and wherever it is needed Place**

Clinical developments within the Trust and partner health boards require constant evaluation of existing pathways and the implementation of new patient-centred pathways to health care. In 2019/20 the Pathways Development Group was established to determine which areas of care would benefit from a nationally developed pathway. The work was developed in partnership with the NCCU and Welsh Government as a means by which pressure on secondary care could be reduced by involving speciality support for a pathway development. The initial test of change centred around the respiratory pathway. This pathway was deployed in the Aneurin Bevan Health Board area with plans (that were interrupted by CoVID-19) to deploy across Wales. Future work will concentrate on

embedding the respiratory pathway and determining which other clinical areas might offer alternative safe care closer to home.

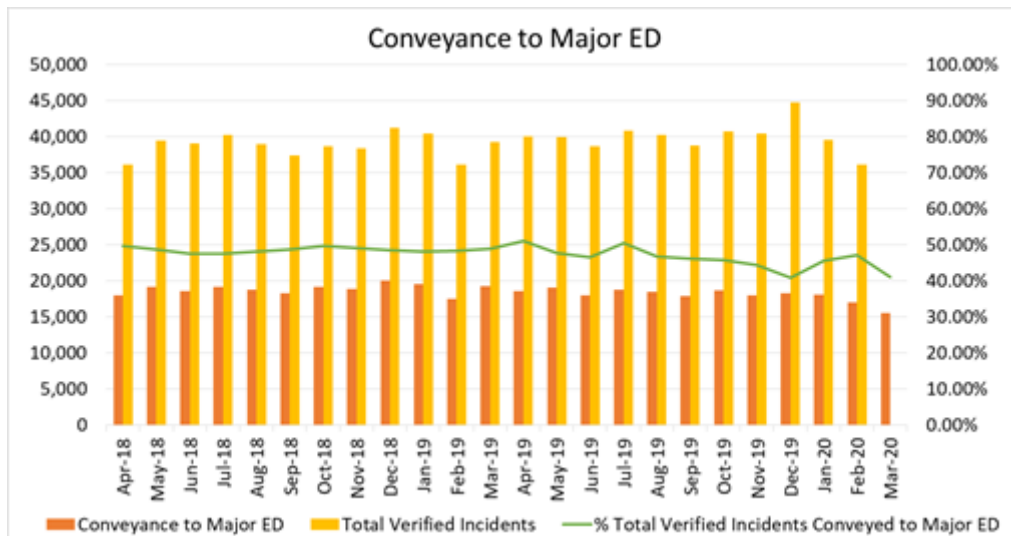
111 is a free-to-call, non-emergency clinical advice line that is amalgamating NHS Direct Wales and GP Out of Hours (GP OoHs) across Wales. The expansion of 111 continued in 2019/20 with the full 111 service going live in Aneurin Bevan University Health Board. As part of the Trust's initial CoVID-19 response, the 111 number also went live across all of Wales, but not the full service. Subject to the demands of CoVID-19 the roll out will continue into 2020/21, but the original strategic plan for the roll out of 111 included a dedicated pause in 2020 to allow the implementation of the necessary ICT infrastructure, i.e., a new integrated digital solution for the 111 and GP OoHs across Wales. To this end, during 2019/20 the Trust has been heavily engaged in the procurement of the new joint national system. This will need further capital investment and support from Welsh Government for which an Outline Business Case has already been agreed in principle. Working with the National Programme, the Trust will support the development of the Full Business Case to reach a successful conclusion to the current procurement process during 2020/21.

In 2019/20 the Trust commenced its exploration of call handling as a discrete service provision under the umbrella of the wider function of the ambulance service, the opportunities available to the Trust and system as well as the enablers which would be required to move to a more holistic view of call handling services. The work undertaken in 2019/20 identified opportunities to realise a range of benefits which will be explored more fully in 2020/21.

During 2019/20 the Trust also undertook a Clinical Contact Centre (CCC) Clinical Review. This was not an original key deliverable for 2019/20, but a request of the new Director of Operations. The Review explored what opportunities there are for improvement, reform and change within the CCC, from a clinical perspective. The Review made 25 recommendations. Its recommendations, if enacted, will facilitate the Trust's transition from the current disparate and, often independent, clinical functions, to a Clinical Hub characterised by co-ordinated and integrated services which seamlessly stream the patient to the clinical function best able to meet their urgent or emergency healthcare needs, whether that be clinical advice, assessment or tele-health services, irrespective of the number used to access care. In Mar-20 the Review was co-opted into the EMS Demand & Capacity Review Programme because of the link to the programme's ambition to increase the hear & treat rate; however, the Review's recommendations covered a range of areas, for example: governance, education, people and human resources, technology and estate.

Following the success of the North Wales Pilot in 2018/19, the numbers of Advanced Paramedic Practitioners (APPs) employed within the Trust continues to grow. 2019/20 saw, with the support of Health Education Improvement Wales (HEIW), 24 paramedics undertake full-time MSc studies with guaranteed positions at the end of successful completion. From Aug-20 these staff will become part of the establishment to contribute to an increase in safer care closer to home. In addition, HEIW have supported part-time studies for a number of paramedics who wish to progress to APP roles. In 2019/20, HEIW agreed that funding could be used to support bridging modules, to enable paramedics, who may not have had the opportunity previously to access higher education at level 6 and 7, to enable them to then apply for future funded MSc places.

As a result of the Trust's work on APPs (and other initiatives like Band 6 Paramedic and pathways), in 2019/20 the Trust conveyed less than half 45.3% (48.6% in 2018/19) of our patients to major Emergency Departments.



During 2019/20, the Trust received 60,706 verified incidents which were classified as a fall, equating to around 166 incidents across Wales per day. A total of 45,726 incidents required a response to scene. The way we respond to falls is undergoing a significant transformation, and much of this is as a result of listening to the families and carers of people who have fallen, alongside our engagement with frontline clinicians both working operationally and within the CCC. The development of the Falls Framework and the Falls Response Model are an important step towards achieving a safe, appropriate and consistent response across Wales for our patients who have fallen.

During the period of 2019/20 the Trust continued to roll out the role of the Falls Assistant (FA), in collaboration with St John Ambulance Cymru (SJAC). This ensures patients who have a non-injurious falls receive a timely response and assessment which is further supported by clinicians within the CCC.

In Sep-20, the Trust trialed a specialist Falls Clinical Support Desk which was staffed by a clinician (Nurse/Paramedic) and an allocator/dispatcher. The concept was focused on providing a designated desk to identify suitable incidents, clinical triage to assess suitability and operationally manage and support Falls Response capable resources; and during Feb-20, the Trust successfully appointed the Improvement Lead: Falls, to lead the exciting programme of work around the implementation of the Falls Framework and Falls Response Model. During 2020/21, alongside the Older Persons' Strategy the Trust will undertake widespread engagement to develop a Falls Improvement and Delivery Plan to further enhance the response, assessment and prevention elements of the Falls Framework.

In terms of UK ambulance services, WAST continues to lead the way regarding the adoption of independent (non-medical) prescribing for paramedics within the APP workforce. 2018/19 saw the development and approval of the required governance framework and internal policy to support non-medical prescribing within WAST. In the same year, the first five prescribers, supported by HEIW funding, completed their courses and began to deploy their skills in practice. In addition, 2019/20 saw a further five prescribers begin their training. This has been affected by the response to CoVID-19, but all candidates are due to complete their training with the support from participating universities and their practice mentors.

We have made good progress in delivering our mental health and dementia improvement plans. With regard to our workforce the Trust has:-

- Launched a mental health portal;
- Reduced stigma and encouraged people to come forward for help;
- Achieved award nominations and recognition;
- Organised a Trust World Mental Health Day; and
- Worked on dementia in our workforce

And we have improved our practices:-

- Improved dementia awareness for our staff;
- Online Mental Health and Dementia learning;
- Suicide First Aid; and
- Bespoke learning.

With regard to our patients and public engagement in 2019/20 we:-

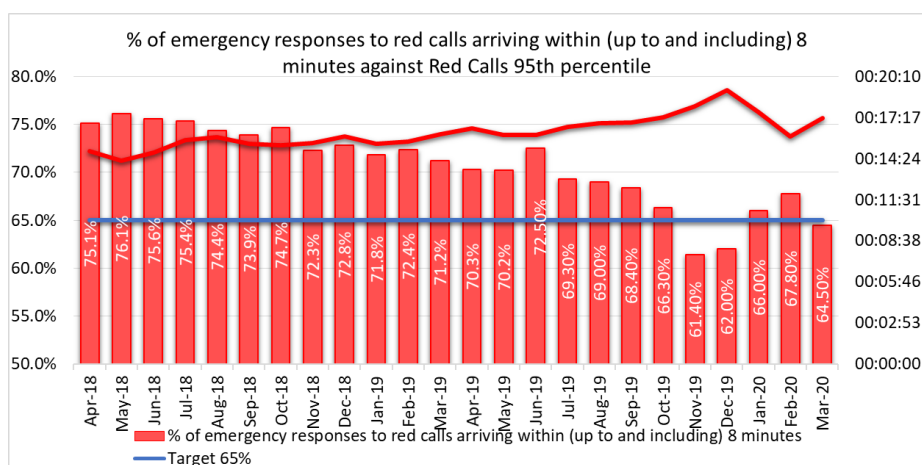
- Involved the public in our work;
- Organised celebration and Learning events;
- Worked on Dementia Friendly Environments;
- Launched a new all Wales NHS Dementia Guide; and
- Our dementia work recognised at an International level.

During 2019/20 work continued on our Electronic Patient Clinical Record (ePCR) solution project. A feasibility study on an in-house NHS Wales solution was conducted and this option rejected. The findings of the study were accepted in Jan-20 and Welsh Government provided endorsement for the Trust to proceed to develop a Full Business Case (FBC) which involves undertaking a procurement exercise to identify a preferred ePCR supplier from a framework, which will give the Trust access to actual product costs of a commercial solution to build our FBC. The work has been slowed due to the effort required in our pandemic response, but recognising the importance of this solution, the business case development is now back on track, with a plan to be complete by Aug-20.

#### **Strategic Priority 4 – Continue to provide best possible care, outcomes and experience to our patients of our core service**

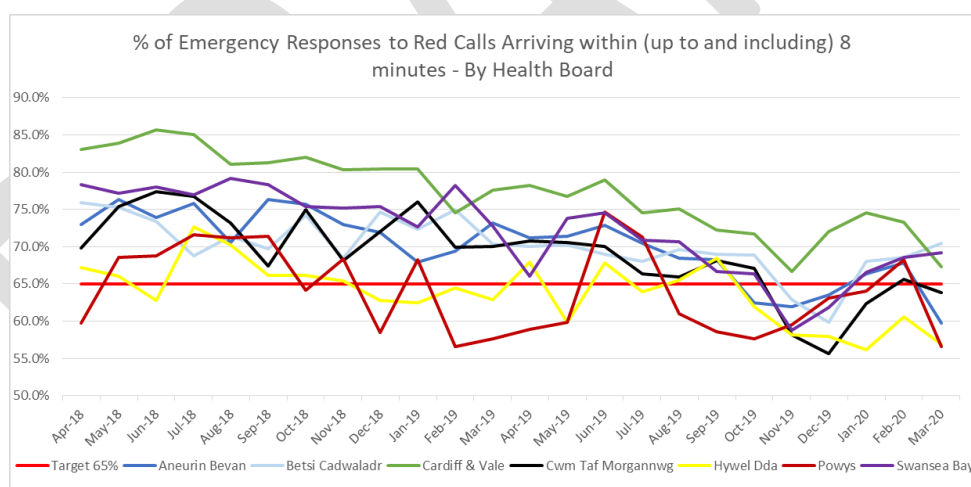
The Trust maintained RED 8 minute performance above the 65% Welsh Government target for nine months in 2019/20. Nov-19 was the first time since the implementation of the Clinical Response Model in Oct-15 that the Trust's RED performance fell below the 65% target. This happened again in Dec-20 before a combination of incentivised overtime and a focus on handover lost hours at a number of key hospital sites across Wales increased the ambulance hours produced and reduced lost hours to handover. In Mar-20 RED performance again dipped just under the 65% target as the impact of CoVID-19 began to be felt (it has subsequently recovered in the first quarter of 2020/21).





In Apr-20 the Trust went into a period of “enhanced monitoring” with the National Collaborative Commissioning Unit (NCCU) on our RED performance. The Trust responded by producing a comprehensive Red Improvement Plan, which was monitored weekly by the Director of Operations, until the onset of the CoVID-19 response.

There has also been variation in RED performance with Cardiff & the Vale traditionally seeing the highest RED performance and Cwm Taf Morgannwg, Hywel Dda and Powys health boards sometimes being below the 65% target. In Hywel Dda’s case, the Trust did not achieve the 65% target in the second half of the year (see information on AMBER Review and EMS Demand & Capacity Programme below).

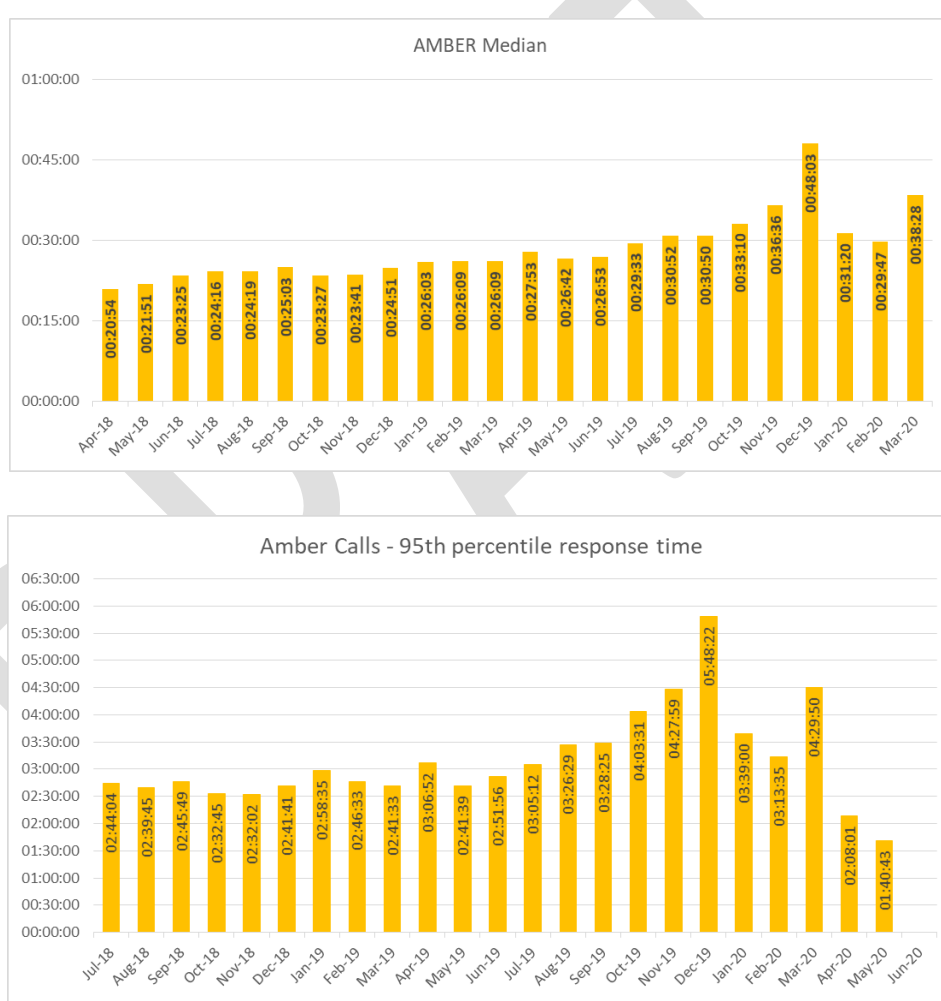


The Amber Review was published in Nov-18. Arising from the Review and under the direction of the NCCU, the Trust agreed to an Amber Implementation Programme, which contained nine recommendations with “assurance mechanisms” to be delivered by Nov-19. The bulk of the Amber Review Implementation Programme actions have been delivered in line with the Nov-19 deadline (and in line with Ministerial expectations); however, there will be a time lag between delivering the processes and tasks identified as the “assurance mechanisms”, for example implementing the findings from EMS Demand & Capacity Review, and improving Amber performance (see below).

The collaborative and independent EMS Demand & Capacity Review was undertaken during 2019/20 with the full report going to Jan-20 EASC:-

The Review identified a “relief gap” of 262.5 FTEs and a projected FTE requirement of 537.5 FTEs by Dec-24. EASC has agreed to fund 136 additional FTEs in 2020/21 and an EMS Demand & Capacity Programme was established in Mar-20 with seven projects. The original position agreed with EASC (and funded) was to increase the number of FTEs by 46 in the period Dec-19 to Mar-20; however, the Trust was unable to deliver this increase with 21 being recruited with the balance to be recruited and trained in 2020/21.

There will be a time lag before these actions impact on AMBER performance. This Performance Report highlights how response times to the AMBER category of patients has an underlying upward trend and unfortunately in Dec-19 the AMBER 95th percentile was 5 hours and 48 minutes, the highest the Trust has recorded.



Whilst not the only factor that influences performance, there is a strong correlation between handover lost hours and AMBER performance. The Trust lost 112,058 ambulance hours to handover, compared to 66,521 in 2018/19, which was already considered high.

On 15 Jan-20, the Minister for Health & Social Housing, Vaughan Gething, announced, as part of his written statement on unscheduled care pressures, the establishment of a Ministerial Ambulance Availability Taskforce. The taskforce was just getting underway when CoVID-19 struck.

<https://gov.wales/written-statement-update-unscheduled-care-pressures-over-winter-201920-and-next-steps-improve>

The second part of handover at hospitals is the time from handing over the patient to clearing the hospital and being available to respond to the next incident. In Jul-19, the Trust introduced a new process for clearing ambulances at hospitals, referred to as “Dual PIN” technology, which requires both the ambulance crew and hospital staff to agree that the ambulance has cleared. As a result there was a significant reduction in lost hours from Jul-19 onwards with 3,030 hours being lost in the period Jul-19 to Mar-20, compared to 8,663 in the same period last year.

During 19/20, the Trust completed the two large patient activity transfers within the health care system, namely Hywel Dda & Swansea Bay scheduled care ambulance transport transferring to the Trust's NEPTS.

The NEPTS call taking function has also seen many improvements including the introduction of new call taking scripts, a new post of National Call Taking Manager to oversee service delivery and the development of the Transport Solutions programme. The Transport Solutions programme, which will go live within Quarter 2 of 20/21, will see eligible patients receive a more efficient transport booking system and non-eligible patients supported to find alternative accommodation that is suitable for their travel needs. The programme will also improve communications with patients and will provide greater clarity on the availability and access to NEPTS provision. Much of this work has already commenced including: a new website, promotion of a single booking number and improved patient facing communication methods.

Over the past twelve months we worked closely with the NCCU and a number of health boards to develop an outline model for an All Wales Transfer and Discharge Service. The model of transport for the Grange University Hospital in Aneurin Bevan University Health Board and the South Wales Major Trauma Network will offer the first opportunities to test out the emerging model in 2020.

### **Strategic Priority 5 – Whole system partnership**

Through our Strategic Planning and Partnership Forum we keep abreast of the development of strategic service change across Wales. The key areas of focus in 2019/20 were the development of the South Wales Major Trauma Network (MTN), Thrombectomy transfers in North and South Wales and the development of the transport solution for the opening of the Grange University Hospital in 2021. We secured funding to develop the Thrombectomy and MTN services, and by Mar-20 we had fully assured the South Wales MTN of our preparedness for “go live”.

During 2019/20, the Board adopted a wide-ranging organisational engagement framework, the only one of its kind in Wales, linked to the priorities of the IMTP. This sets out how the Trust will engage with its partners and its people over the next three years, with a one year delivery plan to be refreshed annually. Progress is reported to the Trust Board quarterly.

The framework encompasses the breadth of stakeholder engagement, from colleagues and volunteers, to patients, carers, young people and vulnerable groups, through to wider health and

social care partners, using the architecture of Regional Partnership Boards (RPB) as a mechanism for wider system engagement.

Whilst it is important that we develop a long term approach to partnership and engagement, it is also important we maintain those existing relationships which we have. The Trust is now participating in four of seven RPB, or their substructures, across Wales. As a commissioned service, there is more to do in this space and, during 2020/21 efforts will be made to secure representation on the remaining three RPBs.

Clinical developments within the Trust and partner health boards require constant evaluation of existing pathways and the implementation of new patient-centred pathways to health care. In 2019/20 the Pathways Development Group was established to determine which areas of care would benefit from a nationally developed pathway. The work was developed in partnership with the NCCU and Welsh Government as a means by which pressure on secondary care could be reduced by involving speciality support for a pathway development. The initial test of change centred around the respiratory pathway. This pathway was deployed in the Aneurin Bevan Health Board area with plans (that were interrupted by CoVID-19) to deploy across Wales. Future work will concentrate on embedding the respiratory pathway and determining which other clinical areas might offer alternative safe care closer to home.

### **Strategic Priority 6 – Support our people to be the best they can be**

The Trust is undertaking a substantial programme of work to support our people. The two key headline metrics for this priority are the ambulance hours we deliver and sickness absence levels. There is a lot of complexity behind these headline numbers, but the key headlines in 2019/20 were:-

- the Trust delivered 1,355,173 ambulance unit hours in 2019/20, compared to 1,342,520 in 2018/19, an increase of 1%. This is for all types of resource: APP, CTL, RRV and UCS; and
- the Trust did not achieve its sickness absence target of 6.30% for 2019/20, but did start to see a significant reduction in Dec-19 to Feb-20, until CoVID-19 began to really affect sickness absence in Mar-20.

We launched our three year Leadership and Management Development Strategy in 2019/20 and building on All Wales work led by HEIW, the Trust recognised the importance of challenging our current approaches to succession planning and talent management and identified individuals to be a part of a talent pool of potential to participate in an All Wales Talent Summit.

The health and wellbeing of our staff is a key priority. The Trust took a significant step in this area during 2019/20 with the appointment of the new Organisational Culture and Workplace Wellbeing Lead (Consultant Clinical Psychologist) who become full time at the end of Mar-20.

During 2019/20 the Trust has continued to develop the TRiM model of service and recently secured funding for our TRiM practitioners to attend update training, which will incorporate moral injury. All of our Wellbeing Advocates and Blue Light Champions have access to mental health awareness training.

