

## **EEAST Rapid Quality Review**

April 2025



## **CEO Update**



#### Progress dashboard for March 2025 (S.29A Warning Notice)

Concern	SRO	Completion target	Feb 2025	March 2025	April 2025
Mandatory Training.	Chief Paramedic and Director of Clinical Quality	>85% by 31/03/2025			1
Call waiting (Call pick up)	Chief of Clinical Operations	10% improvement by 31/03/2025			$\ominus$
EOC Staff Recruitment	Chief of Clinical Operations	Full establishment of call handlers and dispatchers - 30/09/2025			$\ominus$
Emergency Operations Culture	Chief People Officer	Roll out of engagement plan from 01/04/2025			1
Medicines Management Investigations	Medical Director	Zero incidents not closed appropriately by 31/03/2025			$\ominus$
Staff engagement – action plans	Chief People Officer	Roll out of engagement plan from 01/04/2025			



### **Mandatory Training**

East of England Ambulance Service



_					NHS Trust			
	Concern	SRO	Target	March 2025	April 2025 (10 <sup>'''</sup> )			
	Mandatory Training.	Chief Paramedic and Clinical Quality	>85% by 31/03/2025	91.69%	93.33%			
	Actions	completed	Date	Narrati	ve Summary			
•	Review of topics un programme now co subjects contained Skills Training Fran Bi-monthly monitor oversight from EEA Team. Q&A for staff on wh and Trust expectation March 2025. Additional face to face	ndertaken - the Trust's onsists of the 11 mandatory within the NHSE Core	20/02/2025 Ongoing from 20/02/2025	<ul> <li>There has been a c improvement in con subjects since the k</li> <li>Trust achieved &gt;85 latest data (as at 10 position of 93.33%. 85% target.</li> </ul>	ontinual incremental npliance with the 11 CSTF beginning of February 2025. % by end of March and 0/04/2025) shows a current All CSTF topics now exceed ng training stands at 89.33%			
	2025.	no and milestance	Doto		will remain in place to			
		ons and milestones	Date		si sustains a compliance			
•	to ensure staff are training requiremer Weekly L3 safegua	of all other topics and role aligned to the correct nts. Irding courses continuing, Isher training underway	30/04/2025 31/05/2025		Trust sustains a compliance continue after the end of the notice period to ensure a high ance is sustained.			

#### Risks, issues and barriers to delivery

The Trust currently holds a 10% sway in staff coming out of and completing their training which may impact on compliance.

-Due to the large number of staff, the line-by-line review is taking longer than originally planned – date extended to end April 2025 to complete.





STATMAN Training	Target (31/03/2025	20/03/2025	27/03/2025	03/04/2025	10/04/2025	Trajectory	Gap
Executive Team Plus	85%	81.40%	84.62%	91.35%	90.58%	Indjectory	6.35%
Finance	85%	93.58%	93.94%	94.61%	94.36%		9.61%
Medical	85%	85.54%	87.70%	89.55%	89.61%	/	4.55%
People Services	85%	95.43%	96.13%	96.01%	95.85%		11.01%
Clinical Operations	85%	91.70%	92.50%	93.18%	93.20%		8.18%
Clinical Quality Safety & Risk	85%	93.91%	94.60%	94.78%	94.65%		9.78%
Systems Partherships	85%	90.68%	92.84%	93.53%	93.96%		8.53%
Digital Innovation	85%	99.27%	99.40%	99.63%	99.27%		14.63%
Trust	85%	91.69%	92.60%	93.30%	93.33%	/	8.30%
Clinical Operations	Target (31/03/2025	20/03/2025	27/03/2025	03/04/2025	10/04/2025	Trajectory	Gap
Beds & Luton	85%	89.69%	90.02%	92.18%	91.92%		7.18%
Cambs & Peterborough	85%	92.91%	93.26%	93.82%	93.58%		8.82%
Herts & West Essex	85%	91.49%	92.21%	93.31%	92.91%		8.31%
Mid & South Essex	85%	92.19%	93.01%	93.61%	93.78%		8.61%
Norfolk & Waveney	85%	88.45%	89.76%	90.52%	91.33%		5.52%
Suffolk & North Essex	85%	92.45%	93.40%	93.06%	92.95%		8.06%
Air Operations	85%	76.46%	78.23%	85.45%	86.19%		0.45%
Emergency Operations Centres	85%	94.89%	95.23%	95.57%	95.20%		10.57%
HART & Resilience	85%	92.62%	93.62%	95.62%	95.62%		10.62%
Operations Management	85%	88.36%	92.54%	89.14%	88.62%	$\langle$	4.14%
Operations Support & Make Ready	85%	95.25%	95.91%	96.02%	95.91%		11.02%
Service Planning	85%	95.52%	96.64%	98.27%	99.84%		13.27%

