

London Ambulance Service Estates Vision

1. Background & introduction

This document outlines our overall vision for how we are looking to transform our estate in order to support our ambition to become a world-class ambulance service. We launched our work on our estate development in mid-2018 with a significant amount of work having been undertaken so far.

Whilst our estate has been looked at a number of times in the past, we have never successfully embarked on a strategic programme to review our estate in its entirety as opposed to a piecemeal way. Historically changes to our estate have taken place when specific needs arise, resulting in a great deal of variability in terms of quality and efficiency.

As a large public sector organisation it is incumbent on us to consider our estate and we are therefore now seeking to develop our estate in a strategic way to ensure that it is fit for the future and is an enabler to support us achieving our strategic goals whilst delivering value for money.

The rest of this document outlines our estate vision and principles, the current state of our total organisational estate as well as our initial thinking or potential options for how we might seek to develop our estate in the future.

2. Vision and principles for our estate development

The LAS strategy 2018 – 2023 outlines how we will develop our estate to support our ambition to become a world class ambulance service:

- **A future-proof operating model for our frontline estate;** enabling rapid and efficient preparation and deployment of our frontline teams whilst providing the right facilities to support crews and others during their work
- Innovative, fit-for-purpose training and development facilities; providing world class training in dedicated training centres
- **Resilient, high quality control and contact centres;** providing effective environments with the necessary capacity and resilience to respond to events
- **Transformed corporate estates;** providing a high quality working environment that supports effective individual and team working whilst making better use of space

Though the development of our estate **we will seek to adhere to the following principles:**

- Enhance the working environment for our staff
- Provide better value for money
- Improve or not negatively impact upon operational performance
- Improve or not negatively impact upon the quality of care we provide to patients
- Support better integration with other NHS or emergency services
- Collaborate or co-locate where possible
- Improve flexible working, utilising smart working principles
- Engage effectively with our staff, listening to concerns and communicating the benefits of the changes
- Engage effectively with the public and key stakeholders

Our estates development work will be long term and wide ranging but we will ensure that at every step we are being true to the principles we have agreed.

3. The case for change

The largest part of our estate is our frontline operational estate. There is large variability in the size and function of our estate. We have some large (and very large) stations which provide most of our ambulance make-ready and maintenance facilities. And we have a lot of smaller estate which are used solely as a stationing point for crews.

From our staff engagement we understand the difficulty to feel connected to peers and managers when they are dispersed across multiple locations. This reduces opportunity for peer-to-peer learning and is inefficient when crewing ambulances. Additionally, we have heard that staff, understandably, do not like working in estate which is not fit for purpose or of poor quality.

Land and real estate in London is expensive. Despite having a relatively small number of sites compared to other ambulance services, our total Net Book Value (NBV) is £116m (£109.6m for ambulance stations only), while on average it is only £46m for the other ambulance services.

The Carter Review into unwarranted variation in ambulance services outlines some key points that need to be considered when comparing ourselves to the other UK ambulance services. The key points from this work in relation to our estate are:

- London covers a much smaller geographical area than any other service (970km²), with therefore a much greater population density (9k people per sqm), ten times as many people per area than the next most densely populated trusts NWS and SECAMB
- London has the most ambulance stations per area with one station per every 13km² with the least per area being WMAS with one station per every 148km²
- London has the highest population covered per operational site at 120k people (with the lowest being 36k per operational site)
- We have the oldest estate of any ambulance trust in the UK (average of 48.2 years), although we have made a significant effort to clear backlog maintenance, and as a result most of our estate is in a reasonable condition
- An ageing estate leads to higher Facilities Management (FM) costs and we have one of the highest FM costs per building across all trusts (£125k per estate). Although it should also be noted that our FM costs as a proportion of overall spend is the lowest (3.0% of annual budget compared to a range of 3.2% to 5.9% for other ambulance trusts)
- LAS has the median number of operational (73) and total sites (87), but the second largest internal area available (71,860m²)
- LAS sites are therefore the largest on average (825m²). However, it should be noted that this is skewed by a handful of very large sites (including Bromley [4,500m²] and Fulham [3,000m²]). The median area per site is 450m²
- A significant proportion of LAS estate is underutilised (19%)

Looking at other trusts in England we can see that we do not need such geographically close estate. Our current station locations are a result of previous service mergers and availability of buildings as opposed to strategic long term planning.

This need to ensure that our estate provides a consistent and high quality working environment for our staff, as well as adapting to meet future requirements caused by rising demand for our services is a key part of the case for change.

