




Annual review 2009/10



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Foreword from the chair



I am delighted that our work with members over the past year has achieved so much; strengthening the position of the ambulance service as an integral part of today's emergency and urgent care system.

There have been many changes to the Ambulance Service Network (ASN) board over the past year. I should like to record my thanks to John Burnside and Liz Kendall, our first chair and network director, and to Sigurd Reinton, former chair of London Ambulance Service NHS Trust, for their commitment to promoting the role of ambulance services and their work in establishing the network.

2009/10 has been a very productive year for the ASN. A strong work programme has enabled the network to successfully meet its two key objectives: to provide a strong and independent voice for UK ambulance services and to support services in working more closely with the wider NHS and other key stakeholders in health and social care.

A big highlight from our work in 2009/10 includes the first ASN annual conference and exhibition. The event attracted more than 140 delegates from across the NHS and social care providing the opportunity to develop and share good practice on delivering high-quality emergency and urgent care.

We held a number of seminars and workshops on priority issues for our members in 2009/10 which also raised awareness among key stakeholders of the extensive role of the ambulance service. These included designing high-quality trauma and transfer services for patients, partnership working between ambulance services and mental health providers to

develop appropriate care pathways for patients with mental health needs and our work on patient safety. With significant contribution from its members, the ASN has also expanded on some of these issues in briefing documents. We also held two well-attended events for ambulance trusts non-executive directors which provided attendees with the opportunity to discuss the future direction for ambulance services.

The ASN has valued the input we have received from members over the past 12 months to influence the policy agenda. Through consultations on topics such as regulation and the new non-emergency healthcare number '111' and attending our meetings to debate the key strategic issues facing ambulance services and the wider NHS, members have enabled the ASN to represent the needs and concerns of today's ambulance service.

In what will be another challenging year for ambulance services in 2010/11, the network will continue with a programme of work that will support members in delivering significant efficiency savings while meeting increasing demand and ensuring that we continue to improve services for patients. Our focus will include raising awareness of how ambulance services are working in partnership with all parts of the NHS, voluntary and social care communities, promoting the development of new models of urgent care that shift the focus towards prevention and early intervention and helping to improve quality.

The ASN is committed to working with you, our members to ensure that the ambulance service is central to the emergency and urgent care system. We encourage you to contribute to all aspects of our work and look forward to the many opportunities to hear from you in the coming year.

Heather Strawbridge
Chair, Ambulance Service Network

Director's statement



In its second year, ASN has been well placed to support the 17 trusts in membership, giving a voice to the ambitions of and challenges for a service which has proved already that it can compete with the best but knows that there is still more to do to take its place at the heart of

the national urgent and emergency care system.

2009/10 has been a year of achievement but also transition for the ASN. Liz Kendall left her role as director in early 2010 and we wish her well in her political career. Her shoes will be difficult to fill and it is my job, in the first instance, to ensure that our work programme continues to focus on key concerns, adds value to members and meets the needs of individual trusts and the wider ambulance community.

It is a particular challenge this year. We will all be considering the implications of the general election results and how they will affect the NHS in general and urgent and emergency care services in particular.

Members tell me that the commissioning of ambulance services needs to be improved further, so that their central role in local urgent and emergency care systems is acknowledged, and some of the real examples of innovation I have seen recently can be spread further. This is why we will be working with the Primary Care Trust Network (PCTN) to support discussions between members and ambulance service commissioners about developing a better

understanding and shared vision for the service. It is also why we will be working as part of the wider NHS Confederation with the regulators on how the new regulatory system develops now that the initial registration stage has been completed.

Ambulance trusts have already shown that reconfiguration and collaboration can deliver economies of scale while still maintaining local responsiveness. Within ASN, we will ensure that we can achieve what members want from the network in as cost effective a way as possible. We have reduced our subscriptions significantly this year and will continue to look for new ways to deliver a high-quality business plan for a low cost.

My conversations with and visits to member organisations have shown me first hand the wide range of services members provide but the strategic and operational issues still being tackled are many and various. From the implementation of the new trauma networks in London to the challenges of tackling the hardest winter for many years in Yorkshire and the North East, from planning for the 2012 Olympics to raising public awareness of the tell tale signs of an early stroke, ambulance trusts are continuing to show their innovation, resourcefulness and resilience. And ASN will continue to support members to raise their profile and influence policy on their behalf.

The year ahead will be difficult. But my experience in the short time I have been director has shown me that ASN members are up for and able to meet the challenge.

Jo Webber
Director, Ambulance Service Network

About us

The ASN was established as part of the NHS Confederation to enable the ambulance service to work more closely with other parts of the health service, while retaining a strong, independent voice for NHS and public ambulance services in the UK.

