The London Ambulance Service NHS Trust was inspected by the Care Quality Commission (CQC) Chief Inspector of Hospitals in June 2015. The result of the inspection was that the Service was rated as “inadequate”. A second inspection in 2017 has seen improvements and the Service is now rated as “needs improvement”. The report contains a summary of the findings of the CQC report (Appendix A) and the Service’s intentions towards further improvement.

The Health and Wellbeing Board is recommended to note the report.

The Board has previously expressed an interest in the performance of the London Ambulance Service and the way that it provides services to the residents of Barking and Dagenham. Following the announcement of the most recent CQC inspection in February 2017, London Ambulance Service offered to update the Board.

1. Introduction and Background

1.1. The London Ambulance Service NHS Trust (LAS), responds to over 1.9m calls and attends over 1 million incidents each year. It provides emergency medical services to the whole of Greater London, which has a population of around 8.9 million people and is the busiest emergency ambulance service in the UK. The Service employs over 4,600 whole time equivalent (WTE) staff, who work across a wide range of roles based in over 70 ambulance stations and support centres.

1.2. LAS is commissioned by 32 Clinical Commissioning Groups for London and by NHS England.

1.3. The most recent Care Quality Commission (CQC) Chief Inspector of Hospitals inspection of The London Ambulance Service NHS Trust took place on the 7th, 8th
and 9\textsuperscript{th} of February 2017. This inspection was carried out as part of the CQC’s comprehensive inspection programme, following the report of 2015 that had rated the LAS as “inadequate”. Three core services were inspected:

- Emergency Operations Centres
- Urgent and Emergency Care
- Resilience planning including the Hazardous Area Response Team

1.4. The CQC inspection report was published on 29th June 2017. Overall, the trust was rated by the CQC as “Requires Improvement”. However, in the domain of “caring” LAS was rated as “outstanding”.

1.5. In each of the domains covered in the report, the rating had improved from that achieved in 2015.

2. Proposal and Issues

2.1 Over the last two years we have implemented a significant number of improvements which have been reflected in the Care Quality Commission’s recently published report. Our priority is to build upon these and set a strategic direction in which we look for new and innovative ways to provide the best possible care to people who live and work in London and to manage the increasing demand on our services.

2.2 Set out below is a summary of the CQC findings:

<table>
<thead>
<tr>
<th></th>
<th>Safe</th>
<th>Effective</th>
<th>Caring</th>
<th>Responsive</th>
<th>Well-led</th>
<th>Overall</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency and urgent care</td>
<td>Requires improvement</td>
<td>Requires improvement</td>
<td>Outstanding</td>
<td>Requires improvement</td>
<td>Requires improvement</td>
<td>Requires improvement</td>
</tr>
<tr>
<td>Emergency operations centre</td>
<td>Requires improvement</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
<td>Requires improvement</td>
<td>Requires improvement</td>
</tr>
<tr>
<td>Resilience planning</td>
<td>Good</td>
<td>Good</td>
<td>Not rated</td>
<td>Good</td>
<td>Good</td>
<td>Good</td>
</tr>
<tr>
<td>Overall</td>
<td>Requires improvement</td>
<td>Good</td>
<td>Outstanding</td>
<td>Good</td>
<td>Requires improvement</td>
<td>Requires improvement</td>
</tr>
</tbody>
</table>

2.3 Staff behaviours and interactions demonstrated outstanding care, with staff committed to providing a caring and compassionate service.

2.4 Employment of mental health nurses in our control room to provide expert opinion and assistance to frontline staff when they treated patients with mental health concerns.

2.5 A maternity education programme and maternity pre-screening tools and action plans had ensured staff were able to respond to and support maternity patients.
2.6 We are pleased that improvements in medicine management have been recognised and we will continue to improve security and storage.

2.7 We are committed to providing protected time for mandatory training for all staff across the Service.

2.8 We will continue to recruit, placing particular focus on meeting targets to recruit more people from the community we serve (BME).

2.9 We will work with staff and unions to address issues with rosters, rest breaks, sickness and absence as well as improving our staff engagement.

2.10 We will continue to improve infection prevention and ensure consistent standards of cleanliness across the whole Service.

2.11 We are focused on improvements to our 999 system to ensure it remains robust.

2.12 The Trust Board, our new Chief Executive Garrett Emmerson and his Executive Leadership Team are completely focussed on addressing the key actions highlighted in this report.

2.13 A Quality summit was held 29 June to bring together a range of stakeholders to support our future improvement programme.

2.14 Further information on our action plan, when finalised, will be shared with the Board.

3 **Mandatory Implications**


3.2 **Health and Wellbeing Strategy** - A well-rated and high-performing London Ambulance Service underpins the delivery of Barking and Dagenham’s Health and Wellbeing Strategy.

3.3 **Integration** - LAS work with partner organisations, to improve access to care and appropriate care pathways and to drive actions to support timely hospital handovers that allow LAS resources to be available for other emergency calls as soon as possible

3.4 **Financial Implications**

    Completed by: Katherine Heffernan, Group Manager – Service Finance

    There are no financial implications directly arising out of this report.

3.5 **Legal Implications**

    Completed by: Dr. Paul Feild – Senior Lawyer
The Health and Social Care Act (2012) conferred the responsibility for health improvement to local authorities. In addition as a best value authority under the Local Government Act 1999 there is a duty on the Council to secure continuous improvement. The Health and Wellbeing Board terms of reference establish its function to ensure that the providers of health and social care services work in their delivery in an integrated manner.

The function of this report is to provide an attached report by the CQC inspection team on their follow-up inspection of the London Ambulance Service for consideration by the Health and Wellbeing Board in carrying out its role to ensure that providers of health and social care are working to their best effect. It can do this by giving its reflection on the reports and making recommendation for improvement where that can be identified.

3.6 Risk Management – Not applicable

3.7 Patient / Service User Impact – Not applicable

List of Appendices:

- Appendix A - LAS summary of CQC report, June 2017