In Jul-19, the Trust Board approved the Transforming Education and Training Strategy. Since then significant progress has been made in relation to delivery of year 1 and 2 strategic objectives. We have been recommended as a Center of Excellence by our regulated education providers Future Qualls who signposted another UK Trust to contact us for the best delivery model of the Certificate of Assessing Awards and Certificate in Education and Training. Work continues on the planning of our new training center at Matrix House, providing a state of the art facility in the South Wales area and we opened a new training facility in North Wales.

Welsh Government approved a Higher Apprenticeship Framework suitable for Emergency Medical Technicians (EMT) and the first cohort of Trainee EMTs commenced their development just after the year end in Apr-20.

Approval of the Trust's new Volunteer Strategy has been further delayed due to the on-set of CoVID-19; however, the importance of volunteers is recognised in the Trust and the Community First Responders (CFR) continued to make a significant contribution to the Trust's EMS performance. In 2019/20 our CFRs were first on scene in 16,125 incidents, compared to 15,437 in 2018/19 (note: figures include uniformed response contribution from Fire & Rescue Services).

The Trust has continued to make good progress on the Band 6 Paramedic Project; 2019/20 being the second year of the three year programme.

### **Strategic Priority 7 – Ensure the design and infrastructure of the organisation are at the forefront of innovation and technology**

During 2018/19, the Trust developed and launched the Welsh Ambulance Service Trust Improvement and Innovation Network (WIIN). Since the launch of WIIN in early 2019, we have received over 100 submissions, with over 60 being taken forward as an improvement project or signposted to an appropriate lead. This has contributed to the completion of 48 Silver Improving Quality Together (IQT) projects. Ongoing support and coaching is provided throughout the testing of ideas and regular updates are entered onto the WIIN database so that there is a clear and up-to-date log of how ideas have progressed. Ideas that are not immediately supported and progressed are transferred to the ideas warehouse: 15 of which have already been taken forward.

During 2019/20, preparatory work was undertaken to inform a bid for a replacement NEPTS Computer Aided Dispatch (CAD) to support the required service developments. A draft NEPTS Business Justification Case (BJC) was developed with the final BJC being expected for completion and presentation for approval during Quarters 2 & 3 of 2020/21.

The Trust has invested substantially in technology over the last twelve months to accelerate its transformation into a leading digital Ambulance Trust. This previous investment along with a series of modernisation projects, such as migration to Microsoft Office 365, enabled the Trust to quickly support the move to homeworking in response to the CoVID-19 pandemic. The Trust was also well placed to quickly expand its call taking capacity across both 111 and 999 services to accommodate the increased demand during the peak of the pandemic. The appointment of a Director of Digital Services demonstrated the Trust's commitment in this area and the Director will now oversee the development of a Digital Strategy that aligns with both the Trusts Strategy to 2030 and NHS Wales Digital Strategy for Health and Care.

The Trust has successfully rolled out nine QlikSense (the Trust's performance software) applications to increase insight and intelligence in all frontline service areas of 111 and NHS Direct Wales, 999 Emergency Services and Non-Emergency Patient Transport Service operations.

The Trust invested (via Welsh Government capital monies) a number of years ago in powerful EMS ambulance simulation software. In 2018/19 the Trust entered into an arrangement with the supplier of this software (Optima Predict) for an "embedded analyst" to work inside the Trust and support the Trust with the development of the software. 2019/20 was the first full year of this arrangement with the analyst producing +10 reports, normally for the Director of Operations, on a range of performance topics, for example, the impact on performance of a new ambulance station location. This work has been well received by Operations colleagues and by the NCCU. Further collaborative development of the Trust's approach to forecasting and modelling is expected during 2020/21.

A number of new internal systems have been introduced to improve communications with staff. There was a major shift in this at the end of 2019/20 when the Trust triggered its Pandemic Influenza Plan on 04 Mar-20. These changes will really start to impact in 2020/21, and include:-

- Aiding remote working to allow staff to still be productive away from the office. The migration to Office 365 and the use of the Microsoft Teams application was hugely successful as part of this, allowing staff to attend virtual meetings from anywhere;
- Zoom meetings between the CEO and colleagues across the Trust; and
- The purchase of additional laptops to support home working.

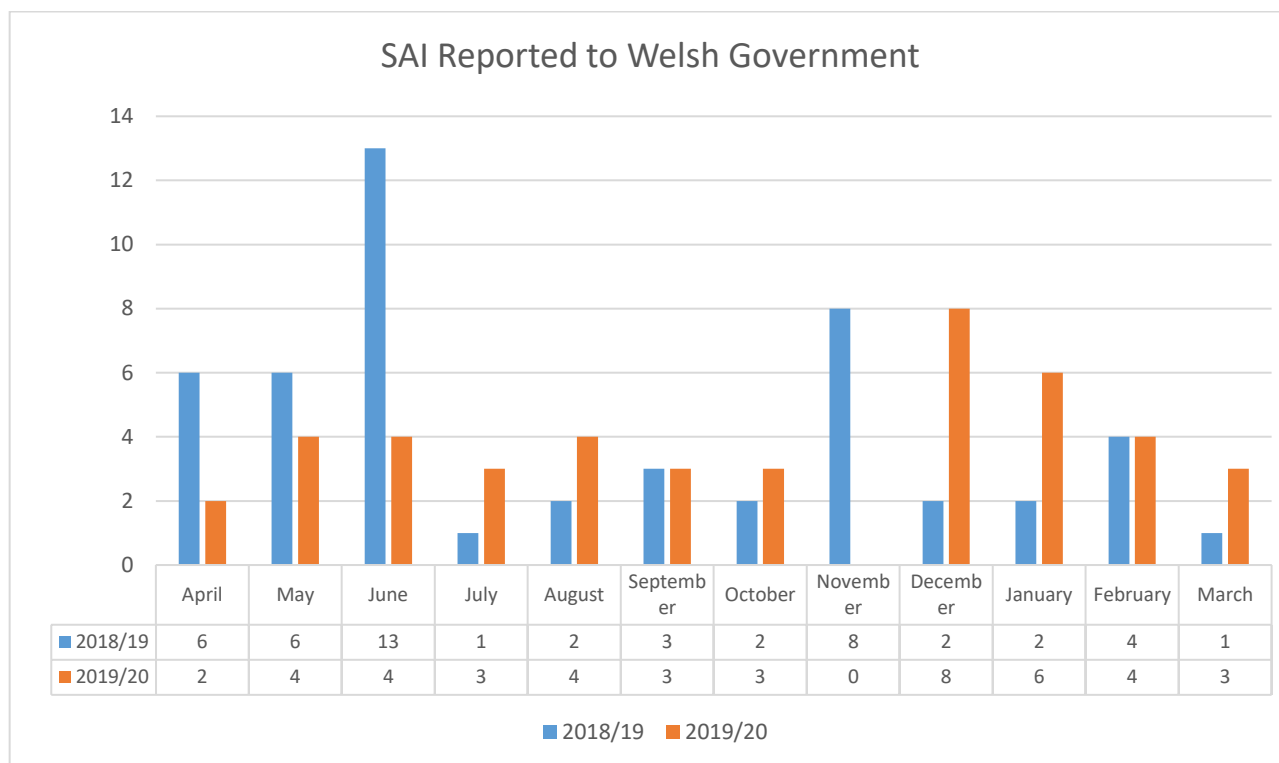
To help this even further, the distribution of iPads to all road based staff is currently underway and should be finished by the end of Aug-20, which will allow staff to access systems away from stations using either WiFi or 4G mobile networks.

## **Strategic Priority 8 – Quality at the Heart of Everything We Do**

The key headline measure for quality, safety and patient experience is the number of Serious Adverse Incidents (SAIs) that we report, investigate and learn from.

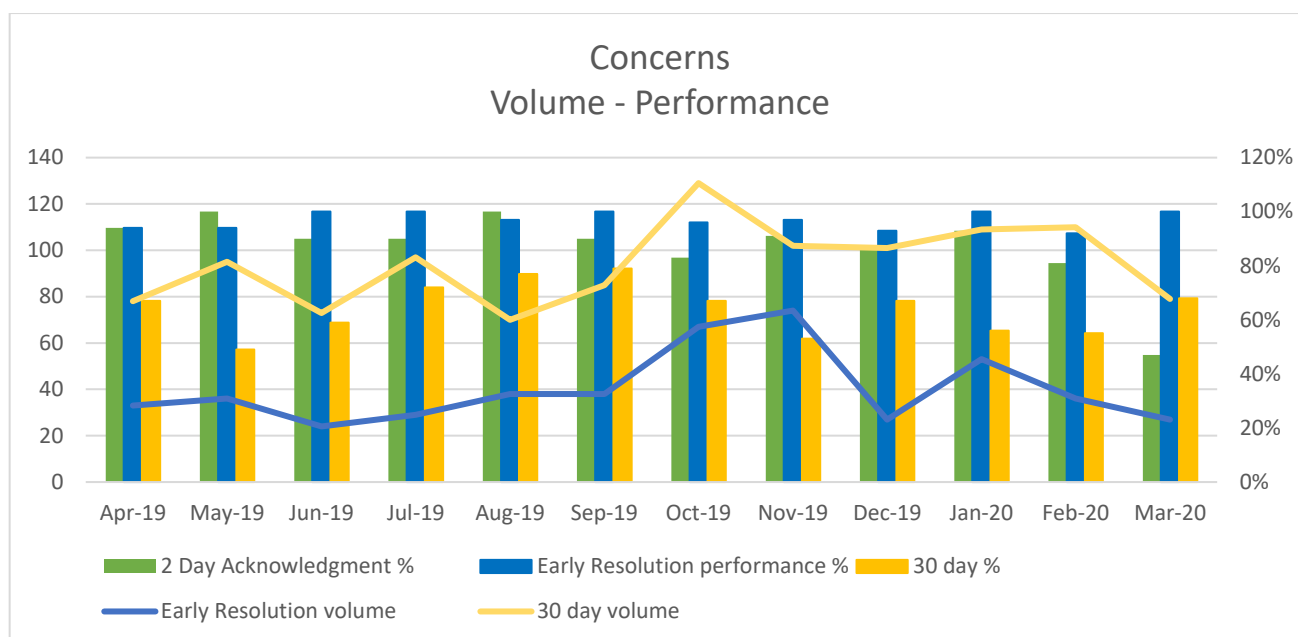
During 2019/2020 WAST reported 44 SAIs compared to 50 in 2018/19. The table below represents the SAIs reported to Welsh Government by reporting month, comparing 2018/19 to 2019/20. The

Trust continues to work on the learning which is drawn from each SAI, whether that be individual, organisational or system learning.



In relation to patient safety incidents, there were 1,748 patient safety incidents in 2018/19, compared to 2,081 2019/20. This represents an overall increase of 19% in the total volume of patient safety incidents being reported within the Trust's Datix system.

Another key quality, safety and patient experience metric, is the compliance against the 30 day concerns resolution target. The Trust received a total of 1,610 concerns in 2019/20 compared to 1,460 in 2018/19, which represents an increase of 10%. In relation to the Trust's Tier 1 target of 75% within the 30 day period, overall the Trust has achieved 64% for this time period. The table below represents the 2 day acknowledgement (performance), early resolution (volume & performance) and 30 day compliance (volume and performance).



In relation to coroner's activity there were 229 '*for information*' requests received, with physical attendances by staff from the Trust equating to eight instances. This is reflective of the significant improvement in relation to the quality of the statements being provided by our staff members, and the improvement work undertaken by the Legal Services Team within the Putting Things Right department. During this period the Trust received 4 Regulation 28 Prevention of Future Death Reports, all of which were responded to within the 56 day timeframe.

During 2019/20, the Trust set out to scope and develop a three-year Quality Strategy that will drive improvement in quality management across the organisation and wider health & care system. The developing Strategy is aligned to the Health and Social Care (Quality and Engagement) (Wales) Bill which will place a duty upon the Trust to secure improvements in the quality of organisational services provided to patients and service users. The Bill includes a Duty of Candour. As a result, the Trust's Putting Things Right and Patient Safety teams are revising current process and guidelines to implement the changes as set out in new legislation. These changes will build upon the already established mechanisms with the Trust of being 'open and honest', to support the culture of 'openness, transparency and candour' which is widely associated across the NHS health care system.

The Trust introduced an in-house designed electronic risk management system during 2019/20, which has improved the ease with which managers can record and share risks. The Corporate Risk Register is a live document in this system and is formally reported to committee each quarter. The beginning of the Performance Report provides a summary of the Trust's corporate risk register at the end of 2019/20.

The Safeguarding Annual Report provides an overview on how the Trust has performed over this reporting period in relation to safeguarding people in our care. It aims to give the Trust Board the necessary assurances that the statutory duties under the Children Act 2004, the Social Services and Well-being (Wales) Act 2014, the Violence Against Women Domestic Abuse and Sexual Violence (Wales) Act 2015 and the Welsh Government Adult and Child Protection guidance are being fulfilled.



The Trust complies with the specific requirements under Section 25 of the Children Act 2004 that there is a lead executive director for children and young people's services and a designated non-executive director for the purposes of the Act. The Director of Quality, Safety and Patient Experience is currently the executive lead for safeguarding within WAST.

The Quality Safety & Patient Experience Directorate provides strategic direction, expertise and support to all staff within the Trust for Infection Prevention and Control (IPC) in line with legislation and National Standards. In May-19, an end of plan progress report was produced for the Trust, which identified key areas for improvement. Good progress has been made with achievements including:-

- The development of the IPC Assurance Framework and Governance Structure within the Trust;
- An IPC Incident dashboard to identify themes and trends arising from Datix; and
- Vehicle Cleaning Standards were developed and approved through the IPC Governance Framework, alongside this, the emerging Make Ready Depots (MRD) developed a Standard Operating Procedure to complement these standards and run parallel for vehicle cleaning.

During 2019/20, several key challenges were identified, including:-

- Improvement required in flu vaccination up take and immunisation recording;
- Lack of Pandemic Flu preparedness;
- A vehicle cleaning audit tool that does not depend solely upon visual assessment;
- Premise cleaning provisions across all sites associated with the Trust;
- Continuation of sharps related injuries; and
- Capacity and capability to deliver the Trust's Safe Clean Care campaign which was due to commence in 2019.

The NHS (Concerns, Complaints and Redress Arrangements) (Wales) Regulations 2011 (hereafter, the 'Regulations') apply to all Welsh NHS bodies, primary care and independent providers in Wales, which provide NHS funded care. The Regulations set out the process for the management of concerns (known as Putting Things Right), and are supported by detailed guidance on raising a concern. The process aims to make it easier for people to raise concerns, to be engaged and supported during the process, dealt with openly and honestly and for bodies to demonstrate learning. The process has enabled a single, more joined up approach, bringing together the management of complaints, incidents and claims, based on the principle of 'investigate once, investigate well'.

In 2019/20 our Patient Experience & Community Involvement team attended 260 events across Wales. Consistent themes captured from our engagement have included:-

- Repetitive questioning from those working in our control rooms;
- Kind, caring, compassionate staff; and
- Delays at hospital when arriving by ambulance.

We have engaged a broad spectrum of the public across Wales; however, we have also undertaken a more focused engagement with a number of specific groups to deliver against some of the Welsh Government ambitions.

## **Strategic Priority 9 – Value in everything that we do**

On 16 Jan-20 we showcased our Bevan Exemplar project 'A Shock To The System' at The Senedd. Our project brought together the Finance and Fleet Departments to identify cost savings and efficiency improvements relating to the Trust's Corplus Defibrillators. The main aim of our project was to realise cost savings and efficiencies through co-production, whilst aligning with the principles of prudent healthcare.

We have continued to work with the Association of Ambulance Chief Executives (AACE), the All Wales Ambulance Services Director of Finance forums and via Celtic Nations connections and links, which has provided a platform for sharing and learning.

In 2019/20 the Trust procured a Patient Level Information and Costing System (PLICS) with detailed implementation to commence during 2020/21 which will involve key stakeholders such as our commissioners and clinicians.

The continued drive for value from procurement has resulted in implementing a 'No Purchase Order, No Pay' process, as well as strengthening our engagement with NHS Shared Services.

The Radio-Frequency Identification (RFID) businesses case was approved by Trust board in Quarter 4 of 2019-20 with the product being procured in Mar-20. The project plan is to implement the RFID system during 2020-21 across the whole of Wales.

The EMS Demand & Capacity Review, which was completed in 2019/20, provided the Trust with a range of industry benchmarks, which are being built into the benefits programme that has emerged from the Review (an approach we expect to repeat in 2020/21 with the NEPTS Demand & Capacity Review).

## **Strategic Priority 10 – Use of our estate and fleet**

A key estate development in 2019/20 was work on the replacement of Blackweir (Cardiff) ambulance station. The Full Business Case (FBC) for the development of Cardiff Area Ambulance Station (Merton House) to replace the existing reporting station at Blackweir was approved by Trust Board on 21 Nov-19 and by Welsh Government on 22 Jan-20 for an investment of £7,959m. An open tender process was followed and as a result of an assessment of the quality submission of tenders returns, John Weaver Construction Ltd was selected as the preferred contractor. The acquisition of Merton House, and associated land, took place on 28 Feb-20 and the official start date on site is 13 Jul-20.

Other key areas of estate progressed in 2019/20 include: an Outline Business Case development for the South East Fleet Workshop, which was approved by Trust Board during 2019/20 and submitted to Welsh Government for consideration, and completion of a Training & Development facility within Ty Elwy, North Wales.

Work commenced in 2019/20 on reviewing and refreshing the Estate's Strategic Outline Programme (SOP) which included engagement with key stakeholders and the development of a prioritisation framework. Further consideration is to be given to the EMS and NEPTS Demand & Capacity Reviews and their impact on the SOP with refresh work being completed 2020/21. The Trust has identified that the already high utilisation of the estate is a significant barrier to delivering the recommendations from these reviews.

As at 31 March the Trust had 778 vehicles in its fleet:-

Vehicle Role	Number
Emergency Ambulances (Including UCS + Neonatal)	266
Rapid Response Vehicles	142
Non Emergency Patient Transport Service	283
Specialist Vehicles (All Other Vehicles)	87
<b>Total</b>	<b>778</b>

The Trust has one of the most modern and well-equipped fleets in the UK thanks to continued support from Welsh Government. A key action for the Trust in 2019/20 was to ensure the second year plan of the Welsh Government endorsed 10-year SOP for the Trust's fleet delivered what had been agreed. Capital investment for the Trust's fleet provided by Welsh Government totalled some £13,586m, which was used to procure a range of replacement vehicles in line with our SOP.

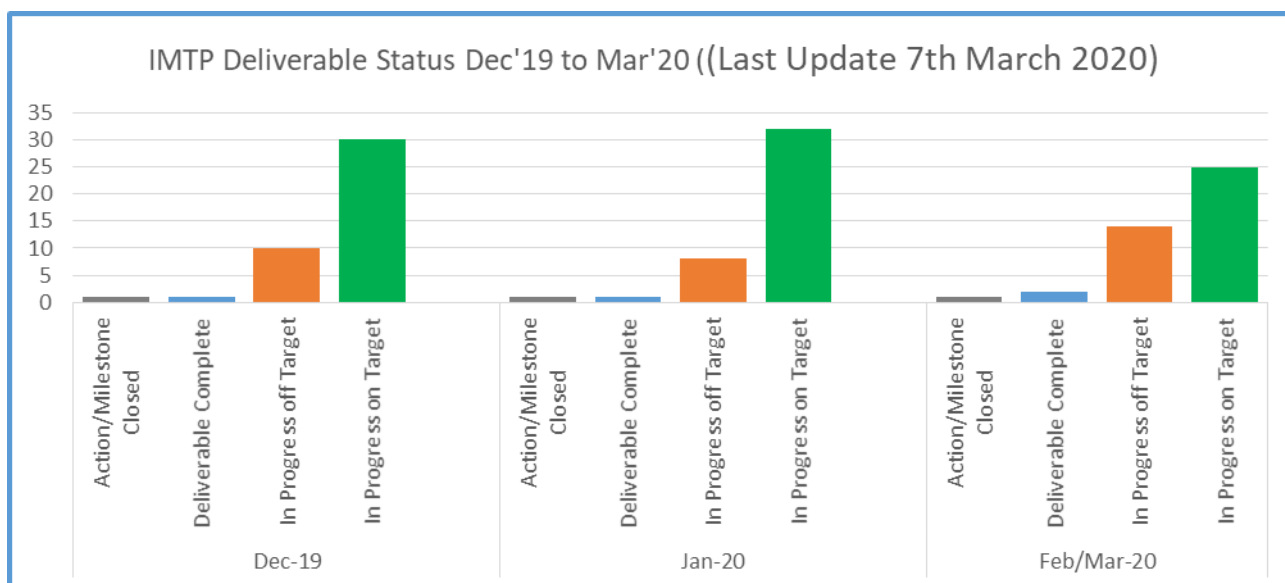
Wherever possible, the Trust is reducing its carbon footprint especially in the Fleet Department. As part of the £13,586m vehicle replacement programme the Trust replaced 25 diesel-powered Rapid Response Vehicles (RRVs) with ultra-low emission, self-charging petrol hybrid variants. These vehicles along with all NEPTS vehicles, replaced in 2019/20, are fitted with solar panels that negate the need for shore-line charging from the mains supply.

The Fleet SOP will undergo detailed review in 2020/21 linked to the EMS Demand & Capacity Review and NEPTS Demand & Capacity Review.

### **IMTP Deliverables**

In support of the delivery of the LTS and IMTP the Trust has 42 IMTP key deliverables which it regularly monitors progress against.