ASN's vision is:

- a single point of access for emergency and urgent care, linked to the appropriate service response
- world-class services nationwide for patients with life threatening conditions and those suffering from major trauma
- integrated and seamless services across primary, secondary and community care, including a range of urgent care services available 24 hours a day, seven days a week.

These services will be backed up by:

- world-class commissioning for emergency and urgent care, involving all NHS and social care partners, with patients' outcomes and experiences used to measure success
- appropriately trained and skilled ambulance service staff working in multi-disciplinary teams across a variety of settings
- real-time data and information about emergency and urgent care services with patients' health records shared seamlessly between different parts of the health and social care system
- a system of funding that incentivise services to treat patients in the most appropriate location for their clinical need – in specialist centres where necessary and in local communities or people's homes where possible.

The ASN continues to work with the commissioners and providers of NHS services and with our partners in social care, to achieve our shared vision of providing a world-class service for all patients.

"The ASN is an important voice for the ambulance service and champions the work it does to provide excellent urgent and emergency care for patients, as well as its continual development as a modern, responsive part of the NHS."

Chris Dowse

Deputy director, head of urgent and emergency care, Department of Health.

Member benefits and how to get involved

The ASN currently has 17 members. These include the 11 ambulance trusts in England, those from the devolved administrations of Northern Ireland and Wales, and the ambulance services of the islands of Guernsey, Jersey, Isle of Man, and the Isle of Wight.

The network is member-driven and we are committed to involving members in developing and shaping our work programme, ensuring that we meet their needs.

We continue to support ambulance services to strengthen their position as an integral part of today's emergency and urgent care system, address the key issues and represent our members' views to key stakeholders in health and social care. Below is a summary of the benefits and engagement opportunities we offer our members.

Influencing policy through:

- engaging with the new teams and organisations that emerge as a result of the new coalition Government
- horizon scanning to assess likely future policy and identifying opportunities to influence developments
- ongoing input from members on the development of current, relevant policies via contributions to our consultation responses
- ongoing work with key stakeholders such as the Care Quality Commission (CQC).

Promoting good practice by:

- supporting members to share examples of good practice and learn from each other about effective implementation
- working with key partners such as the National Patient Safety Agency to improve patient safety in emergency and urgent care
- identifying gaps in the support being provided to NHS ambulance services to help members perform effectively in an increasingly challenging environment.

Networking and engagement opportunities:

- priority bookings for our members at events, workshops and seminars, including our one-day ASN conference
- ASN non-executive directors events
- meetings with key stakeholders and opinion formers to discuss strategic and policy issues
- reduced delegate rates to the NHS Confederation and NHS Employers annual conferences and exhibitions.

Communications to keep members up to date:

- policy briefings, publications and policy digests

“South Central Ambulance Service NHS Trust capitalised on engagement opportunities via the ASN when we were invited to co-lead a workshop on mental health alternative care pathways at a joint workshop with the Mental Health Network in November 2009.

This provided an excellent opportunity for us to engage with chief executive officers and directors of mental health services and, as a result, we have gone on to forge stronger relationships with key stakeholders in our area. This has allowed us to establish effective processes to consider strategic and policy issues affecting both organisations, aiming to improve patient outcomes.”

Sue Putman

Clinical educator, mental capacity act lead, South Central Ambulance Service NHS Trust.

- feedback from consultations, discussion papers and surveys
- access to member-only areas of the NHS Confederation website, including all the latest ASN website documents, materials and online tools
- monthly ASN e-newsletter providing members with up to date policy, network and parliamentary updates and opportunities to get involved.

Our work and achievements 2009/10

Influencing the agenda

We were successful in contributing to Department of Health (DH) committees and working parties, including the Urgent and Emergency Care board. We have also been working with organisations such as the National Patient Safety Agency, which will continue into 2010/11.

Throughout the year, we responded to a number of consultations covering the regulation of health and social care providers, the three-digit number for non-emergency healthcare services and the prevention and control of infections.

We have also contributed to NHS Confederation reports and publications, including covering the impact of alcohol-related problems on the NHS and the key issues for NHS trusts in improving care for patients with dementia.

ASN one-day conference – October 2009

In October, we successfully launched our first annual conference and exhibition that aimed to develop and share good practice on delivering high-quality emergency and urgent care. More than 140 delegates from across the NHS and social care heard from expert speakers including Ian Dalton, national director for flu resilience; and Hugh Griffiths, deputy national director for mental health, Department of Health.

Ambulance service non-executive directors' meetings

We held two workshop events in Birmingham and London, providing the opportunity for non-executive directors to discuss the strategic challenges facing ambulance services. Issues raised included greater partnership working with health and social care and the opportunities to lead, develop and participate in new models of urgent care focusing on prevention and early intervention.

