

Trust HQ

Inspection report

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This report describes our judgement of the quality of care at this service. It is based on a combination of what we found when we inspected, information from our ongoing monitoring of data about services and information given to us from the provider, patients, the public and other organisations.

Ratings

Overall rating for this location

Good 

Are services safe?

Good 

Are services effective?

Good 

Are services caring?

Good 

Are services responsive?

Good 

Are services well-led?

Good 

Overall summary

This service is rated as Good overall. The previous inspection of this service was completed in December 2016 and was rated Requires Improvement overall. (Safe- Good, **Effective- Requires Improvement**, Caring- Good, Responsive- Good and **Well led- Requires Improvement**)

At this inspection the key questions are rated as:

Are services safe? – Good

Are services effective? – **Good**

Are services caring? – Good

Are services responsive? – Good

Are services well-led? – **Good**

We carried out an announced focused inspection at South Western Ambulance Service NHS Foundation Trust (SWASFT) 111 on Wednesday 2 May 2018 to follow up on breaches of regulations in the Effective and Well led domains.

At this inspection we found:

- A clear management structure was in place with proactive engagement and involvement of front line staff to influence and participate in improvements and change.
- Continued positive feedback from patients.
- A continued low number of complaints and no outstanding adverse incident reports.
- An improved and a sustained improving trend of key metrics to demonstrate patients were accessing and receiving timely care and treatment.
- Evidence of appropriate support, auditing and monitoring of staff to demonstrate they had the necessary skills and knowledge to undertake their roles.
- A continued implementation of staff recruitment and induction
- An investment in equipment used at the hub; IT equipment had been replaced and repaired.

Professor Steve Field CBE FRCP FFPH FRCGP Chief Inspector of General Practice

Our inspection team

Our inspection team was led by a CQC lead inspector. The team included a CQC Inspection Manager and a CQC national GP advisor.

Background to Trust HQ

South Western Ambulance Service NHS Foundation Trust (SWASFT) was the first ambulance service to be authorised as an NHS Foundation Trust on 1 March 2011. In February 2013, it acquired neighbouring Great Western Ambulance Service NHS Trust.

The Trust's core operations include the following service lines:

- Emergency operations centre
- Emergency and urgent Care (Out of hours care in Dorset and Tiverton Urgent Care Centre)
- NHS 111 (Dorset) and Resilience

This report relates to the inspection of the NHS 111 services only.

The Trust operates NHS 111 services from one main call centre location:

- East Division Headquarters Acorn Building, Ringwood Road, St Leonards, Hampshire, BH24 2RR.

Further clinician and quality support is available from a hub base:

- Trust Headquarters, Abbey Court, Eagle Way, Sowton Industrial Estate, Exeter, Devon, EX2 7HY

The provision of the NHS 111 service covers the county of Dorset. The area covered has a geographic area of 1024

square miles, a population of 422,900 and a high influx of visitors per year. There is one clinical commissioning group (CCGs) who have a contract with the Trust for NHS 111 service.

- NHS Dorset CCG

Previously, the Trust provided NHS 111 services for two additional areas in Devon and Cornwall. The Cornwall and the Isles of Scilly service contract ended in December 2017 and the contract for the delivery of the NHS 111 services in Northern, Eastern and Western Devon CCG and Torbay CCG ceased on 30 September 2016.

SWASFT NHS 111 service operates 24 hours a day 365 days of the year. It is a telephone based service where patients are assessed, given advice and directed to a local service that most appropriately meets their needs. For example, this could be a GP service (in or out of hours), walk-in centre or urgent care centre, community nurse, emergency dentist, emergency department, emergency ambulance, pharmacy or home management. In addition to the standard staffing mix for a 111 service, the service also employs a GP during the in hours period who gives additional clinical input to calls.

For this inspection we visited the East Division Headquarters Acorn Building, Ringwood Road, St Leonards, Hampshire, BH24 2RR.

Are services safe?

We did not inspect this domain at this visit. It was rated good at our inspection in December 2016.

Are services effective?

We rated the service as good for providing effective services.

At the last inspection in December 2016 we found:

Although performance had improved since the inspection in March 2016 more recent information from November 2016 showed the Trust had still not delivered the national call answering targets of 95%. For example, Information provided by the Trust for the last inspection highlighted performance between November 2015 and March 2016 averaged 73.2% of calls being answered within 60 seconds.

At this inspection in April 2018 data showed an improving picture. For example, between November 2016 and March 2018 the percentage of calls being answered within 60 seconds improved from 76% to 95%. Since November 2017 percentages had consistently been better than the national average and local averages. For example, at the end of January 2018 the Trust had achieved the national target of 95% compared with local and national averages of just under 75%.

Where there were environmental influences on the service the Trust had demonstrated a rapid recovery in key metric targets. For example, recent inclement weather had affected local, national and SWASFT indicators but targets had recovered to normal ranges within a week compared to two weeks for other similar services.

In addition, at the last inspection we found call back systems had improved and were now more responsive to callers' needs. For example, call answering performance and call abandonment performance had improved.

