



Annual Review 2012/13

A look back over the year 2012/13

Memories of Summer 2012



Tim Saunders



THE spotlight of the world fell on London last summer as the Queen's Diamond Jubilee celebrations were followed by the Olympic and Paralympic Games.

The Service had a key role to play in both events, helping to ensure that the millions of visitors to the capital received medical help when they needed it.

Director of Service Delivery Jason Killens said: "We are used to being involved in big occasions such as the Notting Hill Carnival and the New Year's Eve celebrations, but last summer was obviously on a different scale.

"It was very pleasing that all the work that went into our planning and preparations paid off, and that at the same time

we were able to continue providing very good patient care across the rest of London."

The four days of Jubilee celebrations at the beginning of June saw over 200 staff covering the central London area on bicycles, motorcycles, in ambulances and on foot, with volunteers from St John Ambulance and the Red Cross running treatment centres.

Ambulance staff treated a total of 1,151 patients, with the busiest day being that of the Thames River Pageant when those treated included a number of people

from the flotilla suffering the effects of the cold and wet weather.

The event also provided a final chance to test more than five years of planning and preparations for the 2012 Games, which started at the end of the following month.

During both the Olympics and Paralympics, the Service was assisted by staff from other ambulance services across the country,

while people from the organisation's own support departments also played a part in day-to-day activities.

Over the four weeks of competitions, staff at Games venues treated around 1,250 patients, with about 670 of these taken to hospital or a polyclinic at the Olympic Park.

Away from the sporting action, Londoners got a fast emergency response during the Games, with crews reaching 85 per cent of the most sick and injured patients in eight minutes.

"We are used to being involved in big occasions, but last summer was on a different scale"

Looking forward

THE 2012/13 year was one of change for the Service – and 2013/14 will be no different.

Chief Executive Ann Radmore took up her post in January, after Peter Bradley left for a new role last September.

In April this year, the Service announced changes to improve patient care and the working lives of staff, following receipt of £14.8m extra funding.

The money is being used to recruit 240 frontline staff, and changes are proposed to the way the Service responds to some 999 calls as well as to working arrangements for frontline staff.

'Heroes' awarded

TWENTY three members of staff were recognised as part of a national campaign to celebrate the work of health service employees.



They were all presented with certificates as part of the NHS Heroes scheme after being nominated by patients, members of the public or their colleagues for going the extra mile in their work.

The winners came from roles across the Service, including paramedics, station administrators and emergency call takers.

Drink demand

INJURIES or illnesses connected to alcohol are one of the top reasons that 21 to 30-year-olds call 999 for medical help in the capital.

To help manage demand related to excessive drinking and reduce pressure on busy hospitals, the Service's alcohol recovery centre operated in Soho at weekends and over the busy Christmas and New Year period.

Measuring quality



THE care given to patients and their outcomes is now more closely monitored and assessed than ever before.

National ambulance quality indicators were introduced in 2011, allowing for comparisons to be made between ambulance services across the country. The second year of results showed that the Service had improved in a number of areas.

However, a rise in demand on the 999 system also meant that patients with less serious illnesses and injuries have not always been receiving the level of care that they should, with many waiting too long for help.

This group of patients will be the focus of quality improvement priorities

between now and 2015 to ensure that everyone receives a timely and appropriate response.

A new initiative during the year was a satisfaction survey of patients who were not taken to hospital.

Results showed that the respondents were generally happy with the way in which they were cared for, although those receiving only an assessment over the phone reported slightly less satisfaction than patients who had been seen by staff.

- More information about clinical indicators, and both the full quality account and annual report, can be found at www.londonambulance.nhs.uk

Looking back

Chairman

Richard Hunt

What was your impression of how the Service coped with the Queen's Diamond Jubilee celebrations and the Olympics?

We were really pleased that all the planning and preparation that went into them paid off.

The Olympics and Paralympics in particular were the culmination of many years of hard work. As important as the fact that we were able to play our part in caring for those who needed treatment at Games venues, we also maintained our service to patients across the rest of London.

