

Contract Performance Review Report

Nottinghamshire Non-Emergency Patient
Transport Services

January 2014

Introduction

Arriva Transport Solutions Ltd is the provider of NHS Non-Emergency Patient Transport Services (NEPTS) in Nottinghamshire having been awarded a contract which commenced in July 2012. The contract is now 18 months old.

Current performance continues at a level short of expectations but Arriva is a patient focussed company and appears committed to making improvements to the efficiency of its service delivery. Recent adverse publicity in Leicestershire, where Arriva also has a contract to provide PTS, and continuing pressure from contract managers, commissioners and councillors seems to have focussed Arriva's attention into making the required improvements.

The contract review for 2013/14 has been completed with greater clarity on what constitutes an Extra Contractual Journey (ECJ). It is now agreed that the activity to a number of sites including Sheffield, Derby and Leicester hospitals, which were previously classed as ECJ's, will be incorporated into core activity and therefore charged within the block contract, A contract variation notice has been issued and is ready for signing off by both parties.

Performance Improvement

Following a number of meetings with Arriva on the subject of service improvement, Arriva have prepared a Service Improvement Plan and have also provided a strategic update which provides details of the steps they wish to take to improve performance. In summary these are as follows:

- New Telephony System from Feb 2014
- Continuing emphasis on applying Eligibility Criteria rules
- On-going re-structuring and recruitment
- Review of rota's
- Promoting on-line bookings
- Reviewing cancelled and aborted journeys

Part of the restructure has been the creation of the post of Head of Service, East Midlands. This post was filled at the end of 2013. The restructure will create more capacity and a management team focussed on patient first. Processes are being developed to improve data sharing to improve services and influence change. There will be more support for road staff with an increase in the number of team leaders (ratio 1:20) so staff are supported and motivated and able to influence service improvement.

Stakeholder Meetings

In order to further improve the input and dialogue with all stakeholders the commissioners are introducing Stakeholders Meetings from February 2014. These will replace the previously held Locality meetings. The intention is that the meetings will provide a forum for feedback and discussion and will provide an opportunity to promote Performance Improvement.

Key Performance Indicators

The Key Performance Indicators are laid out within the contract and ATSL is expected to adhere to these standards which are subject to final penalties. These include time measured targets for the arrival and collection of patients, journey times, and patient satisfaction and information provisions.

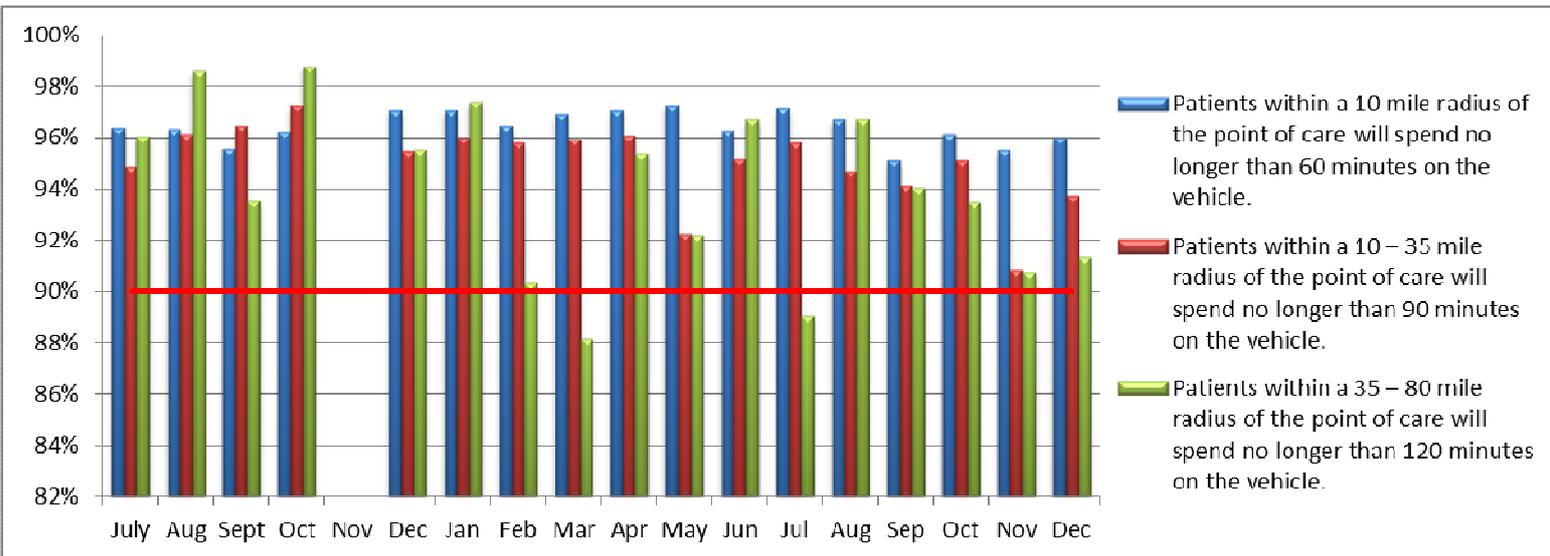
KPI Performance (Excluding Renal)

