

AGENDA ITEM:

HEALTH SCRUTINY PANEL

8 MAY 2008

**PATIENT TRANSPORT TO AND FROM
JAMES COOK UNIVERSITY HOSPITAL:
FINAL EVIDENCE GATHERING**

PURPOSE OF THE REPORT

1. To introduce representation from Middlesbrough Council's Social Care Department, Middlesbrough Primary Care Trust, South Tees Hospitals NHS Trust and the North East Ambulance Service NHS Trust.
2. To facilitate a debate at today's meeting, with the aim of allowing the Health Scrutiny Panel to gather the necessary information to come to a view on Patient Transport to and from James Cook University Hospital, and move towards the production of a Final Report.

RECOMMENDATIONS

3. That the Panel notes the content of the debate at today's meeting and following the consideration of available evidence, moves towards the production of a Final Report.

CONSIDERATION OF REPORT

4. The topic of Patient Transport (to and from James Cook University Hospital) is a topic that the Health Scrutiny Panel resolved to consider during 2007/8. At its meeting on 11 February 2008, the Panel met with representatives of Middlesbrough Council's Department of Social Care, Middlesbrough Primary Care Trust and South Tees Hospitals NHS Trust. An extensive discussion took place around a number of items.
5. Detailed minutes of the discussion are attached to this report as an Appendix. Whilst it is not intended to repeat the contents of those minutes in this short briefing paper, it would be useful to highlight a few themes which the Panel expressed a wish to take up in today's discussion.

6. At the outset of the review into Patient Transport, the Panel was quite clear that it wanted to focus upon the patient's transport experience, with a specific reference to attendance at outpatient appointments and arrangements for patients requiring transport upon discharge.
7. It was highlighted on 11 February 2008 that links between discharge arrangements and Social Care could be improved to ensure that individuals requiring social care services, receive a more seamless service. It was noted that whilst individuals would benefit from better information sharing between discharging units and Social Care, it would also lead to a more efficient use of social care resources. As an example, concern had been expressed that wards could not give accurate times for discharge making it difficult to set up support in the home.
8. The Panel also heard that, from the perspective of the South Tees Hospitals NHS Trust, planned discharges could be booked with the North East Ambulance Service (NEAS) for transport before 11am the working day prior to discharge. The Panel heard that in respect of a same day discharge wards would try and book Patient Transport by contacting NEAS. If unavailable and in order to minimise the disruption to patient flow, an alternative form of transport would be sought such as taxi or private ambulance, depending upon a patient's needs.
9. It was confirmed to the Panel that, in the view of the South Tees Hospitals NHS Trust, the most frequent reasons for delays in discharge were:
 - 9.1 No ambulance available due to 'same day discharge' request for transport.
 - 9.2 Ability for relatives/carers to make arrangements to collect patients once they had been informed of the 'same day discharge'.
 - 9.3 Limited service from NEAS on a weekend.
 - 9.4 Vehicle was inappropriate to meet patients needs for transport, due to unclear and/or insufficient information at the time of request.
10. It was confirmed to the Panel that Patient Transport Service (PTS) was currently provided by the Transport Information Service (TIS) on behalf of the four Tees PCTs. It was confirmed that the purpose of the TIS was to ensure patients who were unable to attend their appointment by public or private transport, had a central contact number to obtain, if eligible, non emergency NHS transport service to ensure attendance at their appointment.
11. It was confirmed to the Panel that a block contract was used to fund the PTS and the PCT commissioned the PTS from NEAS. PTS is performance managed centrally by Middlesbrough PCT.
12. Specifically, the Panel focussed on discharge practices from hospital and arrangements with NEAS. Reference was made to the current arrangements with NEAS in booking a planned journey the day before and confirmation given that in general a time could not be guaranteed.

13. The Panel heard that negotiations are currently ongoing between the South Tees Hospitals NHS Trust and NEAS, aimed at including a certain flexibility into the existing contract in terms of more flexibility around booking arrangements, with particular reference to extended day time appointments and same day patient journeys.

Aims of the meeting today

14. There were a number of themes highlighted on 11 February 2008, which the Panel expressed a wish in exploring today. In addition, it was felt that given the nature of the debate around the operation (and not just commissioning) of Patient Transport Services, it would be appropriate for NEAS to be invited. As a result, it is expected that the following issues will form the basis of the debate today.
15. The Panel expressed an interest in considering the nature of the contract between South Tees Hospitals Trust and NEAS, specifically as it is connected to discharges practices. Members were interested in the size of the contract and the levels of PTS resources available for dispatch around transporting people having being discharged. Specifically, the Panel expressed a wish to explore how the service (and therefore the contract) may be developed in the future. As an extension of this point, the Panel discovered that some people feel the PTS booking arrangements at discharge could be made more flexible. It is expected that at today's meeting, the Panel may wish to explore this line of thought.
16. The Panel heard that in some instances, local taxi firms are used for transporting patients following discharge where appropriate. The Panel may wish to explore further how often this happens and the process undertaken for establishing that a private taxi is an appropriate means of transport for any given person. On this point, the Panel also expressed a wish in considering the role voluntary drivers could have in assisting patient transport.
17. The Panel also heard the view that, at times, professional connections and sharing of information between ward staff and social care could be improved, with specific reference to those hospital patients requiring social care services. The Panel may wish to enquire as to how this can be progressed.
18. In addition to the above themes, The Panel may also wish to explore whether there are any more general points of discussion it would wish to consider, which could play a part in developing Patient Transport Services to and from James Cook University Hospital.
19. Following today's debate, it is anticipated that the Panel will move towards the production of a Final Report, with conclusions and any recommendations felt appropriate.

BACKGROUND PAPERS

20. Please see attached minutes of the Health Scrutiny Panel on 11 February 2008.

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