Due to CoVID-19, a year end position, i.e., at the 31 Mar-20, was not completed this year, however, the position as at 07 Mar-20 was as follows:-



Feb/Mar-20	Action/Milestone Closed	1
	Deliverable Complete	2
	In Progress off Target	14
	In Progress on Target	25

The detailed rating for each of the 42 IMTP Key deliverables is shown overleaf:-

S.no	Theme	Deliverable	Dec-19	Jan-20	Feb-20
1	Delivering Excellence	Develop and approve a WAST Public Health Plan	In Progress on Target	In Progress on Target	In Progress on Target
2	Delivering Excellence	Continue expansion of APP role (if funded and agreed with commissioner)	In Progress on Target	In Progress on Target	In Progress on Target
3	Delivering Excellence	Evaluate and implement APP/non medical prescribing framework	In Progress on Target	In Progress on Target	In Progress on Target
4	Delivering Excellence	Complete rollout of 111 service across Wales	In Progress on Target	In Progress on Target	In Progress off Target
5	Delivering Excellence	Articulate Opportunities to be caller handler of choice	In Progress on Target	In Progress on Target	In Progress on Target
6	Delivering Excellence	Deliver full benefits of the NEPTs business case	In Progress on Target	In Progress on Target	In Progress on Target
7	Delivering Excellence	Complete transfer of work from Health Boards and Trusts	In Progress off Target	In Progress off Target	In Progress off Target
8	Delivering Excellence	Design and implementation of improved booking and call taking processes and procedures	In Progress on Target	In Progress on Target	In Progress on Target
9	Best Care & Outcomes	Deliver on the EMS commissioning intentions	In Progress on Target	In Progress on Target	In Progress on Target
10	Best Care & Outcomes	Deliver NEPTs commissioning intentions	In Progress on Target	In Progress on Target	In Progress on Target
11	Best Care & Outcomes	Review of approach to station cleaning	In Progress off Target	In Progress off Target	In Progress off Target
12	Best Care & Outcomes	Implement the recommendations of the Amber review	In Progress on Target	In Progress on Target	In Progress off Target
13	People	Approve & Implement a HWB Strategy	In Progress off Target	In Progress off Target	In Progress off Target
14	People	Approve & implement a transforming education strategy	In Progress on Target	In Progress on Target	In Progress on Target
15	People	Implement the approved Leadership & Management Strategy	In Progress on Target	In Progress on Target	In Progress on Target
16	People	Refresh our commitment to volunteering	In Progress on Target	In Progress on Target	In Progress on Target
17	Whole System Engagement	Develop a Trust engagement plan	In Progress on Target	In Progress on Target	In Progress off Target
18	Whole System Engagement	Ensure full engagement in preparations for the go live of a major trauma network for South Powys and South Wales on the 01 April 2020	In Progress on Target	In Progress on Target	In Progress on Target
19	Whole System Engagement	Delivering a targeted and effective programme of schools and community engagement	In Progress off Target	In Progress on Target	In Progress off Target
20	Whole System Engagement	Articulate and start to deliver a transfer and repatriation service to support Health Board strategic service change	In Progress off Target	In Progress off Target	In Progress off Target
21	Technology & Innovation	Develop a Digital transformation strategy	Action/Milestone Closed	Action/Milestone Closed	Action/Milestone Closed
22	Technology & Innovation	Develop specification and business case for new NEPTs CAD system	In Progress on Target	In Progress on Target	In Progress off Target
23	Technology & Innovation	Develop access to services online and through internet applications	In Progress on Target	In Progress on Target	In Progress on Target
24	Technology & Innovation	Secure approval for the procurement of the EPCR	In Progress off Target	In Progress off Target	In Progress off Target
25	Technology & Innovation	Utilise technology to improve communication with staff	In Progress on Target	In Progress on Target	In Progress on Target
26	Technology & Innovation	Utilise video and other technologies to enhance the way our services are accessed	In Progress on Target	In Progress on Target	In Progress on Target
27	Technology & Innovation	Launch and develop the WIIN platform (WAST Innovation and Improvement Network)	In Progress on Target	In Progress on Target	In Progress on Target
28	Technology & Innovation	Review of next priorities from estates SOP and development of cases for capital funding	In Progress on Target	In Progress on Target	In Progress off Target
29	Technology & Innovation	Delivery of an MRD for Cardiff and new work shop for south east region	Deliverable Complete	Deliverable Complete	Deliverable Complete
30	Technology & Innovation	Modernisation of our fleet	In Progress off Target	In Progress off Target	In Progress off Target
31	Technology & Innovation	Improve the capture sharing & utilisation of information through implementation & rollout of QlikSense & Optima	In Progress off Target	In Progress on Target	In Progress on Target
32	Quality at the Heart	Develop and approve Older People's Framework	In Progress on Target	In Progress on Target	In Progress off Target
33	Quality at the Heart	Engage and involve users with sensory loss to improve accessibility	In Progress on Target	In Progress on Target	In Progress on Target
34	Quality at the Heart	Implementation of the Mental Health and Dementia Improvement Plan	In Progress on Target	In Progress on Target	In Progress on Target
35	Quality at the Heart	Deliver prioritised actions of the Carter Review	In Progress on Target	In Progress on Target	Deliverable Complete
36	Quality at the Heart	Roll out Trusts Falls Framework	In Progress on Target	In Progress on Target	In Progress on Target
37	Value & Efficiency	Explore opportunities for further work with ICHOM and the Bevan Commission	In Progress on Target	In Progress on Target	In Progress on Target
38	Value & Efficiency	Maintain strong links with the other UK nations to enable sharing of best practice and collaborative work	In Progress on Target	In Progress on Target	In Progress on Target
39	Value & Efficiency	Improve understanding of cost base and cost behaviour, including benchmarking based on outcomes as well as costs	In Progress on Target	In Progress on Target	In Progress on Target
40	Value & Efficiency	Maximise procurement efficiencies	In Progress on Target	In Progress on Target	In Progress on Target
41	Value & Efficiency	Improve efficiency in stock inventory and asset tracking, through RFID	In Progress off Target	In Progress off Target	In Progress on Target
42	Value & Efficiency	Deliver an improvement in resource availability levels	In Progress off Target	In Progress off Target	In Progress off Target

## **2. Performance Analysis**

### **2.1 Measuring and Monitoring Progress on Performance and Delivery**

The Trust prides itself on being amongst the most transparent ambulance services in the World in terms of performance. Every month, key statistics on performance are published by Welsh Government and performance is recorded against the relevant indicators outlined in the NHS Delivery Framework for Wales. EASC publishes a comprehensive set of AQIs on a quarterly basis (suspended for Quarter 4 due to CoVID-19 response), and at every Board meeting the Trust Board receives a range of reports considering quantitative and qualitative information on progress against the IMTP and performance metrics.

Internally, the Trust closely monitored progress against the IMTP. The key components of which were:-

- 10 IMTP priorities;
- 42 IMTP key deliverables, each assigned to a Director lead;
- a suite of performance indicators; and
- achievement of a balanced financial plan.

A new approach to IMTP delivery was agreed as finalising our 2019/20 plan with a new Strategic Transformation Board (STB) established in 2019/20 supported by an overhauled and updated Quality & Performance Report, which is reported to each Board (and monthly to Executive Management Team). The IMTP is underpinned by Directorate Local Delivery Plans (LDPs) and a Planning & Performance Management Framework. The Framework is due for review and was identified as needing review in the 2018 Structured Assessment. Due to other priorities, this work was not commenced until Quarter 4 2019/20 and was then stopped due to CoVID-19. Nevertheless, a significant amount of work has been undertaken on planning and performance within the Trust.

### **2.2 Performance against NHS Delivery Framework**

The NHS Delivery Framework sets out a range of indicators against which the Trust is measured by Welsh Government. Performance against these indicators is discussed at the 6-monthly Joint Executive Team (JET) meetings between the Trust and Welsh Government officials. The Jun-20 2019/20 year end JET did not occur this year due to the CoVID-19 response; however, the Trust has produced the information for these JET indicators, so it can report a year end position. The table below summarises the year end performance, and shows that there are 17 measures where the target has been achieved, 2 where delivery has been within 5% of target and 13 where the target has not been delivered. This is an improvement on the previous year. More detailed information on the majority of these indicators is found in the following sections of this Performance Report.

NHS Delivery Framework 2019/20 Domain	No. of Measures where target delivered	No. of measures where delivery has been within 5% of the target	No. of measures where the target has not been delivered	Domain RAG	Delivery Measure	Delivery Measure RAG
Staying Healthy	0	0	1	R	Uptake of the influenza vaccination amongst healthcare workers (direct patient contact)	R
Safe Care	3	0	4	R	Number of Patient Safety solutions Wales Alerts and Notices that were not assured within agreed timescales % serious incidents assured within the agreed timescales Number of Never Events Number of administration, dispensing, and prescribing medication errors reported as serious incidents Number of patient falls reported as serious incidents Amber Calls - 95th percentile response time Red Calls - 95th percentile response time	R R G G G R R
Effective Care	5	0	2	G	% compliance of the completed level 1 Information Governance (Wales) training element of the Core Skills & Training Framework % calls ended following WAST telephone assessment (hear & treat) % patients conveyed to hospital following a face to face assessment Number of Health and Care research Wales clinical research portfolio studies Number of Health and Care research Wales commercially sponsored studies Number of patients recruited in Health and Care Research Wales clinical research portfolio studies Number of patients recruited in Health and Care Research Wales commercially sponsored studies	G G G G R G R
Dignified Care	0	0	2	R	% of concerns that have received a final reply (under reg 24) or an interim reply (under reg 26) up to and including 30 working days from the date the concern was first received by the organisation % of NHS employed staff completing dementia training at an informed level	R R
Timely Care	6	1	3	G	% of emergency responses to red calls arriving within (up to and including) 8 minutes Amber calls - median response times % NHSDW calls answered within 30 seconds of the welcome message % 111 calls answered within 60 seconds of the end of the message Median 999 Call answer times 65th Percentile 999 Call answer times 95th Percentile 999 Call answer times % stroke patients documented as receiving appropriate stroke bundle of care % patients with fracture hip/femur who are documented as receiving analgesia % acute coronary syndrome patients who are documented as receiving appropriate STEMI care bundle	G R R R G G G A G G
Staff and Resources	3	1	1	G	Financial balance % of headcount by organisation who have had a PADR/medical appraisal in the previous 12 months (exc. Doctors and dentists in training) % staff who are undertaking a performance appraisal who agree it helps them improve how they do their job Overall staff engagement score % compliance for each completed Level 1 competency within the Core Skills and Training framework by organisation % sickness absence rate of staff % staff that would be happy with the standards of care provided by their organisation if a friend or relative needed treatment Emergency Ambulance Unit hours production	G R - - G G - A

## 2.3 Performance against Commissioning Intentions

Because the Trust is a commissioned organisation receiving the bulk of its funding from EASC, the Trust is also required to report on a range of EASC commissioning intentions. In collaboration with Welsh Government and EASC, the Trust has also agreed to report on 17 key EMS commissioning intentions at the JET meetings, with the expectation that in future years NEPTS will also be included.

Whilst the Trust reports at JET on these top EMS commissioning intentions, the Trust has a more extensive set to deliver on each year. The commissioning intentions are split across three types: commissioning framework improvements (referred to as table 1a), performance improvements (referred to as table 1b) and joint intentions with health boards (referred to as table 2). A summary of progress on these is set out in the following table:-

	EMS Table 1a	EMS Table 1b	EMS Table 2	NEPTS Table 1a
Complete	7	8	1	7
On-target	0	3	0	0
Off-target	5	5	3	20
Significantly off-target	0	8	1	2
Re-programmed	0	2	0	0
<b>Total</b>	<b>12</b>	<b>26</b>	<b>5</b>	<b>29</b>

The detail behind this table has been provided to the National Collaborate Commissioning Unit (NCCU) which supports EASC and is available on request. There is no Table 1b or Table 2 for NEPTS in 2019/20.



## 2.4 Strategic Priority 1 – Help Patients and Staff Stay Healthy

### **Strategic Priority 1 Key Deliverables**

- Develop and implement a Public Health Plan
- Develop an Older Person's Framework, strengthening our role in supporting frailty, loneliness and isolation
- Collaborate with Health Boards to develop a range of referral pathways
- Support resilient communities through programme of engagement and education

Our implementation of our Public Health plan has been affected over the last few months by the CoVID-19 Pandemic. However, in light of the pandemic, we will now review our Public Health Plan and our three ambitions, learning from the experience of dealing with Covid-19 and its subsequent impact on our society.

The Trust was successful in its application for Healthier Wales funding to develop and implement key leadership and support roles to deliver our Older Person's improvement ambitions. In Jan-20, an Improvement Lead for Older People was employed within the Trust. An engagement plan was developed which was a wide, collaborative engagement plan across WAST workforce, local authorities, health boards, older people and individuals. The plan was to be rolled out from Mar-20 to Aug-20 with a launch of the Framework on Older Persons' Day in Oct-20. Due to the CoVID-19 pandemic, this has been reviewed and will commence with a workshop at the Older Persons Steering Group in Jul-20. Engagement with Stakeholders will mostly now take place digitally and there will be a number of live Facebook sessions for discussions with staff. Learning from the Pandemic in relation to Older People will also be considered within the Framework. The main headings of the Older Persons' Framework will be Co-production, Falls, Clinical, CoVID-19, and Workforce. Each area has a number of themed topics and issues within which have already been identified as continued areas in need of improvement or concern to Older People across the Trust. Frailty is a specific area which is having a clinical focus as there is a need to address this across the Trust in all areas including education. A Frailty Tool is currently being rolled out across the Trust being lead clinically by a Reginal Clinical Lead (North Wales). There are also key developments around loneliness and isolation in a co-produced manner which will be focused upon with the aim of improving options to assist Older People across Wales.

Clinical developments within WAST and partner health boards require constant evaluation of existing pathways and the implementation of new patient-centred pathways to health care. In 2019/20 the Pathways Development Group was established to determine which areas of care would benefit from a nationally developed pathway. The work was developed in partnership with commissioners and Welsh Government as a means by which pressure on secondary care could be reduced by involving speciality support for pathway development. The initial test of change centred around the respiratory pathway. This pathway was deployed in the Aneurin Bevan Health Board area with plans (that were interrupted by CoVID-19) to deploy across Wales. Future work will concentrate on embedding the respiratory pathway and determining which other clinical areas might offer alternative safe care closer to home.

## 2.5 Strategic Priority 2 – Help patients more easily access our services at the right time

### Strategic Priority 2 Key Deliverables

- Engage and involve users with sensory loss to improve accessibility
- Utilise video and other technologies to enhance the way our services can be accessed
- Develop access to services online and through internet applications, including online portal for NEPTS bookings, linked to hospital systems

Patient feedback received from people living with a sensory loss has continued to follow recurring themes:-

- Deaf BSL users want to communicate with us in their language of choice – BSL. They would appreciate it if our staff only knew some basic signs that could be used to reassure them;
- A better system is required to allow people living with a sensory loss to complain or give feedback about their experience;
- An accessible system that allows someone with a sensory loss the ability book, amend or query a non-emergency transport booking is needed;
- Awareness needs to be raised about how to support an assistance dog user; and
- We need to produce information about our services in more accessible formats.

These themes are still relevant and continue to be the main areas of feedback and concern that the Trust is continuing to work to address.

The Trust has made progress on the utilisation of video and other technologies to enhance the way our services can be accessed. The NHS Direct Wales website was rebranded to NHS 111 Wales in Mar-20. A number of new developments and features were included within the website:-

- Increased the number of online self-assessment symptom checkers from 28 to 32;
- Facilitated the development of a CoVID-19 section including the creation of a chat-bot to enable users to ask questions instead of following a self-assessment algorithm;
- Created a range of new public resources that included;
- a leaflet, 'Seven Vital Signs', that explains what our emergency staff do when responding to patients;
- a 'mental health services' information leaflet;
- a video explaining how we respond to calls '999 – What happens next';
- a new section on 'dementia' that included a wide range of information for those living with dementia, their families and friends; and
- A dedicated 'easy read' section with range of pictorial and easy read resources.

Over the course of 2019/20, much work has been undertaken to promote and encourage remote NEPTS bookers to make bookings through the web-based cleric system. The NEPTS system team supported by local management have been actively promoting online systems and have delivered training sessions to numerous sites, particularly in West & Mid Wales. As a result good progress has been made on increasing the proportion of bookings being made through online systems. In addition, all discharge desks operating now work through the online ebooking system primarily.

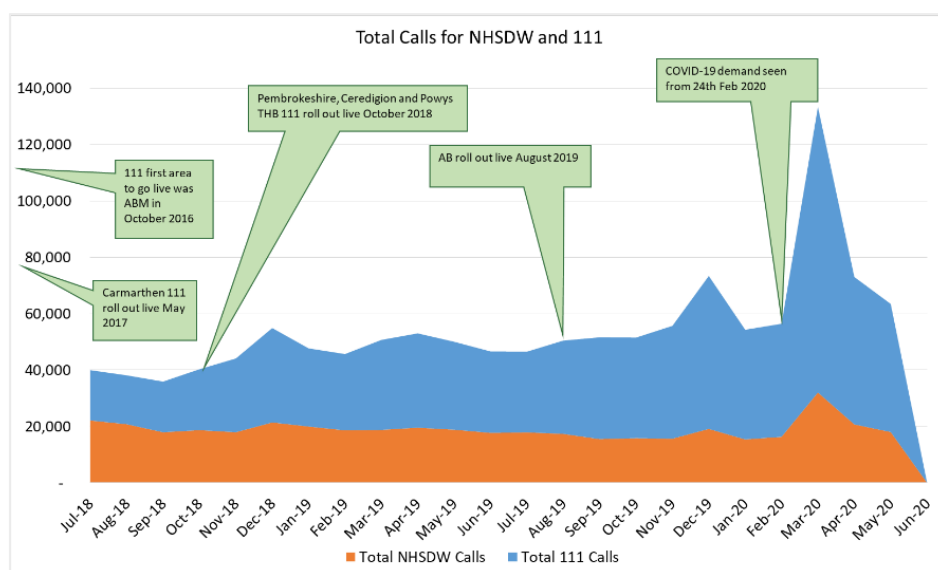
## 2.6 Strategic Priority 3 – Provide Right Care in the Right Place, wherever and wherever it is needed

### **Strategic Priority 3 Key Deliverables**

- Complete roll out of 111 service across Wales, and formalise role as provider
- Articulate opportunities to be call handler of choice
- Continue expansion of the Advanced Practitioner Paramedic role (if funded and agreed with commissioner)
- Roll out Trust's Falls Framework
- Evaluate and implement APP / non-medical prescribing framework (if funded)
- Implement Mental Health and Dementia Improvement Plans
- Secure approval for and procurement of the Electronic patient clinical record system

111 is a free-to-call, non-emergency, clinical advice line that is amalgamating NHS Direct Wales and GP Out of Hours (GP OoHs) across Wales. A national 111 Programme Board has been established to oversee implementation of the service which has been rolled out within four Health Board areas (Swansea Bay, Aneurin Bevan, Hywel Dda and Powys, and also the Bridgend locality which now sits within Cwm Taf Morgannwg). The 111 service is a core component of the Trust's longer term ambitions regarding the delivery of 'Hear & Treat' services and virtual clinical triage. While the successful rollout across Wales must be the immediate priority, we also see the 111 service being a key piece of the jigsaw in the first point of contact for accessing services review.

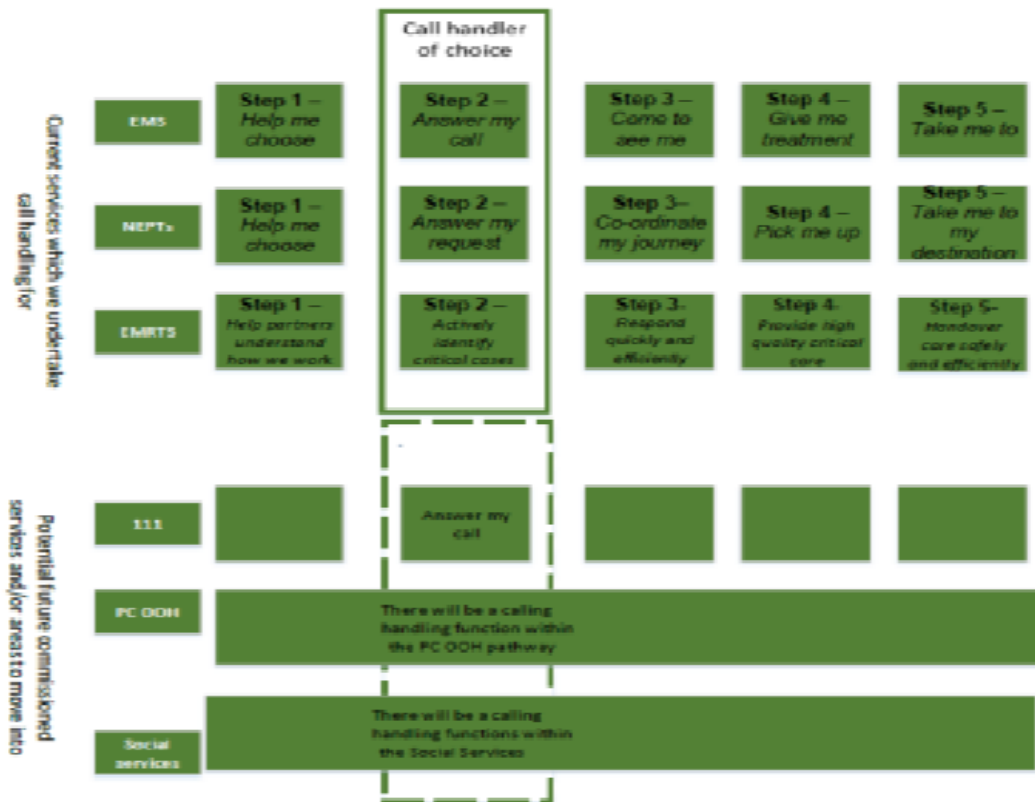
The expansion of 111 continued in 2019/20 with the full 111 service going live in Aneurin Bevan University Health Board and as part of the Trust's initial CoVID-19 response, the 111 number live across all of Wales, but not the full service. Subject to the demands of CoVID-19 the roll out will continue into 2020/21, but the original strategic plan for the roll out of 111 included a dedicated pause in 2020 to allow the implementation of the necessary ICT infrastructure. A new, integrated digital solution for the 111 and GP OoHs across Wales. To this end, during 2019/20, the Trust has been heavily engaged in the procurement of the new joint national system. This will need further capital investment and support from Welsh Government for which an Outline Business Case has already been agreed in principle. Working with the National Programme, the Trust will support the development of the Full Business Case to reach a successful conclusion to the current procurement process during 2020/21.



The Trust is the host of 111, not the provider, but in 2019/20 with regard to the Trust Provider Status it has been confirmed that the Trust will be the provider of 111 services on behalf of NHS Wales and will have Contracting Authority Status under the Public Contracts Regulations 2015, with timescales for transition from the National Programme to be agreed over the next 18-24 months. This status will underpin our unique position across Wales as not only an emergency service and transport provider but also as a key healthcare provider. This will allow us to better join up GP OoHs and 111 with the other two key services which we already provide: NHS Direct Wales/111 and our 999 emergency service and to support urgent primary care services and the pre-hospital primary care system.

