

## **Other sources you may find useful - most offer free news updates::**

NHS Networks <http://www.networks.nhs.uk/> offers a weekly briefing and other useful resources

Monitor [https://www.gov.uk/government/email-signup/new?email\\_signup%5Bfeed%5D=https%3A%2F%2Fwww.gov.uk%2Fgovernment%2Forganisations%2Fmonitor.atom](https://www.gov.uk/government/email-signup/new?email_signup%5Bfeed%5D=https%3A%2F%2Fwww.gov.uk%2Fgovernment%2Forganisations%2Fmonitor.atom)

NHS England - subscribe to email alerts <http://www.england.nhs.uk/>

Social Care Institute for Excellence - subscribe to email alerts <http://www.scie.org.uk/>

HAPIA (Healthwatch and Public Involvement Association) <http://www.hapia2013.org/>

Healthwatch England <http://www.healthwatch.co.uk/news>

National Voices <http://www.nationalvoices.org.uk/who-we-are-and-what-we-do>

Public Face <http://emahsn.org.uk/public-involvement/public-face-newsletter/>

CLAHRC Newsletter [www.clahrcpp.co.uk/#!publications/c17jc](http://www.clahrcpp.co.uk/#!publications/c17jc)

Involve - <http://www.invo.org.uk/>

Best wishes

Geoff Smith

## **[The new Congenital Heart Disease review: 37th update – John Holden](http://www.england.nhs.uk/2015/01/13/john-holden-37/)**

<http://www.england.nhs.uk/2015/01/13/john-holden-37/>

**CCG Bulletin 75** is at

<http://www.england.nhs.uk/2015/01/15/ccg-bulletin-75/>

## ***Dental contract reform: prototypes - overview document***

Prototyping is the next step in the reform of primary care dentistry. Following the initial pilot scheme, a prototype of a possible new system is to be trialled in selected dental practices. This document provides information on: the background to the reform, lessons learnt from current pilot practices, proposals for prototyping and how dental practices can apply to be a prototype. <https://www.gov.uk/government/publications/dental-reform-next-step>

## ***Technology enabled care services: resource for commissioners***

This resource aims to help maximise the value of technology enabled care services for patients, carers, commissioners and the whole health economy. It provides information on how to commission, procure, implement and evaluate these types of solutions effectively.

[http://www.commissioningassembly.nhs.uk/pg/cv\\_content/content/view/157329](http://www.commissioningassembly.nhs.uk/pg/cv_content/content/view/157329)

## **[New pilots to improve speed and medical accuracy of ambulance calls](#)**

Posted by NHS England: 16 Jan 2015 02:39 AM PST

The NHS has today announced two new pilots that aim to reduce wasted ambulance journeys and improve the quality of care for all patients contacting 999.

The proposal has been recommended by doctors and the ambulance service and agreed following expert advice from senior clinical experts at NHS England. This [clinical advice has been published today](#).

For the most serious calls, where every second counts, ambulances will continue to be dispatched immediately.

A number of conditions will be upgraded from “Red 2” to “Red 1” to receive an even faster response, and no conditions will be moved in the other direction to a lower priority classification.

Evidence shows that less than 10 per cent of 999 calls are for genuinely life threatening conditions, yet ambulance services currently categorise around 40 per cent of calls as such, partly because call handlers have only 60 seconds to gather the information they need before an ambulance vehicle must be sent.

To meet the current target of reaching 75 per cent of patients who are categorised as “Red2” within 8 minutes, Ambulance Trusts frequently send vehicles to 999 callers before they have determined the exact nature of the problem. They also send more than one vehicle, such as an ambulance and a Rapid Responder. This is known as ‘double dispatch’.

On average, over 20 per cent of these vehicles are cancelled before reaching the scene, wasting vital resources which could and should be used for other patients.

Clinical experts believe extending the call handling time by 120 second for non life threatening calls will reduce the number of double dispatches, freeing up more ambulances to respond to more patients, and will also allow the 999 response to be more accurately targeted to patient need, improving the service as a whole.

As well as having more ambulances on the road, experience has shown that allowing extra time for a more detailed assessment increases the proportion of calls resolved through telephone advice (Hear and Treat) by up to 30 per cent, freeing ambulances for patients who need to be treated at scene and taken to hospital. It also reduces the proportion of patients treated at the scene (See and Treat) by around 10 per cent and reduces the proportion of patients taken to hospital by around 10 per cent. This improves the efficiency of the service overall, and reduces pressure on A&E Departments.

The two pilots are proposed as London and South Western Ambulance Service. They will give trained call handlers up to 120 seconds longer to get all the information they need from a person making a non life threatening 999 call before deciding on the right response. We anticipate that the first pilot will start in February.

**Professor Keith Willett, National Director for Acute Care, said:** ‘We are piloting these new arrangements because on medical grounds, we believe they will increase the availability of ambulance vehicles and paramedic staff, providing patients with a better service and improving their chances of survival, especially those with the most serious conditions. “It’s not about relaxing standards. By acting with slightly less haste on the calls, we believe we can get to more patients with more speed. Some conditions will be upgraded to Red1 status, requiring a more urgent response than is currently the case.”

**Anthony Marsh, Chair of the Association of Ambulance Chief Executives and Chief Executive of West Midlands Ambulance Service NHS Trust, said:** “These changes will ensure that those people with the most serious conditions get the most urgent response, which will protect patients and save lives. The changes will also allow us to provide patients with the right level of care so that they get the best possible outcome. This is a change that our staff, who know the system better than anyone, have been pushing for as they know it will save countless lives.”

When asked about the proposals at a hearing of the Health Select Committee on Tuesday, President of the College of

Emergency Medicine, Cliff Mann, supported giving call handlers more time to triage non life threatening 999 calls, saying “otherwise we are dispatching vehicles at high speed, with inherent dangers, when the clinical necessity no longer justifies that”

Qualitywatch latest update is at

<http://qualitywatch.cmail1.com/t/ViewEmail/r/C4A8FA518CE171D32540EF23F30FEDED/CED3F0B3464CC75AA7F290B8E8FDC6A0>

### ***The invisible patients: revealing the state of neurology services***

This report brings together the findings of the Neurological Alliance’s inaugural quality of commissioning audit and neurological patient experience survey and identifies significant variation in the quality of the commissioning of neurological services among CCGs. In response, it sets out a number of recommendations.

<http://www.neural.org.uk/updates/245-invisible%20patients%20variations%20report>

### ***Tackling the causes and effects of obesity***

This LGA report argues that health problems associated with being overweight or obese cost the country £5 billion per year, with numbers of people with obesity predicted to more than double in the next 40 years. It warns that councils do not have enough money in their public health budgets to properly tackle obesity once mandatory services such as sexual health and drug and alcohol services have been paid for. The report calls for a fifth of existing VAT raised on sweets, crisps, takeaway food and sugary drinks to go to boost council-run grassroots initiatives with a proven track record, such as leisure activities and health awareness campaigns.

[http://www.local.gov.uk/web/guest/media-releases/-/journal\\_content/56/10180/6906893/NEWS](http://www.local.gov.uk/web/guest/media-releases/-/journal_content/56/10180/6906893/NEWS)