

Organisational Performance Improvement Plan – OPIP

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On Scene Times





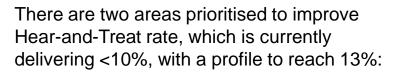
- Job cycle time (JCT) represents the total time taken to assist a single patient. The shorter the time taken the more patients can potentially be assisted.
- The largest part of the JCT is typically the **onscene** times and these are within our control.
- EEAST historically has a longer than average on-scene time compared to other Trusts, although the most recent benchmarked data is from2023.
- It is in the patient's interest to reduce these on-scene times to provider similar care to other UK ambulance services.

Action	Specifics	Lead	Due date	Impact	Progress
Rollout of organisational information portal (OIP)	This action allows the visibility of individual performance and is planned for rollout alongside a framework of performance appraisals	Jon Moore/Darren Meads	September 2024	Reduction in on scene times moving towards a lower average 00:41:00 conveyed / 01:07:00 non- conveyed	OIP has now been rolled out in all areas. Training in on-going with the local management teams on how to best utilise the tool with a progress review managed through the weekly OPIP meeting.
Deliver bespoke training on 'quality efficiencies on scene' to all operational areas	This action ensures that staff are briefed on the positive patient benefits to shortened on scene times		End Q3	Reduction in on scene times moving towards a lower average 00:41:00 conveyed / 01:07:00 non- conveyed	This has been incorporated into the OIP roll out. Each sector is now committed to this and will be delivering as part of ECS or as a training package.
Rollout of IT 'Workbench' solution	This allows for correct visibility on the on-scene times and accurate comparisons	Darren Gray	Jan 2025	Visibility of priority areas and impacts of changes	Interim solutions are being explored to support until Jan.
Education programme on clinical best practice on scene decision making	Led by the clinical leads, this education programme is designed to support staff outside of the normal on scene time ranges	Paul Gates	End Q2 (and then ongoing)	Reduction in longest ranges of on scene times	All sectors have used the SNEE template and have updated the content. Plans being produced to roll out education.



Hear & Treat





• Increase Capacity

- Accelerate recruitment currently at 99 FTE
- Expand agency clinicians
- Undertake GP triage outsource (if this can be funded)

• Improved Efficiency

- Increase calls per hour
- Increase H&T conversion rates
- Focus resource on specific call types
- (C2) where appropriate
- Develop endpoints
- Visibility of data

Action	Specifics	Lead	Due date	Impact	Progress
Develop performance reporting within the EOC for CAS Clinicians.	Individual performance monitoring will allow for an improvement in the efficiency of each patient contact	Darren Gray (information reporting) Richard Smith (management implementation)	End Q2	Increase in calls taken per hour with potential for associated increase in hear and treat rates	Action plan developed with BI to get reporting in place by 7 th of October 2024 Interim manual reporting ongoing and initial data be analyzed with actions in place.
Implementation of medical staffing within the EOC to enhance clinical advice within the CAS team.	Develop medical staffing, specifically GPs, working within the EOC to support H&T with clinical assessment and advice	Richard Smith	End Q2	Overall increase in calls taken per hour and hear and treat rates.	Unable to progress due to financial position currently. Approach to medical staffing being developed for current medical staff in trust / on Bank.
Accelerate CAS clinician recruitment and publish the CAS recruitment plan	Improving the visibility on the recruitment target by month for CAS clinicians allows for improved hear-and-treat performance	Simon King	End Q2	Increase in calls taken per hour and hear and treat rates	Ongoing recruitment 100WTE in post out of 136 WTE vacancy.
Reduce current abstraction levels for CAS staff	Ensure that all available CAS staff are workforce effective and appropriate controls in place for absences	Simon King	End Q2	Increase in calls taken per hour and hear and treat rates	Ongoing abstraction control in place. CAS sickness reduced to 9%.
Delivery of H&T 13%	Based on full WTE on H&T	Simon King	End of Q4	H&T Target	Position continues to be below the 13% although an increase seen.



