RESOURCE MANAGEMENT DESCRIPTORS - RE1

Extant Ambulance Quality Indicators

https://easc.nhs.wales/asi

Ongoing Development - Exercise A

Ref	Care Standard	Ambulance Quality Indicators (AQIs) – Mapped as A=Activity R=Resources P=Performance wherever applicable	Updates Proposed from utilisation and experiences to date	Updates Proposed for Supporting shift towards Inverting the Triangle
Step 1 -	Help me choose			
PCPI	WAST must participate in citizen and community engagement events to minimise the use of the ambulance service as a first response for non-life threatening calls.			
PCP2	WAST must participate in service development initiatives at National, Regional (Alliance) and local events with other healthcare providers where there is a potential impact upon the future delivery of emergency ambulance services.			



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Step 2 -	Answer my call			
PCP3	WAST must answer all healthcare professional calls [non-999] promptly.			
PCP4	WAST must answer all 999 calls promptly.			
PCP5	WAST must ensure a procedure is in place to identify life threatening conditions with minimum delay.			
PCP6	WAST should ensure all appropriate non-life threatening calls are diverted to "hear and treat".			
PCP7	WAST must ensure a clinically appropriate responseto non serious, non-life threatening calls – "signposting" to the correct care option within NHS Wales ("hear & direct").			





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Step 3 -	Come to see me			
PCP8	WAST must ensure that the right resource(s) are dispatched to provide the right care and treatment as quickly as possible.			
PCP9	WAST must ensure a clinically appropriate ambulance response is dispatched with minimum delay to serious, non-life threatening calls.			
PCP10	WAST must ensure an emergency response is dispatched with minimum delay to immediate life threatening calls.			



RESOURCE MANAGEMENT DESCRIPTORS - REI

Ref	Care Standard	Ambulance Quality Indicators (AQIs) – Mapped as A=Activity R=Resources P=Performance wherever applicable	Updates Proposed from utilisation and experiences to date	Updates Proposed for Supporting shift towards Inverting the Triangle
Step 4 -	Step 4 - Give me treatment			
PCP11	Where a face to face assessment is required WAST must ensure all interventions adhere to best practice e.g. Joint Royal Colleges Ambulance Liaison Committee (JRCALC)			
PCP12	All patients determined by WAST not requiring conveyance are referred by WAST to the appropriate service and a record of the referral is left with the patient / family / carer / service.			



RESOURCE MANAGEMENT DESCRIPTORS - REI

Ref	Care Standard	Ambulance Quality Indicators (AQIs) – Mapped as A=Activity R=Resources P=Performance wherever applicable	Updates Proposed from utilisation and experiences to date	Updates Proposed for Supporting shift towards Inverting the Triangle
Step 5 -	Take me to hospital			
PCP13	WAST must only convey patients to A&E where no alternative (e.g. community-care or direct ward admission) is safe or available to meet the care needs of the patient.			
PCP14	WAST must ensure conveyance by EMS is only undertaken when the patient condition requires Advanced Life Support (ALS) or intervention / monitoring on route to hospital.			
PCP15	WAST must ensure that resources are available to respond to their next call without delay.			



Exercise B

Review of previous Resource Management descriptors to determine any updating & their future applicability.

Step 1 - HELP ME CHOOSE

S1 / R1 Direct Costs Associated with Partners in Health (PIH) Team

Step 2 – ANSWER MY CALL

- S2 / R1 Direct Costs Associated with EMS CCC at VPH
- S2 / R2 Direct Costs Associated with EMS Carmarthen
- S2 / R3 Direct Costs Associated with EMS North
- S2 / R4 Direct Costs Associated with Nursing Services
- S2 / R5 Sickness Figures (Based on hours lost when planned on roster)
- S2 / R5a EMS CCC at VPH
- S2 / R5b EMS Carmarthen
- S2 / R5c EMS North
- S2 / R6 Resource Unit Hours
- S2 / R6a EMS CCC at VPH
- S2 / R6b EMS CCC at Carmarthen
- S2 / R6c EMS North