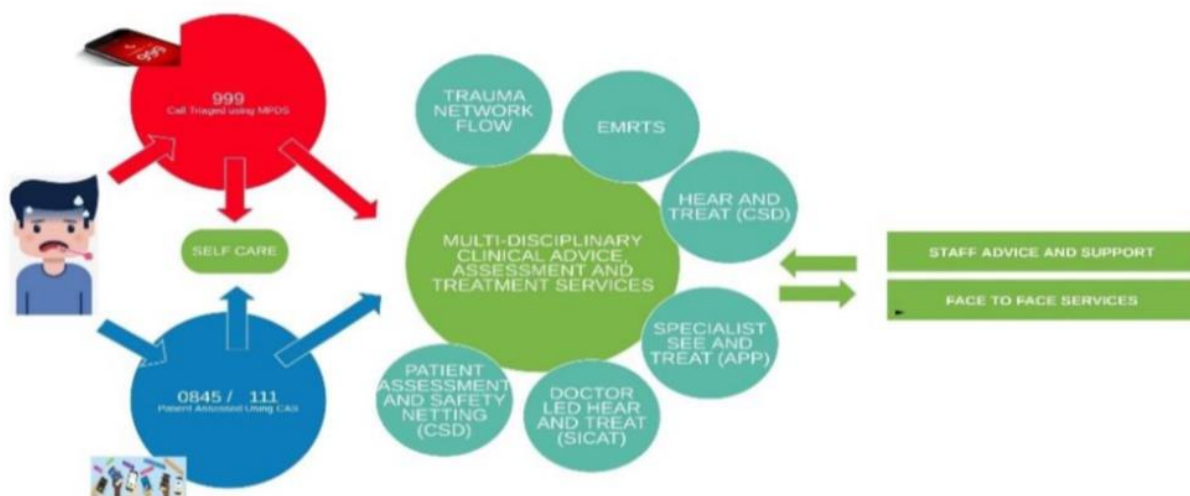
In 2019/20, the Trust commenced its exploration of call handling as a discrete service provision under the umbrella of the wider function of the ambulance service, the opportunities available to the Trust and system as well the enablers which would be required to move to a more holistic view of call handling services. The work undertaken in 2019/20 identified opportunities to realise the following benefits, which we want to explore in more detail:-

- Supporting people in getting the right information in their first, and only, call and maximise the chances of them staying and/or receiving care in their home;
- Improving our ability to provide unscheduled care services wherever and whenever it is needed; and
- Increasing our ability to co-ordinate all of the journeys a patient might need whether that be emergency conveyance, repatriations, discharges or planned appointments, and improving patient experience by knowing they are at all times dealing with one organisation and point of contact.



All those call handling and assessment services, currently provided by the Trust, are underpinned by a clinical function. In 2019/20 the Trust undertook a comprehensive review of these services.

During 2019/20 the Trust also undertook a CCC Clinical Review. This was not an original key deliverable for 2019/20, but a request of the new Director of Operations. The Review explored what opportunities there are for improvement, reform and change within the CCC, from a clinical perspective. The Review made 25 recommendations. Its recommendations, if enacted, will facilitate the Trust's transition from the current disparate and, often independent, clinical functions, to a Clinical Hub characterised by co-ordinated and integrated services which seamlessly stream the patient to the clinical function best able to meet their urgent or emergency healthcare needs, whether that be clinical advice, assessment or tele-health services, irrespective of the number used to access care. In Mar-20, the Review was co-opted into the EMS Demand & Capacity Review Programme because of the link to the programme's ambition to increase the Hear & Treat rate; however, the Review's recommendations covered a range of areas, for example: governance, education, people and human resources, technology and estate.

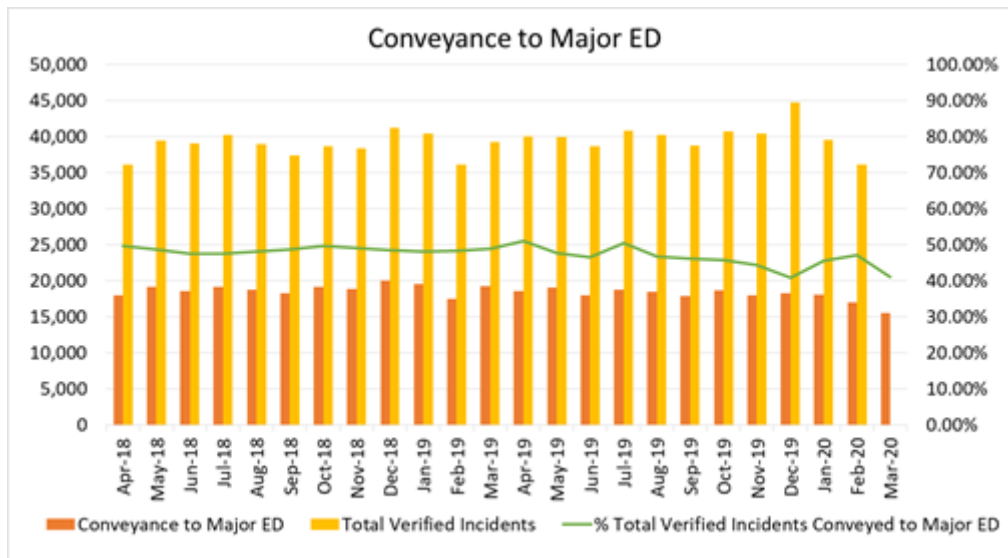


As this work is finalised and completed in year 2 of the plan, work will then begin in terms of our longer term ambitions to use our knowledge and experience to potentially integrate other numbers used to access care (e.g., helplines, social care), and also to expand the range of clinicians who are brought together in the Clinical Hub to maximise opportunities to respond to patients' needs.

Following the success of the North Wales Pilot in 2018/19, the numbers of Advanced Paramedic Practitioners employed within the Trust continue to grow. 2019/20 saw, supported by HEIW, 24 paramedics undertake full-time MSc studies with guaranteed positions at the end of successful completion. From Aug-20 these staff will become part of the establishment to contribute to an increase in safer care closer to home. In addition, HEIW have supported part-time studies for a number of paramedics who wish to progress to APP roles. In 2019/20 HEIW agreed that funding could be used to support bridging modules, to enable paramedics who may not have had the opportunity previously, to access higher education at level 6 and 7 to enable them to then apply for future funded MSc places.

Advanced Paramedic Practitioners continue to support the out of hours primary care service in Hywel Dda through a funded rotation and in North Wales, 2019/20 saw a team of APPs begin a rotation through primary care as part of a Welsh Government funded Pacesetter scheme which will run until the end of March 2022. In Swansea Bay, paramedics rotate into GP Out of Hours with the plan that this is continued with a group of Advanced Paramedic Practitioners from winter 2020. In Aneurin Bevan University Health Board APPs are funded to support 'managed' GP practices. Rotational working between CCC and operational duties is still the clinical vision within WAST, with the APP role in CCC requiring further development.

As a result of the Trust's work on APPs (and other initiatives like Band 6 Paramedic and pathways), in 2019/20 the Trust conveyed less than half 45.3% (48.6% in 2018/19) of our patients to major Emergency Departments.



During 2019/20, the Trust received 60,706 verified incidents which were classified as a fall, equating to around 166 incidents across Wales per day. A total of 45,726 incidents, required a response to scene. The way we respond to falls is undergoing a significant transformation, and much of this is as a result of listening to the families and carers of people who have fallen, alongside our engagement with frontline clinicians both working operationally and within the Clinical Contact Centre. The development of the Falls Framework and the Falls Response Model are an important step towards achieving a safe, appropriate and consistent response across Wales for our patients who have fallen.

During the period of 2019/20, the Trust has continued to roll out the role of the Falls Assistant (FA), in collaboration with St John Ambulance Cymru (SJAC). This ensures patients who have non-injurious falls receive a timely response and assessment which is further supported by clinicians within the Clinical Contact Centre. A further FA team was introduced through funding from the Gwent Regional Partnership Board and the Integrated Care Fund within the Aneurin Bevan area, operating by night. Challenges have existed with regards to the implementation of the Falls Assistant within Betsi Cadwaladr and Powys throughout the year due to increasing operational pressures and the increased utilisation of SJAC across the wider organisation. It is anticipated that the Trust will continue to roll out the Falls Assistant to the remaining two health boards across Wales (Besti Cadwaladr and Powys) by July 2020.

In Sep-20, the Trust trialled a Specialist Falls Clinical Support Desk which was staffed by a clinician (Nurse/Paramedic) and an allocator/dispatcher. The concept was focused on providing a designated desk to identify suitable incidents, clinically triage to assess suitability and operationally manage and support Falls Response capable resources. Following a comprehensive evaluation, the utilisation of falls assistants had increased throughout the trial period. The mean average utilisation during the period of Apr-19 to Sep-19 was 37%, but during the 2<sup>nd</sup> week of the trial the utilisation had reached a high of 51%. Following the positive evaluation, we are now examining opportunities to further develop the Hear and Treat and Clinical Contact Centre processes.

During Feb-20, the Trust successfully appointed the Improvement Lead: Falls, to lead the exciting programme of work around the implementation of the Falls Framework and Falls Response Model. During 2020/21, alongside the Older Persons' Strategy, the Trust will undertake widespread engagement to develop a Falls Improvement and Delivery Plan to further enhance the response, assessment and prevention elements of the Falls Framework.

In terms of UK ambulance services, WAST continues to lead the way regarding the adoption of independent (non-medical) prescribing for paramedics within the APP workforce. 2018/19 saw the development and approval of the required governance framework and internal policy to support non-medical prescribing within WAST. In the same year, the first five prescribers, supported by HEIW funding, completed their courses and began to deploy their skills in practice. In addition, 2019/20 saw a further five prescribers begin their training. This has been affected by the response to CoVID-19, but all candidates are due to complete their training with the support from participating universities and their practice mentors.

An evaluation of the first wave of prescribers will examine the benefits of this new level of service to both WAST and the wider unscheduled care arena. Continual analysis will shape the future of this new role in paramedic professional practice within WAST. Paramedic prescribing is new, dynamic and requires time to enable the organisation to learn about the implications of this cutting edge role.

We have made good progress in delivering our mental health and dementia improvement plans. With regard to our workforce the Trust has:-

- Launched a mental health portal:
  - The bilingual portal is accessible from any device, anywhere, any time. The portal aims to provide staff with information and resources around mental health and wellbeing; from advice for managers to self-assessment quizzes and access to online therapy; and
  - The portal can be accessed via the QR code which has been distributed across the Trust sites in the form of vinyl stickers, key fobs, magnets, posters and lapel pins.
- Reduced stigma and encouraged people to come forward for help:
  - Our #WASTKeepTalking campaign has continued to grow throughout the organisation. We released further videos of staff sharing their personal experiences and struggles with mental health to educate and inspire colleagues across the Trust, and to help us reduce stigma and improve help seeking.
- Achieved award nominations and recognition:
  - The Mental Health and the Workforce and OD teams were given a 'highly commended' award from the Chartered Institute of Personnel and Development, recognising the work that we have done collectively to embed a culture of workplace wellbeing.
- Organised a Trust World Mental Health Day:
  - The Mental Health and Dementia Team organised events across Wales to celebrate World Mental Health Day, 10 Oct 19. These events were successful in raising awareness of projects and work streams relating to both staff wellbeing and patient centred care including the #WASTkeep talking mental health and wellbeing portal, suite of mental health and dementia e-learning modules and a brand new addition to the #WASTkeep talking video series.
- Worked on dementia in our workforce
  - We have commenced work with our Workforce and OD colleagues to explore how we improve messaging to staff on healthy lifestyles that protect people against developing dementia. We are also exploring how our policies and practices might need to adapt to an ageing workforce in the future



And we have improved our practices:-

- Improved dementia awareness for our staff:
  - We have been developing a range of new dementia awareness sessions for our staff. People living with dementia and their carers encourage us to continually learn about dementia and its impact.
- Online Mental Health and Dementia learning:
  - Our e-learning modules have been developed internally and are targeted at front line WAST staff to improve knowledge and understanding of a number of issues including supporting people with dementia, suicide, self-harm, substance misuse and dementia. These modules will also be available in Welsh in coming months.
- Suicide First Aid:
  - Face-to-face training for staff has continued and we will be ramping up our training in this and next year by having in-house trainers in place.
- Bespoke learning:
  - We continue to offer bespoke learning opportunities for our staff across Wales, for all levels and new/existing staff; and
  - We have been supporting the development of the new paramedicine degree programme at Swansea University starting in 2020.

With regard to our patients and public engagement in 2019/20 we:-

- Involved the public in our work:
  - People who have dementia are involved in our work, from delivering training with us through to helping us think about the ambulance fleet more dementia friendly; and
  - We have started to replicate this in our broader mental health work programmes, by exploring how we improve service user representation in our meetings and at training events.
- Organised celebration and Learning events:
  - We held Dementia Celebration and Learning events across Wales, which brought together a range of dementia groups and partners to celebrate the achievements and outcomes of our dementia programme. We also used this opportunity to engage people about the next phase of our dementia plan, in line with the National Dementia Plan for Wales. The events provided an opportunity for people living with dementia and their carers to influence our dementia values and priorities for the future.
- Dementia Friendly Environments
  - People living with dementia and their carers often tell us that ambulance environments can be stressful. Over the last year we have been engaging with a range of dementia groups and communities across Wales to provide familiarisation opportunities; and
  - This has allowed people to feedback to us on the equipment we use, lights, colours and noises on the vehicles, which has helped us understand the sensory needs and requirements of people living with dementia.
- NHS Dementia Guide
  - A new All Wales bilingual information resource launched on the NHS 111 Wales website [www.111.wales.nhs.uk/LiveWell/Dementia](http://www.111.wales.nhs.uk/LiveWell/Dementia). The guide is a comprehensive introduction and overview of dementia, symptoms, diagnosis and treatments. The

guide provides effective signposting to a range of additional specialist organisations, charities and other sources of information.

- Dementia work recognised at an International level
  - The Welsh Ambulance Service has been chosen to showcase our innovation and action on dementia, in partnership with ITN and Alzheimer's Disease International in the programme 'Hope in the Age of Dementia'. The programme will include best practice from around 14 other countries.

Following submission of our OBC in Quarter 3 2019/20, Welsh Government commissioned an independent feasibility study. The study was to determine if an NHS Wales Electronic Patient Clinical Record (ePCR) solution could be designed and delivered in-house, either within the Trust or by the NHS Wales Informatics Service. The study was completed in Dec-19 and concluded that, it was not feasible at this time due to the significant additional time, cost and risk that developing bespoke software would bring to the project. The findings of the study were accepted in Jan-20 and the Welsh Government provided endorsement for WAST to proceed to develop a Full Business Case (FBC) which involves undertaking a procurement exercise to identify a preferred ePCR supplier from a framework, which will give the Trust access to actual product costs of a commercial solution to build our FBC. The work has been slowed due to the effort required in our pandemic response, but recognising the importance of this solution, the business case development is now back on track, with a plan to be complete by Aug-20.

## 2.7 Strategic Priority 4 – Continue to Provide the Best Possible Care Outcomes and Experience to our Patients of our Core Service

### Strategic Priority 4 Key Deliverables

#### *EMS*

- Deliver EMS commissioning intentions
- Implement recommendations of the Amber review
- Collaboration and co-production with Commissioner and Health Boards on delivery of a 5 year Demand and Capacity Review
- Deliver prioritised actions from the Carter Review

#### *NEPTS*

- Deliver NEPTS commissioning intentions
- Deliver full benefits of the NEPTS Business Case
- Complete transfer of work from Health Boards and Trusts
- Design and implementation of improved booking and call taking processes and procedures
- Articulate and start to deliver a transfer and discharge model/service for Wales

The Trust is required to deliver on commissioning intentions across three types: commissioning framework improvements (referred to as table 1a), performance improvements (referred to as table 1b) and joint intentions with health boards (referred to as table 2). A summary of progress on these is set out in the following table:-

	EMS Table 1a	EMS Table 1b	EMS Table 2	NEPTS Table 1a
<b>Complete</b>	7	8	1	7
<b>On-target</b>	0	3	0	0
<b>Off-target</b>	5	5	3	20
<b>Significantly off-target</b>	0	8	1	2
<b>Re-programmed</b>	0	2	0	0
<b>Total</b>	<b>12</b>	<b>26</b>	<b>5</b>	<b>29</b>

The detail behind this table has been provided to the National Collaborate Commissioning Unit (NCCU) which supports EASC and is available on request. There is no table 1b and 2 for NEPTS in 2019/20.

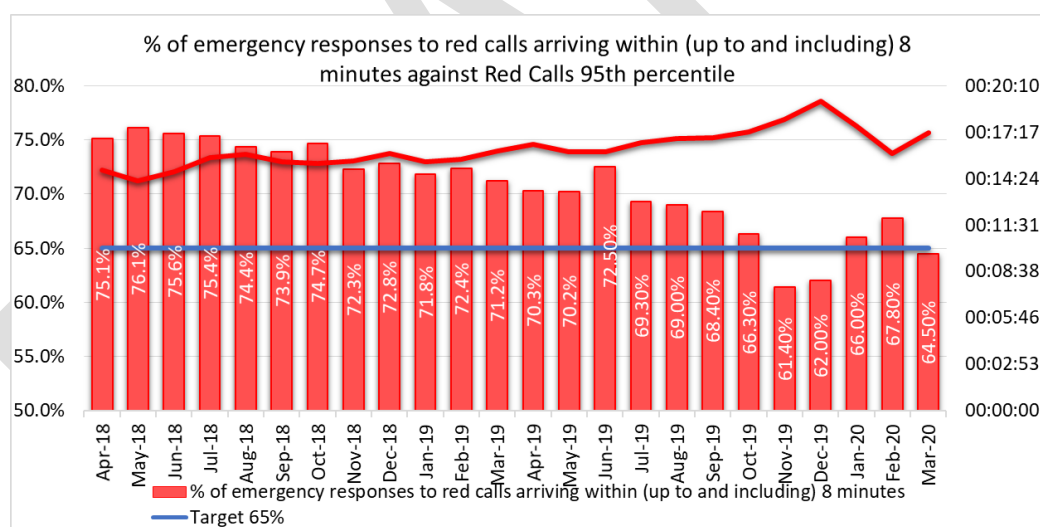
The commissioning intentions are a mix of developments and performance measures. Performance on the key headline metrics is as follows.

35,934 ambulances were not dispatched as a result of calls being closed by the Clinical Service Desk, compared to 34,965 in 2018/19. The commissioning intention was to improve (achieved), but the Trust's internal ambition was to achieve a 12% level of hear & treat in 2019/20. The EMS Demand &

Capacity Review (see below) undertaken in 2019/20 identified a benchmark rate of 10.2%, which is dependent on the Clinical Services Desk reducing the time spent on “safety netting” patients and focussing on suitable Hear & Treat incidents (reducing “safety netting” is dependent on reduced pressure in the unscheduled care system, improved efficiency, or more capacity).

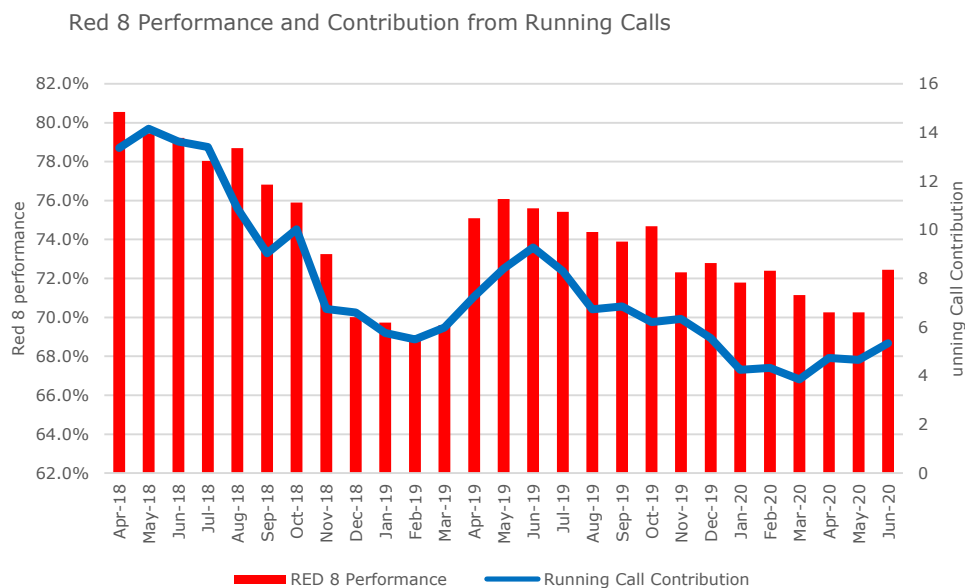
The Trust maintained RED 8 minute performance above the 65% Welsh Government target for nine months in 2019/20. Nov-19 was the first time since the implementation of the Clinical Response Model in Oct-15 that the Trust’s RED performance fell below the 65% target. This happened again in Dec-19 before a combination of incentivised overtime and a focus on handover lost hours at a number of key hospital sites across Wales increased the ambulance hours produced and reduced lost hours to handover. In Mar-20 RED performance again dipped just under the 65% target as the impact of CoVID-19 began to be felt (it has subsequently recovered in the first quarter of 2020/21).

RED performance has been on a gradual downward trend for some time, something that the Trust was expecting from its demand and capacity work, i.e., as demand has increased and capacity has reduced (there were unprecedented levels of handover lost hours in 2019/20); nevertheless the Trust went into a period of “enhanced monitoring” with the NCCU on our RED performance. The Trust responded by producing a comprehensive Red Improvement Plan, which was monitored weekly by the Director of Operations, until the onset of the CoVID-19 response. The vast majority of the actions in the Red Improvement Plan were delivered along with the incentivised overtime and focus on key hospital sites mentioned above.