The other key elements of our case for change are:

- We have poor utilisation of space across our estate, including our corporate buildings and frontline stations
- There is a need to improve the resilience within our control services
- Logistics processes are ineffective and uneconomic
- Changing how we use our estate can help to improve team working and is a key driver for organisational culture

It is crucial that the development of our estate supports our vision and purpose. Our purpose includes our responsibilities towards our patients, our people, our partners and ensuring best value for money for the tax paying public. The diagram below looks at the key outcomes which we will seek to achieve when developing our detailed plans for each area of our estate to provide benefits for each of these four groups:

Figure 1: Key outcomes that our estate changes could provide



4. Summary of our current estate

Our current estate comprises of corporate, operational and training estate located across London. The different types of estate, and a brief description of each, is set out in table 1 below.

Table 1: Current London Ambulance Service Estate

Estate	Description
<p>Ambulance Stations</p> <ul style="list-style-type: none"> • Maintenance • Make Ready • Group Stations <p>Drug storage</p>	<p>We have 68 ambulance stations located across London. Within these 68 there are the following different functional variations:</p> <ul style="list-style-type: none"> - 12 contain maintenance facilities which perform planned and unplanned vehicle maintenance - 14 contain make-ready sites which clean, stock and prepare ambulances for the next shift - 18 are group stations which support activities across a geographical area - 25 stations have secure drug storage facilities. <p>Some stations perform more than one of these functions.</p>
<p>999 Emergency Operations Centres</p>	<p>These house the technology and staff which run our 999 contact handling, triage, resource dispatch and 999 Clinical Hub. We have two sites, based in Lambeth and Tower Hamlets</p>
<p>IUC Contact Centres</p>	<p>These house the technology and staff which run our NHS111/IUC contact handling, triage, and Clinical Advice Service. We have two sites, one for each of the IUC services we provide in South East London and North East London, based at Croydon and Barking respectively.</p>
<p>Headquarters & corporate offices</p>	<p>We have four corporate offices including our Headquarters in Waterloo which is next to an ambulance station, in a single large development. Having recently exited one corporate office (Morley Street), we have one corporate office in Pocock Street and another co-located with London Fire Brigade HQ in Union Street.</p>
<p>Training Centres</p>	<p>We have eight centres from which we run our clinical training and education. Six are for clinical education and training, one is a dedicated driving training centre and one is a standalone EOC training centre.</p>
<p>Non-Emergency Transport Service</p>	<p>We have two sites which house and dispatch the vehicles and staff for our Non-Emergency Transport Service (NETS). In addition, NETS also operate from three ambulance stations.</p>
<p>Hazardous Area Response Team</p>	<p>We have two strategically located sites which house and dispatch the vehicles, equipment and staff for our Hazardous Area Response Teams.</p>
<p>Logistics Store</p>	<p>We have a Central Logistics store based in Deptford.</p>

The next section outlines our initial thinking on whether we think each element of our estate needs development, the extent of that development and our initial thinking of what the final future state of that estate might be.

5. Strategic direction for each area of our estate

This section outlines, for each area of our estate, some of the initial options that were considered as well as our preferred option and the benefits that we believe they could deliver. Where progress has already been made, or plans have already been approved, these are outlined rather than other potential options.

5.1 Frontline operational estate – including stations, make ready & Non-Emergency Transport Service (NETS)

Our future frontline operational estate will provide a high quality and fit for purpose operational estate, which supports staff to effectively and efficiently deliver a world-class service whilst demonstrating value for money

We have started to develop a vision for our frontline estate which, whilst needing further development, is described below. This proposed approach will ensure that our frontline estate is fit for now and in the future and will be based on the anticipated demand we will receive and the level of resources we will therefore need to supply. It will acknowledge that our staff are predominantly mobile and often will only be at station at the start and end of shifts.

Current status	Current plan – operational estate strategy
<ul style="list-style-type: none"> 68 ambulance stations of varying sizes and specifications that produced c.320 ambulances each day across London The estate growth has been organic and reactive and not the result of a strategic assessment Larger stations support a range of LAS activities which are not directly linked to the preparation and deployment of clinical teams, including training and administrative functions Some of our stations are much more accessible by public transport than others 	<ul style="list-style-type: none"> Consolidation of stations to a smaller number of larger, high quality Ambulance Deployment Centres (ADC) spread across London Each ADC will be aligned to an operational frontline team, supporting team-working and identity ADCs will provide all the facilities staff need to prepare for and start their shifts. It will also contain dedicated rest and meeting spaces for staff to relax or meet with colleagues or managers for catch ups, debriefs, reviews or team meetings Dedicated make-ready facilities at each new consolidated location, reliably providing a fully stocked vehicle at the start of shift Development of a system of local standby points to ensure appropriate coverage of resource deployment to meet expected demand Integration of NETS into core operational service delivery
Potential Key Benefits	
<ul style="list-style-type: none"> A frontline estate that, based on full analysis of expected future demand, efficiently supports service delivery and ensures that our staff are able to respond in the appropriate time and with the right equipment to every patient that needs us Improving the working lives of our staff; reducing variability and ensuring that all of our staff have safe, secure, modern and high-quality places of work Supporting better team working through co-location of all local groups to a single site, allowing more time for managers to meet with and support their teams Co-location of make ready facilities to improve processes and more reliably provide crews with a fully equipped and fuelled vehicle at start of shift 	

5.2 111/IUC contact centres and 999 Emergency Operations Centre (EOC)

Our strategy envisages future integration of 111/IUC contact centres with 999 contact handling, providing improved efficiency, resilience and operational performance whilst providing a better quality working environment for our staff. Working in partnership with our emergency service partners will enable us to provide a better response to major incidents.