#### Data tolerance:

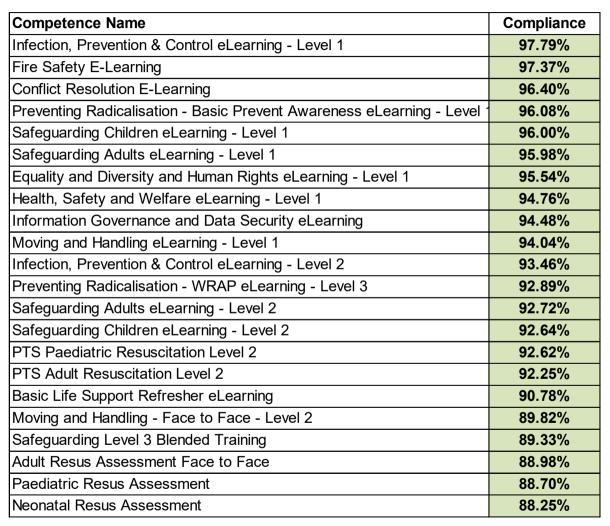
#### www.eastamb.nhs.uk

Green: Above target and not reducing more than 1%. Amber: 1% reduction or above and/or two months of decline. Red: below target



## Data detail – CSTF topics





#WeAre

### **Call Pick Up**

East of England Ambulance Service



						NHS Trust			
	Concern	SRO	Target	Feb 2025	March 2025	April 2025			
	Call waiting (Call pick up)	Chief of Clinical Operations	10% improvement by 31/03/2025	Mean – 00:00:04 95% - 00:00:33	(13/02/25) Mean – 00:00:02 95% - 00:00:00	(10/04/2025) Mean – 00:00:02 95 <sup>th</sup> – 00:00:01			
Ī	Action	s completed	Date	1	Narrative summa	ry			
	<ul> <li>Business Support</li> <li>performance.</li> <li>After call working</li> <li>Call handler training</li> <li>Call handler training</li> <li>weeks and extend support and retain</li> <li>Support from N</li> </ul>	ining extended from 3 to 4 ended mentoring hours to ain staff. EAS for 999 call <i>calls ph, 7 days a week,</i>		2025. Support from NEA seen within EEAS <sup>-</sup> Specific Call Hand focuses on call ha has had a positive and after call work	lling Team Leader or ndling shift performa impact on reduced o	the improvements each shift who nce we believe this call answer times			
	Next steps act	ions and milestones							
	actions relating are contained w and change por		Ongoing	SPOC which ensures 999 call handlers are available for emergency calls					
	Risks, issues and	barriers to delivery							

Easter holiday period still a concern but we are working closely with scheduling to maximise cover





	FYTD (01/04/24- 31/03/25) -	FYTD (01/04/25- 31/03/26) -					
Call Pick	average	average	13/03/2025	20/03/2025	27/03/2025	03/04/2025	10/04/2025
< 5 seconds mean	00:00:12	00:00:02	00:00:02	00:00:01	00:00:01	00:00:01	00:00:02
< 5 seconds 95th centile	00:01:25	00:00:01	00:00:00	00:00:00	00:00:00	00:00:00	00:00:01



### **Staffing - EOC**

East of England Ambulance Service



					NHS Trust		
Conc	ern	SRO	Target	March 2025	April 2025		
EOC Staff R	ecruitment	Chief of Clinical Operations	Full establishment of call handlers and dispatchers - 30/09/2025				
	Actior	ns completed	Date	Narrative summary			
a new P oversigh • Weekly I recruitm • Ongoing • Month b	owerBI rep nt. EOC trajec ent, retenti recruitme	orkforce plan in place		<ul> <li>The Trust is continuing and predicting upcomination officult due to the nate however there are cur offer stage with an add shortlisting stage.</li> </ul>	f, this is more ure of the role, rently 12 posts at		
Next	steps ac	tions and milestones	Date				
<ul><li>Open da</li><li>Geograp</li><li>Workford</li></ul>	ays to publi ohical targe ce plan rev ablishment	cise roles within the EOCs. ting of recruitment.	Ongoing	<ul> <li>Recruitment of CAS sin April 2025.</li> <li>EOC had a successful has seen an increase a further virtual recruit arranged for 28 April 2 the process of reviewil and assessments to will pool.</li> </ul>	l open day which in applications, with ment event 2025, we are also in ng our entry criteria		

#### Risks, issues and barriers to delivery

As within the narrative summary, recruitment of clinicians for the CAS function is more difficult, the Trust is also reviewing this target to ensure it is correct for future requirements.





