



NHS HIGH WEALD LEWES HAVENS CLINICAL COMMISSIONING GROUP

Patient Transport Services Mobilisation – incorporation of lessons learned



April 2017

FINAL

The matters raised in this report are only those that came to TIAA's attention during the course of the review, and are not necessarily a comprehensive statement of all the weaknesses that exist or all the improvements that might be made. This report was prepared for NHS High Weald Lewes Havens Clinical Commissioning Group and was therefore prepared specifically for the benefit of NHS High Weald Lewes Havens Clinical Commissioning Group and the six other Clinical Commissioning Groups in Sussex. This report has been prepared solely for management's use. No responsibility to any third party is accepted as the report has not been prepared, and is not intended, for any other purpose. TIAA neither owes nor accepts any duty of care to any other party who may receive this report and to the fullest extent permitted by law specifically disclaims any liability for loss, damage or expense of whatsoever nature, which is caused by their reliance on our report.

Patient Transport Services Mobilisation – incorporation of lessons learned

Executive Summary

INTRODUCTION

1. The review was commissioned by NHS High Weald Lewes Havens Clinical Commissioning Group (HWLH CCG) on behalf of the Sussex CCGs. The review considers the extent to which the mobilisation arrangements for the transfer of the Sussex non- emergency patient transport service contract from Coperforma Ltd to South Coast Ambulance Service incorporated the lessons learned from the previous mobilisation and other recent findings on commissioning major NHS contracts.

CONCLUSION

2. From the evidence available it is clear that the recommendations made in a number of reviews which either directly, or indirectly, relate to commissioning and mobilisation of patient transport services have been considered and actioned through the Programme Board which oversaw the transfer of the service from Coperforma Ltd to South Coast Ambulance Service.

ACKNOWLEDGEMENT

3. We would like to thank staff and management at the HWLH CCG for their co-operation and assistance during the course of our work.

RELEASE OF REPORT

4. The table below sets out the history of this report.

Date draft report issued:	10 th April 2017
Date management responses rec'd:	10 th April 2017
Date final report issued:	13 th April 2017

Detailed Findings

SCOPE AND LIMITATIONS OF THE REVIEW

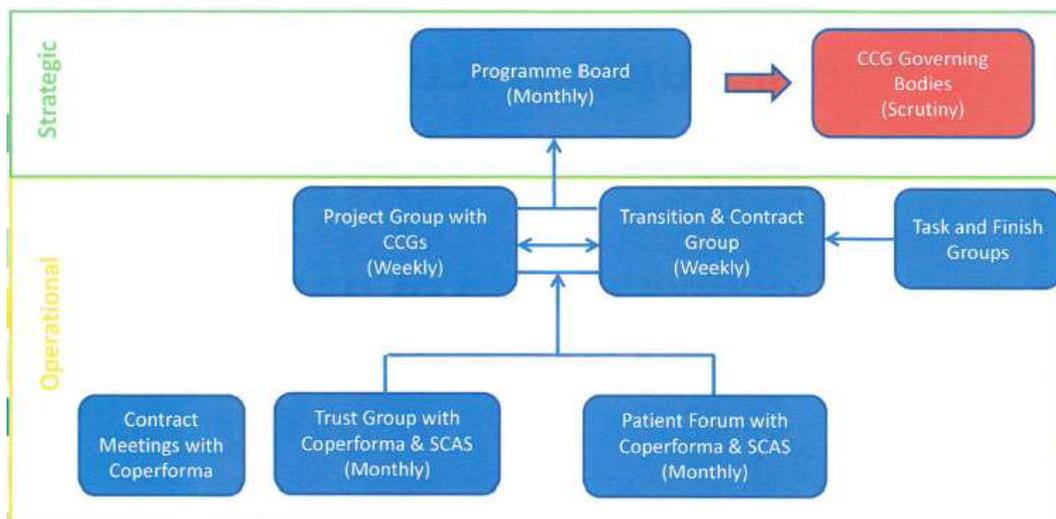
5. TIAA was commissioned by the CCG Accountable Officer in November 2016 to carry out this follow up review to confirm that good practice lessons learned which may be relevant to the mobilisation of the Sussex patient transport services contract have been taken into consideration. The scope of the review included consideration of the recommendations made in the following reports which directly related to patient transport services:
 - TIAA review of the Coperforma mobilisation ('TIAA report').
 - Users' perspectives on the Patient Transport Service April - September 2016 ('Healthwatch report').
 - Review learning the lessons from the procurement and mobilisation of the new Patient Transport Service in Sussex ('HWLH report').
6. The review also included consideration of the project management lessons learned from the failure of a major CCG commissioned contract elsewhere in England which was the subject of a National Audit Office (NAO) report issued in July 2016.
 - Investigation into the collapse of the Uniting Care Partnership contract in Cambridgeshire and Peterborough ('NAO report').