Current status	Options could include
<ul style="list-style-type: none"> • 2 999 control centres – Waterloo HQ & Bow • Insufficient resilience to maintain full cover for a prolonged period if either 999 site were to become unusable • Working environments are considered poor for 999 control room staff • We currently deliver IUC services in South East London (Croydon) and North East London (Barking) • We are actively pursuing further involvement in 111/IUC services across London • We are starting to implement technology to integrate 999 and 111/IUC contact handling which will lead to integration opportunities in the future • We are implementing Clinical Hub satellite hubs in stations (currently Barking, Croydon and Pinner) 	<ul style="list-style-type: none"> • As part of our ICAT strategic ambition we want to be the integrator of access to urgent and emergency care across London. This will include running or playing a key role in 111/IUC across London and might, in the future, lead to consolidation of contact handling functions to improve efficiency and operational performance. • Efficiencies across current EOC estate (Carter) • Greater collaboration with blue light partners including co-location. This will include looking at areas where we already have existing, but separate facilities • Internal moves for LAS control rooms within London • Collaborate with other industries e.g. TfL • Collaboration/co-location with 111/IUC services
Potential Key Benefits	
<ul style="list-style-type: none"> • A more seamless and consistent service to patients who call 111 or 999 • Improved resilience & capacity within 999 and IUC services through integrating patient contact functions and ability to respond to 999 or 111 patients at all sites • Better working environments for staff, helping improved recruitment & retention which in turn will support operational performance • Better value for money through co-location/collaboration • Improved operational performance • Improved response to major incidents through closer working and collaboration on a strategic and tactical level with our emergency service partners • Efficiencies through economies of scale of providing multiple IUC services, integrating patient contact facilities 	

5.3 Headquarters & corporate offices

Our Headquarters and corporate offices need to provide high quality working environments for our corporate and support staff, improve team working and provide best value for money through consolidation.

Current status	Progress made/existing plan

<ul style="list-style-type: none"> • 4 main Corporate locations, all in Zone 1 (Waterloo HQ, Pocock Street, Morley Street, Union Street) • Corporate staff also co-located with HART at Cody Road and at Ilford and Barnehurst stations • Majority of corporate staff spend most of their time in HQ buildings in Central London • There are a number of areas within corporate offices dedicated to storage, including long term storage of HR files 	<ul style="list-style-type: none"> • Redevelopment of central London offices underway to rationalise 4 sites to 2 • We have exited from Morley Street and plan to exit from Union Street upon the end of that lease, bringing those staff into Waterloo HQ • Formal agreement of hot desk policy to make better use of space (7 desks to 10 people) • All corporate staff moved from Cody Road to HQ to ensure all teams are co-located
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Key Benefits

<ul style="list-style-type: none"> • Improved team working through co-location • Longer term financial savings through exiting of leases at Morley Street & Union Street • Better working environment for staff at HQ through newly renovated building

5.4 Training centres

Our future training centres will be state of the art facilities, supported by mobile resources, which will better support our staff to provide outstanding care to patients and give our trainers the resources and environment they need and deserve.

Current status	Options could include
<ul style="list-style-type: none"> • 7 Clinical Education and Training locations across London, including a standalone driving training centre • 1 EOC Training facility • A great deal of training happens locally on station which is variable in effectiveness, takes place in poor facilities and does not conform to an agreed oversight and quality assurance framework 	<ul style="list-style-type: none"> • Reducing and consolidating the number of training locations from 6 to 2 (North/South or East/West) • Developing state of the art training facilities that will be able to provide the full range of training required • Opportunities to integrate with surrounding ambulance services, e.g. EEAS in the North, SCAS in the West and SECAMB in the South • Supplementing fixed training locations with mobile classrooms • Consideration to utilising alternative facilities for peak demands

Potential Key Benefits

<ul style="list-style-type: none"> • Supporting the delivery of outstanding patient care through improved quality of training delivered through use of specialist training facilities and equipment • Improved productivity of trainers through consolidation of training sites • Access to world class training facilities supporting improvement of recruitment and retention • Providing our trainers with a much better quality working environment than they currently experience
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5.5 Vehicle Maintenance

Our future vehicle maintenance service will demonstrate best value for money and better support operational performance by providing staff with the reliable vehicles they need.