Work force effective (employed and agency)	Target - WTE	On ESR	Agency Staff	Current status	Pipeline	On ESR	Agency Staff	Current status	Pipeline
Call handlers (total)	255	204	204	-5	17	203	44	-8	22
Dispatchers total	123	119	119	-4	5	119	0	-4	3
Dispatchers - Bedford		30				30			
Dispatchers - Chelmsford		45				45			
Dispatchers - Norwich		44				44			
CAS Staff									
Workforce effective	128	108		-20	6	91		-37	12
					16 (at interview stage)				16 (at shortlisting stage)



### **EOC Culture**

East of England Ambulance Service



Concern	SRO	Target	March 2025	April 2025	
Emergency Operation Culture	Chief People Officer	Roll out Engagement plan 31 <sup>st</sup> April 2025	Narrativo summany		
	is completed	Date	Narrative s		
<ul> <li>and reporting to Tra</li> <li>Risks understood a</li> <li>Trust values launch</li> <li>Staff survey results action' activity to fo</li> <li>Delivery of inclusive</li> <li>Continuing to implete</li> </ul>	launched, with 'Listening into llow up	18 <sup>th</sup> March 2025 19 <sup>th</sup> March 2025 19 <sup>th</sup> March 2025 13 <sup>th</sup> March 2025 Ongoing Ongoing 30 <sup>th</sup> March 205	<ul> <li>RAG rated progress in actions in March and A</li> <li>Currently monitoring of and Freedom to Speal undertaken on a mont</li> <li>Almost all aspects of corregramme are now p</li> <li>This is a long-term chain improvement through should be noted that for publication of the NHS</li> </ul>	April 2025. f the number of ER k Up cases is hly basis cultural change rogrammed ange and to 2026 however it collowing the	
Next steps act	tions and milestones	Date	results, EEAST is the	•	
<ul> <li>Launch of 'Big Conversion</li> </ul>		28th April 2025	ambulance trust for the third year runnin Datasets being developed to demonstrative dat delivery through KPIs and qualitative dat through the Cultural transformation plans which will be monitored through the Transformance Improvement Board		

#### Risks, issues and barriers to delivery

- Failure to embed a culture focussed on staff safety and wellbeing there is a risk that staff morale, retention & patient outcomes may be affected
- If the Trust does not have effective performance conversations and demonstrate career opportunities THEN staff engagement, turnover and the Trust's ability to deliver services will be affected





FTSU - cases reported (monthly)	Jan-25	Feb-25	Mar-25	Trajectory
Beds & Luton	1	5	0	
Cambs & Peterborough	2	3	2	$\sim$
Herts & West Essex	1	2	4	
Mid & South Essex	6	6	0	
Norfolk & Waveney	3	1	2	$\checkmark$
Suffolk & North Essex	0	5	0	$\langle$
EOC	3	6	2	
Trust overall	21	28	19	
Month end Live ER cases & in-month closures	Jan-25	Feb-25	Mar-25	Trajectory
Beds & Luton	9	11	9	$\frown$
	-		-	
Cambs & Peterborough	10	17	19	
Cambs & Peterborough Herts & West Essex	10 10	17 17	19 20	
				$\langle \rangle \rangle$
Herts & West Essex	10	17	20	
Herts & West Essex Mid & South Essex	10 11	17 9	20 12	
Herts & West Essex Mid & South Essex Norfolk & Waveney	10 11 22	17 9 26	20 12 26	
Herts & West Essex Mid & South Essex Norfolk & Waveney Suffolk & North Essex	10 11 22 15	17 9 26 15	20 12 26 19	
Herts & West Essex Mid & South Essex Norfolk & Waveney Suffolk & North Essex EOC	10 11 22 15 14	17 9 26 15 14	20 12 26 19 19	



