



meeting	JOINT HEALTH SCRUTINY COMMITTEE	
date	10 February 2009	agenda item number

Report of the Chair of the Joint Health Scrutiny Committee

Patient Transport Service

East Midlands Ambulance Service NHS Trust

Purpose of the report

1. To allow the Joint Health Scrutiny Committee to consider information on the operation and commissioning of the Patient Transport Service (PTS) in Nottingham and Nottinghamshire.

Background

2. The Joint City and County Health Scrutiny Committee is responsible for scrutinising decisions made by NHS organisations, together with other issues, which impact upon the conurbation of Greater Nottingham. Much of the Committee's work is focused on major projects being carried out by Trusts within the conurbation.
3. A potential scrutiny review of the Patient Transport Service in Nottingham and Nottinghamshire was identified by Members as part of the Joint Health Scrutiny Committee's work programme.
4. The Chair, Vice-Chair and lead officers met with representatives of the East Midlands Ambulance Service to discuss a potential scrutiny review on 29 February 2008.
5. At the meeting of the Joint Committee on 11 March 2008, Members agreed that "an initial report regarding patient transport services be requested for submission to a future meeting of this Committee." Members then gave further consideration to this issue at the meeting the meeting on 24 June 2008.
6. The Department of Health published guidance in 1991 on the criteria for establishing which patients were eligible for non-emergency patient transport services in the document: 'Ambulance and other Patient Transport Services: Operation, Use and Performance Standards' [HSG 1991(29)].

7. This was superseded in September 2007 by new guidance entitled Eligibility Criteria for Patient Transport Services (PTS). A copy was included as an appendix to the report to the meeting on 24 June 2008.
8. Patient Transport Services are provided through a number of contracts agreed with multiple commissioners. In Nottinghamshire this includes NHS Nottinghamshire County, Nottingham University Hospitals NHS Trust, Doncaster and Bassetlaw Hospitals NHS Foundation Trust and Sherwood Forest Hospitals NHS Foundation Trust.
9. Increasing emphasis is being placed on the ability of scrutiny to influence the commissioning of services. Commissioning in the NHS is the process by which NHS Trusts ensure the health and care services provided most effectively meet the needs of the population. The process can include assessing population needs, prioritising health outcomes, procuring products and services, and managing service providers.
10. Scrutiny can look at all the stages of this process and the Joint Health Scrutiny Committee agreed that this review of the Patient Transport Service should consider:
 - The service that is currently provided
 - The framework that the service operates in – what national requirements is it required to meet and what it is locally commissioned to achieve
 - Whether the current service meets and/or is commissioned to meet the needs of patients
 - What should future commissioning requirements for the service include

Provider Perspective - EMAS

11. The principal provider of PTS in Nottingham and Nottinghamshire is the East Midlands Ambulance Service. Representatives of the Trust attended the meeting on 24 June 2008 and provide a presentation on the operation of the PTS to allow Members to understand the service that is currently available from the perspective of a provider.

Commissioner Perspective – Nottinghamshire County tPCT

12. Representatives of Nottinghamshire County Teaching Primary Care Trust (tPCT) attended the meeting on 24 June 2008 to provide a presentation on the commissioning arrangements for the PTS by primary care trusts.

Commissioner Perspectives – Acute Trusts

13. NHS Nottinghamshire is just one of the commissioners of the PTS. The Joint Health Scrutiny Committee agreed to receive submissions from the other commissioners of PTS at the meeting on 11 November 2008. Representatives of the following Trusts attended the meeting:
 - Doncaster and Bassetlaw Hospitals NHS Foundation Trust,
 - Sherwood Forest Hospitals NHS Foundation Trust and
 - Nottingham University Hospitals NHS Trust.
14. The Trusts were asked to discuss:
 - the PTS service that is available to patients of the Trust
 - the standards/targets that the Trust sets for the service through the commissioning process
 - any practical issues affecting the service
 - how the Trust identifies and considers patient needs when commissioning the service
 - any future commissioning aims for the service
15. An extract of the minutes of that meeting are attached as an appendix to the report.

Issues

16. At the meeting on 11 November 2008 the Joint Health Scrutiny Committee was concerned at the variation in key performance indicators that EMAS was commissioned to achieve and the different service that this provided residents.
17. The Joint Committee was also concerned that
 - the targets being set by commissioners were not meeting patient needs. Members considered that in some cases too low a target was being set and
 - that the level of performance reported, indicated that there was significant underachievement against some of the targets.
18. The Joint Committee was concerned at the implications of these findings for patients and the health services that they were due to receive. Further detail has been requested from commissioners and where this has been received it has been included as an appendix. Members will be provided with further key performance indicators and performance prior to the meeting.