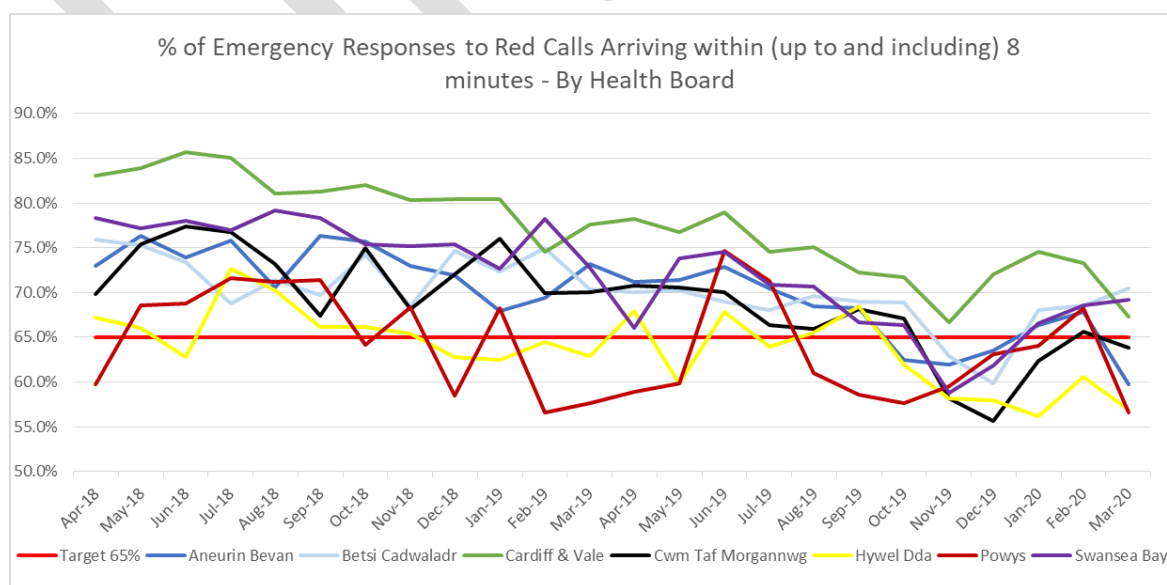
During 2019/20, the Trust made the clinically correct decision to change its CCC call answering process for RED calls. As a result RED demand increased by 20% (comparing May-19 to Mar-20 with the same period in 2018/19). The Trust participated in a levelling exercise held with the Medical Prioritisation Dispatch System (MPDS) Academy at which the Trust received some advice that related to the application of MPDS. The issue centred on how a call taker responds to ineffective breathing. Whilst the following explanation is limited to the breathing problem chief complaint, the principle applies to other chief complaints. The initial 999 call is broken into segments. The impacted segments are Case Entry and Key Questions. The Trust received advice that if prompts for ineffective breathing are provided to the call taker during Key Questions, the call taker should exit Key Questions and return to Case Entry. When at Case Entry the call taker is to select ineffective breathing. Previously, the call taker would have remained in Key Questions which would likely have resulted in an AMBER response. This revised approach will result in a RED response. This increase in RED demand may

not therefore be indicative of a particular change in patient presentation, and neither is it related to an appropriateness of categorisation (as ineffective breathing should be RED).



In addition, during 2019/20, the Trust saw a reduction in the number of “running calls” recorded (through increased consistency in the application of the standard / guidance). “Running calls” are incidents where an ambulance resource was passing or already on scene, which can therefore skew performance in terms of the Trust’s dispatch of ambulance resource to RED incidents.

There has also been variation in RED performance with Cardiff & Vale traditionally seeing the highest RED performance and Cwm Taf Morgannwg, Hywel Dda and Powys health boards sometimes being below the 65% target, in Hywel Dda’s case the Trust did not achieve the 65% target in the second half of the year (see information on AMBER Review and EMS Demand & Capacity Programme below).



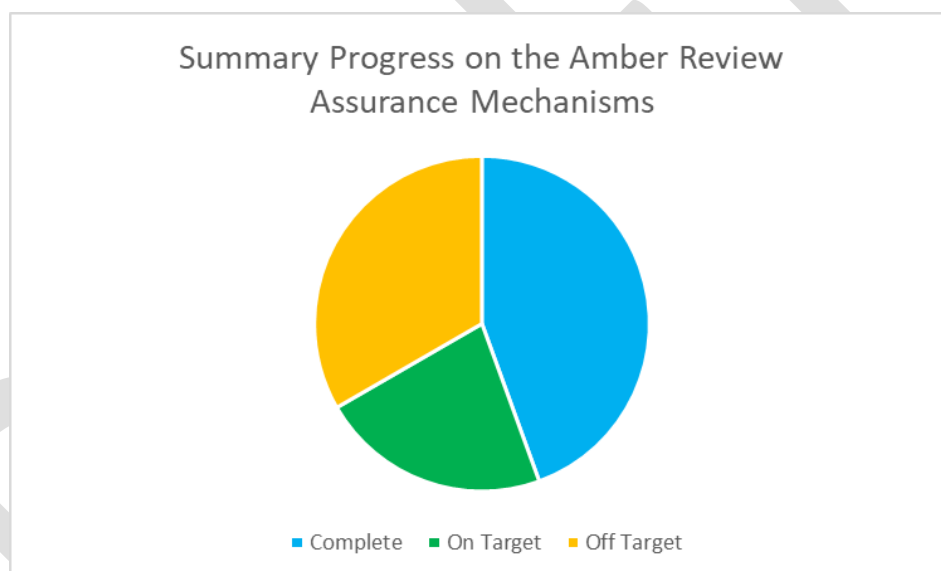
Because of the concern regarding longer waits in the Amber category, an independent review (the Amber Review) was requested by the CASC in 2018. The Amber Review concluded, “we have found that there are a number of patients in the amber category that are waiting too long to receive a response. The overriding factor in improving this is the availability of ambulance resources and not the categorisation of these patients as amber.”

The Review considered the factors affecting availability of ambulance resources. Many are within the Trust’s ability to influence and work has been on-going on actions to: reduce sickness and abstraction levels, increase the level of responding response deployed within available resources and improve the efficiency and effectiveness of the resource deployed.

The Amber Review was published in Nov-18:-

<http://www.wales.nhs.uk/sitesplus/documents/1134/NHS-Amber-Report-ENG-LR.PDF>

Arising from the Review, and under the direction of the NCCU, the Trust agreed to an Amber Implementation Programme, which contained nine recommendations with “assurance mechanisms” to be delivered by Nov-19. The pie chart below summarises progress on the recommendations and their assurance mechanisms.



The bulk of the Amber Review Implementation Programme actions have been delivered. A key part of the Implementation Programme was the agreement of, “community breach”: it was agreed that a wait of 12 hours or more for an ambulance would constitute a “community breach” and the Trust has subsequently reported these breaches.

Patient Waits over 12 Hours in Hours																																		
Month	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	32	33	34	Grand Total										
Apr-19	28	29	20	10	9	11	4	5	2	2															120									
May-19	30	25	18	16	10	13	2	7		1															122									
Jun-19	26	16	10	13	5	10	8	8		1					1										98									
Jul-19	45	28	22	14	9	14	5	4	4	1		2	1	1	2	1	1								154									
Aug-19	43	43	22	23	10	13	7	3	4	3			1												172									
Sep-19	44	24	24	14	18	12	5	5	3	3	2	1		1		1							1		158									
Oct-19	67	50	31	26	28	25	19	14	18	9	5	1	1	1					1						296									
Nov-19	62	64	45	41	25	19	15	12	11	10	6	7	3	1		3		1							325									
Dec-19	103	79	68	47	48	51	39	23	25	17	8	14	8	3	2	1	1		1	2					540									
Jan-20	50	44	40	36	34	32	16	15	8	7	7		2		4										295									
Feb-20	39	23	20	10	10	9	7	1	1		2	1	1	1											125									
Mar-20	52	49	43	23	15	15	11	9	2	2	1	1	3		1										227									
Grand Total	515	406	317	238	199	192	127	86	76	52	31	27	20	8	9	6	2	1	2	2	0	0	1		2317									

There is a strong correlation between these breaches and lost capacity to handover delays, but the Trust also agreed to “dip sample”, five long waits each month, always including the longest wait. This was due to start just as CoVID-19 struck, but will restart in Jun-20.

The collaborative and independent EMS Demand & Capacity Review was undertaken during 2019/20 with the full report going to Jan-20 EASC:-

<http://www.wales.nhs.uk/easc/january2020>

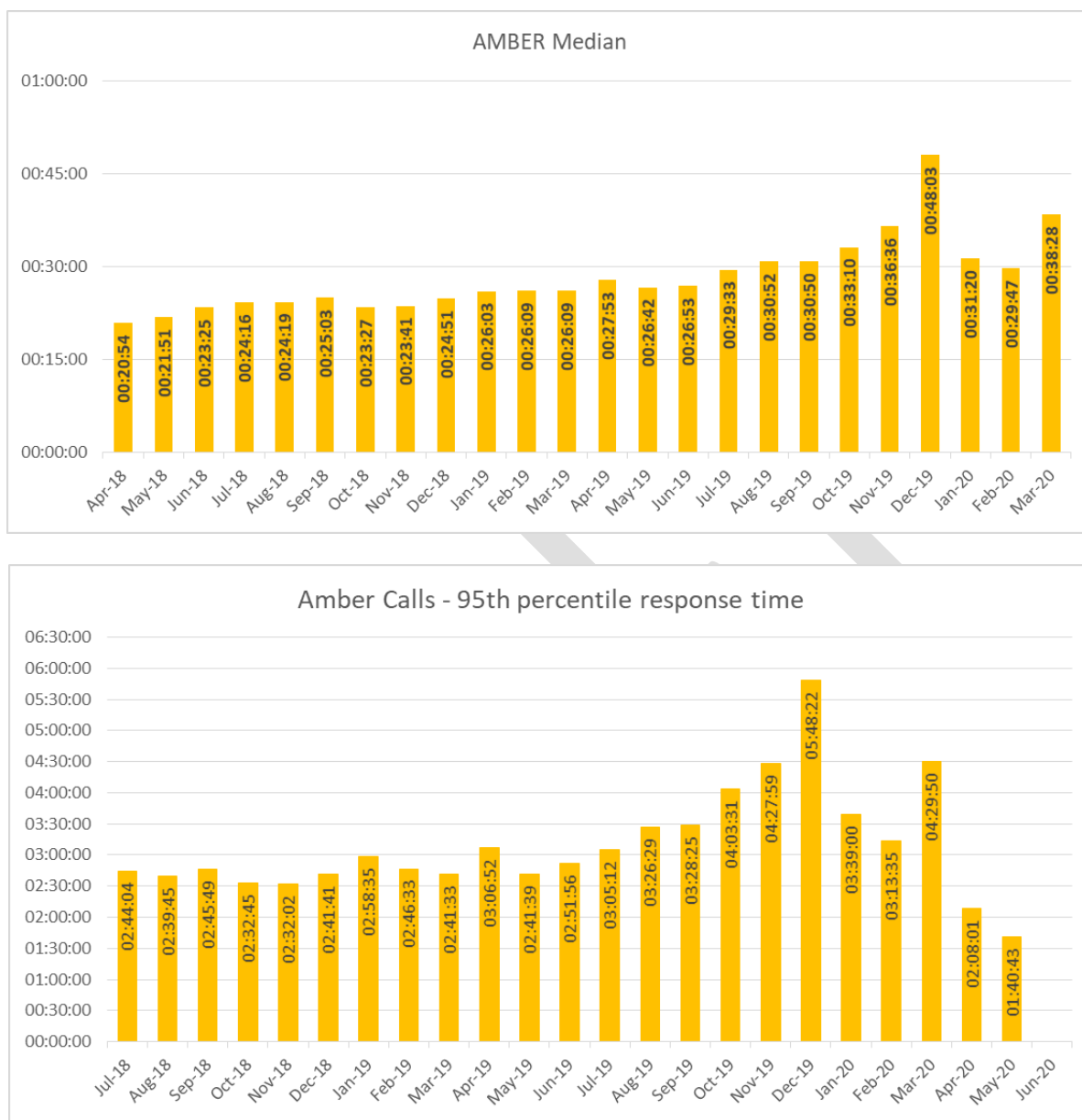
The Review is the key strategic response to the Amber Review. The EMS Demand & Capacity Review identified a “relief gap” of 262.5 FTEs and a projected FTE requirement of 537.5 FTEs by Dec-24. It also identified a range of efficiencies for the Trust, including reducing abstractions from rosters, in particular, sickness absence, a reconfiguration of the CCC, various “shift left” initiatives, for example, increased Hear & Treat and See & Treat and efficiencies in the wider unscheduled care system, for example returning handover lost hours to their 2018/19 levels. The Review’s forecasting and modelling was predicated on a range of “performance parameters” collaboratively agreed with EASC, but these are not commissioning intentions or Welsh Government targets at this point in time. EASC has agreed to fund 136 additional FTEs in 2020/21, and an EMS Demand & Capacity Programme was established in Mar-20 with seven projects. The original position agreed with EASC (and funded) was to increase the number of FTEs by 46 in the period Dec-19 to Mar-20; however, the Trust was unable to deliver this increase, with 21 being recruited and the balance being recruited and trained in 2020/21.

The Review provided the Trust with a wealth of information, including a range of industry benchmarks. WAST benchmarked comparatively well with three exceptions: abstractions from rosters (including sickness absence), return to base meal breaks lost hours and hospital handover levels (which is an issue for the unscheduled care system, rather than the Trust alone). A programme benefits framework was beginning to be developed when CoVID-19 struck, but will be completed during 2020/21, which can then be reported on each year. Benefits will include a targeted lower level of roster abstractions, improvements to post production lost hours (which includes return to base meal breaks) and for handover lost hours. See the information in the following paragraphs on the Ambulance Taskforce.

Whilst the Trust has made good progress on delivering actions arising from the Amber Review, in particular, the EMS Demand & Capacity Review, there will be a time lag before these actions impact on AMBER performance. This Performance Report highlights how response times to the AMBER



category of patients have an underlying upward trend and unfortunately in Dec-19 the AMBER 95<sup>th</sup> percentile was 5 hours and 48 minutes: the highest the Trust has recorded.

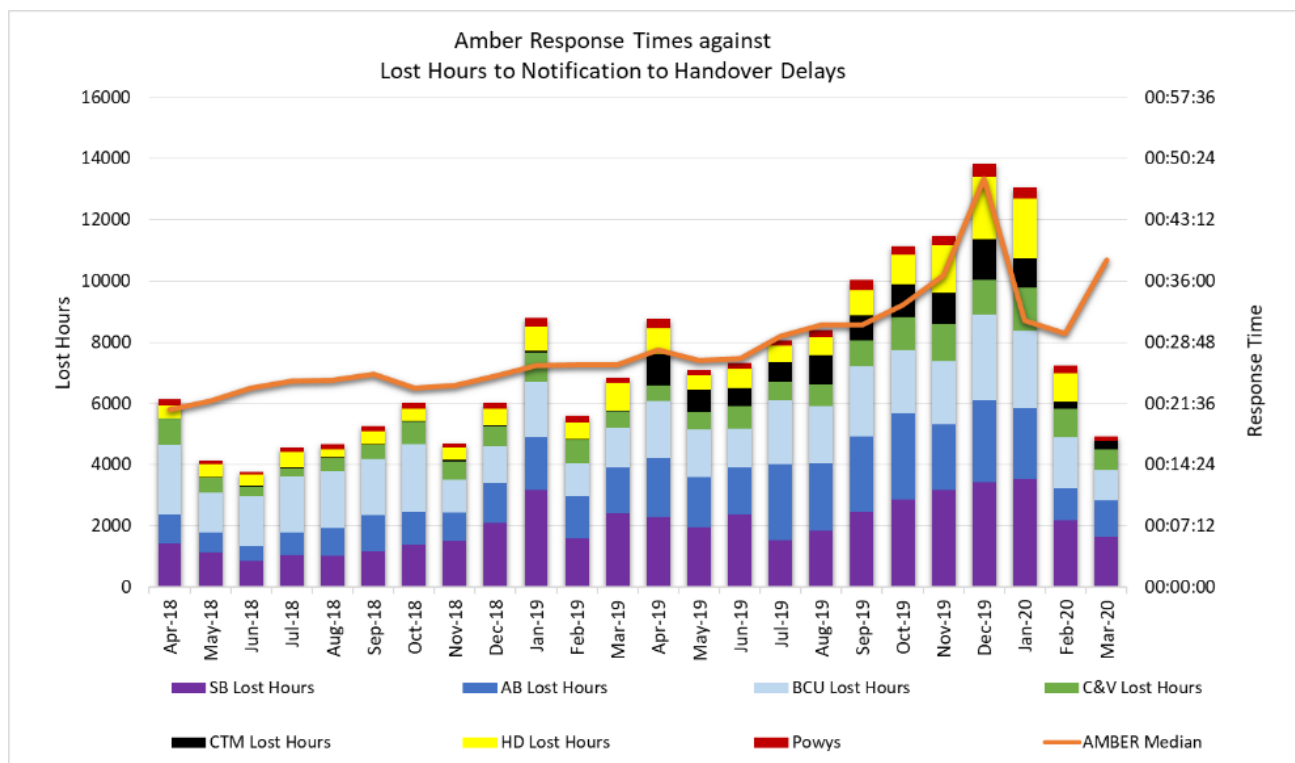


Whilst not the only factor that influences performance, there is a strong correlation between handover lost hours and AMBER performance. The Trust lost 112,058 ambulance hours to handover, compared to 66,521 in 2018/19, which was already considered high.

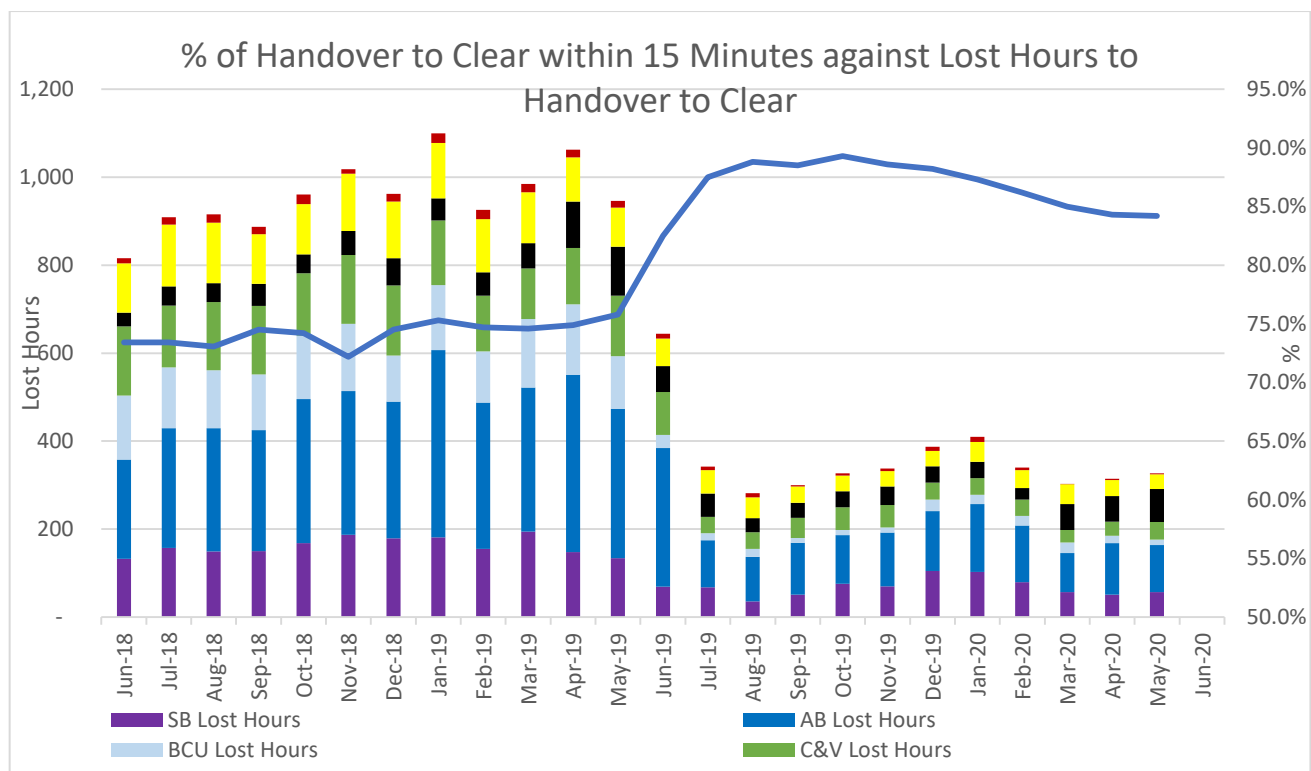
On 15 Jan-20 the Minister for Health & Social Housing, Vaughan Gething, announced the establishment of a Ministerial Ambulance Availability Taskforce, as part of his written statement on unscheduled care pressures (see link below). The taskforce was just getting underway when CoVID-19 struck.

<https://gov.wales/written-statement-update-unscheduled-care-pressure-over-winter-201920-and-next-steps-improve>



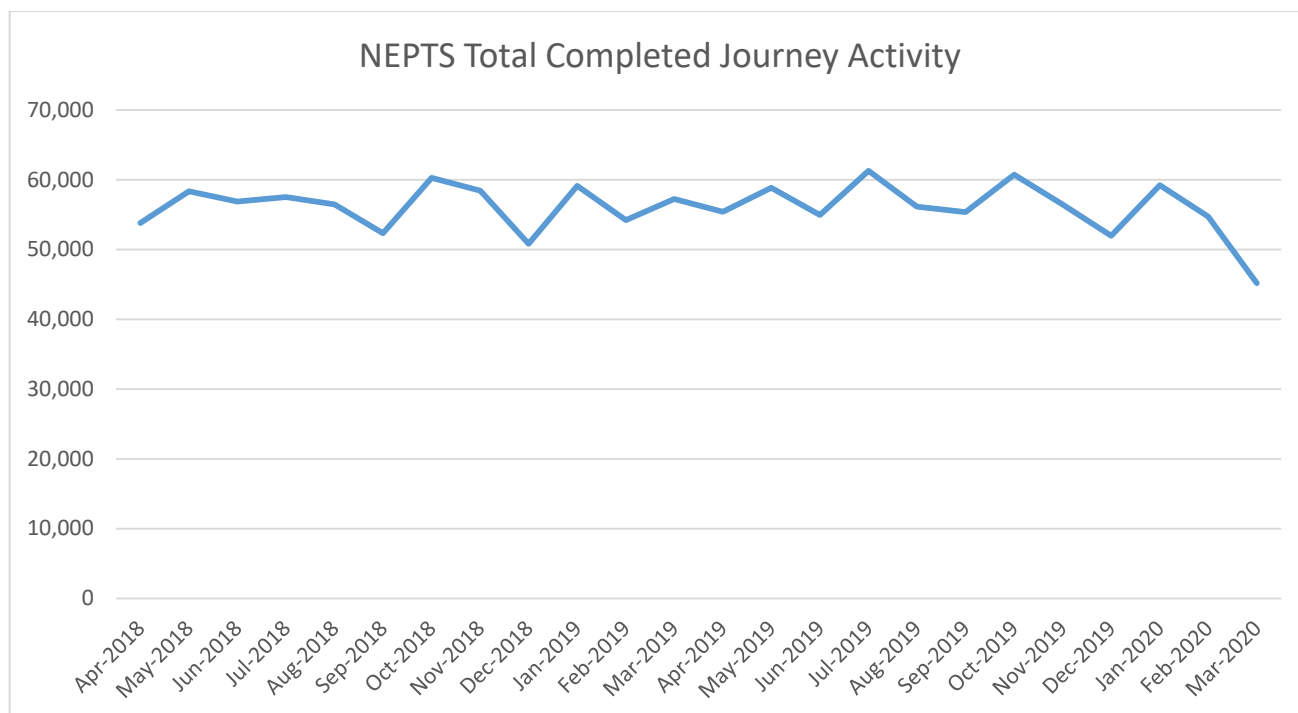


The second part of handover at hospitals is the time from handing over the patient to clearing the hospital and being available to respond to the next incident. In Jul-19, the Trust introduced a new process for clearing ambulances at hospitals, what is referred to as “Dual PIN” technology, which requires both the ambulance crew and hospital staff to agree that the ambulance has cleared. As a result there was a significant reduction in lost hours from Jul-19 onwards with 3,030 hours being lost in the period Jul-19 to Mar-20, compared to 8,663 in the same period last year.