#### Action Plans – staff engagement East of England Ambulance Service



					NHS Irust
	Concern	SRO	Target	March 2025	April 2025
Ste	aff engagement in		Roll out of		
	2 improvements	Chief People Officer	engagement plan		
			from 01/04/2025		
	Actior	is completed	Date	Narrative s	ummary
•	For all areas RAG	rated detailed plans in place	18 <sup>th</sup> March 2025		
	and reporting to Tra	ansformation Programme Board		<ul> <li>Progress is on target a</li> </ul>	against these plans
•	Risks understood a	and scored with mitigations	18 <sup>th</sup> March 2025	<ul> <li>This is a long-term cha</li> </ul>	ange and
	•	staff survey results, including	31 <sup>st</sup> Jan 2025	improvement through	
	listening into action	•	th	<ul> <li>Many aspect of plans</li> </ul>	
	•	g into action events and staff	13 <sup>th</sup> March 2025	Cultural transformation	n plans
	survey plans		th	<ul> <li>Datasets being development</li> </ul>	•
•	Walk in session he	ld at Bedford EOC	24 <sup>th</sup> March 2025	delivery through KPIs	•
				through the Listening a	
	Next steps act	tions and milestones	Date	Staff transformation pl	
• Li	stening into action	events implemented and	30 <sup>th</sup> April 2025	monitored through the	Transformance
fe	edback used to dev	velop plans further		Improvement Board	
• Te	emplates provided t	o teams for implementation of	30 <sup>th</sup> April 2025		
e١	/ents				
		or action plans created and	30 <sup>th</sup> April 2025		
-		aff interaction and feedback			
• P	ans submitted to E	LT for review	6 <sup>th</sup> May 2025		
Ris	sks, issues and	barriers to delivery			
This	is a long-term plan	of which the impact will not be	able to be measure	ed by the date set within	the S29A Warning
Noti					



### **Medicines Management**

East of England Ambulance Service



				NHS Trust		
Concern	SRO	Target	March 2025	April 2025		
Medicines Management Investigations	Medical Director	Zero incidents not closed appropriately by 31/03/2025				
Actio	ons completed	Date	Narrative	Narrative summary		
<ul> <li>Deputy Clinical Direct weekly to review all M looking at both CD an Providing real-time su teams to ensure learn escalation.</li> <li>Both CD and non-CD items of Trust Medicin Proactive sharing of M by Trust Pharmacist f</li> <li>Zero incidents not clo</li> <li>Further review on how</li> </ul>	w Trust secures CDs on ambulances eing produced for extraordinary	6 <sup>th</sup> Feb 2025 and weekly	<ul> <li>Currently, there that have been identified action</li> <li>Guidance to suinvestigations here developed and</li> <li>Pilot within C&amp; review of risks/undertaken durwith a review of lock solutions.</li> <li>A total of 22 index</li> </ul>	e are no incidents a closed without ns and learning upport incident has been issued to staff. P commenced, /benefits to be ring May, along of costs for digital		
Next steps a	ctions and milestones	Date		or keys had been		
<ul> <li>fully sighted on relevative medicine Datix report</li> <li>A pilot/pathfinder for eaccess to vehicle CD Peterborough.</li> </ul>	ensuring only registered HCP have keys across Cambridgeshire &	20 <sup>th</sup> March 2025 31 <sup>st</sup> May 2025	reported (4.4 incidents/year), this included station keys and vehicle keys, not only CD keys.			
<b>Risks, issues and b</b> Following of policy is impr	arriers to delivery: Competing c	perational prioritie	s means not always	focused on.		



Medicines incidents - CD	01/02/2025 -	28/02/2025 -	14/03/2025 -	29/03/2025-	
	27/02/2025	13/03/2025	28/03/2025	10/04/2025	Total
Number reported	9	7	6	10	32
Of which, number of investigations closed	2	1	4	2	9
Of which, number of investigations in progress	7	6	2	8	23
Of those closed, number of incidents reported as no lessons learned	0	0	0	0	0
Of which, number requiring reporting to police	1	1	1	1	4
Of which, number reported to the police	1	1	1	0	3
Medicines incidents - other					0
Number reported	90	38	53	36	217
Of which, number of investigations closed	28	5	14	3	50
Of which, number of investigations in progress	62	31	39	33	165
Of those closed, number of incidents reported as no lessons learned	0	0	0	0	0



### Regulation 17 (Good Governance)

### **C2** response times





### Our business plan 25/26: Headlines

- Current year C2 mean on track for c.43:00.
- Without interventions, >48:00 is possible (+5 mins). This could worsen if activity >3% or hospital delays >38 minutes.
- Improvements from our productivity, hospital delays and additional funding for PFSH and CAS overtime.

No changes:	Productivity stretch:	Growth Funding:
• Unchanged productivity levels and expected average handover times of 38 mins.	<ul> <li>Productivity improvements from the PA Consultancy review to give an estimated 8-min C2 improvement.</li> <li>An average PFSH of 83,103.</li> <li>An average H&amp;T of 15%.</li> <li>An improvement in hospital handover delays of 30 mins.</li> </ul>	<ul> <li>As opposite, but with an increase in PFSH to 88,863.</li> <li>An increase in average H&amp;T to 16%.</li> </ul>
00:48:07	00:37:54	00:34:55





# **Any questions?**







### We Are Accountable

### We Are Respectful

### We Strive To Be Excellent