Step 3 - COME TO SEE ME

- S3 / R1 Direct Costs Associated with EMS CCC at VPH
- S3 / R2 Direct Costs Associated with EMS Carmarthen
- S3 / R3 Direct Costs Associated with EMS North
- S3 / R4 Direct Costs Associated with Nursing Services
- S3 / R5 Sickness Figures (Based on hours lost when planned on roster)
- S3 / R4a EMS CCC at VPH
- S3 / R4b EMS Carmarthen
- S3 / R5c EMS North
- S3 / R6 Resource Unit Hours
- S3 / R6a EMS CCC at VPH
- S3 / R6b EMS CCC at Carmarthen
- S3 / R6c EMS North

Step 4 - GIVE ME TREATMENT

- S4 / R1 Direct Costs Associated with EMS Aneurin Bevan HoS
- S4 / R2 Direct Costs Associated with EMS Cwm Taf HoS
- S4 / R3 Direct Costs Associated with EMS Hywel Dda HoS
- S4 / R4 Direct Costs Associated with EMS Abertawe Bro Morganwg
- S4 / R5 Direct Costs Associated with EMS Betsi
- S4 / R6 Direct Costs Associated with EMS Cardiff and Vale
- S4 R7 Direct Costs Associated with EMS Powys





EMERGENCY AMBULANCE SERVICES

COLLABORATIVE COMMISSIONING FRAMEWORK AGREEMENT

REI – RESOURCE MANAGEMENT DESCRIPTORS - SCHEDULE VI JULY 2022

Step 4 - GIVE ME TREATMENT

S4 / R8 Sickness Figures (Based on hours lost when planned on roster)

S4 / R9 Resource Unit Hours - WAST Staff

S4 / R9a EMS - ABHB

S4 / R9b EMS - CTHB

S4 / R9c EMS - HDHB

S4 / R9D EMS – ABMHB

S4 / R9E EMS - Betsi

S4 / R9 EMS - CVHB

S4 / R9 – EMS Powys

S4 / R10 Resource Unit Hours - External Providers

S4 / R10a EMS – ABHB Private Ambulance Providers

S4 / R10b EMS - CTHB Private Ambulance Providers

S4 / R10c EMS - HDHB Private Ambulance Providers

S4 / R10d EMS – ABMHB Private Ambulance Providers

S4 / R10e EMS – Betsi Private Ambulance Providers

S4 / R10f EMS – CVHB Private Ambulance Providers

S4 / R10g EMS - Powys Private Ambulance Providers

Step 5 - TAKE ME TO HOSPITAL

S5 / R1 Direct Costs Associated with EMS Aneurin Bevan HoS

S5 / R2 Direct Costs Associated with EMS Cwm Taf HoS

S5 / R3 Direct Costs Associated with EMS Hywel Dda HoS

S5 / R4 Direct Costs Associated with EMS Abertawe Bro Morgannwg

S5 / R5 Direct Costs Associated with EMS Betsi

S5 / R6 Direct Costs Associated with EMS Cardiff and Vale

S5 / R7 Direct Costs Associated with EMS Powys

S5 / R8 Sickness Figures (Based on hours lost when planned on roster)

S5 / R9 Resource Unit Hours - WAST Staff

S5 / R9a EMS - ABHB

S5 / R9b EMS - CTHB

S5 / R9c EMS - HDHB

S5 / R9d EMS - ABMHB

S5 / R9e EMS - Betsi

S5 / R9f EMS - CVHB

S5 / R9g EMS - Powys

S5 / R10 Resource Unit Hours - External Providers

S5 / R10a EMS – ABHB Private Ambulance Providers Voluntary Sector Providers

S5 / A10b EMS - CTHB Private Ambulance Providers Voluntary Sector Providers

S5 / R10c EMS - HDHB Private Ambulance Providers Voluntary Sector Providers

S5 / R10d EMS - ABMHB Private Ambulance Providers Voluntary Sector Providers

S5 / R10e EMS - Betsi Private Ambulance Providers Voluntary Sector Providers

S5 / R10f EMS - CVHB Private Ambulance Providers Voluntary Sector Providers

S5 / R10g EMS - Powys Private Ambulance Providers Voluntary Sector Providers

S5 / R11 Hospital Delays



