About NWAS

- Covers the North West footprint = 33 CCGs, 1,420 GP
 practices, 29 acute trusts
- 1.3 million 999 calls per year
- 950,000 patient episodes
- Population of 7m people growth of 3% by 2017
- Employs approximately 5,000 staff
- Annual income of £260 million
- Three emergency control rooms virtual call taking
- 1.2 million PTS journeys in Cheshire, Lancashire, Merseyside and Cumbria

Cumbria

Lancashire

Performance Standards for 999

- All calls prioritised to determine appropriate level of response
- Red calls immediately life threatening, eg cardiac arrests,
 breathing difficulties
- 75% of these calls within 8 minutes and 95% of these calls within 19 minutes.
- NWAS commissioned to achieve the national targets on a regional basis only
- Green calls less serious, and are not immediately life threatening. No national targets set, we endeavor to respond as follows:

Activity 2014/15

NWAS Activity Volumes:

- 430,947 Reds (+9.1% vs Plan)
- 598,873 Greens (-1.7% vs Plan)
- 1,029,820 Overall (+2.3% vs Plan)

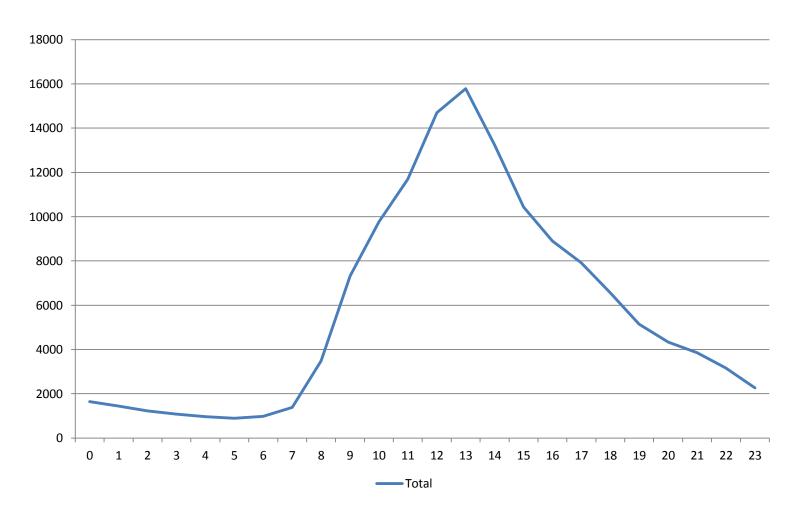
Lancashire County Activity Volumes:

- 92,603 Reds (+11.9% vs Plan)
- 129,834 Greens (-2.1% vs Plan)
- 222,437 Overall (+3.3% vs Plan)

Response times

	R1 in 8 mins % (target 75% at County)	R2 in 8 mins % (target 75% at County)	REDS in 19 mins % (target 95% at County)
NHS Fylde and Wyre CCG	51.1%	57.0%	89.2%
NHS Blackburn with Darwen CCG	76.3%	75.4%	94.2%
NHS Blackpool CCG	84.6%	82.1%	94.5%
NHS East Lancashire CCG	65.1%	64.6%	89.3%
NHS Greater Preston CCG	76.0%	74.9%	93.9%
NHS Chorley and South Ribble CCG	69.9%	72.7%	91.9%
NHS Lancashire North CCG	59.3%	63.0%	90.3%
NHS West Lancashire CCG	48.6%	55.9%	84.9%
Lancashire	68.4%	69.0%	91.3%
NWAS	69.2%	69.5%	93.1%

HCP Activity by Hour



Delivering the right care, at the right time, in the right place

Top Five Calls

Excluding HCP & NHS 111 calls

Falls

Breathing Chest **Problems**

Pains

Unconscious /

Fainting

Sick

Person

Ambulance handover problem

March 2014	<15 mins	%	>15 mins	Actual mins
Lancashire	6065	56.1%	4078	88500
NWAS	26398	66.9%	13049	296625