“During 2009/10 the ASN was instrumental in raising awareness of patient safety initiatives in the ambulance services by organising a workshop involving all ambulance services and the National Patient Safety Agency. They assisted services with understanding the Care Quality Commission (CQC) registration process which proved beneficial to all involved.

We look forward to working with them in 2010/11 and applaud the work they are doing to ensure ambulance services are at the forefront of new initiatives to improve the quality of care delivered to NHS patients.”

Sue Green

Regional head of risk and governance, West Midlands Ambulance Service NHS Trust.

Member dinners

These events provided a platform for our members to engage with and inform senior opinion formers about the role of the ambulance service. Participants heard from key health and social care officials including Sir David Nicholson CBE, chief executive of the NHS in England; Dr William Moyes, previously executive chair, Monitor; and Lord Carter of Coles, chair, Cooperation and Competition Panel (CCP).

Seminars and workshops

Our workshops, attended by national leading experts on urgent and emergency care, covered a number of priority issues. We hosted a workshop that looked at trauma care and the transfer system, and how the design of high-quality trauma and transfer services is complex and will vary between areas with different population densities, transport infrastructure and hospital

facilities. The workshop highlighted how there are important judgements to be made about service configurations, investments in new facilities and protocols for bypassing and transferring patients.

We also held a joint workshop with the National Patient Safety Agency (NPSA) to discuss patient safety and ambulance services. The meeting brought together chairs, directors and practitioners in ambulance services with senior figures from the NPSA to review the data on patient safety incidents, discuss the barriers and opportunities for improving reporting rates, and identify key issues for improving patient safety in future.

The NHS Confederation annual conference and exhibition

We established a strong presence at the 2009 conference where we held two sessions: transforming critical care and improving urgent and emergency care for patients with mental health needs.

Network annual general meeting 2009

We invited all members to attend the network's annual general meeting (AGM) which took place at the NHS Confederation annual conference and exhibition. Our 2008/09 annual review was presented at the AGM where members discussed the key achievements of the past year as well as those areas that could be developed further in the coming year.

Other network conferences

We held a joint workshop with the Mental Health Network (MHN) at its conference in November 2009, to consider how ambulance services can develop alternative care pathways with their local mental health providers to improve patients' outcomes, increase service efficiency and reduce costs. We also published a joint briefing entitled *Getting to a good place: partnership working for mental health patients*, which explored how ambulance services and mental health services can work together to provide the best care for patients with mental health needs.

Our priorities 2010/11

In 2010/11, we will concentrate on system reform, quality and urgent and emergency care, including the role of ambulance trusts as a single point of access to local systems. The network will continue to conduct research, collect examples of international and UK best practice, produce briefing documents and reports, and host meetings and seminars with members, policy makers and opinion formers.

Developing a relationship and profile with a new administration

The recent General Election has resulted in an influx of new MPs and local council elected representatives, whose knowledge of the scope of modern ambulance services will be variable. In May, we produced a short briefing paper *Seeing ambulance services in a different light: more than a patient transport service*, for ASN members to use to inform new local MPs and councillors about the range of services that ambulance trusts deliver. This can be used in conjunction with our *Vision for emergency and urgent care strategy* to give a rounded picture of our views and services in the early days of the new administration.

A high-quality offer

With a new coalition Government in operation, a range of new policies are expected to potentially change the way in which services are delivered. We will continue to deliver high-quality events to inform members on key issues of interest. These will include two full-day seminars for non-executive directors in July and November, two sessions at the NHS Confederation's annual conference in June and the ASN annual conference on urgent and emergency care.

Key project areas

Commissioning

In a period of increasing financial constraint with efficiencies needed across the service, it is important that the range of interventions that ambulance trusts can offer to manage demand are part of local commissioned services. With the Primary Care Trust Network (PCTN) Ambulance Service Commissioners Group, we will be holding a workshop in July on

developing a better understanding and shared vision for the future of ambulance commissioning. We hope that this will result in an ongoing dialogue prior to the next commissioning round later this year.

Trauma

Following our work last year to identify and raise awareness of the key issues in pre-hospital care for major trauma, our briefing paper on trauma will be published in July. We will continue to work in this area as the roll-out of trauma centres continues, to look at lessons to be learned and the impact of the system changes.

Urban versus rural issues

Ambulance services work across a huge range of geographical areas and these bring with them their own challenges for performance and responsiveness. We will develop our work in this area with a discussion paper and further consultation with members on our stance on this important issue.

