



Department
of Health &
Social Care

From Edward Argar MP
Minister of State for Health

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Our Ref: PFD-1190331

Ms Joanne Kearsley
HM Senior Coroner, North Manchester
Coroner's Service
Phoenix Centre
L/Cpl Stephen Shaw MC Way (formerly Church Street)
Heywood OL10 1LR

28th January 2020

Dear Ms Kearsley,

Thank you for your correspondence of 12 September 2019 to Matt Hancock about the death of Mr William Oliver. I am responding as Minister with responsibility for urgent and emergency care and I am grateful for the additional time in which to do so.

Firstly, I would like to say how saddened I was to read of the circumstances of Mr Oliver's death and I extend my sympathies to his family and loved ones.

It is important that we look to make improvements where we can to ensure safe and high quality healthcare services. I am informed that the North West Ambulance Service NHS Trust has acknowledged that on this occasion, it did not provide the right care, as quickly as it should have done.

In preparing this response, Departmental officials have taken advice from the Association of Ambulance Chief Executives (AACE) and NHS England and NHS Improvement.

On the matter of meal breaks and shift rostering, paramedic meal breaks and shift pattern arrangements are operational matters for individual ambulance trusts and there is no national ambulance meal break policy. Meal break requirements are set out in employment law (including the Working Time Directive) and NHS ambulance trusts develop their own policies to ensure compliance with the law.

I am advised that all ambulance services are aware of the need to stagger meal breaks as much as possible and to regularly review rostering systems. When on meal breaks, staff are effectively off duty and are free to leave their working environment and use the time as they wish. However, ambulance trusts have arrangements in place to enable staff to elect that, on a voluntary basis, they are willing to be disturbed during breaks to attend life-threatening incidents.

I am assured that all ambulance trusts are aware of their responsibilities in this area and regularly review rostering arrangements to ensure they are robust and optimised to meet current demand patterns.

I am advised that following a review, the North West Ambulance Service is looking to introduce new shift rostering and meal break arrangements to better meet resource demands and has benefitted from increased investment from commissioners for an additional 250 paramedics.

In relation to ambulance handover delays, we are clear that patient handovers must take place within agreed timeframes. NHS England and NHS Improvement are taking a joint approach to improve performance, including:

- The identification of regional leads for handover performance, holding NHS providers to account for improved performance;
- Emergency Care Improvement Teams supporting the most challenged acute trusts with identified handover delay issues to improve performance;
- The issuing of revised, detailed hospital handover guidelines, focussing responsibility on the wider system to address handover delays, including clear escalation procedures; and,
- Improved monitoring and reporting of patient handover delays.

The NHS Standard Contract¹ stipulates that patient handovers need to be completed efficiently within 15 minutes to allow ambulance resources to be returned to service quickly (ambulance crews then have a further 15 minutes to make their ambulance ready to respond to new calls).

The Department has made the AACE aware of the concerns in your report. The AACE acts as a national co-ordinating voice on issues of policy and practice for ambulance trusts and I am advised that the AACE takes seriously the learning that can be gained from Prevention of Future Deaths reports. The AACE has mechanisms in place to bring matters of concern to the attention of ambulance trusts in England and to promote the development of good practice.

Finally, we know that there is high demand for ambulance services. Including calls transferred from NHS 111, ambulance services deal with more than 11 million 999 calls every year. However, we are taking significant action to improve ambulance services at a regional and national level.

Nationally, we have implemented an improved ambulance performance framework across all ambulance trusts in England that prioritises responses to the sickest patients, while helping to reduce long waits and ensuring patients receive the most appropriate response for their condition. This includes reducing unnecessary journeys to hospital by safely treating at scene where clinically appropriate which in turn increases the availability of ambulances to respond to other incidents.

¹ <https://www.england.nhs.uk/wp-content/uploads/2019/03/8-NHS-Standard-Contract-Technical-Guidance-1920-v1.pdf>

I hope this response is helpful. I am grateful to you for bringing these matters to my attention.

Yam nicenly,
Edward Argar

EDWARD ARGAR MP

