



meeting	JOINT HEALTH SCRUTINY COMMITTEE	
date	11 November 2008	agenda item number

Report of the Chair of the Joint Health Scrutiny Committee

Patient Transport Service

Doncaster and Bassetlaw Hospitals NHS Foundation Trust

Sherwood Forest Hospitals NHS Foundation Trust

Nottingham University Hospitals NHS Trust

Purpose of the report

1. To allow the Joint Health Scrutiny Committee to receive information on the operation and commissioning of the Patient Transport Service (PTS) by acute trusts.

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 This was superseded in September 2007 by new guidance entitled Eligibility Criteria for Patient Transport Services (PTS).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. A copy of the presentation is attached as an Appendix to the report.

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. A copy of the presentation is attached as an Appendix to the report.

Issues - Commissioner Perspectives

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 a future meeting.
14. The Joint Committee agreed to look at the commissioning arrangements across the whole of Nottingham and Nottinghamshire. Representatives of the following Trusts have been invited to attend the meeting:
 - Doncaster and Bassetlaw Hospitals NHS Foundation Trust,
 - Sherwood Forest Hospitals NHS Foundation Trust and
 - Nottingham University Hospitals NHS Trust.
15. The Trusts have been asked to discuss:
 - An introduction to 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
16. Members of the Joint Committee may wish to consider:
 - How the commissioner identifies patient needs
 - How the commissioner meets those needs through the service that is procured
 - How the commissioner manages the contract for the service to ensure that the needs of patients are met
 - How the commissioner reviews the commissioning of the service to ensure that if patient needs change the service can evolve to meet those changed needs

- How the commissioning arrangements ensure that the service is providing best value.
17. At the meeting on 24 June 2008 the Joint Committee received the results of a survey undertaken by the former East Midlands Ambulance Service Patient and Public Involvement Forum (PPIF). The Forum made a number of recommendations that the Joint Committee may wish to discuss with the Trusts, with particular regard to the following recommendations:
- The assessment process for the patient's needs, i.e. type of transport and whether an escort is required should be reviewed. Periodical reviews are recommended of patients' assessment of needs as a measure for service improvement.
 - The majority of patients commence their return journey within 30 minutes, but for patients who have a long wait it can be quite arduous because they are not always made aware of how long they have to wait, e.g. they may need to have something to eat or drink or go to the toilet. Also patients have been known to wander away from the waiting area, which may have been a result of not knowing how long they had to wait for transport. This can also cause difficulties for the PTS staff. EMAS Trust needs to outline what standard of service patients should expect and identify the lines of responsibility between EMAS and the hospital particularly when patients are dropped off and collected. The Forum suggests the use of Lay Responders in reception to ensure patients' personal needs are met.
 - Patients should be made aware of the position of the Ambulance Liaison Office in the hospital by a notice in the waiting area as in many hospitals it is hidden out of the way.
 - The Forum recommends a dedicated PTS Customer Service Line so that patients or carers could arrange, rearrange or cancel their transport bookings more easily.

Recommendations

18. 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