For Lancashire equates to 1,475 lost hours or 4 crews per day

= 10% of the ambulance resource at cost of over £2m

For NWAS equates to 4,943 lost hours or <u>13 crews per day</u>

= 7% of the ambulance resource at cost of over £7m

Service Delivery Factors

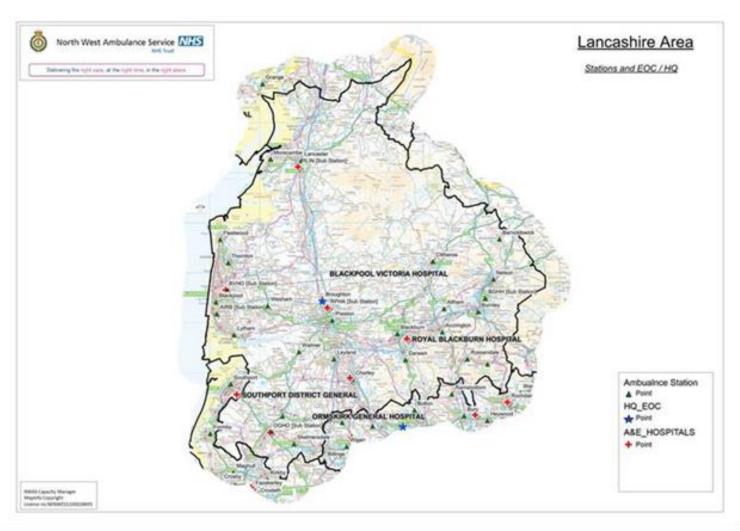
Patient Pathways eg stroke, trauma

Hospital reconfigurations

The doughnut effect

Community First Responders/AEDs

The Doughnut Effect



Evolving Role

- Enhanced treatment role a community based provider of mobile urgent care and emergency health care
- Safely manage more patients at scene, treating them at home or referring them to a more appropriate community based service
- Further opportunities to assess, prescribe, manage exacerbations of chronic illness
- Working even closer with GPs and community services



Why?



Managing the demand is

unsustainable

if change doesn't happen



Less than **10%** of incidents are actually

life threatening



Fallers

make up **17%** of all 999 activity



31% of all PES activity between

12:00 and 15:00

is from HCPs



Patients with known long term conditions call 999 **six times** more often than other service users

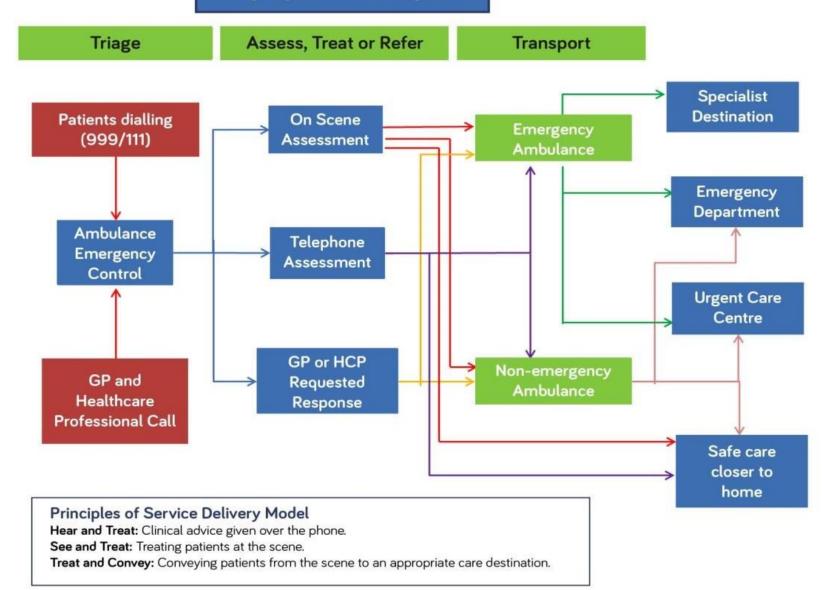


54% of patients arriving at ED by ambulance end up in a **hospital bed** (75% of admissions over

65 years of age)

Delivering the right care, at the right time, in the right place

Emergency Service Delivery Model



Working Differently

- Paramedic Pathfinder
- Community Care Pathways and Plans
- Acute visiting scheme
- Community Paramedics
- GP Bureau
- Urgent Care Desk
- Frequent Callers Initiative
- Mental Health care



Educating the Public (and our partners)

- Closing the gap between the public perception/expectation and the ambulance offer
- Calling 999 does always means an ambulance or a trip to hospital
- Breaking down the complex service offer into digestible, consumer friendly chunks.





Future Options

Whole System Solution