The following tables provide details of current and historic performance against the most important KLPI's and details any improvement plan specific/relevant to the KPI.

1. KPI 1 - Time on Vehicle

KPI Target: 90% for all three KPIs

KPI Summary, exc Renal			Std.	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
KPI 1	Time on Vehicle	Patients within a 10 mile radius of the point of care will spend no longer than 60 minutes on the vehicle.	90%	96%	96%	96%	96%		97%	97%	96%	97%	97%	97%	96%	97%	97%	95%	96%	96%	96%
		Patients within a 10 – 35 mile radius of the point of care will spend no longer than 90 minutes on the vehicle.	90%	95%	96%	96%	97%		95%	96%	96%	96%	96%	92%	95%	96%	95%	94%	95%	91%	94%
		Patients within a 35 – 80 mile radius of the point of care will spend no longer than 120 minutes on the vehicle.	90%	96%	99%	94%	99%		96%	97%	90%	88%	95%	92%	97%	89%	97%	94%	93%	91%	91%

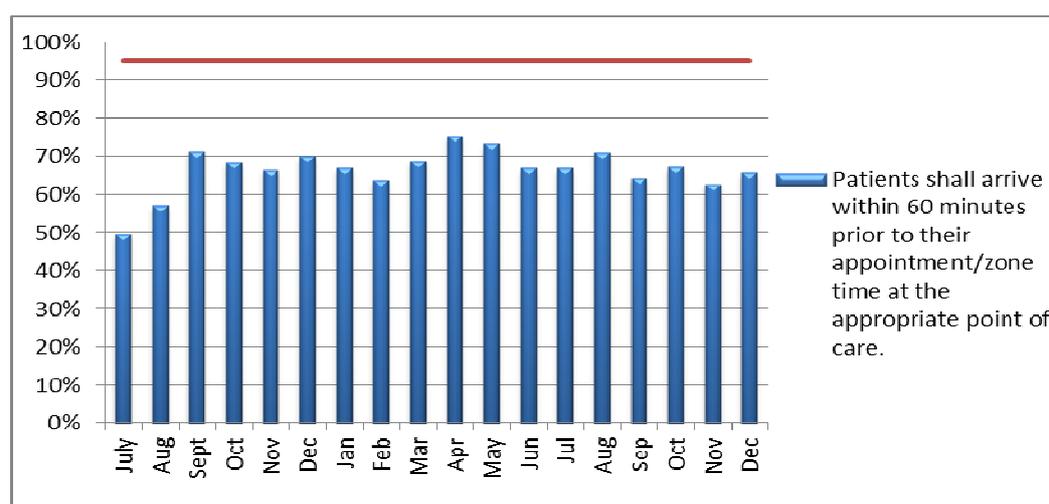


In respect of KPI 1, performance has been achieved and maintained throughout the past seventeen months; this is not an area of any concern to commissioners or provider alike at this current time.

