

PATIENTS' FORUM

FOR THE LONDON AMBULANCE SERVICE

Malcolm Alexander
Chair
Patients' Forum
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Professor Keith Willett,
Medical Directorate
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March 11th 2019

Dear Professor Willett, you may recall that we wrote to you in December 2015, to share with you our concerns about the continuing problems of ambulance queuing and handover delays at London's A&E departments. Our correspondence is shown below.

We are aware of many system changes initiated to deal with the problem of handover delays, but nevertheless the problems continues and is severe and unacceptable, e.g. 800 patients waited for an hour or more for handover in December 2018.

Our purpose in writing to you is to ask whether you are developing plans to deal with the post-Brexit situations, when we fear that many NHS and care home staff will leave the country, and create a far worse handover situation in our A&Es for patients requiring emergency care.

Do you have a plan that will prevent hundred of ambulances being locked in situ outside A&Es, while very sick and injured patients wait long periods for ambulance to arrive? Do you have a plan to discourage staff from leaving the NHS and care homes?

We would very much like to see your plans and discuss with you your proposed mitigation of the potential harm to patients that could arise post-Brexit.

Very best wishes and thanks

Malcolm Alexander
Chair
Patients' Forum for the LAS
07817505193

23/12/2016 -

REPLY from: Keith Willett, NHS England Director of Acute Episodes of Care

Dear Mr Alexander,

Firstly, can I thank you for your recent contact and I note the issues you raise.

Secondly, can I apologise for not being able to make the follow-up call you had kindly accepted planned for today. I was called away on a national priority issue. However I am happy to cover in this email what I was going to cover in that call, be it less personal.

The intention of my call was to explain that my role in NHS England is to lead the design and development of Urgent and Emergency Care services as part of the Keogh Review. As you are aware all A&E and Ambulance Services are commissioned by CCGs and they also hold the statutory authority for service design. Something I know has been to the fore in NW London. The oversight of operational and clinical performance by NHS England is through our Regional Offices and so I have spoken to and brought to their attention the concerns you and you Forum members have raised. Your correspondence has been forwarded to Dr Andrew Mitchell to respond.

We are all acutely aware of the service provision and demand placed across the whole urgent and emergency care community from general practice and the community, through 111 and 999 to hospital admissions and delayed discharges. That in the medium to longer term is what the UEC Review is attempting with colleagues in the NHS to address through redesign. Perhaps you would however clarify in any further correspondence with Dr Mitchell the data you put in your letter about increased handover delays. Clearly delayed handovers are a real issue for patients care and ambulance operational performance. As I read the numbers though, comparing the months of November 2014 and October 2015, there has been a reduction from 1329 to 1189 in total delayed handovers, which adjusted for days in the month, looks like a 13% improvement.

Yours sincerely

Keith Willett
NHS England director of acute episodes of care

December 13th 2015

Professor Keith Willett,
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A&E Patients and the Winter Crisis

Dear Keith, we are very concerned about the pressures on London's acute services caused by the closure of A&E department in west London, and the underfunding of acute hospitals and A&E services. Closure of A&E departments over the past few years appears to have had the inevitable effect of ensuring that sick people wait appalling lengths of time for treatment.

Imagine an elderly person falling in their home and being unable to get up, and then waiting hours for an ambulance, and then queuing outside an A&E department for up to an hour, and then laying in a cubicle in A&E for 4 hours before discharge or admission - 8 hours of queuing to get a bed or get home.

Surely, NHS England is responsible and accountable for these delays because they have closed services and have failed to deal with the ambulance queuing outside some of our major hospital which has gone on for years.

Commissioners have failed deal adequately with the crisis as the following figures for October 2015 and 2014 show:

Patients waiting in an ambulance for up to an hour outside casualty in October 2015 - compared to November 2014:

Hillingdon Hospital 210 (222 in 2014)
Northwick Park 342 (326)
Queens 244 (355)
North Middlesex 213 (205)
Ealing 180 (221)

Not only are patients who are seriously ill waiting in ambulances for admission to A&E, but the ambulances and their highly trained crews are stuck in queues and can't get away to attend to the next patient suffering

from stroke or cardiac arrest. Delays can cause serious harm to seriously ill patients.

We believe that NHS England must accept responsibility for a failure in the provision and organisation of emergency and urgent care.

What action will NHS England now take to ensure that the resources that London needs to get rid of ambulance queues and inappropriate patient waits are made available immediately?

Malcolm Alexander

A handwritten signature in black ink, appearing to read 'M. Alexander', written in a cursive style.

Chair

Patients' Forum – Ambulance Services - London