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Patient Facing Staff Hours

- Existing patient facing staff hours should be maximised to ensure that paid staff are contributing fully to performance.
- Opportunities to improve in some areas have been identified which will potentially support PFSH becoming more effective at a cost neutral rate.
- Strategic polices such as end of shift arrangements can affect the service the Trust delivers at certain points in the day.
- Ultimately further changes to the current operational rotas are likely to be required. The potential scale of the requirement is noted and therefore this project is not yet fully scoped.

Action	Specifics	Lead	Due date	Impact	Progress
Reduce the time taken to acquire C1 driving licence	The time taken to become work effective is affected by the time taken to successfully pass a C1 licence exams	work effective d by the time successfully Antony Kitchener Q2		Maximum number of staff without C1 limited to 100 and the maximum time of 5 months between starting payroll and becoming work- effective	All frontline staff without C1 theory licences have been withdrawn from frontline operations and are currently in a virtual classroom being provided the support to achieve their qualification. Additionally, from September all adverts for frontline staff will require candidates to have a C1 theory before commencement of their employment. These two ongoing workstreams will reduce the time taking staff to acquire their C1 licence.
End of shift policy	The limitations on the numbers of calls staff can respond to in the last hour of their shift needs to be balanced alongside the welfare	Dave Allen	Indicative end Q2	Improved response times between 05:00-06:00, 17:00 – 19:00 and 01:00 – 02:00.	Meeting with BI team 28.08.24. New end of shift report now in place, which will provide greater accuracy in gathering data. New EOS proposal will be shared with senior Ops next month.
Implementation Of Centralised Scheduling	Ensure consistent application of policy across the Trust with specialist resource overseeing planning against forecasted demand requirements	Steve West	Aug 2024	Reduction in single crews Increase in Bank use	Centralised scheduling now live across all areas. Department bedding in with further staff training planned in September. Centralised bank management also live with bank hours increasing in line with trajectory. Priority is being given to relief planning.
Implement vehicle planning module in GRS.	This technological improvement will allow for vehicles to be planned alongside staff at the point of rostering	Steve West	Q3	Reduced number of crews starting shift without vehicles	Two discovery sessions held with P&R and Fleet teams to scope options. Project delivery plan now being finalised.
Consideration of wider rota changes	Rolling hour issues occurs when hours worked don't match hours paid. Modifications to staff rosters will be required	Darren Meads, Steve West, Jon Moore	TBC	Improved alignment of activity against the number of DSAs on duty	This part of the plan has been deliberately postponed until calendar year 2025 in order to prioritise the legal review of rolling worked hours.

Vehicle Availability

East of England Ambulance Service



- Vehicle technicians have been historically difficult to recruit to due to competitive market. As a result, we rely heavily on external support.
- The fleet is aging, some eight years old and most approaching five years old. Newer vehicles will improve reliability and sustainability.
- Improved maintenance scheduling now in place and more frequent vehicle inspections. This has led to a reduction of defects.
- Increased mobile vehicle technician capacity to support SNEE and C&P.

Action	Specifics	Lead	Due date	Impact	Progress
Recruit to all vehicle technician posts within budget (32)	Increased capacity in line with the 2024/25 budget to manage workshop demand	Ant Brett	End Q2	 Increased vehicle availability. Decreased VOR. 	 Job description re-evaluated and advertised at Band 6 Interviews taking place through August 2024 On track for completion and all 32 FTE to be in place by Q3.
Implement 228 new operational ambulances	Increase fleet to 525 and begin replacement of older vehicles	Ant Brett	March 2025	 Increased vehicle availability. Decreased VOR. 	 Fleet size increased to 524, and the first of 70 new ambulances to arrive within the next two months now on site An order of 89 DSAs placed for delivery between Dec 2024 and Mar 2025 Further, smaller batches of ambulances to be delivered by Mar 2025 On track but subject to change with market/manufacturer conditions
Increase workshop infrastructure	Increasing the number of workshop repair ramps by 6 within the region	Ant Brett	March 2025	 Increased vehicle availability. Decreased VOR. 	 All capital business cases now approved to expand ramp capacity by 3 Work due to commence in Q3 On track for completion



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