Regulation

The new registration system started in April this year and, with a new Government, further changes would seem inevitable. Following our discussion with the ambulance leads for regulation we will develop our position on the impact to the ambulance service of the changes to the regulatory system. This will feed into a wider NHS Confederation work programme, including a workshop to discuss the system impact of registration and the future of the regulatory framework.

Patient safety

Patient safety is a key consideration in all triage decisions. We are working with the NHS Institute for Innovation and Improvement and the National Patient Safety Agency to explore the most appropriate methodology to address and improve patient safety in the urgent care and ambulance healthcare sectors.

Dementia

With the numbers of people with dementia expected to rise over the next few years, the role of ambulance

services in supporting them and their carers has never been more important. We will be holding a DH supported workshop with members in November about the role of ambulance services in early detection and support of individuals with dementia. This will follow the NHS Confederation's *Acute awareness: improving hospital care for people with dementia* report which the network contributed to. Depending on the findings from the workshop, this may lead to further work in this area.

Urgent care and the Quality, Innovation, Productivity and Prevention agenda

We will continue to work as part of the Urgent and Emergency Care board to implement the three-digit number. In our meetings with key figures we will also work to influence the direction of the national Quality, Innovation, Productivity and Prevention (QIPP) agenda and to reinforce the role of ambulance trusts as a single point of access to services.

Patient transport services

Patient transport services (PTS) continue to be an important part of local ambulance services but their commissioning and delivery varies in different parts of the country. We will explore the issues around PTS

later this year with a view to producing a discussion paper to further develop how we can influence this important topic.

ASN and the wider NHS Confederation work programme

In addition to ASN specific objectives, we will contribute to work across all the networks and interest groups in the NHS Confederation to agree the priorities for the wider NHS Confederation work programme.

The NHS Confederation is unique in its ability to bring together all parts of the modern NHS and we will take advantage of being under the umbrella of the NHS Confederation to continue to work closely with our family of networks to share learning and improve interaction on issues that affect the whole of the health and social care system.

Areas of joint work include regulation; working with the new Government; health inequalities and health improvement; local government and social care; quality and safety; competition and choice; employment issues and knowledge management and sharing.

Our people

The corporate governance structure of the NHS Confederation recognises the networks as the route by which members drive the purpose and strategy of the organisation. Each of the networks is in turn committed to working within a single corporate entity that governs in the interests of the NHS Confederation as a whole and ensures the effective function and success of the organisation. Information about the overall governance structure of the NHS Confederation is outlined in the organisation-wide annual review.

Each of the networks is self-governing with its own board elected by its members. These boards set the business plan and approve the budget of the network. The ASN board is comprised of five chief executives, five chairs of ambulance services and the director.

Board members also ensure that the network and the NHS Confederation continue to lobby and work on behalf of its ASN members on the issues that are important to them.

Board members 2009/10

Chair: Heather Strawbridge

South Western Ambulance Service NHS Trust

Liz Kendall

Director, Ambulance Service Network (until February 2010)

Jo Webber

Director, Ambulance Service Network

Vice-chair: Paul Sutton

Chief executive, South East Coast Ambulance Service NHS Trust

Tony Dell

Chair, North East Ambulance Service NHS Trust

Chris Faircliffe

Chair, East Midlands Ambulance Service NHS Trust

Nick Varey

Chair, Yorkshire Ambulance Service NHS Trust

Richard Hunt

Chair, London Ambulance Service NHS Trust

William Hancock

Chief executive, South Central Ambulance Service NHS Trust

Darren Hurrell

Chief executive, North West Ambulance Service NHS Trust

Anthony Marsh

Chief executive, West Midlands Ambulance Service NHS Trust

Alan Murray

Chief executive, Welsh Ambulance Service NHS Trust

Finance

A summary of the network outturn in 2009/10 is set out in the table below. This is currently being audited and therefore may be subject to unforeseen adjustments.

The network is reporting a surplus of £122,000 for 2009/10, against a budgeted surplus of £74,000. The difference is mainly due to savings on salaries created by a vacant post. This means that the network has achieved its target surplus of 50 per cent of salary costs within the first year.

Income is above budget as the amount generated by events during the year exceeded budgets.

As a consequence of the surplus for 2009/10, and in recognition of the current economic climate, the network board is pleased to announce that the membership fee structure has been revised, reducing the fees for 2010/11.

The main NHS Confederation fee will also be frozen for 2010/11.

Summary of income and expenditure 2009/10

	Forecast outturn £k	Budget £k	Variance £k
Total income	401	393	8
Expenditure – pay	181	207	26
Expenditure – non-pay	98	112	14
Expenditure – total	279	319	40
Total surplus/(deficit)	122	74	48

NHS CONFEDERATION



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