



Northern Ireland Ambulance Service  
Health and Social Care Trust

**NIAS**

**ANNUAL QUALITY REPORT**

**2022/2023**

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# Foreword

On behalf of the Northern Ireland Ambulance Service (NIAS), I am pleased to share with you our Annual Quality Report for the year 2022-2023.



*During this year, Health and Social Care services across Northern Ireland and NIAS have faced many, well documented challenges, including the significant issue of ambulance handover delays which impacts on our response times in the community. Despite these challenges, our service and our staff have remained committed to delivering the highest possible standard and quality of care and treatment.*

*This report details the efforts and achievements of NIAS in relation to improving the quality of care and treatment during this time and I am pleased to share this with you. The report highlights our accomplishments, challenges and ongoing dedication to improvement and excellence. This report also explains that at times we have not provided care or treatment to the standard we would want to deliver and we are committed to learning from these times and working to improve going forward.*

*Through this report we will demonstrate how NIAS is striving to deliver the most responsive, safe, effective, caring and well led service that we can, through a sustained focus on quality and quality improvement.*

*These achievements have only been possible through the commitment of our staff, and I would like to take this opportunity to thank them for everything they do.*

*As an organisation NIAS recognises and values the contribution our patients (and their advocates) have made and will make, in helping us to develop and deliver high quality services. It is our hope that their voice and the very active role they have played, and will continue to play, is clear and evident in this report. As we move into the 2023-2024 year, this is an area we are planning to develop further, and our newly developed 'Involvement and Co-Production Strategy', 'Quality Strategy' and Patient Voice Forum will provide us with a clear and defined structure and roadmap to do this.*

*I look forward to 2023-2024 - we know we can expect challenges along the way, but we remain committed to doing our best, in a complex system, for our patients and staff and to ensuring that we continuously strive to deliver high quality care and treatment.*

NIAS Chief Executive  
Michael Bloomfield

A handwritten signature in black ink, appearing to be 'MB', written in a cursive style.



# **Introduction**

About the Northern Ireland  
Ambulance Service

# About the Northern Ireland Ambulance Service



# What does a 'typical' year look like in the Northern Ireland Ambulance Service

## In 2022-2023

We received 225,182 calls  
of which 176,517 resulted in an ambulance arriving on scene

12,793 calls were for immediately life-threatening conditions (Category 1)

93,383 calls were for serious but not immediately life-threatening conditions (Category 2)

32,280 calls were for not immediately life-threatening or serious conditions (Category 3)

We made 158,115 non-emergency journeys, taking people to and from hospital appointments or for routine treatment

## We currently have:

Circa 1,400 staff supported by 250 volunteer

first responders and almost 100 volunteer car service drivers 116 frontline, double-crewed emergency ambulances

43 rapid response ambulance cars and 115 non-emergency vehicles coordinated by one Emergency Control Room and

one Non-Emergency Control Room, across five operating divisions and out of 59 ambulance stations or deployment points

NIAS has an annual operating budget of circa £100m



Identifying the sickest quickest

Caring today, planning for tomorrow

Sending the right resource first time

Providing the best patient care

Strategy to Transform: 2020-2026

# NIAS





## Mission and Values

### Our Mission is:

To consistently show compassion, professionalism and respect to the patients we care for.

### Our Values:

We are committed to embedding the following shared HSC values in NIAS:

 <p><b>Working together</b></p> <p>We work together for the best outcome for people we care for and support. We work across HSC and with other external organisations and agencies, recognising that leadership is the responsibility of all.</p>	 <p><b>Excellence</b></p> <p>We commit to being the best we can be in our work, aiming to improve and develop services to achieve positive changes. We deliver safe, high quality, compassionate care and support.</p>	 <p><b>Openness &amp; Honesty</b></p> <p>We are open and honest with each other and act with integrity and candour.</p>	 <p><b>Compassion</b></p> <p>We are sensitive, caring, respectful and understanding towards those we care for and support and our colleagues. We listen carefully to others to better understand and take action to help them and ourselves.</p>
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### Our Goals:

The four organisational goals set out in our Strategic Plan are that:



*Our patients will feel professionally cared for, always with compassion and respect*

*Our staff will feel positive and proud to work for NIAS*

*Our stakeholders and partners will have confidence in us as a reliable provider at the centre of urgent and emergency care*

*Our communities will continue to value and trust us*

# What is an Annual Quality Report?

The Annual Quality Report is a document which brings together a meaningful summary of all of the activities that have occurred within NIAS during a given financial year which have contributed to the quality of care and service that our patients have experienced and that our staff have delivered.

