

Healthwatch Worcestershire's response to the Quality Account of the West Midlands Ambulance University NHS Foundation Trust (WMAS) for the year 2021/22

Healthwatch Worcestershire [HWW] has a statutory role as the champion for those who use publicly funded health and care services in the county. Healthwatch Worcestershire welcomes the opportunity to comment on the West Midlands Ambulance University NHS Foundation Trust Quality Account [QA] for 2021/22.

This has been another extraordinary and difficult year for providers of NHS services and Healthwatch Worcestershire appreciates and acknowledges the effort and commitment of the staff at the Trust who have been working hard to do their best for patients under difficult circumstances.

We have used national Healthwatch England guidance to form our response below.

1. Do the priorities of the provider reflect the priorities of the local population?

We would make the following comments:

Progress against 2020/21 Improvement Priorities:

- Cardiac Arrest Management: on page 63 of the version of the QA it states, "Whilst still delivering very safe and highly effective patient care, reports from the last year have shown a reduction in performance". However, this had been given a green progress rating due to the target being to reduce the number of serious Incidents relating to the management of cardiac arrest.
- Maternity this is carried forward as an improvement priority for 2022/23.
- Reduction in the Volume of Patient Harm Incidents During Transportation (PTS): we note the small rise in overall incidents but taken against the overall volume of activity the number is very low and the proportion is decreasing, although Q4 figures were not available in QA version we were commenting on. We welcome the WMAS intention 'to continue to learn from incidents and to educate staff when particular trends emerge, with the target of reducing the trend of incidents of all severity'.
- Learning from our Patients' Feedback. Last year Healthwatch Worcestershire particularly welcomed the introduction of the fourth Improvement Priority around patient feedback. The overall intention was to increase the responses and overall learning from patient surveys. We note that this was not achieved for technical reasons. Whilst this continues as a project for 2022/23 it is no longer an improvement priority. However, given the low response rates to patient surveys and the Friends and Family test and the importance of patient feedback in continuous improvement, we hope that the Trust will continue to focus on this and report back in the 2022/23 Quality Accounts.

The five improvement priorities for 2022/23:

Healthwatch Worcestershire recognises that the five identified improvement priorities for 2022/23 are likely to improve patient experience, safety and outcomes. However, there is



a lack of detail around how the Trust will achieve its objectives and little in the way of measurable targets, therefore any progress will be subjective and difficult to evaluate.

One of the major themes raised in the Patient Experience section of the QA was around timeliness of response, which mirrors the feedback received by HWW for both emergency and NHS 111 services. It is not clear that this has been addressed in the Improvement Priorities. Whilst we acknowledge that, particularly regarding the emergency response times there is a whole system issue, this has been addressed in the narrative but not in the improvement priorities. Although two of the proposed improvement priorities for 2022/23 might well impact on the timeliness of response: Integrated Emergency and Urgent Care Clinical Governance and Utilisation of Alternative Pathways, this has not been linked in the QA.

- Maternity: the WMAS work plan in maternity care was a key priority in 2021/22, and the plan is to maintain this as an improvement priority in 2022/23.
- Mental Health: HWW welcomes the focus on mental health and the recognition
 that a significant proportion of patients requiring urgent or emergency care have
 mental health needs. We note the appointment of a Head of Clinical Practice for
 Mental Health and the development and implementation of a workplan for mental
 health.
- Integrated Emergency and Urgent Care Clinical Governance: We acknowledge
 that the ability to quickly and accurately assess patient needs and identify the best
 response is key to achieving the best patient outcome. However, there is little
 detail about how this will be achieved and no specific targets or measures against
 which progress can be assessed.
- Utilisation of Alternative Pathways: we are aware that as part of providing an
 effective emergency service to those who need it, there is also a benefit in
 creating the appropriate links into other services for those patients who do not
 have immediately life and limb threatening illness and injury the right response,
 to the right patients at the right time. It is also possible that this priority could
 have an impact on response times however there is very little detail as to how this
 will be achieved or progress monitored. We would suggest however that this is an
 area where patient input and feedback could be of great value.
- **Developing Our Role in Improving Public Health:** whilst recognising that WMAS has an opportunity to support and improve public health through liaison with both patients and other healthcare providers, there is very little detail as to how this priority might be achieved and how progress will be evaluated.

2. Are there any important issues missed?

Healthwatch Worcestershire's principal concern is that patients who live or work in Worcestershire receive safe and quality services from the Trust.



We acknowledge that this has been another extraordinary and difficult year for NHS providers, with increased demand and system pressures continuing throughout the year We appreciate the challenges that the Trust have faced.

Comparing with the 2020/21 QA we note that there has been a deterioration in response times in all four categories in 2021/22. We are aware that this has occurred against a national background of deteriorating response times and that WMAS has continued to exceed the national average in all categories.

Reviewing the Ambulance Quality Indicators we note that there has been a small deterioration against previous years, whilst on the whole performing well against national averages. However the application of the post resuscitation care bundle has declined year on year and is lower than the national average. In general it would be useful if there was some narrative around these indicators in the QA.

We note the preparations in progress for the provision of services to the Commonwealth Games during the summer 2022 and welcome the re assurance that this will not adversely affect other patient services.

We welcome the Trust's focus on Learning from Deaths and the approach that they have adopted that where deaths have occurred while in WMAS care, all instances will receive a case record review although not stipulated within the National Guidance for Ambulance Trusts.

3. Has the provider demonstrated that they have involved patients and the public in the production of the Quality Account?

In the section on Quality Priorities for 2022/23 there is a statement that:

"In deciding our quality priorities for 2022/23 for improving patient experience, patient safety and clinical quality, we have reviewed outputs from discussions with stakeholders, engagement events, surveys, compliments, complaints and incident reporting. We regularly review all information available to us to identify trends and themes, this helps us to identify causes and priorities for improvement."

There is no other evidence that patients and the public have been involved in the production of the Quality Account.

We are not aware of the extent of patient engagement by WMAS in Worcestershire but would welcome any contact with the Public Governor representing the county.

4. Is the Quality Account clearly presented for patients and the public?

Healthwatch Worcestershire is aware that a significant level of technical detail and content is required in the QA and this makes it difficult to present the Quality Account clearly for patients and the public. However, the document as presented is long, technically complex, repetitive and the language used is not always accessible for patients and the public. Perhaps the Trust could consider asking their patient group to review the QA template during the year to provide input on a clearer and more approachable format.



We note the production of a Summary Quality Account for 2020/21 however we would also encourage the publication of an Easy Read version of the QA summary and potentially alternative languages.

We understand that WMAS are not required to produce this, but a geographic breakdown of key performance indicators by Integrated Care System area would help the public understanding of the Trust's performance in their own local area.

Jo Ringshall

Chair