At this inspection we found despite the number of call backs increasing from 600 to 700 between March 2017 and March 2018, the mean call time performance continued to improve. For example, for the same time period the mean call back time had reduced from just under two hours to one hour and was continuing to decrease. The business continuity plan had been reviewed to ensure triggers and escalations were in place to manage the call queue and an integrated call queue was in place to provide clinical oversight.

At the last inspection in December 2016 we found:

Audit activity had improved since the inspection in March 2016 but continued to miss national target rates. It is a condition of the NHS Pathways user licence and a National Quality Requirement for NHS 111 services that providers

must regularly audit a random sample of patient contacts. The sample must include enough data to review the performance of all staff that provides care. For example, between September and October 2016 call advisor call audits rates were reported at between 37% and 41% of the audit target. Between September and October 2016 clinical advisor audits rates were reported at between 50% and 81% of the audit target.

Since this inspection the Trust had:

- Met with the CCG to agree a 'Right size business case' and secured additional financial funding for clinicians and audit which supported performance improvement.
- Introduced an audit team with the appointment of a Clinical Lead Auditor enabling service quality to be more effectively monitored.
- Continued to monitor compliance with the NHS Pathways licence resulting in improved performance.

At this inspection in April 2018 we found data to show the service was now compliant with NHS pathways licence for clinicians and non-clinicians. These targets had been achieved since October 2017 and every month thereafter. 10 case records were reviewed in detail and all showed appropriate and timely management of patients. Audits were seen to be non-punitive, positive and demonstrated additional learning and action which staff valued.

The service continued to 'theme' findings from the audits, patient feedback and from any adverse incidents. Coaching and appraisals were provided to all staff including call advisors with high 999 referral rates. Further plans were in place to develop these improvements within the wider organisation.

At the last inspection in December 2016 we found:

The Trust's provision of the NHS 111 service had experienced a number of challenges to the delivery of its service which included staff recruitment and retention. This had been reflected on their risk register and discussed in the monthly integrated corporate performance reports, NHS 111 governance reports, and Trust board meetings.

At this inspection in April 2018 we found the service had:

- Continued to monitor and improve staffing levels.
- Achieved a full establishment of non-clinical staff (100%). For example data from the end of April 2018

Are services effective?

showed funded full time equivalent (FTE) of 79.08 staff, compared with an actual FTE amount of 90.11 demonstrating an over establishment figure of 11.03 staff.

- Established active recruitment processes for six clinicians including two additional posts.
- Increased the number of hours three clinicians worked and offered initiatives to staff to work additional hours.

- Started to roll out an option for clinical staff to work from home to improve access to resources and to support staff wellbeing.

The service were currently undertaking a rota review to streamline staffing in line with the demands of the service. The staff side groups, unions and staff had been fully involved in these changes and spoke highly of the responsiveness of the management approach to staffing and skill mix.

Are services caring?

We did not inspect this domain at this visit. It was rated good at our inspection in December 2016.

Are services responsive to people's needs?

We did not inspect this domain at this visit. It was rated good at our inspection in December 2016.

Are services well-led?

We rated the service as good for leadership.

At the last inspection in December 2016 we found:

The Trust had made significant improvements to their governance framework to support the strategy to deliver high quality and compassionate care to patients in the most clinically appropriate, safe and effective way. However, some of the new improvements and the effectiveness were difficult to evidence due to the short time since implementation.

At this inspection in April 2018 we found the service had

- Responded in a timely way to the CQC report.
- Met with Dorset CCG to agree a 'right size business case' and secure additional financial funding for recruitment of clinicians and delivery of the audit process.
- Ceased providing a 111 service for Cornwall but retained these staff for the Dorset contract resulting in much improved services.
- Continued to monitor staffing levels and skill mix to ensure quality services were delivered.
- Introduced systems to monitor and maintain compliance with the NHS Pathways licence resulting in improved performance.
- Introduced a new leadership team and clear lines of accountability which improved governance arrangements.
- Fostered an effective working relationship between the management team, staff group and commissioners of the service.
- Engaged with external organisations, including Healthwatch, to obtain feedback to evidence where services needed improving.
- Encouraged front line staff and union engagement to seek feedback on future changes and implementation of new systems.

As a result the service demonstrated

- An awareness of future development needs and transparency of what needed to be done
- Improvements of Key Performance metrics.
- Continued patient satisfaction. For example, 92% of patients would recommend the service.
- Achievement of call answering performance and call abandonment within upper quartile nationally. For example, call abandonment rates were consistently under the 5% national target rate.
- Reduction of overall complaints. For example, for an average of 19-20,000 calls per month the service received a total of eight complaints in the period of January to March 2018.
- A sustained low level of serious and moderate incidents. For example, at the time of inspection there were no outstanding serious or moderate incidents reported. There had been one moderate incident reported in July 2017. This incident investigation had been completed before October 2017.
- A sustained downward trend of outstanding adverse incident investigations. For example, in December 2016 there were 268 incomplete incident reports and in May 2018 this figure had reduced to 11.
- Increasing staff support and supervision resulting in improved performance and staff morale.
- An improvement in the governance of call audits which resulted in improved staff performance and better patient outcomes.

Staff told us morale had improved but had been affected by recent changes in the service provision and uncertainty of the imminent tendering result regarding the contract.