How do you think the Service performed overall during 2012/13?

It was a year of change – not least in seeing both our Chief Executive and two other senior directors leave us for new opportunities elsewhere.

We did well to once again

achieve our main performance target and in doing so reached more of the most seriously ill and injured patients more quickly.

Having said that, we know that there are things that we need to change to deal with ever increasing demand and continue to improve our service to patients.



What was the impact of the ongoing financial savings plan?

Delivering on our planned budget proved even more challenging than we had expected it to be.

Our priority was to do all we could to protect patient care despite our financial challenges, and this led to greater levels of spending in some areas than we had budgeted for.

We are fully aware that we need to continue to make savings and have to spend every penny carefully.

When do you now hope to become a foundation trust?

We are continuing with our plans to be licensed to operate as an NHS foundation trust and are working with the newly-formed NHS Trust Development Authority on building a new timeline towards an application in 2014/15. However, our governance processes and ways of working will increasingly be brought in line with those required of a foundation trust over the coming months.

In brief



LONDONERS who phoned for emergency medical help last year continued to have their calls answered quickly.

Of the 1,708,597 calls received, 95 per cent were answered within seven seconds, with over half answered immediately.

The percentage of callers who hung up before their calls was answered was only just over 0.1 per cent.

New Year's Day was once again the busiest 24-hour period of the year, with 6,575 calls received – of which more than 2,600 were taken in the first five hours of the day.

Of those patients with less serious illnesses and injuries who were given clinical telephone advice, only 2.9 per cent called again within 24 hours of making their first call.

999 demand continues to rise

A BIG increase in the number of patients reported to be in a life-threatening condition put the Service under particular pressure during the year.

A total of more than 1.7 million emergency calls were received, with over 438,000 of the emergency incidents treated as Category A.

This figure was up by 12.2 per cent on 2011/12, but staff still managed to achieve the target of reaching more than 75 per cent of these patients within eight minutes – the tenth year in a row that this has been achieved.

The overall total of incidents attended rose by over two per cent, with slightly

fewer patients being given clinical advice over the phone than in the previous 12 months.

However, response times for less seriously ill and injured patients fell, with a total 86.5 per cent reached within an hour compared to 91 per cent in 2011/12.

Director of Service Delivery Jason Killens said: "The figures are reflective of another very busy year, with a particularly challenging

winter period with spells of very cold weather.

"While we can be pleased with the level of

response to those with the most serious illnesses and injuries, we are working hard to improve the care provided to all our patients."



1.7m

Emergency calls were received, up 6.4 per cent on the previous year

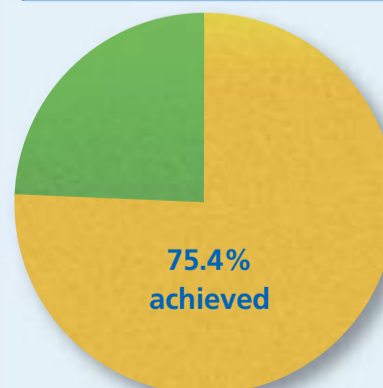


Demand in 2012/13

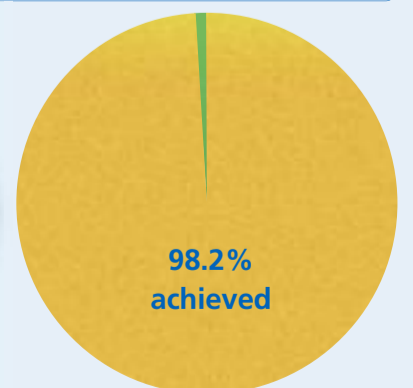
(Per cent increase/decrease on 2011/12)

Total 999 calls received	1,708,597	(+ 6.4)
Calls to life-threatened patients	465,107	(+12.8)
Total incidents attended	1,068,338	(+2.6)
Patients taken to hospital	747,630	(+1.7)
Patients taken to another care centre	89,996	(+21.4)
Patients give clinical advice over the phone	68,479	(-3.5)

Main response time targets for 2012/13



75 per cent of Category A (life-threatening) calls within 8 minutes



95 per cent of Category A calls within 19 minutes

at a busy year

Chief Executive Ann Radmore

What have been your first impressions of the Service since taking up your post in January?