The Trust conducted a second assessment of its progress against the Carter Review (a review of English ambulance services) in the Summer of 2019, about a year after our first assessment in 2018. It was agreed at STB that the Trust would close this strategic objective down partly because it was so vast with some things capable of being actioned immediately with other things taking longer. Every recommendation from the Review had a lead officer name against it and the Trust agreed that for our local delivery plan reviews/refresh would reflect the relevant actions from the Review.

Turning our attention to NEPTS; in 2019/20 the Trust undertook 670,353 NEPTS journeys, compared to 670,343 in 2018/19 and more than for EMS.



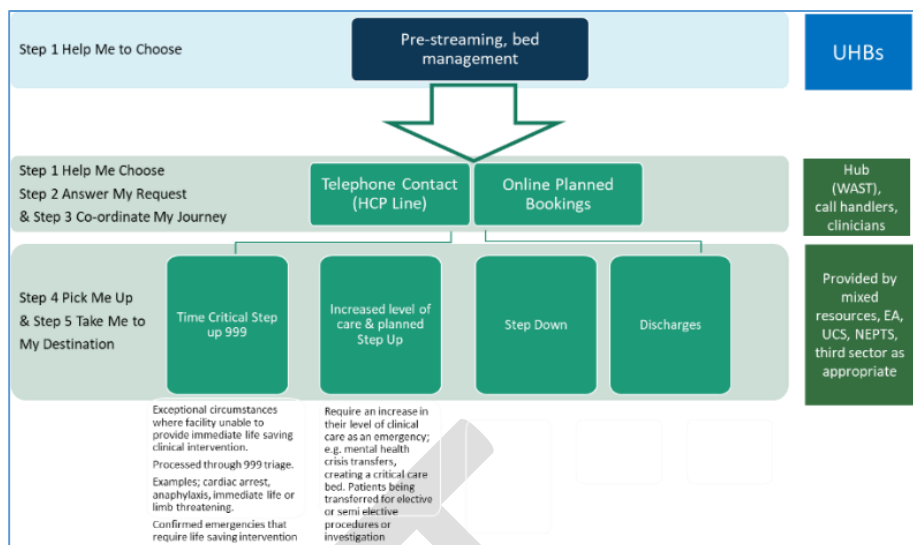
During 19/20, the Trust completed the two largest scheduled care transport activity transfers within the system, namely Hywel Dda & Swansea Bay. The Powys and Aneurin Bevan transfer preparation works were completed, and approved transfer documents prepared for approval prior to the commencement of the CoVID-19 pandemic. These will need to be reviewed in light of the time that has passed since CoVID-19 and be concluded within the remainder of the financial year 2019/21. Work to complete the remaining transfers is underway.

Until the transfers are complete it will not be possible to fully complete the remit of the NEPTS business case; however, during the year much progress has been made on many other aspects of service delivery including: performance improvement on the Discharge & Transfer service, improvements to procurement and quality assurance of services provided by external providers and improvements to renal service delivery.

The NEPTS call taking function has also seen many improvements including the introduction of new call taking scripts and a new post of National Call Taking Manager to oversee service delivery and the development of the Transport Solutions programme. The Transport Solutions programme, which will go live within Q2 of 2020/21 will see eligible patients receive a more efficient transport booking system and non-eligible patients supported to find alternative accommodation that is suitable for their travel needs. The programme will also improve communications with patients and will provide greater clarity on the availability and access to NEPTS provision. Much of this work has already commenced including a new website, promotion of a single booking number and improved patient facing communication methods.

Over the past twelve months, we have worked closely with the National Collaborative Commissioning Unit (NCCU) and a number of health boards to develop an outline model for an All Wales Transfer and Discharge Service.

Following a workshop in Jul-19, an early proposal for the model was developed and aligned to the commissioning framework five step model. It was recognised that joint work was required to enable whole system improvements: improving patient experience, maintaining flow across the system and enabling best use of resource.



The NCCU signalled within their commissioning intentions, in Dec-19, that they would lead the collaborative effort to progress the work further, based on a number of principles:-

- A Once for Wales collaborative approach and commissioned nationally;
- Contribution from all Health Boards, WAST and other partners;
- Separate service to the emergency response systems as far as possible;
- No changes to the existing clinical model for WAST;
- System wide principle focused on the safety of the whole system;
- Single point of contact for the service;
- WAST make the call on the type of vehicle and staff needed within a clear clinical criteria; and
- Implementing this model, subject to further collaboration with the NCCU, as per our Commissioning Intentions and ongoing support from EASC over the course of the next year.

The model of transport for the Grange University Hospital in Aneurin Bevan University Health Board and the South Wales Major Trauma Network will offer the first opportunities to test out the emerging model in 2020.

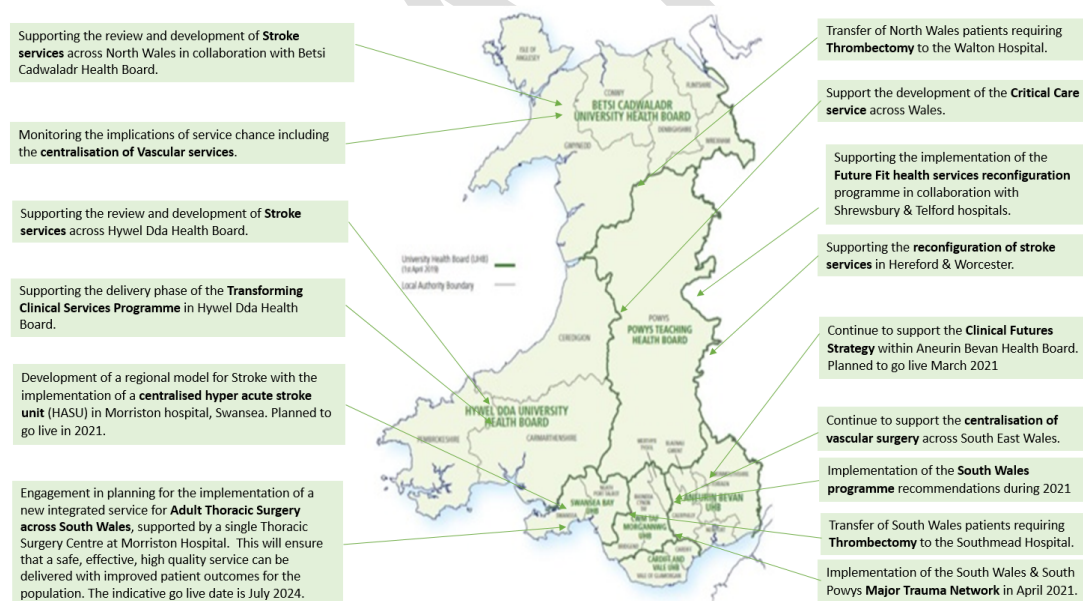
## 2.8 Strategic Priority 5 – Whole System Partnership and Engagement

### Strategic Priority 5 Key Deliverables

- Understanding, agreeing and quantifying impacts of Health Board strategic service change
- Development and implementation of engagement plan, including work with Regional Partnership Boards
- Development of new pathways with Health Boards

Through our Strategic Planning and Partnership Forum we keep abreast of the development of strategic service change across Wales. The key areas of focus in 2019/20 were the development of the South Wales Major Trauma Network, Thrombectomy transfers in North and South Wales and the development of the transport solution for the opening of the Grange University Hospital in 2021. We secured funding to develop the Thrombectomy and Major Trauma Network (MTN) services, and by March 2020 we had fully assured the South Wales MTN of our preparedness for “go live”.

Going forward we are continuing to monitor service change and the focus will be on the development of transport services with Emergency Medical Retrieval and Transfer Service (EMRTS) Wales for the Critical Care Network across Wales whilst being mindful and keeping up-to-date on a number of service change programmes across the country.



During 2019/20, the Board adopted a wide-ranging, organisational engagement framework, the only one of its kind in Wales, linked to the priorities of the IMTP. This sets out how the Trust will engage with its partners and its people over the next three years, with a one-year delivery plan to be refreshed annually. Progress is reported to the Trust Board quarterly.

The framework encompasses the breadth of stakeholder engagement, from colleagues and volunteers, to patients, carers, young people and vulnerable groups, through to wider health and social care partners, using the architecture of Regional Partnership Boards as a mechanism for wider system engagement.

While it is important that we develop a long term approach to partnership and engagement, it is also important we maintain those existing relationships which we have. The Trust is now participating in four of seven RPBs, or their substructures, across Wales. As a commissioned service, there is more to do in this space and, during 2020/21 efforts will be made to secure representation on the remaining three RPBs.

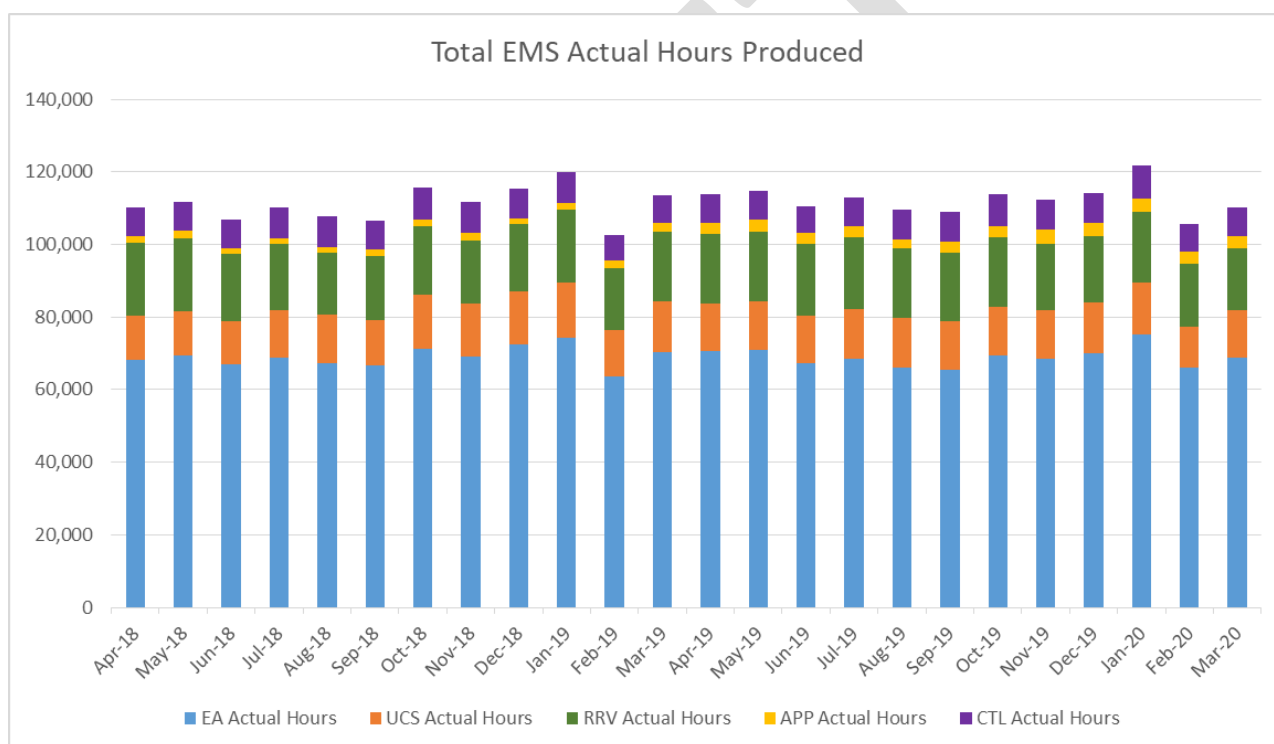
Clinical developments within WAST and partner health boards require constant evaluation of existing pathways and the implementation of new patient-centred pathways to health care. In 2019/20 the Pathways Development Group was established to determine which areas of care would benefit from a nationally-developed pathway. The work was developed in partnership with commissioners and Welsh Government as a means by which pressure on secondary care could be reduced by involving speciality support for pathway development. The initial test of change centred around the respiratory pathway. This pathway was deployed in the Aneurin Bevan Health Board area with plans (that were interrupted by CoVID-19) to deploy across Wales. Future work will concentrate on embedding the respiratory pathway and determining which other clinical areas might offer alternative safe care closer to home.

## 2.9 Strategic Priority 6 – Support our People to be the Best they can be

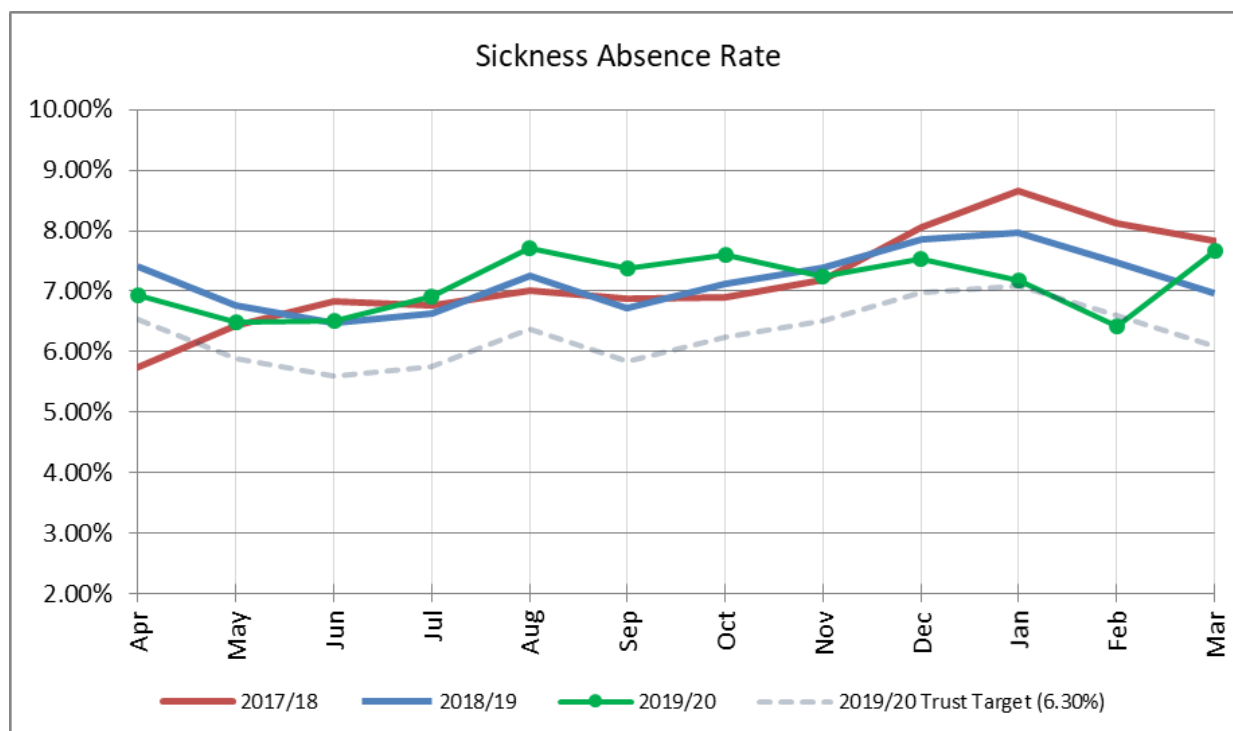
### Strategic Priority 6 Key Deliverables

- Deliver an improvement in resource availability levels
- Implement a Leadership and management development and succession strategy
- Approve and implement a Health & Wellbeing Strategy
- Approve and implement a Transforming Education Strategy (Clinical practice and education), which will include delivery of any enabling capital requirements
- Refresh our commitment to volunteering and approve strategy

The Trust delivered 1,355,173 EMS ambulance unit hours in 2019/20, compared to 1,342,520 in 2018/19, an increase of 1%. This is for all types of resource: APP, CTL, RRV and UCS.



Sickness absence is a key component of reducing abstractions from rosters, which in turn helps drive up the amount of ambulance hours that the Trust is able to produce. The EMS Demand & Capacity Review identified a targeted rate of abstraction for sickness absence of 5.99% (the target for 2019/20 was 6.30%). As part of the EMS Demand & Capacity Review Programme, the Trust established a Resource Availability Programme, which included a focus on sickness absence management which built on the nine-point programme already in place. Whilst sickness levels were higher during the middle of the year, they achieved a noticeable improvement during the winter plan period until the onset of CoVID-19 in Mar-20.



Our three-year Leadership and Management Development Strategy provides a description of the leadership and management skills, knowledge and behaviours essential for future success. It is fundamental to encourage and develop appropriate leadership and management behaviours at all levels in current and future leaders and managers, and to delivering our strategic objectives. The Strategy is an evolving document being shaped by the 'direction' and 'priorities' of WAST, NHS Wales and wider Public Service and Welsh Government. The Trust recognises that the implementation of the Strategy cannot be undertaken in isolation and is building on opportunities for collaborative working across the system: including the Trust and the wider provision of Healthcare, including our Blue Light Partners. Following the first joint senior leadership event in Autumn 2020, it has been agreed that this will become an annual event.

Building on All Wales work, led by Health Education Improvement Wales (HEIW), WAST recognises the importance of challenging our current approaches to succession planning and talent management and exploring different approaches going forward. Individuals have been identified in WAST to be a part of a talent pool of potential to participate in an All Wales Talent Summit and one of our Deputy Directors secured a place on the National Aspiring Director programme.

There is a real appetite and openness for approaching the development of our Leaders and Managers using different and less traditional approaches. A masterclass approach is planned and the first session was held in Nov-19 on Becoming a Culturally Intelligent and Inclusive Leader. Further events are being planned and adapted to use Zoom and Teams given current restrictions on bringing colleagues in a room together.

As an organisation we plan to re-engage with a Trust wide conversation in relation to the Trust's behaviours. As a result of discussions we will have: a refreshed Vision and Purpose; a clear sense of what our behaviours mean (and how we support and challenge each other to live them) and; an updated way of describing them.



The health and wellbeing of our staff is a priority for the Trust and while the development of the updated Health and Wellbeing Strategy was paused pending the appointment of the new Organisational Culture and Workplace Wellbeing Lead (Consultant Clinical Psychologist) who became full time at the end of Mar-20, significant work has continued to ensure that colleagues are helped and supported at work.

The Wellbeing Team provides support for all staff in a number of ways including telephone consultations; a virtual, live wellbeing Q&A session delivered over Zoom; drop-in listening sessions and physical presence at stations that have experienced loss particularly during the pandemic.

During 2019/20, the Trust has continued to develop the TRiM model of service and recently secured funding for our TRiM practitioners to attend update training, which will incorporate moral injury. All of our Wellbeing Advocates and Blue Light Champions have access to mental health awareness training. We are also taking the opportunity to plan for the long term. This includes the development of a wellness action plan template for all staff and ensuring quality therapy provision provided by trauma informed therapists.

In Jul-19, the Trust Board approved the Transforming Education and Training Strategy. Since then significant progress has been made in relation to delivery of year one and two strategic objectives. Despite the challenges of CoVID-19, in some respects we are ahead in areas such as innovation of delivery models, and progress has been made in relation to delivering some programmes locally, e.g., driver training. The move to Office 365 has enabled virtual delivery of programmes that have traditionally been delivered face-to-face. We have continued to develop both clinical and driving tutors during this period and have been recommended as a Center of Excellence by our regulated education providers Future Quals who signposted another UK Trust to contact us for the best delivery model of the Certificate of Assessing Awards and Certificate in Education and Training. Work continues on the planning of our new training center at Matrix House, providing a state of the art facility in the South Wales area. We are working with estate colleagues to establish a flexible and adaptable education model. The Trust has continued to work closely with Swansea University and during 2019/20 successfully developed the Degree for Paramedic Education, which will commence in Sep-20. Work continues on the EMT to Paramedic programme which commences a year later.

Welsh Government approved a Higher Apprenticeship framework suitable for Emergency Medical Technicians and the first cohort of Trainee EMTs commenced their development just after the year end in Apr-20. Work continues to obtain similar support for Apprenticeship frameworks for Health Care Support Worker roles within WAST.

Approval of the Trust's new Volunteer Strategy has been further delayed due to the on-set of CoVID-19; however, the importance of volunteers is recognised in the Trust's People and Culture Strategy, and their contribution recognised. Our Community First Responders (CFRs) continue to make a substantial contribution to EMS performance. In 2019/20 our CFRs were first on scene in 16,125 incidents, compared to 15,437 in 2018/19 (note: figures include uniformed response contribution from Fire & Rescue Services).

2019/20 was year 2 of the Band 6 Paramedic Project. Most Paramedics have completed the two face-to-face competencies required during 2019/20 with the only staff who have not completed them being any Newly Qualified Paramedics (NQPs), new starters, or staff who have been on long term sick (LTS) or maternity leave since Feb-20. The Trust currently has 112 members of staff who have been

granted an extension due to LTS, Mat leave or different start dates (later than Apr-18). As of Jul-20, there are 18 members of staff who have surpassed their extensions, but have submitted some evidence which is awaiting assessment to be signed off.