KPI 2 - Appointment arrival time - within 60 minutes prior to appointment time

KPI Target: 95%

KPI Summary, exc Renal			Std.	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
KPI 2	Arrival Times at Point of Care	Patients shall arrive within 60 minutes prior to their appointment/zone time at the appropriate point of care.	95%	50%	57%	71%	68%	67%	70%	67%	64%	69%	75%	73%	67%	67%	71%	64%	67%	63%	66%

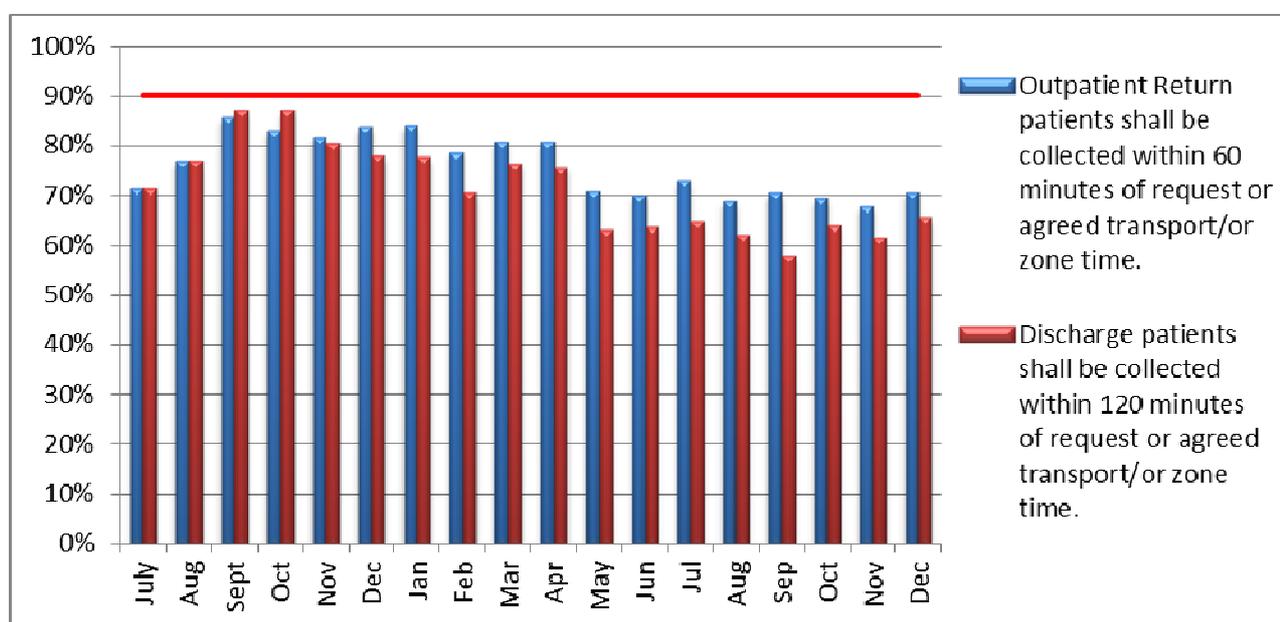


Performance against this KPI target has not improved recently having plateaued at an average of the mid 60%'s since August. Arriva are working to an improvement plan which is hoped will enable an improvement in this KPI performance. A number of reasons have been cited for the poor performance during these months. The ATSL Performance Improvement Plan is geared toward all KPIs where there is significant underperformance and includes improved activity demand profiling and associated changes to rotas, the need for recruitment, further training and absence management. Particular reference is made by Arriva to congestion issues and this has been raised with colleagues in the council/highways dept.

2. KPI 3 -Post Appointment Collection Time (within 60 mins of booked ready)

KPI Target: 90%

KPI Summary, exc Renal			Std.	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
KPI 3	Departure times from Point of Care	Outpatient Return patients shall be collected within 60 minutes of request or agreed transport/or zone time.	90%	71%	77%	86%	83%	82%	84%	84%	79%	81%	81%	71%	70%	73%	69%	71%	69%	68%	71%
		Discharge patients shall be collected within 120 minutes of request or agreed transport/or zone time.	90%	72%	77%	87%	87%	80%	78%	78%	71%	76%	76%	63%	64%	65%	62%	58%	64%	62%	65%



The standard of 90% is still not being achieved and it can be seen that the performance from May 2013 till Dec 2013 has not improved. This particular KPI had seen some reasonable development with the contract management board and there was an expectation of achievement by year end. This was unrealistic. The lack of improvement in performance since May 2013 will be subject to further scrutiny, in line with the performance improvement plan.

