**ACTION LOG – DECEMBER 12th 2018**

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| **OBJECTIVE** | **PLAN** | **PROGRESS** |
| **MATERNITY** | Maternity is one of the LAS’s pioneer services in their strategy, and a Maternity Pioneer Group has been set up, to which the Forum has been invited to send a representative. | Request to be put out to members who have experience of childbirth. |
| **STREET CARE FOR HEAVILY INTOXICATED PATIENTS** | The Forum has made the following request to Brent CCG which commissions the London Ambulance Service: “C*an you please tell me if any consideration has been given by the CQRG to funding vehicles and centres across London, to provide support for people in streets who are heavily intoxicated. The objective in the past was to safely divert people from A&E, and provide advice about recovery from excessive alcohol use. Has this issue be considered and is there a subject review paper on the proposal?* | In response to the FOI the CCG denied that had done any work in this area. Response is being challenged.  |
| **PRIMARY CARE FOR HOMELESS PATIENTS** | Cards are available for paramedics to hand to homeless patients to confirm their right of access to GPs. It is not clear if the homeless person has to demonstrate former residence within the boundaries of the GP practice. | Seek further advice from the Healthy London Partnership (a collaboration of [NHS](https://www.england.nhs.uk/london/)London,  [London Councils](https://www.londoncouncils.gov.uk/), [Public Health England](https://www.gov.uk/government/organisations/public-health-england), [Mayor of London](https://www.london.gov.uk/about-us/mayor-london)). [www.london.gov.uk/](http://www.london.gov.uk/) |
| **LAS AGM** **QUESTIONS TO THE BOARD**. | Responses requested to questions put to the LAS AGM by members. LAS unable to provide answers at the moment. The draft minutes of the meeting, including the questions asked are with the Chair for approval.  | Philippa Harding – Governance lead will respond with answers to our questions and draft minutes in week beginning Dec 10th |
| **SOUTH EAST 111 SERVICE****OBSERVATION VISITS** | Member’s observation visits planned for November and December 2018. Also Focus Groups and joint work with Healthwatch pan-London planned. | Request put out to members on November 8th 2018 for involvement. Six members responded, but 111 service hasn’t developed the programme for observation visits. Visits cancelled. Trying to get response from Tracy Pidgeon and Anne Jones |
| **Review of the LAS by London Assembly** |  During the course of the discussion, Members of the Health Committee requested the Chief Executive Officer of the LAS to provide further information on the extent of the engagement consultation of the new LAS Strategy, *A world class ambulance service for a world class city*. | **LAS committed to attending the Health Committee on an annual basis to provide an update on LAS services. The final London Assembly report is expected in early December 2019.****Forum is maintaining regular contact with Chair of the London Assembly Health Committee Dr Onkah Sahota** |
| **EQUALITY AND DIVERSITY IN THE LAS** | LAS Race Equality Standard received and shared with members. Approved by LAS BoardMotion put to the November meeting of the Forum on development of an Equality and Diversity Task Group.  | Meeting with Melissa Berry and Patricia Grealish planned for December 14 to discuss Task Group.Draft ToR produced. Roger Kline invited to advise. |
| **ACCESS TO LAS BOARD PAPERS** | 1. Hard copy in advance of meeting denied.
2. FOI submitted to LAS but unable to get full response.
 | Issue discussed with Heather Lawrence, Chair of LAS on 5/12/18. She has agreed for access to papers to be resumed.  |
| **EMERGENCY OPERATIONS CENTRE****ADVERTISING BANNERS FOR JOBS IN THE EOC**    | Raise issue with Patricia Grealish and Pauline Cranmer regarding advertising jobs.  | The work for the banners at HQ and Bow is in train and they have been designed ready for production. Benita is managing the placement of them as part of a larger refurbishment of the Waterloo frontage and also managing obtaining the necessary permissions.  We will be able to give you an indicative timescale based on phasing in with other work priorities. The plan is to complete this task by the end of March, the most important element is the design of the banner and this is all ready to go having attained the appropriate consent from each individuals.  |
| **EMERGENCY OPERATIONS CENTRE** | 1. The Forum has written to Pauline Cranmer to organise Forum members’ monitoring visits to the EOCs at Waterloo and Bow. Members were asked to sign in if they wished to participate.