I have been very impressed with the compassion and commitment I've seen in staff across the organisation. I have spent time in our control rooms, with frontline crews and a number of support departments, and it is clear that people are very proud to work for us and want to do all they can for the benefit of our patients.

What do you see as the main challenges this year?

We are providing a good level of service to people with life-threatening illnesses and injuries, but some patients who have less serious conditions have been having to wait longer for our help than they should.

With the support of our additional funding, we are going to have to start to work

differently and more efficiently to be able to respond to everyone who calls us.

What will be the benefits for patients of plans to modernise the organisation?

We are proposing to that, in the future, patients will have their care overseen by a paramedic working alongside a member of our A&E support staff – helping them to get the right care, first time.

Other changes include ensuring rosters for frontline staff are more closely aligned with our patterns of demand and changing our annual leave arrangements.

We are also being very mindful of the findings of the Francis Report into Mid Staffordshire NHS Foundation Trust, and what learning we can take from its recommendations.



How do you see changes to the wider NHS impacting on the Service?

One of the big changes is that we are now commissioned directly by GPs who want a more local service which reflects how they see the priorities for their patients in a particular area.

In terms of hospital emergency departments, we continue to support proposals that will lead to better clinical care. Our commissioners also recognise that we will need additional investment to help manage increasing demand created as a result of local NHS changes.

Emergency lifesavers

THE SERVICE trained more than 17,000 members of the public in lifesaving skills during the year.

One patient who directly benefited from others knowing what to do when someone collapses and stops breathing was 50-year-old Ian Brown (below), who suffered a cardiac arrest while on a construction site in May last year.

Colleagues immediately called 999 and began to give rescue breaths and chest compressions before ambulance staff arrived within five minutes and gave three shocks with a defibrillator – a machine used to restart the heart.

Paramedic Adrian Thatcher said: "His workmates helped to save his life by starting CPR so quickly."



Heart care advice

NINETY three per cent of heart attack patients were taken to one of eight specialist centres in London last year to receive primary angioplasty, a treatment which involves inflating a balloon inside an artery to clear the blockage which caused

the heart attack. Ambulance staff in the capital are trained to diagnose a heart attack using a piece of equipment called a 12-lead electrocardiogram (ECG), and can then bypass emergency departments on the way to a heart attack centre.

Praise for helicopter crash response



THE Prime Minister and the Mayor of London praised the quick response of staff to a helicopter crash which killed two people.

Twelve others were also injured following the incident in Vauxhall in January, which happened after the helicopter hit a crane.

Speaking in the House of Commons, David Cameron said: "The whole House will wish to join with me in sending their thanks to the emergency services for their rapid and professional response to the situation."

Boris Johnson tweeted: "Once again when tested London's emergency services have responded superbly."



You should call 999 immediately if someone is having a heart attack.

The most common symptoms are:

- Central chest pain which can spread to the arms, neck or jaw.
- Feeling sick or sweaty as well as having central chest pain.
- Feeling short of breath as well as having central chest pain.

Symptoms vary and some people may feel any of the following:

- A dull pain, ache, or 'heavy' feeling in the chest.
- A mild discomfort in the chest that makes you feel generally unwell.
- A pain in the chest that can spread to the back or stomach.
- A chest pain that feels like bad indigestion.
- Feeling light-headed or dizzy as well as having chest pain.

The pain can last from five minutes to several hours. Moving around, changing your position or resting will not stop or ease the pain. The pain may be constant or it may come and go. It may feel like pressure, squeezing or 'fullness'.

Service money matters

THE SERVICE reported a surplus of £262,000 at the end of 2012/13 on total income of £303 million.