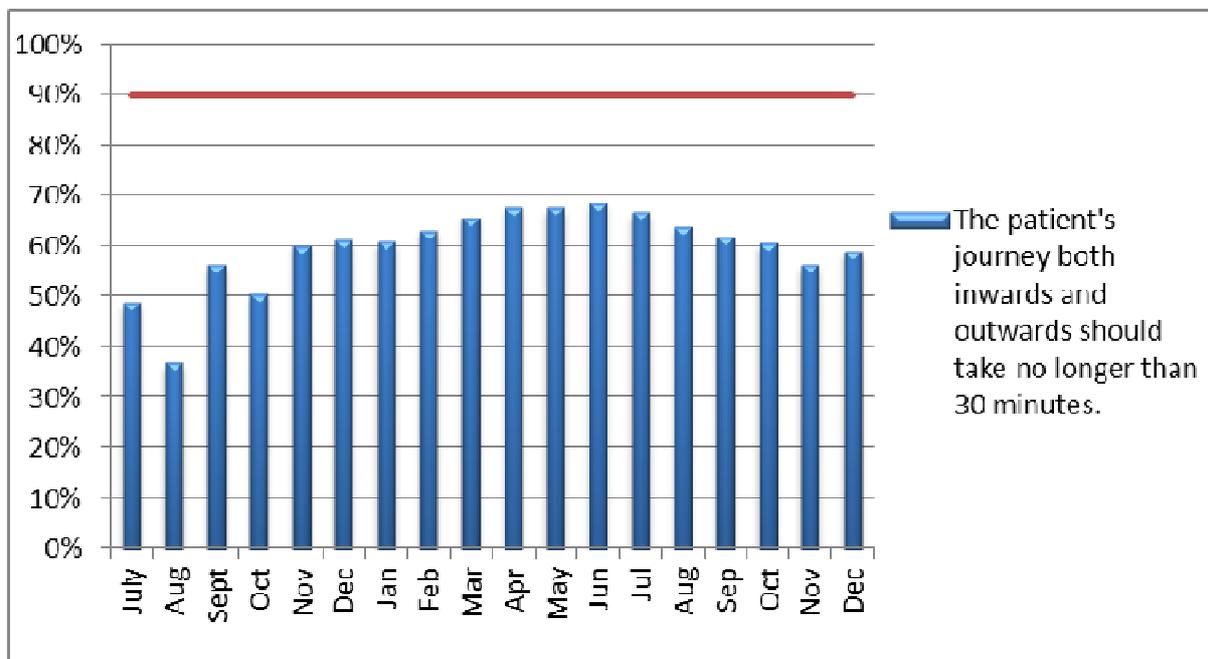
The discharge of patients within 120 minutes is challenging and is influenced by the working practices of Trusts such as the number of discharges booked on the day of discharge, the timeliness of discharges being booked late in the day and the impact of bed availability within care homes and community hospitals ever changing through a day. These factors can contribute to ATSL's ability to plan and resource in advance, making the service very reactive during times where resources are committed elsewhere.

As part of the performance improvement plan, ATSL has committed to working with provider Trusts to review, understand and plan for these peaks in demand, whilst all providers are also working to improve their own respective processes to improve the discharge pathway.

Renal KPI's

1. KPI 1 - Renal Dialysis Journey Time

KPI Summary, Renal only			Std.	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
KPI 1	Time on Vehicle	The patient's journey both inwards and outwards should take no longer than 30 minutes.	90%	49%	37%	56%	51%	60%	61%	61%	63%	66%	68%	68%	68%	67%	64%	62%	61%	56%	59%