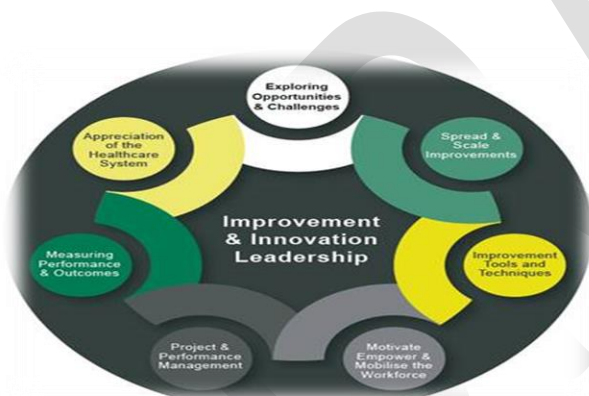
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## 2.10 Strategic Priority 7 – Ensure the Design and Infrastructure of the Organisation are at the Forefront of Innovation and Technology

### Strategic Priority 7 Key Deliverables

- Launch of the WAST Improvement & Innovation Network (WIIN) and by the end of Year One, a database of improvement ideas that are being progressed or have been delivered
- Development of NEPTs CAD business case
- Development of a digital transformation strategy
- Improve the capture, sharing and utilisation of information through implementation and roll out of Qlik sense and Optima Predict
- Explore and pilot opportunities to utilise cutting edge technology to improve and enhance care e.g. use of video, telehealth, AI and drone technology and clinical diagnostic equipment
- Utilise technology to improve communication with staff

During 2018/19, the Trust developed and launched the Welsh Ambulance Service Trust Improvement and Innovation Network (WIIN). The aim of this Network is to ensure that the Trust has an improvement and innovation platform that connects the various parts of the organisation together to enable small and large scale improvements. The infographic below summarises its principles and functions.



WIIN is supporting frontline staff to progress Silver Improving Quality Together (IQT) projects and aims to link with the research functions of the Trust as well as the Project Management team, where successful, small scale improvements are intended for scale up.

As WIIN establishes and embeds itself into the Trust, it will also provide the vehicle for external partnerships and creative solutions to system challenges.

Since the launch of WIIN in early 2019, we have received over 100 submissions, with over 60 being taken forward as an improvement project or signposted to an appropriate lead. This has contributed to the completion of 48 Silver IQT projects. Ongoing support and coaching is provided throughout the testing of ideas and regular updates are entered onto the WIIN database so that there is a clear and up-to-date log of how ideas have progressed. Ideas that aren't immediately supported and progressed are transferred to the ideas warehouse: 15 of which have already been taken forward.

Since the announcement in Nov-19 that '1000 Lives' will be rebranded as 'Improvement Cymru', WAST improvement experts have been members of the faculty responsible for developing Improvement in Practice which will replace IQT in the near future.

During 2019/20, preparatory work was undertaken to inform a bid for a replacement NEPTS CAD to support the required service developments. A draft NEPTS Business Justification Case (BJC) was

developed with the final BJC being expected for completion and presentation for approval during Quarters 2 & 3 of 2020/21.

A number of new internal systems have been introduced to aid remote working to allow staff to still be productive away from the office. The migration to Microsoft Office 365 and the use of its Teams application was hugely successful as part of this, allowing staff to attend virtual meetings from anywhere. To support this, additional laptops were purchased and distributed to those requiring the ability to work away from their normal office. To help this even further, the distribution of iPads to all road based staff is currently underway and should be finished by the end of August, which will allow staff to access systems away from stations using either WiFi or 4G mobile networks.

The Trust has invested substantially in technology over the last twelve months to accelerate its transformation into a leading digital Ambulance Trust. This previous investment along with a series of modernisation projects, such as migration to Microsoft Office 365, enabled the Trust to quickly support the move to homeworking in response to the CoVID-19 pandemic. The Trust was also well placed to quickly expand its call taking capacity across both 111 and 999 services to accommodate the increased demand during the peak of the pandemic. The appointment of a Director of Digital Services, demonstrated the Trust commitment in this area and the Director will now oversee the development of a Digital Strategy that aligns with both the Trusts Strategy to 2030 and NHS Wales Digital Strategy for Health and Care.

The Trust has successfully rolled out nine QlikSense (the Trust's performance software) applications to increase insight and intelligence in all frontline service areas of 111 and NHS Direct Wales, 999 Emergency Services and Non-Emergency Patient Transport Service operations. In response to the CoVID-19 pandemic and the need for an increased level of specific reporting around CoVID-19, the Trust initiated a series of rapid developments to provide maximum insight to aid and enable real-time operation decision making. By the end of the financial year, the first of six additional applications were deployed. The Trust continues to evolve current business intelligence intentions and innovate with new solutions becoming available as part of the National Microsoft license agreement.

WAST invested (via Welsh Government capital monies), a number of years ago, in powerful EMS ambulance simulation software. In 2018/19 the Trust entered into an arrangement with the supplier of this software (Optima Predict) for an "embedded analyst" to work inside the Trust and support the Trust with the development of the software. 2019/20 was the first full year of this arrangements with the analyst producing +10 reports, normally for the Director of Operations, on topics like: the location of the replacement Nelson station, the location of RRV standby points in every health board, the impact of proposed changes at the Royal Glamorgan Hospital, UCS crews not responding to AMBER incidents, where to place the "additionality", i.e., increased FTEs from the EMS Demand & Capacity Programme. This work has been well received by Operations colleagues and by the NCCU. Further collaborative development of the Trust's approach to forecasting and modelling is expected during 2020/21.

The Trust has a resilient and robust ICT infrastructure in place that will now allow it to consider the application of new and developing technologies to support delivery of its clinical care.

The Trust has commenced roll-out of iPads to its EMS and NEPTS frontline road crew to ensure that they are always connected back into the organisation. These devices will provide opportunities to enhance clinician-to-clinician communication through use of Microsoft Teams for communication and

collaboration along with other similar applications such as Consultant Connect and Attend Anywhere,. The latter is already well used for patient consultation in delivery of the 111 GP Out of Hours Service from the Trusts three Clinical Contact Centres.

Having researched the application of Artificial Intelligence, the Trust introduced an AI Chatbot that was accessible to the public to check for CoVID-19 symptoms. The further expansion of AI technologies is under further consideration across several other areas of the Trust.

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## 2.11 Strategic Priority 8 – Quality at the Heart of Everything We Do

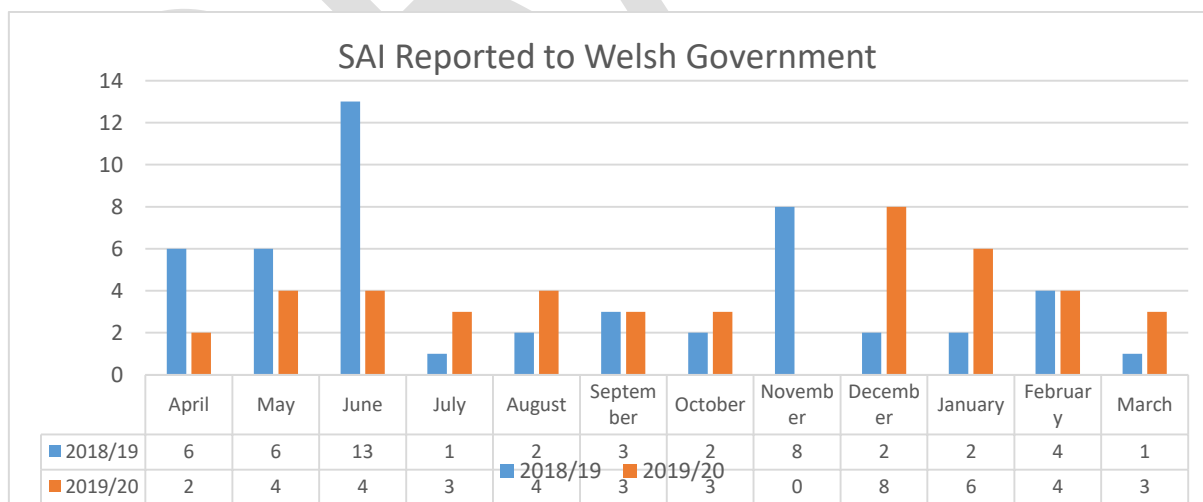
### Strategic Priority 8 Key Deliverables

Themes of work include:

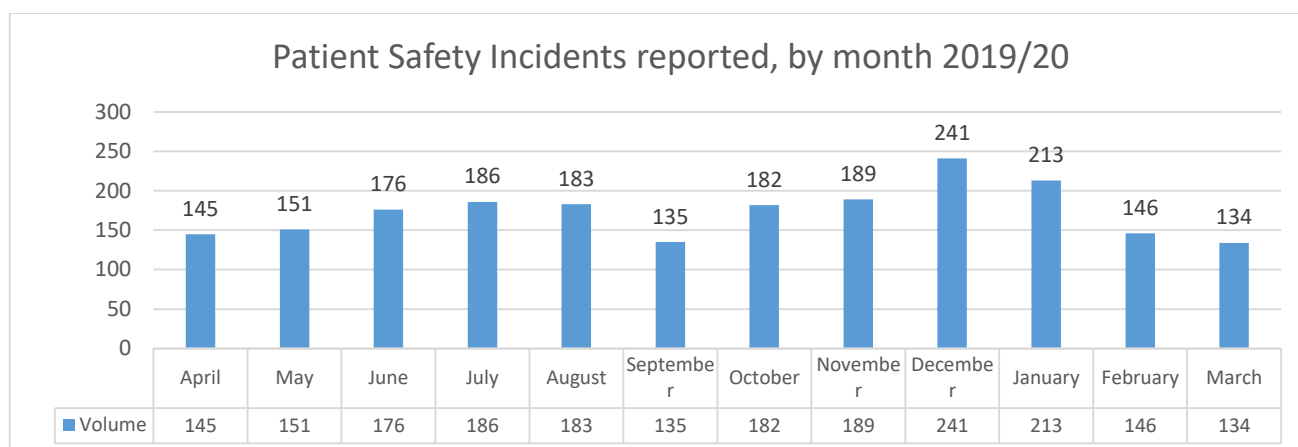
- Health and Care Standards,
- Trust Quality Strategy
- Quality Assurance, Risk Management Strategy,
- Health and Safety Improvement plan,
- Safeguarding annual report and annual plan,
- Infection Control Improvement Plan,
- Putting Things Right Improvement Plan
- Winter Assurance Panel Improvement Plan
- Patient Experience & Community Involvement

The key headline measure for quality, safety and patient experience (and therefore the Health & Care Standards), is the number of Serious Adverse Incidents (SAIs) that we report, investigate and learn from.

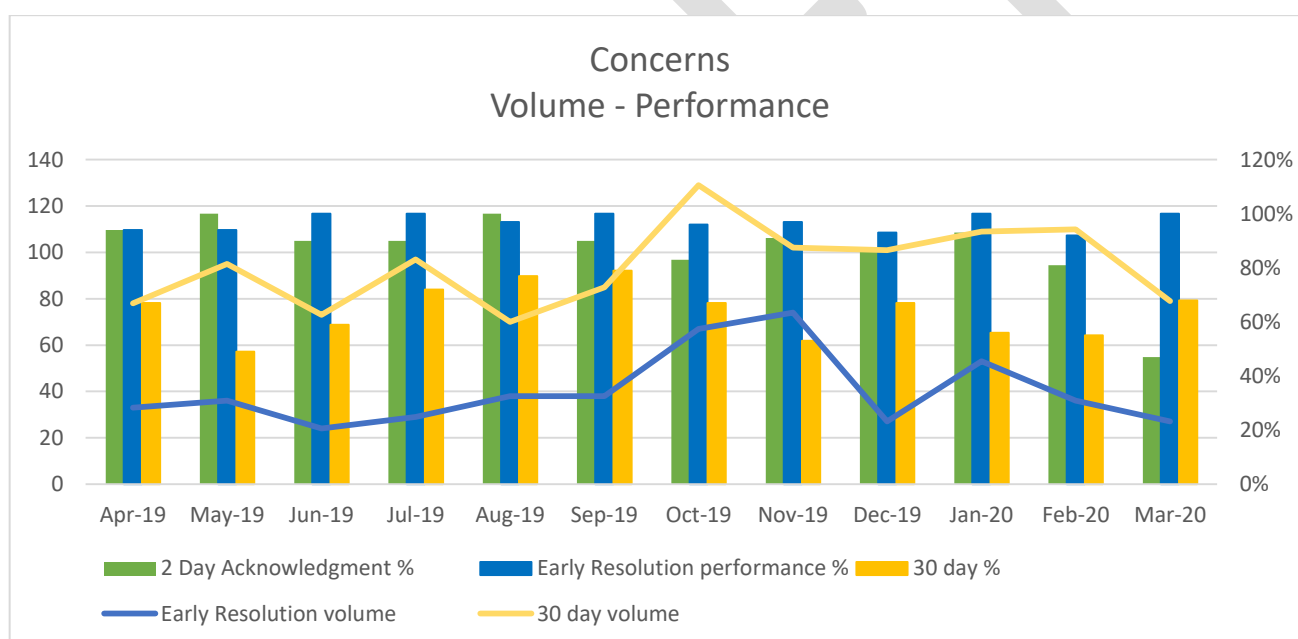
During 2019/2020 WAST reported 44 SAIs compared to 50 in 2018/19. The table below represents the SAIs reported to Welsh Government by reporting month, comparing 2018/19 to 2019/20. The Trust continues to work on the learning which is drawn from each SAI, whether that be individual, organisational or system learning.



In relation to patient safety incidents, there were 1,748 patient safety incidents in 2018/19, compared to 2,081 2019/2020. This represents an overall increase of 19% in the total volume of patient safety incidents being reported within the Trust's Datix system. From the table below, the trend of reported incidents tends to increase through the months of December and January.



Another key quality, safety and patient experience metric, is the compliance against the 30 day resolution target. The Trust received a total of 1,610 concerns in 2019/20 compared to 1,460 in 2018/19, which represents an increase of 10%. In relation to the Trusts Tier 1 target of 75% within the 30 day period, overall the Trust has achieved 64% for this time period. The table below represents the 2 day acknowledgement (performance), early resolution (volume & performance) and 30 day compliance (volume and performance).



In relation to coroner's activity there were 229 'for information' requests received, with physical attendances by staff from the Trust equating to 8 instances. This is reflective of the significant improvement in relation to the quality of the statements being provided by our staff members, and the improvement work undertaken by the legal services team within the Putting Things Right department.

During this period the Trust received 4 Regulation 28 Prevention of Future Death Reports, all of which were responded to within the 56 day timeframe.

The Trust has established a newly formed Patient Safety and Experience Monitoring and Learning Group (PSELMG), which provides assurance on quality, governance, improvement and learning, within the context of Patient Safety. The PSELMG is a sub group of the Trust Quality Steering Group (QSG) which reports to the Patient Experience and Safety Committee (QUEST).

In addition to this, and in conjunction with, the Heads of Patient Safety/Experience within the health boards, a joint framework for the investigation of Patient Safety Serious Incidents (SIs) has been developed. The ratification of this framework has been taken through the Head of Patient Experience Network and formally signed off at the Directors of Nursing Forum.

During 2019/20, the Trust set out to scope and develop a three-year Quality Strategy that will drive improvement in quality management across the organisation and wider health & care system. The developing strategy is aligned to the Health and Social Care (Quality and Engagement) (Wales) Bill which will place a duty upon the organisation to secure improvements in the quality of organisational services provided to patients and service users.

In 2019/20, a draft Quality Strategy was developed for consultation across the organisation. The focus of the strategy is to ensure our services are effective, ensure our services are safe, and ensure positive patient and service user experiences through our care. Over 2020/21, the Trust will launch the Quality Strategy which will strengthen quality management systems within the organisation, implement systems of work which identify and resolve quality issues quickly, and refine governance and assurance structures to empower and enable colleagues to drive forward quality improvement.

Following the introduction of Health and Social Care (Quality and Engagement) (Wales) Bill, and within it the Duty of Candour legislation, the Trust's Putting Things Right and Patient Safety teams are revising current process and guidelines to implement the changes as set out in new legislation. These changes will build upon the already established mechanisms with the organisation of being 'open and honest', to support the culture of 'openness, transparency and candour' which is widely associated across the NHS health care system

Embedding strong quality assurance mechanisms continues to be a priority for the Trust. Over 2019/20, exploratory and development work has been undertaken to embed assurance systems. Digitalisation of quality metrics and measures is a fundamental aspect of this work. QlikSense, the Trust's web-based data visualisation software, has been used as a central depository for key data sets. This, often automated, data capture and visualisation tool is important in ensuring equitable access to data on which to base decision making and improvement activities. During 2019/20, further work has commenced to refine quality assurance metrics across the Trust. With a wealth of data available, ensuring insightful data is delivered to the right audience is critical to ensure strong decision making.

This work has informed the development of the operationalisation plan of the Trust's quality strategy. The strengthening of the key quality assurance metrics and measures, tailored to each audience, is a key component of enabling the success of the Trust's Quality Strategy.

The Trust introduced an in-house designed electronic risk management system during 2019/20, which has improved the ease with which managers can record and share risks. The corporate risk register is a live document in this system and is formally reported to committee each quarter. The beginning of the Performance Report provides a summary of the Trust's corporate risk register at the end of 2019/20.

Over 2019/20, the Trust's Risk, Health & Safety improvement work has continued to strengthen the organisation. Electronic risk monitoring and management has been introduced across directorates, improving the coordination and active management of risk across the organisation. Corporate risks



are managed through the Assistant Director Leadership Team and recommendations considered by the Executive Management Team. Further embedding of e-Risk management into the organisation will continue into 2020/21.

Management of violence and aggression incidents is a priority. Work in this area has seen an increase in reporting of related incidents, an increase in the number of court sanctions and positive staff satisfaction in supporting colleagues through violence and aggression incidents. Further work will continue to improve the quality of violence and aggression investigations and staff support.

During the CoVID-19 pandemic, the establishment of a Health, Safety and Welfare Advisory cell was critical to the Organisation's statutory duty with the Health and Safety at Work Act.

The Trust's Health & Safety team has undergone an organisational change process in 2019/20; health and safety managers will align to key Trust areas as business partners. The Trust will continue in transformation of health and safety into 2020/21, evaluating and closing the Health and Safety Improvement Plan (2018-2020) and articulating and implementing a follow up Health and Safety Transformational Plan.

The Safeguarding Annual Report provides an overview on how the Trust has performed over this reporting period in relation to safeguarding people in our care. It aims to give the Trust Board the necessary assurances that the statutory duties under the Children Act 2004, the Social Services and Well-being (Wales) Act 2014, the Violence against Women Domestic Abuse and Sexual Violence (Wales) Act 2015 and the Welsh Government Adult and Child Protection guidance are being fulfilled.

The Trust complies with the specific requirements under Section 25 of the Children Act 2004 that there is a lead executive director for children and young people's services and a designated non-executive director for the purposes of the Act. The Director of Quality, Safety and Patient Experience is currently the executive lead for safeguarding within WAST.

The Head of Safeguarding has responsibility as Named Professional for Safeguarding Children as well as Adults at Risk. This role ensures the Trust's compliance with Statutory Legislation and Guidance above. The Head of Safeguarding takes the organisational strategic lead on all safeguarding related matters for WAST (Report available on request).

The Quality Safety & Patient Experience Directorate provides strategic direction, expertise and support to all staff within the trust for Infection Prevention and Control (IPC) in line with legislation and National Standards. In December 2016 the trust produced a three-year IPC Improvement Plan, the aim of which was to:-

- Embed the importance of IPC in everyday practice;
- Reduce variation in IPC practice and standardise care processes;
- Improve the application of knowledge and skills in IPC;
- Help reduce the risk of Healthcare Associated Infections, particularly cross infection and contamination; and
- Help reduce the unnecessary use of antibiotics in practice.

In May 2019, an end of plan progress report was produced for the Trust, which identified key areas for improvement. Good progress has been made with achievements including:-

- The development of the IPC Assurance Framework and Governance Structure within the Trust;
- An IPC Incident Dashboard to identify themes and trends arising from Datix;
- Vehicle Cleaning Standards were developed and approved through the IPC Governance Framework, alongside this the emerging Make Ready Depots (MRD) developed a Standard Operating Procedure to complement these standards and run parallel for vehicle cleaning;
- The IPC Policy was reviewed, rewritten and progressed through the trust Policy process along with a new Vehicles and Premises Cleaning Policy and the All Wales Aseptic Non Touch Technique Policy (ANTT);
- A bespoke Pre Hospital Care Package was developed and uploaded onto the Electronic Staff Register (ESR) platform at the end of 2018 with completion monitoring done throughout 2019;
- Fit testing training and compliance was captured through a series of competencies added to staff profiles on ESR. This also included staff that have been trained as fit testers and what respiratory protection was required by each staff member. In addition all staff were issued with Personal Protective Equipment Wallets again which could be registered on ESR; and
- A proof of concept study was performed to assess the suitability of using Adenosine Triphosphate (ATP) swabbing as a quality assurance tool to measure the efficacy of the vehicle cleaning.

During 2019/20, several key challenges were identified, including:-

- Improvement required in flu vaccination up take and immunisation recording;
- Lack of Pandemic Flu preparedness;
- A vehicle cleaning audit tool that does not depend solely upon visual assessment;
- Premise cleaning provisions across all sites associated with the Trust;
- Continuation of sharps related injuries; and
- Capacity and capability to deliver the Trust's Safe Clean Care campaign which was due to commence in 2019.

Further objectives and actions can be found in the IPC action plan moving forward based on key deliverables in the directorates delivery plan. Furthermore, at time of writing, the recent experience of CoVID-19 has raised the scope and scale of IPC within the Trust, which has amplified and prioritised work plans for 2020/21.

The NHS (Concerns, Complaints and Redress Arrangements) (Wales) Regulations 2011 (hereafter, the 'Regulations') apply to all Welsh NHS bodies, primary care and independent providers in Wales, which provide NHS funded care. The Regulations set out the process for the management of concerns (known as Putting Things Right), and are supported by detailed guidance on raising a concern.

The process aims to make it easier for people to raise concerns, to be engaged and supported during the process, dealt with openly and honestly and for bodies to demonstrate learning. The process has enabled a single, more joined-up approach, bringing together the management of complaints, incidents and claims, based on the principle of 'investigate once, investigate well'.

WAST is committed to listening to people who use our services, resolving their concerns where possible in an equal and empathetic manner and learning from people's complaints. We aim to provide

an easy and timely process for responding to concerns, which enables the healthcare system to improve services based on lessons learnt, with the aim of achieving high quality, compassionate and effective care for all service users, whether in provided or commissioned services.

The Trust ran a tactical winter plan through the period Nov-19 to Mar-20 which included a range of initiatives to improve patient safety and staff welfare through what is always a more challenging period for the unscheduled care system. Initiatives included additional capacity in the Concerns Team, the “cohorting” of patients at a number of key hospital sites across Wales to enable the timely release of ambulances, additional ambulance shifts provided by St John Ambulance, additional senior clinical capacity in the Clinical Services Desk, a pilot of a pan-Wales Operational Delivery Unit (ODU) and the expansion of the Falls Service. A number of these initiatives were funded by EASC, whilst the Trust used its own resources to support the wider unscheduled care system on cohorting and the Operational Delivery Unit (ODU). Normally, the Trust concludes the winter plan period with a formal review and evaluations of key initiatives, but this work was suspended to the CoVID-19 response.