BACKGROUND

7. In November 2016 Coperforma gave notice to withdraw from the Sussex Patient Transport Services contract with effect from 31st March 2017. The contract was subsequently awarded to South Coast Ambulance Service. The contract award process and mobilisation was consequently driven by a shorter timetable than might otherwise have been adopted as the imperative was to ensure that for patients there was a business as usual service from April 2017.

FINDINGS

8. The transition from Coperforma Ltd to South Coast Ambulance Service was overseen by a Programme Board. The Programme Board met monthly and formed part of the PTS Governance structure, as set out below.



9. The findings of this follow up review are reported upon on an exceptions basis.

TIAA Report

10. There were 10 recommendations arising as a result of the 'Adequacy of the mobilisation arrangements for the new Patient Transport Service contract' report produced by TIAA. It was confirmed that all of the recommendations raised had been implemented by the CCGs.

Status	Number	Observations
Cleared	10	
Not applicable	0	
Outstanding	0	

Healthwatch Report

11. There were 22 recommendations arising as a result of the Users' perspectives on the Patient Transport Service April - September 2016 produced by Healthwatch Brighton and Hove, which provided perspectives of Renal Outpatient Department patients at the Royal Sussex County Hospital, Brighton. It was confirmed that all of the recommendations raised had been implemented by the CCGs.

Status	Number	Observations
Cleared	22	
Not applicable	0	
Outstanding	0	

HWLH report

12. There were 18 recommendations arising from the Lessons Learnt review carried out by HWLH CCG on behalf of all Sussex CCGs. Two of the recommendations related to the same area (as outlined below), therefore, has been included once for the purposes of the follow up review. It was confirmed that all of the recommendations raised had been implemented by the CCGs.

Status	Number	Observations
Cleared	17	
Not applicable	0	
Outstanding	0	

NAO Report

13. Whilst the NAO report considered the specific failures in the UnitingCare Partnership contract there were a number of matters raised which were applicable to CCG commissioned contracts generally. The NAO report was presented to the Parliamentary Accounts Committee (PAC) and in November 2016 the PAC summarised the lessons to be learned from the failures of the UnitingCare Partnership contract as follows:
- Design the service properly from the outset, rather than developing it during the procurement.
 - Insist on transparency from legacy providers, including open book access to cost data.
 - Increase the NHS’s commercial capability so that basic mistakes can be avoided.
 - Get complete clarity about the role of external advisers and how their individual inputs should be brought together into coherent advice.
 - Do not change the terms of the procurement part way through the process.
 - Do not go live until all issues between commissioners and providers are resolved.
 - NHS England and NHS Improvement should work better together, rather than regulating in organisational silos (outside the scope of this review).
14. The specification and the contract with South Coast Ambulance Service by necessity had to be prepared at short notice. Notwithstanding this the six lessons to be learned were incorporated into the design and subsequent remit of the Programme Board. The minutes of the meeting of the Programme Board show these were considered throughout the specification and transition period.

Status	Number	Observations
Incorporated	6	
Not applicable	1	This related to closer working between NHS England and NHS Improvement
Outstanding	0	
