

Chair's Report January 2011

I wish all members of the Forum and others a very happy 2011. I attended the LAS Trust Board meeting on December 14th. I also met briefly with Peter Bradley, LAS Chief Executive, prior to his departure on several weeks leave to discuss the future of the Patients Forum and several other issues. I have invited Peter to speak on the abolition of Category B calls and other issues at the March meeting of the Forum. I also arranged and attended a Xmas dinner with other members of the Forum on December 13th. I have also been in correspondence with the GMB union regarding the situation of the Patient Transport Service in South London.

LAS Trust Board Meeting.

As usual the minutes of the Trust Board meeting are available on the LAS's website

http://www.londonambulance.nhs.uk/about_us/who_we_are/trust_board/board_papers_-_2010.aspx

The meeting was held just a few days after the demonstrations involving students and the LAS had been very involved in this. A question was raised as to whether the LAS met with the Met Police to discuss public order issues and this was confirmed.

The Chair had presented a report on the LAS to the Chairs of London PCTs and was intending to visit the Mid Staffordshire Board meeting. He also intended to attend the NHS London Board meeting.

Finance: There was a loss of half a million pounds for the month. The year to date had a £543,000 surplus. The student demonstrations were draining resources away from core business. The year end forecasts were not being changed.

Performance: November saw 74.4% achieved in Category A calls. The week before the meeting it was 67% with 1100 Cat A calls per day, this was more than during the flu epidemic the previous year. At one point 200 to 300 calls had to be turned away and extra staffing was required. There were long delays at hospitals with some hospitals turning ambulances away due to bed shortages. Worse results were expected that week due to the student demo and the snow. A lot of the hospital waiting problems were connected with seasonal respiratory problems. Many beds were taken up with elderly acutely ill and they were not discharged quickly. The Demand Management Plan had to be used in 14 out of the 15 previous days but always used with discretion. On 3 or 4 occasions green or amber calls had to be turned

away. A clinician had been walking the floor in the control room and many GPs were being advised to see patients in hospital the next day.

Pregnant women with swine flu were on the increase and some hospitals were having to close with Blue calls which was unusual. Fiona Moore said that she had never seen demand at this level and there were now problems with some hospitals which had never had problems before. Lots of planning was in place about how hospitals and the LAS would work over Xmas and the New Year when GPs were closed etc. Some hospitals were passing on cases to the next hospital and some Trusts were closing wards – the single sex ward regulations meant that some patients were refused beds in some hospitals. 10-15% of patients were seen due to alcohol related problems.

Medical Director's Report: There had been no Serious Untoward Incidents nor clinical issues arising. New resuscitation guidelines were being introduced. LAS was working with other ambulance services on the recategorisation of calls. This involved examining determinants of Cat B and how the Cat B calls and higher C calls could be included under Cat A calls. Norovirus was also very prevalent in London hospitals and causing major problems.

I asked a question from the Forum as to how the LAS dealt with emergency calls from those placed inside a police kettle during recent demonstrations. I was told that St John's Ambulance and the Red Cross were both on standby. There were 2 Control Room Managers in the Police Control Room, who were heavily kitted out. There were also two Public Order Control Teams who go into the kettle when a call is received – these are very heavily kitted out. The danger of hypothermia for those inside the kettle was acknowledged to be very real.

Chief Executive's Report; On the following Friday the Secretary of State would announce the abolition of Category B calls and there would be an announcement regarding targets. Changing the definition of Category A calls from when the clock starts would be likely to be progressed in January. A letter regarding Foundation Trust status would be sent by the end of that week. The Secretary of State was also writing to the London Assembly to state that the LAS will remain under the control of the NHS and not that of the Assembly. The Chief Executive was going away on 3 weeks leave in January and Mike Dinan was appointed as Acting CE. A meeting with trade union reps to discuss staff reductions was also imminent.

Volume of Calls: A discussion began between Neil Kennet-Brown, the Director of LAS Commissioning, and the board about the volume of calls. The Commissioner

stated that although less calls were coming in to the Control Room there was an increase in ambulances being dispatched. This indicated a failure to pass on calls to NHS Direct and that 74% of NHS Direct calls still involved patients being conveyed to A&E.

Patient Transport Service in South London

A further article regarding Savoy Ventures appeared in the Xmas edition of Private Eye magazine. Malcolm has also written to the South London NHS Trust regarding the issue (see correspondence). I have received information from the GMB union that they are taking legal action for unlawful deductions of earnings and failure to consult and inform against Savoy Ventures and LAS.

Xmas and New Year Crisis

There have been a number of press reports concerning the huge volume of calls facing the LAS because of both the weather and the festivities over the holiday period and some of these are attached.

Dr Joseph Healy