Title

South Central Ambulance Centre - Operational Service Review of SCAS Emergency Operations Centres

FOR CONSIDERATION BY

Health Overview and Scrutiny Committee on 29 May 2012

None Specific

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South Central Ambulance Service

NHS Foundation Trust

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BRIEFING PAPER

OPERATIONAL SERVICE REVIEW OF SCAS EMERGENCY OPERATIONS CENTRES (EOCs)

SUMMARY

In November 2010, the SCAS Board considered the future configuration of EOCs (Emergency Operations Centres) due to the lease expiry of the Wokingham HQ building in December 2011. The Board decided at that time to remain in the building and carry out a further review in 2012 to determine the long term configuration of the three SCAS EOCs, based at Bicester, Otterbourne and Wokingham.

Responding to strong staff concerns and feelings regarding the continued situation in Wokingham, it was decided to identify the likely and realistic options open to the Trust.

In summary, the options identified were:

Option 1 – Do Nothing

 Continue with the original Wokingham EOC productivity improvement plan rollout during 2012 (this has been temporarily suspended pending the outcome of this review)

Option 2 – Retain 3 EOCs

- Fully resource Wokingham EOC to required staffing levels
- Limited long-term operation at Wokingham EOC (16 hours a day, 7 days a week)
- Relocate to new EOC site in Berkshire

Option 3 – Move to 2 EOCs

- Wokingham EOC fully relocates to Bicester EOC (Northern House)
- Wokingham EOC fully relocates to Otterbourne EOC (Southern House)
- Split Wokingham EOC functionality between Bicester and Otterbourne EOCs

Option 4 – Create 1 EOC

• A single Trust wide EOC.

After considering the above options, the Senior EOC Review Group agreed that an assessment should be made of each option based on the following criteria:

- Patient safety
- Efficiency / value
- ICT resilience
- Strategic alignment
- Benefits to staff

The review of the three centres has been undertaken and the Board accepted the recommendation that the functions of Wokingham EOC should be fully relocated to Bicester EOC.

Rationale for this decision:

Patient Safety

- We have experienced great difficulty recruiting to the Wokingham Clinical Support Desk (CSD) and have had to transfer vacant positions to Otterbourne EOC in the past. The CSD is a fundamental part of our clinical strategy, supporting our vision of personalising care to individual patients needs. The CSD is also key to our productivity improvements, enabling and supporting our staff to deliver the right care for patients first time. The continual shortage of CSD staff in Wokingham has inhibited the full development of our clinical model. The move to Bicester will enable us to have a fully staffed CSD offering clinical advice to call takers, dispatchers and patients, thereby enhancing patient safety, care and productivity.
- Moving Wokingham EOC to Bicester could entail some loss of local knowledge as some staff may not be able to relocate to Bicester. However this will be mitigated by creating dedicated dispatching desks in Bicester, using technology effectively and enabling staff to build their local knowledge. Throughout the English ambulance service most dispatchers do not have detailed local knowledge of their dispatch areas based on living in that area. Instead, they build their experience in dispatching in that area coupled with technological aids available. We have experience of relocating 'call centres' and have successfully managed dispatching 'out of area'. We believe that this experience will ensure that we will be able to train and support all staff, ensuring patient safety.
- As we operate a virtual call taking system between our three centres, we already deal with Berkshire calls at both Bicester and Otterbourne. As the Wokingham EOC call taking function is now closed from 0000-0600 hrs, every day, all calls are taken elsewhere, safely and seamlessly.
- The larger dispatch area will promote the more efficient sharing and use of resources in the Thames Valley, for example in the areas of South Oxfordshire/North West Berkshire and South Buckinghamshire/North East Berkshire and greater resilience for the Slough area and north Reading area. This will enable resources to be more effectively deployed in areas which currently sit on the borders between the two EOCs.
- The Trust has successfully undertaken "proof of concept" trials with West, East and both Berkshire desks being operated from Bicester, with no loss of service. Few Field Ops crews and no patients were aware that this was in operation proving that the location of the control desk is in fact irrelevant to the resources being controlled.

ICT Resilience

- The Wokingham site would require considerable investment (£450k) to bring it up to the same essential standard as at Bicester and Otterbourne.
- Even after that investment, a "two-similar" sized site solution is intrinsically safer and more resilient than a "three-different" sized site solution, which brings with it an exponential increase in complexity. Each EOC will be operating with more staff that are able to be re-tasked to provide dedicated control resources in the event of a Major or Significant Incident, whilst the EOC still maintains the "normal" levels of service to the public. This could not be guaranteed in the Wokingham EOC.

- With the relocation of the EOC the need to provide an ICT presence on site is removed. Staff based at Wokingham will get their IT support from the northern based team with work being allocated from the IT Service desk on a prioritised need basis.
- On Call support outside of normal working hours will continue to be supplied by the ICT On Call service.

Benefits to staff

- We believe this move to a larger call centre will offer better access to support and development opportunities for the affected staff.
- We will maintain a strong, visible leadership presence in Berkshire with an Area Manager, two Emergency Services Managers and a local operational office.

Strategic Alignment

- The two site option better supports the many benefits from the Operational/Clinical Structure Review, based on two clusters, north (Berkshire/Ox/Bucks/MK PCTs) and the south (Hampshire/Southampton/Portsmouth PCTs).
- It supports the trauma and vascular network structure, which is based on Wessex and Thames Valley.
- It is a better fit with patient flows.
- It offers a resilient 50/50 split of workload between two large, modern, well equipped EOCs in Bicester and Otterbourne.
- It provides co-terminosity with Thames Valley and Hampshire Police. It is of note that Oxfordshire Fire & Rescue Service and Berkshire Fire & Rescue Service are currently reorganising to provide a single control room to cover both operational areas.
- There is a general move across English ambulance services to fewer, fit for purpose EOCs for the reasons given in this briefing document. We do not know of any EOCs that are as small as Wokingham that have a long term future.
- We need to make financial efficiencies to protect frontline services and patient care.

KEY RISKS AND RISK MITIGATION

During the Senior EOC Review Group's discussions, and as part of the review process, a thorough risk assessment was carried out. This has resulted in a mitigation plan being developed to ensure we maintain safe service delivery and operational performance.

PROPOSED TIMETABLE

We will make a formal announcement of the decision to relocate the Wokingham EOC, Scheduling and ICT staff who support EOC, on 8 May 2012 at 12.30pm. There will begin a thirty day consultation period with affected staff, on the implications of the decision, which will end on the 7 June 2012. We will then begin the process to move the operation to Bicester. We anticipate that this will be completed by mid July.

THE FUTURE OF THE WOKINGHAM SITE

The remaining staff, not in EOC or covered by the Corporate Review will be concerned about the impact of these staff moves on the long term viability of the Wokingham office. There will be an ongoing requirement for the GP Out Of Hours services to be provided but until we have some clarity about the future provision of the NHS111 service in Berkshire, we are unable to make a decision about the future of the Wokingham building. As the NHS111 service is expected to go live from April 2013, we hope to get a clearer indication in the next 3-4 months.

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Will Hancock Chief Executive

8th May 2012