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6th April 2018

Malcolm Alexander
Chair
Patients' Forum for the LAS
PatientsforumLAS@aol.com

Dear Mr Alexander,

Re. Ambulance queuing outside London's A&Es

Thank you very much for your email on 18th March outlining the concern of the LAS Patient Forum about ambulance queuing outside A&E Departments. As an organisation we share your concern about the impact that this has on our patients both in terms of potential harm and on their experience of care during such a worrying time.

Unfortunately we are unable to send a representative to your Forum on 9th April and so thought it would be helpful to share with you our work to resolve this problem in the Hillingdon Hospital system through this written response.

System Leadership & Governance

It is recognised that pressure on A&E departments are a system-wide problem and as such we also have a system wide Hillingdon Board co-chaired by the Chief Officer for the CCG's and myself. Your LAS regional representative attends this meeting and is very much part of our system wide response to address pressures in Hillingdon.

At Trust Board level, our Chief Operating Officer is the Executive lead for ensuring the action and improvement plans to reduce ambulance handover delays are implemented. These action and improvement plans are monitored and reviewed on a weekly basis in a multi-disciplinary working group that is attended by Hospital, LAS & Urgent Care Centre colleagues. We also have strong clinical leadership, with both the Deputy Divisional Director for Emergency Care and the Clinical Lead for A&E part of this group.

Progress made by this working group is reported into the Emergency Care Improvement Programme governance structure, through the A&E Patient Flow Board, chaired by the Chief Operating Officer.

Planned Improvements to Reduce Delays

The Trust has been supported for some time by the National Emergency Care Improvement Programme (ECIP). As part of this, the working group for ambulance handovers has an action plan of improvements that are designed to reduce the delays in the process. This includes the following:

- Clear handover process provided for ambulance crews
- Simple controls provided for managing flow in the corridor
- Patients on trolleys are assessed for suitability for "Fit2Sit"
- Clinical Assessment within 30 mins of arrival, regardless of arriving with LAS or GP referred and arriving via LAS
- Review of internal ED methods for managing simultaneous ambulance arrivals.

In addition to this, the group are also looking at the number of patients conveyed by ambulance to hospital that are never admitted, as this can be between 50-60% of conveyances on some days. Work is being done locally with our CCG, Community Services and LAS colleagues on alternative pathways of care for these patients that avoid the need for an A&E attendance – thus freeing up crews and reducing pressure on our department.

More broadly, this is one area you may also wish to explore internally with LAS colleagues as in theory if alternative care pathways were better utilised by crews across London at source then many attendances to hospital could be avoided, which would also free up your crews for more urgent cases.

Escalation Process for Significant System Pressure

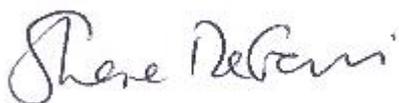
In addition to the actions taken around improvements in the processes, the Trust has also implemented a revised escalation process for times at which the department is experiencing significant system pressure that is affecting ambulance handover times. This outlines immediate actions to be taken by the Trust and its system partners to ensure safety in the department and reduce the length of time for ambulances to offload. This includes:

- A review of all patients in the department against the "fit to sit" criteria to free up cubicle space for ambulance offload
- Triggering the "full hospital protocol" to allow patients in A&E waiting for beds to move out of the department more promptly
- Use of other clinical space near the A&E department to assess and offload patients

Finally, it is recognised that the Trust has one of the smallest A&E departments in London versus the number of A&E conveyances and we have recently been awarded funding to expand our A&E department with the aim of improving flow for our patients. This includes additional space for the prompt handover of ambulances.

I do hope that this goes some way to answering the questions posed in your email about our proposed solutions and plans. If you or your colleagues would like to learn more about the approach we are taking in Hillingdon I would be very happy for you to visit the Trust to understand our plans in more detail.

Yours sincerely



Shane DeGaris
Chief Executive

c.c: Rob Larkman