



**SECamb Branch 20111**

Courtesy of South East Coast Ambulance

# **NEWSLETTER**

## **APRIL 2016**



www.shutterstock.com · 369909365

### **The plot thickens.....**

After the resignation of SECamb Chair Tony Thorne in March, we now have a new interim Chair Sir Peter Dixon, and the Chief Executive Paul Sutton remains on extended leave. Former SECamb Commissioning Director Geriant Davies has taken over as CEO for now. It has also been confirmed that another key Director will be departing soon.

It has been confirmed that James Kennedy chief operating officer, will be leaving the Trust to take up a new job as Director of Finance at the University of Middlesex, Unison wishes James well in his new position.

This is a time of turmoil for those in high places so it is understandable that there is a risk that what appear to be less important matters will be responded to slower than hoped.

Following the Monitor RED 3 & NHS111 retriage report - and still waiting for the further investigation into potential lives lost during the event, as well as the CQC inspection in early May - we may be glad to be below the line of fire. As the saying goes "Watch this space....."

## PTS Sussex

It's with a heavy heart that we said goodbye to our colleagues in Sussex who have now been left in the hands of the private sector via TUPE arrangements.

Things did not start well on the 1<sup>st</sup> April for the new, rather complicated Sussex PTS organisation that is led by the private company Coperforma, with 2 main transport providers called Thames Ambulance and V M Langfords.

Various stories have emerged of staff locked out in Bognor, renal patients arriving late – or not arriving at all - for treatment in Brighton, and return journeys made by hastily arranged taxis.

An ambulance station with no electricity or water, and long distances for staff to cover to reach new remote ambulance stations have caused a lot of widespread concern. Media including BBC news, Argus newspapers and Twitter have made public many of these concerns, and the future of PTS in Sussex clearly needs considerable improvement. SECAmb PTS management always said that the quality of service required could not be provided for the money made available by the Sussex commissioners and so far, this is proving correct.



## NHS111

All records seem to be being broken in the volume of calls received in 111 over the Easter period and beyond. I have witnessed what incredible pressure the Health Advisors and Clinicians have been under and how Management have battled on bravely to support the onslaught.

To me it is very clear that the problem has at least three parts to it:

Firstly the obvious lack of GP's available at weekends and in the evenings (less than 10% of the GP's available during normal working hours), let alone during the day when receptionists are telling people to phone 111.

Secondly the apparent mind-set of the public who need their hands held for any and everything medical. In support of the GP's the one thing they cannot prescribe is time which is needed for people to recover from their aches and pains, but impatience in recovery time is now the norm.

Finally, the problem will not and cannot be resolved until NHS Pathways is replaced by a more suitable algorithm as it is constantly pushing towards an emergency outcome. Not all chest pain with a cough means a heart attack and breathing problems with a cold does not always mean serious lung problems, unless of course you use NHS Pathways.

Although the Clinicians continue to stop many unnecessary ambulance dispatches, the sheer volume makes it a very difficult. There is some good news on the horizon as nine more full time Clinicians join 111 in Ashford in the next couple of months, which not only replaces those who have left but increases the daily cover and support for the Healthcare Assistants.



### **Changes in NHS111 & Out-of-Hours Doctor Services in Kent**

The loss of 18% of 111 business from October this year when East Kent start their own 111 and OOH GP service will mean some changes.

We have been reassured that there will be minimal effect to those currently working at 111 and by the look of the volume of calls, the workload might be lightened just a little.

The more realistic concern will be the effect on 999 services in half of Kent, as the request for ambulances will fall to a separate private company and if using NHSPathways, the increase in ambulance requests could be quite noticeable. The awarding of this contract does however fulfil the requirement highlighted in last year's OOH report which asks for closer working with 111 and the OOH GPs, albeit supplied by a private provider. This also shows further signs of privatisation of the NHS by the back door as seen in the PTS in Kent and more recently in Sussex.