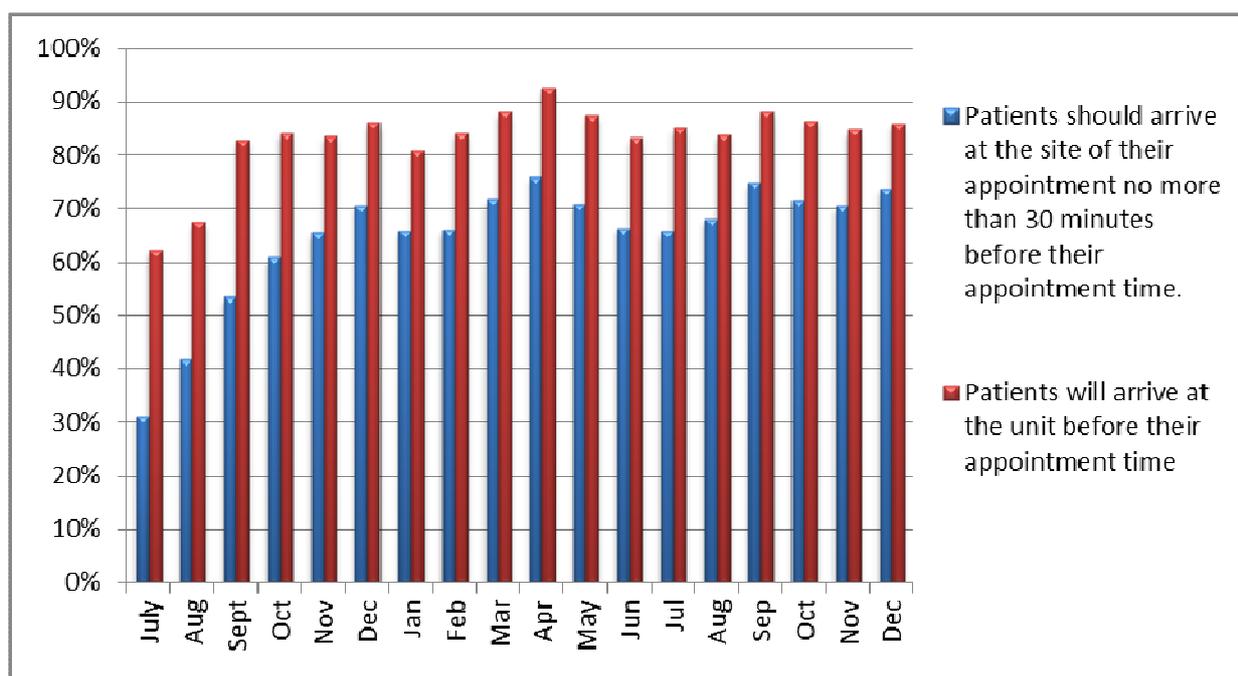


Performance had shown a steady increase but starting falling away from July 2013. The performance still falls significantly below the target of 90%. The 10% tolerance above the target of 90% allows for a number of patients who live a further distance from their Dialysis Unit than the Renal Network standard "provision of Dialysis unit within 30 minutes of the patients home address"; this is something that is therefore planned by the local Renal Service providers, subject to capacity and patient choice and as such ATSL have little influence. It must however be noted that the number of patients living beyond the 30 minute standard changes frequently and therefore further work will be undertaken to allow for this tranche of patients.

KPI2 -Renal Dialysis inward journeys (by appointment time)

KPI targets 95% and 100% respectively

KPI Summary, Renal only			Std.	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec
KPI 2	Arrival Times at Point of Care	Patients should arrive at the site of their appointment no more than 30 minutes before their appointment time.	95%	31%	42%	53%	61%	65%	71%	66%	66%	72%	76%	71%	66%	66%	68%	75%	72%	71%	74%
		Patients will arrive at the unit before their appointment time	100%	62%	67%	83%	84%	84%	86%	81%	84%	88%	92%	87%	83%	85%	84%	88%	86%	85%	86%



Performance has improved significantly since the start of the contract but has recently plateaued and still falls short of the target. Any late attendance for dialysis also impacts on the patients scheduled departure time as well having a knock-on effect to those patients dialysing later in the day.