b) The next available dates will be from Tuesday 26th February this being a Bow week. Visits to EOC run on a Tuesday, Wednesday and Friday alternating weekly between Waterloo and Bow 9-1pm or 1-5pm – 2 Visitors per day 1 in the morning/ 1 afternoon. | Nine members signed up for visits to EOC. Theme will be mental health |
| **PATIENT SPECIFIC PROTOCOLS– PSPs** | Patient input needs to be strengthened. Raised with Trisha Bain who has agreed that information for patients will be produced.PSP leaflet almost ready for distribution.  | Patient’ Centered leaflet finalised. Final to be sent to GPs via local Healthwatch and CCGs. Awaiting publication of leaflet by the LAS comms departmentIssue raised at Quality Oversight Group of the LAS on November 6 |
| **LAS STRATEGY** | Follow up 5 major issues in Strategy each allocated to one or more members | Two public meetings each year to follow progress of key elements of strategy |
| **PRISONS AND SECURE ENVIRONMENT****Access to Prisons and Immigration Removal Centre for Emergency Call** | Data not available which records the time taken from arrival to patient contact and leaving prison or IRCCheck how accuracy of prison data reflects on ARP performance data. An Incident Response Officer (IRO) is a member of the Central Operations leadership team who is accountable for the safe management of incident scenes, supervision and on duty welfare of Clinical Team Leaders and all frontline staff in the field.Forum has Memorandum of Understanding between the LAS and prison service. Will follow up key issues | 1) Raised issue with NHSE the commissioners for prison and IRC services. Raise also with Diane Abbot.3) LAS has no data on the time to enter and leave prisons. 4) Very positive response from Kate Davies. Attached. 5) Raised with LAS Quality Oversight Group. 6) Data to be sought from prisons and IRC by FOI and possible visits to observe process. 7) **Contact** Paul Baker, the DDC (Deputy Director of Custody for Greater London). Write formally to Home Secretary Sajid Javid and the parliamentary Home Affairs Select Committee, chaired by Yvette Cooper. |
| **LAS COMPLAINTS AUDIT** | **Methodology produced by Angela and sent to Trisha Bain. Copy methodology to members. Meeting to be held with chair of the LAS to review complaints.**  | Joint meeting held on December 5th with Heather Lawrence, Gary Bassett, Kaajal Chotai and three Forum members to review a set of complaints. Quality of responses varied. Excellent discussion. |
| **FLU EPIDEMIC AND VACCINATION****What being done to increase the number of the LAS front line who receive the flu vaccine?**  | **Forum wrote to Association of Chief Executives of Ambulance Services who contacted PHE on this issue. Public Health England PHE about promoting flu vaccination. Agreed to obtain comparative data from UK ambulance services on vaccination rates. Ask the Association of Ambulance Chief Executives (AACE) if they have data.**  | Response from AACE who have raised issue with the PHE. **Request made for update. See full update below.**  |
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**APPENDIX**

**FLU VACCINATION**

**Hilary Pillin** – Association of Chief Executives of Ambulance Services

I have had some feedback which suggests that this data is collated nationally by NHS Employers who have a 'best-practice' workstream for Flu jab uptake.  Monitoring within ambulance services seems to fall into different directorates in each trust and isn't being collated in term of stats by HRDs as I was led to believe. Trusts have certainly got ideas for campaigns etc from other each other though, including incentives which we are seeing have a positive impact this year.  However, it seems the biggest issue is the recording.  Some Trusts record a wider range of staff in their figures than is 'strictly' within the guidelines ie EOC staff (this is primarily because the guidelines don't easily fit Ambulance Trusts like many other things). The question has been raised regarding 'definition and scope' and the PHE Influenza vaccine uptake monitoring team (who we report the figures to through ImmForm) responded to state:

*“We define direct patient contact/care as face to face contact or provide care in person. Therefore control room staff would not be included in the survey as they would not have/involved in direct patient contact/care”*

Whereas when NHSI was asked, they said:

*"There is no distinct definition for any healthcare provider, despite us asking for guidance."*

*​*

There was a project team set up with the Ambulance Trusts from the Northern Ambulance Alliance, who contacted NHS Employers to find the NHS Trusts who had the best results and biggest increases and then contacted them to identify any good ideas or learnings.

The NAA were able to share ideas, resources including posters and communications campaigns and discuss any problems.  They were also able to identify efficiencies for next year which has been built into the plan eg an e-solution for the recording of vaccinations and purchasing all vacs from one supplier.  They have planned a catch up call with the NAA Flu Leads mid-campaign to discuss progress and then a call post closure of the campaign and complete an evaluation and closure report.   I am sure they will in turn share their learning with other trusts. In terms of LAS's approach to this you will need to liaise with Patricia Grealish who should be able to update you.

Kind regards
Hilary Pillin
Association of Ambulance Chief Executives

07879444967

Dear Malcolm,

The first published healthcare worker seasonal flu vaccine update (for period between 1st Sept till the

30 October has been recently released and could be found in the following PHE homepage. You should be able to find performance of all NHS Trusts in England.

<https://www.gov.uk/government/statistics/seasonal-flu-vaccine-uptake-in-healthcare-workers-monthly-data-2018-to-2019>

Sammer Tang

Regional Lead for Quality (South of England)

Public Health England

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| **EPILEPSY AS A MEDICAL EMERGENCY - IMPROVING URGENT AND EMERGENCY CARE**  | 1. Request access to new national guidelines in 2019. Focus on: PNES (Psychogenic Non-Epileptic Seizures), focal convulsions, access to meds for different grades of staff

 b) NHS issues* Are conditions in A&E adequate?
* Sharing of medical notes across hospital locally and geographically

c)Introduction of PSPs - discuss with Sean and Epilepsy UKh) Better advice re fits on trains for British Transport Policy (and LAS?)g) Request info on epilepsy SI and 29 datix reportsSee also end note relating to a detailed description of ReSPECT (alternative to PSP | a)Contact Epilepsy UK for more information regarding their recommendations for changes to pre-hospital practice and PSP<https://www.epilepsysociety.org.uk/emergency-medication#.W93u7JP7SUk>b) LAS SI and datixc) Fenella and Sean regarding adequacy of A&Es and sharing of medical notesd) British Transport Police re advice on fitting patients. |