This year our Patient Experience & Community Involvement team attended 260 events across Wales. Consistent themes captured from our engagement have included:-

- Repetitive questioning from those working in our control rooms;
- Kind, caring, compassionate staff; and
- Delays at hospital when arriving by ambulance.

We have engaged a broad spectrum of the public across Wales however we have also undertaken a more focused engagement with a number of specific groups to deliver against some of the Welsh Government ambitions. These groups have included:-

- Carers, our Dementia and Mental Health Improvement Plan respectively have recognised the needs of Carers, and our Older Peoples’ Plan also recognises the value and support for carers and their contribution to deliver consistent experiences across Wales
- Top 5 Themes from our first annual Carers Survey this year were:
  - Need to recognise and value carers;
  - Long wait for an excellent service;
  - 50% carers have not planned for an emergency;
  - Wanting to know how long people will have to wait for an ambulance; and
  - Need for good quality, bespoke information about all the available services.
- Learning Disabilities & Autism

This year, we have focused on ensuring that people have access to a range of appropriate information and assistance that helps to achieve positive outcomes. We have developed a series of easy read and pictorial information resources used in face-to-face engagement sessions and available through the online learning disability zone through the WAST website. Through our Learning Disability Community Champion Programme people have been encouraged and enabled to have their voices heard and express their views. Through this we have captured the need for: support for carers, a wider range of resources that includes non-verbal communication aids; and better awareness and training for staff

## 2.12 Strategic Priority 9 – Value in Everything We Do

### **Strategic Priority 9 – Key Deliverables**

- Explore opportunities for further work with ICHOM and the Bevan Commission
- Maintain strong links with the other UK nations to enable sharing of best practice and collaborative work
- Improve understanding of cost base and cost behaviour, including benchmarking based on outcomes as well as costs
- Maximise procurement efficiencies
- Improve efficiency in stock inventory and asset tracking, through RFID

On 16 Jan-20, we showcased our Bevan Exemplar project 'A Shock To The System' at The Senedd. Our project brought together the Finance and Fleet Departments to identify cost savings and efficiency improvements relating to the Trust's Corpuls Defibrillators. The main aim of our project was to realise cost savings and efficiencies through co-production, whilst aligning with the principles of prudent healthcare.

We have continued to work with the Association of Ambulance Chief Executives (AACE), All Wales Ambulance Services Director of Finance forums and via Celtic Nations connections and links, which has provided a platform for sharing and learning.

In 2019/20 the Trust procured a Patient Level Information and Costing System (PLICS) with detailed implementation to commence during 2020/21 which will involve key stakeholders such as our commissioners and clinicians.

The continued drive for value from procurement has resulted in implementing a 'No Purchase Order, No Pay' process as well as strengthening our engagement with NHS Shared Services.

The Radio-Frequency Identification (RFID) business case was approved by Trust board in Quarter 4 of 2019/20 with the product being procured in Mar-20. The project plan is to implement the RFID system across the whole of Wales during 2020/21.

The EMS Demand & Capacity Review, which was completed in 2019/20, provided the Trust with a range of industry benchmarks, which are being built into the benefits programme that has emerged from the Review (an approach we expect to repeat in 2020/21 with the NEPTS Demand & Capacity Review).

## 2.13 Strategic Priority 10 – Use of our Estate and Fleet

### **Strategic Priority 10 Key Deliverables**

- Review of next priorities from Estates SOP, and development of cases for capital funding
- Delivery of MRD for Cardiff and new workshop for the South East region
- Delivering a range of specialist vehicles including training and resilience
- Review of approach to station cleaning
- Modernisation of fleet, utilisation of latest technology, step change towards non-diesel powered vehicles

Work commenced in 2019/20 on reviewing and refreshing the Estate's SOP which included engagement with key stakeholders and the development of a prioritisation framework. Further consideration is to be given to the EMS and NEPTS Demand & Capacity Reviews and their impact on the SOP with refresh work being completed 2020/21. The Trust has identified that the already high utilisation of the estate is a significant barrier to delivering the recommendations from these reviews.

A key development in 2019/20 was work on the replacement of Blackweir (Cardiff) ambulance station. The Full Business Case (FBC) for the development of Cardiff Area Ambulance Station (Merton House) to replace the existing reporting station at Blackweir was approved by Trust Board on 21 Nov-19 and by Welsh Government on 22 Jan-20 for an investment of £7,959m. An open tender process was followed and as a result of an assessment of the quality submission of tenders returns, John Weaver Construction Ltd was selected as the preferred contractor. The acquisition of Merton House, and associated land, took place on 28 Feb-20 and the official start date on site is 13 Jul-20. The programme has been extended due to the recent pandemic and will be completed within 59 weeks. As recommended by Welsh Government, a project bank account will be established with this scheme being one of the first in NHS Wales to pay contractors in this new way.

In the meantime, a number of priority schemes have been identified for progression and several are at feasibility stage; however, progression of these will be subject to appropriate funding being made available and also internal resource to project manage. Progress included:-

- An Outline Business Case (OBC) development for the South East Fleet Workshop was approved by Trust Board during 2019/20 and submitted to Welsh Government for consideration;
- Cardiff FBC as detailed above;
- Completion of Training & Development facility within Ty Elwy, North Wales;
- Accommodation provided at Ty Elwy, North Wales on an interim basis to support the rollout of the 111 Service;
- Other schemes successfully completed consisted of minor works to premises, including Welshpool, Snowdon House, the introduction of access control systems and new appliance bay doors to part of the estate;
- OBC South East Workshop was submitted to Welsh Government and subsequent queries raised through the scrutiny grid has meant further work with the design team, client and landowner;
- FBC Cardiff MRD was approved and will be covered in a separate update;

- ISO14001 accreditation has been maintained, consideration for the decarbonisation of the estate and fleet is being progressed and led by the environmental and sustainability officer.

Cardiff Area Ambulance Station will provide the Trust with a long term solution providing a fit-for-purpose Ambulance Station with a make ready function and provision for a cycle response team. The facility will allow integrated working practices with NEPTS and Training, providing colleagues with appropriate staff welfare and sanitary facilities including local amenities, incorporating the wellbeing and corporate health standards.

As at 31 March the Trust had 778 vehicles in its fleet:-

<b>Vehicle Role</b>	<b>Number</b>
Emergency Ambulances (Including UCS + Neonatal)	266
Rapid Response Vehicles	142
Non Emergency Patient Transport Service	283
Specialist Vehicles (All Other Vehicles)	87
<b>Total</b>	<b>778</b>

As per estate above, work commenced in reviewing and refreshing the Fleet SOP during 2019/20, with further detailed work required in 2020/21 in response to the EMS Demand & Capacity Review and NEPTS Demand & Capacity Review.

The Trust has one of the most modern and well-equipped fleets in the UK thanks to continued support from Welsh Government. A key action for us in 2019/20 was to ensure the second year plan of the Welsh Government endorsed 10-year Strategic Outline Plan (SOP) for the Trust's fleet delivered what had been agreed. Capital investment for the Trust's fleet provided by Welsh Government totalled some £13,586m, which was used to procure a range of replacement vehicles in line with our SOP. As at 31 Mar-20 the Trust had 778 vehicles in its fleet.

The Fleet SOP forms the framework for vehicle replacement for the next eight years and in conjunction with the Estates SOP also identifies the preferred options for Fleet to deliver its services to Operations and from work previously undertaken, it is clear that carrying out vehicle servicing, maintenance and repair (SMR) in our own workshops by Trust staff is the most cost effective model. In 2019/20 work progressed on the next stages of reconfiguring our estates to build a new workshop in South East Wales with sufficient capacity to not just undertake all the servicing, maintenance and repair work currently being undertaken in two workshops, Blackwood and Blackweir, but also have capacity to include another 100 vehicles that are currently maintained by third party suppliers.

The strategy is to continue to develop fleet services so that the department is in a position to undertake the entirety of the SMR of our vehicles in-house.

Wherever possible the Trust is reducing its carbon footprint especially in the Fleet Department. As part of the £13,586m vehicle replacement programme the Trust replaced 25 diesel-powered Rapid Response Vehicles (RRVs) with ultra-low emission, self-charging, petrol hybrid variants. These



vehicles along with all NEPTS vehicles replaced in 2019/20 are fitted with solar panels that negate the need for shore-line charging from the mains supply.



## 2.14 Delivering our Financial Plan to achieve Financial Balance

### Finance & Resource Management

The Trust's financial performance in 2019/20 was again underpinned by strong financial management including the delivery of a significant level of savings and achievement of all statutory financial targets including the payment of invoices within 30 days and achieving a small surplus against the budget. The Trust will continue to operate in a challenging financial environment and will need to continue to deliver further planned savings into 2020/21.

In 2019/20, the Trust achieved all of its financial targets as follows:

	<b>Actual 2019/20</b>	
<b>Breakeven</b> - achievement of revenue financial balance	Delivered	
<b>CEL</b> - capital spend equal to, or less than, the WG set Capital Expenditure Limit	Delivered	
<b>EFL</b> - Remain within External Financing Limit*	N/A	
<b>PSPP</b> - 95% of Non NHS invoices by number are paid within 30 days	Delivered	

*\*Due to the COVID-19 pandemic, the EFL requirement was temporarily suspended by Welsh Government*

At the end of the 2019/20 financial year, WAST reported a small revenue surplus of £0.045m in its audited final accounts.

Each NHS Trust must ensure that its revenue is not less than sufficient, taking one financial year with another, to meet outgoings properly chargeable to the revenue account.

The first assessment of performance against the three-year statutory duty in NHS Wales was at the end of 2016/17, being the first three-year period of assessment.

The Trust is, therefore, deemed to have met its financial duty to breakeven over the 3 years 2017/18 to 2019/20 as shown below:-

<b>Annual financial performance</b>			<b>2017-20</b>
2017-18	2018-19	2019-20	<b>Financial duty</b>
£000	£000	£000	<b>£000</b>
70	57	45	<b>172</b>
0	0	0	<b>0</b>
<u>70</u>	<u>57</u>	<u>45</u>	<u><b>172</b></u>



The Trust expended Capital Investment funds of £25.849m in new property, plant, equipment and ICT, utilising 100% of the Trust's Welsh Government set Capital Expenditure Limit of £25.751m, without exceeding it, as in addition, a further £0.098m, being the netbook value of assets disposed of, was re-invested, resulting in the above total investment of £25.849m.

The Trust is required to pay at least 95% of the number of non-NHS invoices received within 30 days of receipt of goods or a valid invoice (whichever is later). The Trust met this target, paying 97.2% within the specified time.

## **2020/21 and beyond...**

In common with other public sector bodies across Wales, the Trust is facing a further challenging year.

Income assumptions reflect those agreed within the IMTP and are used to support cost pressures identified in detailed budget setting. The key funding assumptions for 2020/21 being that the 2019/20 funding is fully recurrent, and the 2020/21 funding will include:-

- 2% uplift for core cost growth, which includes funding to meet the first 1% of the 2020/21 pay award costs;
- Funding to support the final year of A4C 3 year pay award; and
- Impact of Previously Agreed Developments/other adjustments including income support to implement the EMS Demand & Capacity Review, in line with support by Commissioners in the IMTP

To deliver a fully balanced financial plan this has resulted in a requirement to deliver a minimum of a further £4.3m savings via cost reduction and cost avoidance schemes.

Full details of the Trust's service, operational, workforce and financial plans more relevant to the 2019-20 financial year are contained within IMTP for the period 2019-20 to 2021-22, which was submitted in accordance with the NHS Wales Planning Framework to WG in January 2019 and received approval during April 2019.

Further detail on the financial performance of the organisation is found in the Annual Accounts section of the Annual Report.

## **2.15 Resilience and Business Continuity**

The Resilience and Specialist Operations department of the Operations Directorate sits with the Assistant Director of Operations (Resilience, Business Continuity and Operational Intelligence) and comprises a Head of Resilience, an Area Operations Manager Resilience and two regional Resilience Managers responsible for specific health board areas across Wales and Local Resilience Forums (LRFs) supported by three regional Resilience Officers as well as the Hazardous Area Response Team (HART), the Special Operations Response Team (SORT), and an Event Planning Manager.

The AOM and Resilience Managers work closely with key partners in delivering against statutory (Civil Contingencies Act 2004) and non-statutory guidance in relation to emergency preparedness, resilience and response (EPRR).

The AOM and Resilience Managers engage through the Local Resilience Forums (LRF) which are coterminous with the four Welsh police forces. The department is also engaged in national (UK) fora to support the area of operations from Resilience / emergency preparedness, resilience and response (EPRR), Hazardous Area Response Team (HART) and the Special Operations Response Team (SORT). The Trust's Resilience Team also engages at a Welsh level with the relevant resilience fora and are also engaged in the UK Contest Board and the UK Counter Terrorism Strategy.

The Resilience Team deliver competency assessed command training to Trust Commanders to meet the relevant national guidance and the national occupational standards for the role, these courses have been assessed and recognised as foundation courses for the National Ambulance Resilience Unit (NARU) national command courses.

Under the Civil Contingencies Act 2004 (CCA) Category One responders are subject to the following full set of legal civil protection duties:-

- Risk assessment;
- Emergency planning;
- Business continuity planning;
- Warning and informing;
- Information sharing; and
- Co-operation.

In ensuring the Trust is fully discharging its legal obligations and ensuring that it is in a suitable state of readiness to react to any situation, the Trust's preparedness, resilience and business continuity processes are constantly reviewed and updated.

The Trust provides and supports a specialist service known as HART (Hazardous Area Response Team). The HART team forms the central core of what would be the Trust's response to any major incident, physical incident or weather-related event (including, in the current political climate, the Trust's response to any acts of terrorism) and employs 35 Paramedics and 7 HART Team leaders supported by 2.8 whole time equivalent (WTE) management and administration staff.

The HART team is supported by a cadre of three regional SORT Supervisors and a network of SORT volunteers from across the Trust and these specialist staff ensure the statutory obligations and duties of the Trust are met in relation to its role as a Category One Responder under the Civil Contingencies Act 2004 (CCA), the UK Government's Counter Terrorism Strategy (CONTEST), and the Security and Counterterrorism Act (2015). Other legislative and guidance documents relating to duty of care, security and emergency preparedness from both UK and Welsh Government are addressed as part of Trust core business, with the support of the HART team.

2019/20 has been a challenging year for the Resilience Team in terms of the forward planning required for the EU Exit and also the CoVID-19 pandemic, the team have provided their specialist skills and knowledge to support these events through provision of a National Interagency Liaison Officer (NILO) role to support Operations in the early phase of the outbreak, and also professional

representation as Tactical Advisors in the CoVID-19 Incident Coordination Centre (CICC) and on the Local, Tactical and Executive Pandemic teams as well as LRF Strategic and Tactical Coordination groups and into the Recovery Coordination Groups.

The team's work continues through the monitoring phase of the pandemic utilising our business continuity expertise to support, review and evaluate the Trusts ongoing response to CoVID-19.

## 2.16 Annual Quality Statement

The Trust also produces an Annual Quality Statement.

## 2.17 Sustainability Report

The Trust also produces an Annual Sustainability Report.

### Audit & Inspection

Like every public body, the Trust is subject to external audit and inspection. The Welsh Audit Office (WAO) undertake an annual Structured Assessment of the Trust and the Trust can also be subject to inspection by Health Inspection Wales. The Trust also has its own Internal Audit function. All of this information is considered through the Trust's Audit Committee. You can find out more about the work of the Trust's Audit Committee by clicking on the following hyperlink:-

<http://www.ambulance.wales.nhs.uk/Default.aspx?pagelid=215&lan=en>

The Welsh Audit Office published its 2018 Structured Assessment of the Trust in November 2018 which contained 7 recommendations. Each recommendation is recorded, tracked and reported in the Audit Tracker which is submitted to each Audit Committee throughout the year.

The table below describes each of the 7 recommendations and the progress made against each of these during 2019/20, as captured within the Welsh Audit Office 2018 Structured Assessment.

In addition, a brief note describing the progress to date is included.

Ref.	Recommendation	Completion Date	2019/20 Progress
1	<b>Review, clarify and reduce the need for Chair's actions</b>  The Trust should review the process for Chair's actions and seek opportunities to reduce these where possible. Where Chair's actions are necessary, the Trust should ensure there is sufficient description of Chair's actions within Board papers.	May 2019	Complete  A new process for reporting these was presented to the September 2019 Board. There were no Chair's Actions meetings during 2019 due in part to the increased frequency of Board meetings.

2	<p><b>Strengthen governance arrangements for Information Governance and ICT</b></p> <p>Take steps to strengthen the governance arrangements for Information governance and ICT by:</p> <ul style="list-style-type: none"> <li>a) Increasing regular attendance by core members of the Information Governance Committee; and</li> <li>b) Clarifying and articulating links between information governance and ICT to strengthen the oversight and scrutiny of the Trust's digital business.</li> </ul>	<p>Dec 2018</p> <p>Sep 2019</p>	<p>Complete</p> <p>Improved attendance levels were reported during 2019.</p> <p>The IG and ICT Steering Groups have been separated to clarify their roles. Links between the two groups have been formalised with several common members.</p>
3	<p><b>Improve risk practice and assurance</b></p> <p>To improve risk practice and provide assurance to the Board and its Committees from the Corporate Risk Register (CRR) and Board Assurance Framework (BAF), the Trust should:</p> <ul style="list-style-type: none"> <li>a) Provide sufficient detail on the CRR and BAF to describe why risks have been escalated / de-escalated; and</li> <li>b) Ensure risks on the BAF are live and anticipate future risks as well as reflecting on the success of mitigating actions.</li> </ul>	<p>Mar 2019</p>	<p>Complete</p> <p>The CRR report provides greater narrative as to why a risk has been escalated or de-escalated.</p> <p>The BAF reflects the updated position of the CRR.</p>
4	<p><b>Ensure effective oversight and compliance with new legislation</b></p> <p>The Trust should consider ways which it can provide assurance that it is aware of and complying with new legislation and communicate this to the Board either through the Board Assurance Framework or as an item within the annual work programme of the Board and/or its committees.</p>	<p>Nov 2019</p>	<p>Complete</p> <p>Due to the size and nature of the piece of work; the Board Secretaries are considering an All Wales solution; however, the immediate proposal is that a central point will issue the updates from an up to date Legislation Assurance Framework and the Trust will incorporate this information into the Committee Assurance Frameworks.</p>
5	<p><b>Explore the impact of ongoing vacancy management on the Trust's corporate capacity</b></p> <p>We commented on pressures on the Trust's corporate capacity during our 2016 and 2017 Structured Assessment. It is likely that this pressure will worsen</p>	<p>Jan 2019</p>	<p>Complete</p> <p>Reviewed with savings outturn in 2018/19 significantly overachieved.</p>

	because of its annual savings scheme related to non-operational vacancies. The Trust should evaluate the impact of this saving scheme on its corporate capacity.		
<b>6</b>	<p><b>Ensure greater ownership over all procurement activities</b></p> <p>While the Trust has some local procurement processes and oversight of some procurement activity e.g. vehicle procurement, the Trust should improve its oversight and ownership of the procurement activity undertaken on its behalf by Trust by NWSSP, including:</p> <p>a) reviewing the Service Level Agreement between the Trust and NWSSP in relation to procurement to ensure it clearly sets out the Trust's expectations; and</p> <p>b) provide greater scrutiny of quarterly performance reports.</p>	<p>Mar 2019</p> <p>Apr 2019</p>	<p>Complete</p> <p>Procurement element has been reviewed and is part of a wider agreement which will be signed off as a whole.</p> <p>Regular review meetings are held with Procurement.</p>
<b>7</b>	<p><b>Develop an asset management strategy</b></p> <p>The Trust should explore the potential benefits of developing an overarching asset management strategy, including whether an overarching strategy helpfully brings together the individual strands of its current asset management arrangements to ensure value for money and provide clarity to board members.</p>	Mar 2020	<p>Partially Complete</p> <p>The overall asset management strategy has been developed and is complete. A report will be submitted to Finance &amp; Performance Committee to demonstrate the Trust has received VFM. This action can then be marked as complete.</p>

There were no specific Health Inspectorate Wales (HIW) inspections of the Welsh Ambulance Service Trust during 2019/20. The Trust collaborated with the Health Inspectorate Wales during 2018/19 on the emergency department inspection tool, which will go live and be used in 2019/20. When an emergency department is inspected using this tool, the Welsh Ambulance Service Trust will receive a specific report on its relationship/performance with that emergency department.

## 2.18 Further Information

The Trust reports delivery against its Integrated Medium Term Plan throughout the year and also reports on performance to every Trust Board meeting through the Integrated Quality & Performance Report.

For further information and view these reports please click on the following links:-

Board Date	Board Agenda Item	Link to Board Papers
18 July 2019	3.1 and 3.2	<a href="#">WAST Trust Board Papers 18 July 2019</a>
19 September	3.1 and 3.2	<a href="#">WAST Trust Board Papers 19 September 2019</a>
21 November 2019	3.3 and 3.4	<a href="#">WAST Trust Board Papers 29 November 2019</a>
30 January 2020	3.3	<a href="#">WAST Trust Board Papers 30 January 2020</a>
28 May 2020	3.1	<a href="#">WAST Trust Board Papers 28 May 2020</a>

### *Ambulance Quality Indicators*

Each health board receives a performance indicator dashboard, from Welsh Government, to ensure consistent reporting in their annual reports. The Trust is not a health board and is a commissioned service by EASC; consequently, Welsh Government do not issue a dashboard to the Trust. Whilst no dashboard exists, the Trust is amongst the most transparent ambulance services in the World, with the publication of the quarterly (no publication in quarter 4 due to CoVID-19 response) AQIs by EASC.

<http://www.wales.nhs.uk/easc/ambulance-quality-indicators>

Whilst no Welsh Government dashboard for the Trust exists, the Trust does report its performance to Welsh Government, against a range of measures. This information is detailed in section x above. Similarly, the Trust has developed its own dashboard, which is reported to each Board as part of the Integrated Quality & Performance Report. There was no 2019/20 end of year version of this report due to CoVID-19, but via the Trust Board papers you can review each Quality & Performance report to Board following the links in the table above.

### *Performance Report Contact Details*

Should you require any further information on this Performance Report, please contact:-

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