Current status	Options could include
<ul style="list-style-type: none"> Planned and reactive maintenance undertaken across 12 station locations This includes 'light' maintenance such as changing headlights and minor repairs as well as 'heavy' maintenance that requires full workshop facilities 	<ul style="list-style-type: none"> Development of dedicated maintenance facilities which will be able to provide a better quality service, for longer hours, responding to peak demand on maintenance services Retain 'light maintenance' at deployment stations with 'heavy' or planned maintenance at dedicated maintenance sites, one per sector.
Potential Key Benefits	
<ul style="list-style-type: none"> Reducing the time our vehicles are off the road for maintenance Reducing the amount of non-patient facing vehicle movements across London 	

5.6 Specialist assets – including Hazardous Area Response Team (HART) – Tactical Response Unit (TRU), Motorcycle Response Unit (MRU) and Cycle Response Unit CRU)

Our future specialist assets will ensure that we are able to respond effectively and quickly to all incident types, especially major incidents when they occur

Current status	Options could include
<ul style="list-style-type: none"> The HART and TRU teams are located together at 2 sites in West and East London. These are specialised centres which are strategically located and would be excluded from any rationalisation of frontline operations HART use 10 units at a storage location (c. 7000 sq ft) as well as a location next to Silver Town station. These units contain vehicles, event equipment, public order response kit, MTFAs & incident logs/paperwork 	<ul style="list-style-type: none"> No current plans to move the HART and TRU sites due to their strategic locations. However we will review this as the lease ends at these sites with any plans needing to maintain strategic locations We have released space at Cody Road through the consolidation of corporate buildings allowing us to move the recruitment team to HQ. This will provide the teams remaining at Cody Road with the space that they need

5.7 Logistics Store

Our future logistics store will ensure that, as effectively and efficiently as possible, our staff are reliably provided with all of the equipment, drugs and consumables they need to deliver world class care to our patients

Current status	Options could include
<ul style="list-style-type: none"> We have one centralised logistics store in Deptford, which is responsible for making sure that we have enough kit and equipment 	<ul style="list-style-type: none"> Maintain a single central logistics store Integrate with South Central Ambulance Service for greater economies of scale

<p>to then be delivered to stations across London</p> <ul style="list-style-type: none"> The centralised logistics store is supported by localised stores for consumables and medicines 	<ul style="list-style-type: none"> Pursue a more extensive integration model, potentially on a national basis with other ambulance trusts, or with other London NHS provider trusts
Potential Key Benefits	
<ul style="list-style-type: none"> Efficient and effective distribution of all necessary equipment whilst maximising economies of scale and efficiencies 	

6. Next steps

As detailed in the previous section, there is a significant amount of estate development work which could be undertaken to deliver transformational changes to the way in which we can deliver our urgent and emergency care services now and in the future. The scale and scope of these potential changes differs significantly for each element and can be split into the following categories:

- No current change; BAU improvements to continue through the estates team and annual business plan
- Moderate change needed; to be managed through BAU governance processes and internal programme and project management, with business cases developed as required. This will be managed and monitored through Portfolio Management Board as well as monthly internal performance reviews
- Transformational change; will require a business case and might require external funding and consultation

No current change – BAU improvements	Moderate change – internal programme & business cases as required	Transformational change – standalone business case required
<ul style="list-style-type: none"> 111/IUC estate Specialist assets Logistics store 	<ul style="list-style-type: none"> Headquarters & corporate offices Training centres 	<ul style="list-style-type: none"> Frontline operational estates (inc. NETS) Emergency Operations Centre

In support of developments for all of the areas of estate the following next steps are proposed:

- To refresh the 6-facet survey, which is now almost 8 years old, to ensure we have an up to date assessment of the physical quality of our stations
- Develop a detailed engagement plan for how we will engage with staff, the public and stakeholders, working with the Director of Communications and Engagement
- Identifying and pursuing opportunities that would provide better outcomes or better value for money or provide other improvements on the emerging operational estates strategy. This could include new opportunities to co-locate with partners or new sites becoming available for purchase/redevelopment
- We have identified the sites with the most pressing need for redevelopment and will focus on identifying potential opportunities for these sites in the first instance. This will include sites under a compulsory purchase order, sites coming to the end of a lease, buildings not fit for purpose or not safe for our staff and anywhere a commercially viable opportunity arises.

Given the categorisations in the table above, it is proposed that standalone business cases are developed for the areas of estate identified as potentially needing transformational change. These will

be developed using the requisite expertise and modelling to ensure that they will deliver the benefits needed as well as supporting improvements to operational performance. These business cases will include separate delivery plans and proposed benefits as well as outlining whether they will require staff and/or public consultation exercises to be carried out. Each one will be discussed with Trust Board in detail and will require formal sign off to proceed.