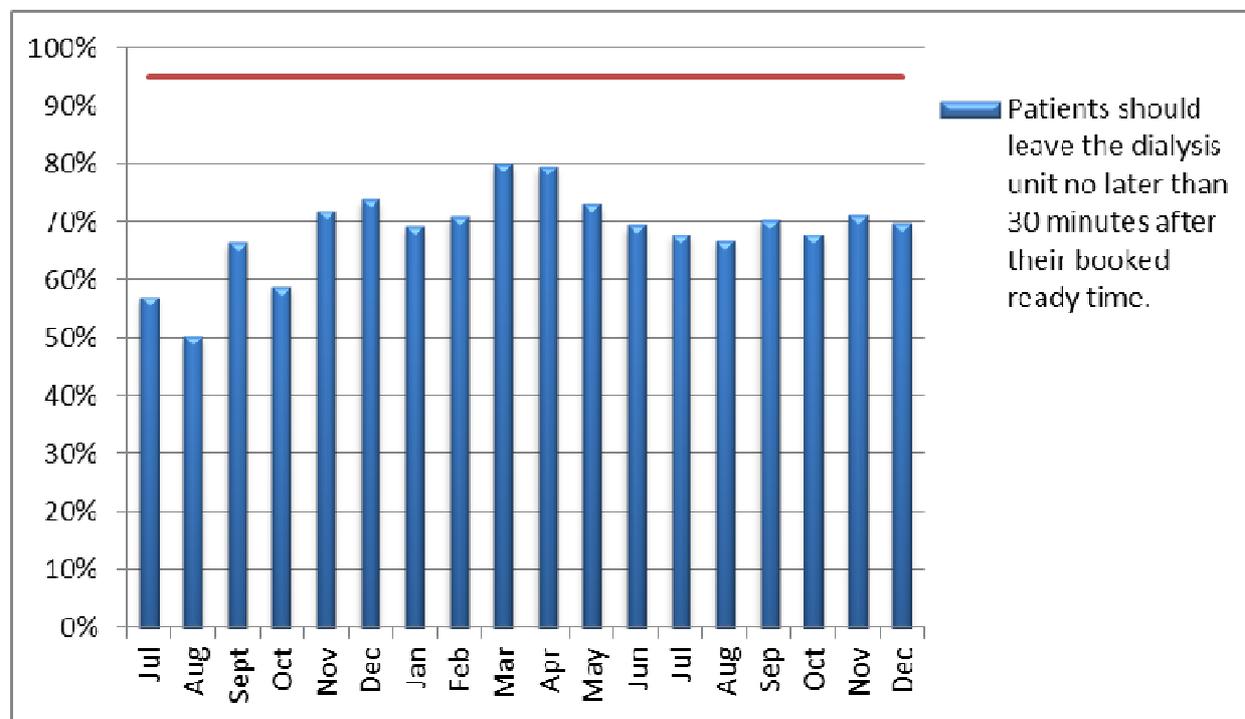
A similar trend in performance can be seen for patient collection times (below)

The ATSL performance improvement plan contains a 'Renal Specific' element in order to focus on this group of patients in recognition of the importance of this service to these regular user patients and therefore the potential to impact on their quality of life. The plan has delivered a more collaborative and transparent approach between Renal Units and ATSL in the logistics planning and has led to a dedicated transport provision for this cohort of patients.

ATSL have also relocated some of their resources to reduce initial travelling time and to reduce congestion risk in order to minimise lost time in collecting patients.

KPI 3 - Renal Dialysis outward time (Collection)

KPI Summary, Renal only			Std.	Jul	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sept	Oct	Nov	Dec
KPI 3	Departure times from Point of Care	Patients should leave the dialysis unit no later than 30 minutes after their booked ready time.	95%	57%	50%	67%	59%	72%	74%	69%	71%	80%	80%	73%	70%	68%	67%	70%	68%	71%	70%



Complaints

At the time of producing this report (Jan 2014) an updated statement of the level of complaints and the corresponding details were awaited from Arriva.

Patient Survey

Arriva have recently (Sept/Oct 2013) carried out a patient survey to obtain patient (customer) feedback. In general terms this was very positive. A sample of patients' comments includes;

"Excellent caring people, thank you"

"From the driver to the reception it was certainly service with a smile."

"The staff were excellent"

Some of the words used to describe Arriva staff include; *professional, caring, helpful, pleasant, friendly and respectful.*

Some of the words used to describe their vehicles; *comfortable, plenty of leg room, warm and smooth.*

Of the answers where patients disagreed or strongly disagreed with the statement and where patients were unlikely or extremely unlikely to recommend us to friends and family, the reasons cited were as follows (in order of importance);

Timeliness

Bumpy and noisy vehicle.

Arriva will carry out further analysis to establish any trends and to examine any learning opportunities. Any resultant action taken will be reported. A full copy of the report is available by request.

Conclusion

The relationship between ATSL, commissioners, contract management staff, provider units and users continues to be positive and progressive. ATSL has continually provided assurances to making further improvements to its quality standards, something Commissioners are closely monitoring in line with the contract parameters. Furthermore, ATSL is also actively improving its reputation for reliability, collaboration and responsiveness. As the contract term progresses, ATSL has increased its understanding of the variable demands within the NHS and has demonstrated a flexible approach in addressing patient and commissioner needs.

Its acceptance of the recent Contract Variation Notice shows that Arriva are prepared to be flexible and to further invest in the service.

The Contract Management Board continues to meet monthly with ATSL in addition to meeting with NSL Care Services Ltd on cross border/contract issues as part of the agenda.