19. The Joint Health Scrutiny Committee requested that a further discussion with the East Midlands Ambulance Service NHS Trust be scheduled. Representatives of the Trust have been invited to attend the meeting.
20. Members of the Joint Committee may wish to discuss:
 - The variation in indicators set by commissioners and any difficulties that this provides EMAS
 - The issues faced by EMAS in achieving these indicators including whether the targets are achievable or under ambitious
 - What steps EMAS is taking to address underperformance against indicators
 - The relationship between EMAS and the commissioners including what action has been taken by commissioners to encourage or support EMAS in delivering the indicators.
21. The Joint Committee was also made aware of a number of additional transport services provided by acute trusts - particularly Doncaster and Bassetlaw Hospitals Foundation Trust - designed to complement the service provided by EMAS. Members may wish to discuss with EMAS the effectiveness of these services.

Recommendations

22. It is recommended that
 - the Joint Health Scrutiny Committee consider the evidence provided and identify any other area where further information is required.

Councillor Chris Winterton
Chair of the Joint Health Scrutiny Committee

Background papers:

World class commissioning vision summary – DH, December 2007

Extract of the Minutes

Meeting JOINT CITY/COUNTY HEALTH SCRUTINY COMMITTEE

Date Tuesday, 11 November 2008 (commencing at 10.15 am)

membership

Persons absent are marked with 'A'

COUNCILLORS

Nottingham City Councillors:-

Emma Dewinton
 A Michael Edwards
 Penny Griggs
 Eileen Heppell
 Ginny Klein (Vice-Chair)
 Tony Marshall
 A Andrew Price
 A Mick Wildgust

Nottinghamshire County Councillors:-

Reg Adair
 Mrs K Cutts
 A Vincent Dobson
 Pat Lally
 Ellie Lodziak
 Parry Tsimbiridis
 Chris Winterton (Chair)
 Brian Wombwell

PATIENT TRANSPORT SERVICES

Representatives from Sherwood Forest Hospitals NHS Foundation Trust, Doncaster and Bassetlaw Hospitals NHS Foundation Trust and Nottingham University Hospitals NHS Trust (NUH) gave their perspectives on patient transport services in their areas.

On behalf of Sherwood Hospitals, Ann Gray explained that the trust set targets of the service expected of East Midlands Ambulance Service (EMAS), which were monitored and discussed at monthly meetings with EMAS. Julie Dixon pointed out that the trust also ran its own ambulance, based at King's Mill, for use for discharged patients and transfers to Mansfield Community Hospital.

Mike Rhodes from Doncaster and Bassetlaw Hospitals indicated that his trust used various types of transport (eg courtesy cars, patient transfer vehicles, and a shuttle service between Doncaster and Bassetlaw Hospitals), with EMAS not being as flexible as might be wished, and failing to meet some targets.

Jo Tomlinson, NUH, indicated that EMAS was also not meeting targets at NUH. The trust was receiving improved management information, so would be in better position to challenge EMAS about quality of service. She

explained that when NUH had re-tendered the patient transport service for 2008/09, EMAS had been the only bidder. Concerns for the future included payment by results from 2009, and mechanisms for patients from outside the trust's area.

Questions and comments from members followed. Councillor Wombwell asked about transport for renal patients to their dialysis sessions. Ms Tomlinson stated that discussions were in progress, and invited examples of specific problems. In reply to a question from Councillor Winterton, Roy Tyson, Doncaster and Bassetlaw Hospitals, said that the NHS was moving towards withholding payment if a trust or EMAS missed targets. In relation to renal patients, he indicated that Doncaster and Bassetlaw Hospitals was planning a 20 station renal dialysis unit, which would have its own vehicle.

Councillor Klein asked whether NUH planned to provide its own transport. Ms Tomlinson referred to the high dependency unit vehicle which was used for internal or local transfers. She gave the performance statistics for 2008/09. Councillor Mrs Cutts believed that the targets were not robust enough, and that each patient should be given a questionnaire. Ms Dixon believed that more work could be done on monitoring. Members were concerned that the service from EMAS continued to be poor. Ms Dixon commented that the monthly monitoring meetings gave the opportunity to press EMAS. Ms Tomlinson pointed out that since for NUH there were no alternative providers, there was a need to get the most from EMAS. Councillor Tsimbiridis referred to an earlier County Council scrutiny of EMAS, which had concluded that the short contract term was an issue. Ms Tomlinson indicated that the NUH contract was now for five years, but had previously been shorter. Mr Tyson stated that because Doncaster and Bassetlaw Hospitals Trust was smaller, it was easier to find alternative providers.

It was agreed to note the evidence from the three trusts, to circulate recent key performance indicator figures and surveys on EMAS due in February 2009.