### **EOC**

While 111 has seen incredible increases, the EOC's have experienced exactly the same with a dramatic rise in 999 calls and demand outstripping supply. This leaves individuals who already work in a very pressured environment under even more pressure. The delays in dispatch as well as the delays at Hospital handover times which leads to longer turnaround times all adds to the maelstrom that is 999 today. It should not go unrecognised just what a great job is done by all and despite the frustrations of inappropriate calls, we all carry on, sometimes feeling thankless and often feeling exhausted.

## Crawley new HQ & EOC



The move to the new Headquarters and EOC in Crawley seems to be fast approaching and we realise all of those involved in the process of the move as well those moving to the new site will be feeling extra pressure and concern. No one really likes change and this is a big one so don't forget your **Union Reps** are there to support you and give advice, especially Jenny Young and James Apps as our Welfare leads, they are always ready to lend an ear and to use their expertise to offer true support.



www.shutterstock.com · 281358149

## **Beacon Site in East Kent**

The “Beacon Target Operating Model” in Thanet incorporating the new Paramedic in the community plan, started in January and continues at a pace. Relevant data is being collated to see how effective this “new way” of working is.

It is clearly to the advantage of the patient to have appropriate care as soon as possible, but we must not forget that this is primarily designed to leave people at home so reducing the pressures on the hospitals.

This may be particularly attractive to the GPs involved who are seeing their workload reduced, but it must not be to the detriment of others who are feeling overloaded with calls and the potential delays in getting access to PPs for example, due to them now working full time for the GP surgeries.

A resource gained by the GPs is, effectively, one lost by ourselves so the trial needs to be scrutinised very thoroughly.

There is also the tricky subject of Unsocial Hours payments, remembering that this Trust still works on individuals only being paid for the unsocial hours they work, which is unlike any other Ambulance Trust in the country, as well as restricting new staff to 21% for financial reasons which still seems rather crazy to us.

If and when this trial is satisfactorily concluded, the potential roll out to Paddock Wood and Guildford is still planned to follow, with Polegate also being talked about. There is still the real possibility that this Trust will see at some time in the future a complete change of direction, especially if those at the top are forcibly replaced by a more conservative thinking team.

A number of Ambulance Trusts have returned to the classic method of Paramedics and Techs/ECSW’s in ambulances and primary community care being the responsibility of the GP Commissioners.

We are in the hands of Monitor (now NHS Improvement), the Care Quality Commission (CQC) and their ongoing investigations to see what the future will be.



## **Rota Group**

The group is still meeting regularly with full involvement of the joint Unions and once we get past the sticking point of the USH, I am sure we will continue at a pace.



## **Band 6 and 7 Review Meetings**

The work continues in reviewing the Band 7 management structure, which particularly affects those in Operations in the new Operating Units (OU). We are aware of the difficult place this has put a number of our members in, and we continue to make sure that management follows due process and procedure to ensure fairness for all of those directly affected.

This work is ongoing but we are keen to get this work done as quickly as possible but only as long as it is not to the detriment of a single individual. It is better it takes a bit longer and is right, than rush and those affected are then left with living with the consequences. The process will therefore include those in Band 6 ultimately and the same assurances are extended to them.



## **JPF – April 7**

The invaluable work that takes place at the Joint Partnership Forum continues and we will keep you updated as a matter of course. The current situation of the Trust being in REAP 5 does cause limitations on time as well as individuals availability. The turmoil in the Trust has an influence on all meetings taking place, but in particular Francesca Okosi's ill health puts restrictions on her time. We all agree that her well-being and return to full good health is the priority and we offer her every best wish and our support in the future.

## **New addition to Off-Road UNISON Stewards**

From March this year, Sussex Technician and former SECAMB Governor, Nigel Sweet has joined the stewards taking advantage of "facility time" made available by SECAMB for recognised trade unions.

Nigel now works on UNISON business each Monday and Wednesday from 09.00 to 17.00 and can be contacted anytime on his UNISON phone number 07554 437181; his SECAMB email address; or Twitter @SweeterNigel