This figure was lower than planned, mainly as a result of the higher than expected level of emergency demand, which resulted in more spending than had been predicted.

Included within the figures were the costs of the Olympic and Paralympic Games and the Queen's Diamond Jubilee celebrations, which totalled in

excess of £8 million and were funded by commissioners.

Along with key performance targets, all statutory financial duties were successfully met.

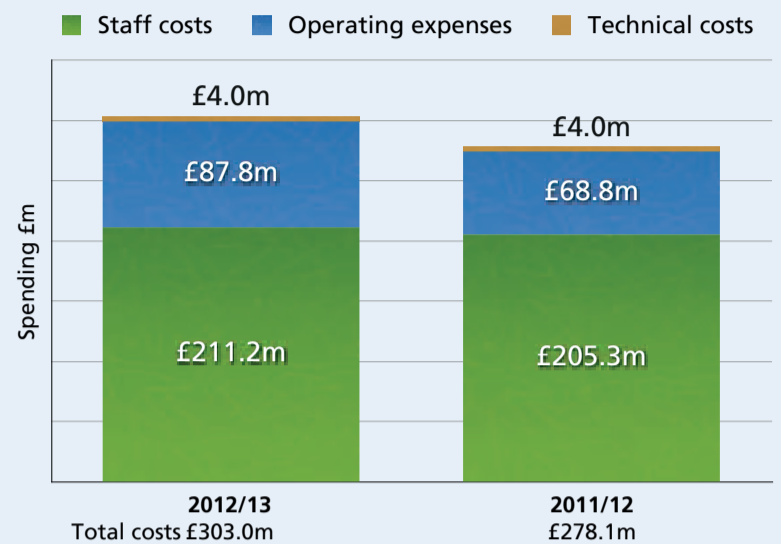
Other expenditure included £9.7m on new assets and equipment, with the majority spent on new vehicles, IT and equipment.

Director of Finance Andrew Grimshaw said: "Overall 2012/13 was a challenging year financially,

with increasing activity together with periods of significant increases in capacity to support high profile events.

"We were able to successfully respond to these challenges and make efficient use of the resources that our commissioners made available. Looking forward, 2013/14 will continue to be challenging, but the additional investment made by commissioners will allow us to invest and respond to the needs of Londoners."

Changes in spending



A decade of support

A NETWORK run by staff for their colleagues marked its tenth anniversary during the year.

LINC (Listening, Informal, Non-judgemental, Confidential) is a listening service available to all employees across the organisation.

It now has over 100 trained volunteers (some pictured right) who can support



...supporting each other

colleagues on issues ranging from work-related stress to family and social problems.

LINC is one of a range of systems in place to support staff, which include a number of forums.

The Service also took 22nd place in the charity Stonewall's



Top 100 Employers list – up from 94th the previous year – as well as being recognised in the top 10 of their Healthcare Equality Index, assessing how the needs of patients are met.

Steph Adams, Joint Chair of the Service's Lesbian, Gay, Bisexual and Transgender

(LGBT) forum, said: "Both rankings were significant achievements for us.

"It is important to recognise healthcare issues for all groups of patients and ensure our response recognises the needs of the individual."

Telling a story through Twitter

PEOPLE across the world got a behind-the-scenes perspective on life as a 999 call taker when the Service held a 12-hour tweetathon.

It covered every 999 call handled by a couple of call takers, although no patient identifiable information was shared.

The initiative in October was aimed at giving a snapshot of the huge variety of incidents staff deal with, and helping to increase understanding of how and when to use the 999 system.

The Service Twitter feed now has more than 22,000 followers.

London hosts national test

AMBULANCE staff from across the country came together in the capital to take part in an emergency preparedness test.

Exercise Amber – which was hosted by the Service and held ahead of the London 2012 Games – involved scenarios with patients on a boat, under rubble, in the water and others needing treatment at the top of scaffolding.

The event also involved other agencies such as the Metropolitan Police Service, London Fire Brigade and the Royal National Lifeboat Institute.