'Quality' can be a hard concept to define. The Department of Health, Social Services and Public Safety (DHSSPS, 2011) set out a vision for 'quality' for Health and Social Care (HSC) which is helpful to guide us in our understanding of this in their 'Quality 2020'.

This strategy is underpinned by 5 strategic goals. The strategic goals are:

## 1. Transforming the Culture

This means creating a new and dynamic culture that is willing to embrace change, innovation and new thinking and which can contribute to a safer and more effective service. It requires strong leadership, widespread involvement and partnership-working by everyone.

## 2. Strengthening the workforce

Without doubt the people who work in health and social care (including volunteers and carers) are its greatest asset. It is vital therefore that every effort is made to equip them with the skills and knowledge they require, building on existing and emerging Human Resource strategies, to deliver the highest quality.

## 3. Measuring the Improvements

The delivery of continuous improvement lies at the heart of any system that aspires to excellence, particularly in the rapidly changing world of health and social care. In order to confirm that improvement is taking place we will need more reliable and accurate means to measure, value and report on quality improvement and outcomes.

## 4. Raising the standards

The service requires a coherent framework of robust and meaningful standards against which performance can be assessed. These already exist in some parts, but much more needs to be done, particularly involving service users, carers and families in the development, monitoring and reviewing of standards.

## 5. Integrating the care

Northern Ireland offers excellent opportunities to provide fully integrated services because of the organisational structure that combines health and social care and the relatively small population that it serves. However, integrated care should cross all sectoral and professional boundaries to benefit patients, clients and families.

This Annual Quality Report takes each of these strategic goals and uses them as a section title to explain what NIAS has been doing, and will be doing going forward, in relation to each of them.

As an organisation NIAS recognise and value the contribution of our staff and our patients (and their advocates) in helping us to develop and deliver high quality services, it is our hope that their voice and the active role that they have played and will continue to play is evident in this report.

In this Annual Quality Report we have also included an opening section about the impact of the COVID-19 pandemic during the period 2022-23. We have done this as during this time the virus and its management continued to significantly impact on our services, our patients and our staff.



# COVID-19

The COVID-19 Pandemic commenced in February 2020. When the virus first emerged it was novel and was associated with high levels of mortality. As the pandemic progressed systems and processes for managing the virus were developed and strengthened. A key turning point in the pandemic was the introduction of effective vaccines and treatments. Mass vaccination, immune protection derived from wild virus infection and viral mutation, in time, led to a reduction in the mortality associated with the virus.

For the reasons above during the period April 2022 to March 2023, COVID-19 began to be viewed as an endemic circulating respiratory virus. This change in status prompted a Health and Social Care (HSC) wide reset, whereby it was accepted that COVID-19 would need to be encompassed into a more 'business as usual' operating model to stabilise and normalise service delivery going forward.

A number of key changes to how the virus was managed during this time arose. These resulted in changes to patient care provision, for example changes to requirements for physical distancing, changes to periods for isolation when symptomatic of the virus, changes to the management and definitions of close contacts of the virus, risk assessment of patient likelihood of infection and matched use of Personal Protective Equipment (PPE) (not exhaustive).

NIAS continued to support staff in relation to COVID -19 during this period. At various points in this timeline COVID-19 guidance change and

NIAS supported staff with updated information and guidance on the required changes and also to transition to the updated guidance.

In line with government advice and guidance NIAS ceased the testing of symptomatic staff and family members at the end of May 2022. Over the next months, as the prevalence of COVID-19 reduced and requests for advice lessened, the decision was made to stand down the remainder of the in house Covid-19 Testing services including the Contact Tracing team from the 1st November 2023. This was a welcome relief and appeared to mark the emergence from the pandemic, as an organisation though we were confident that should the need arise that these services could be stood again.

Derriaghy station, which had been being used to undertake staff COVID-19 testing was decommissioned as the Covid Test centre and has since been returned to operational status. Over the period of the pandemic NIAS dealt with almost 7000 enquiries from our staff about COVID-19 and provided support, advice and interventions for them and their families.

The graphs below demonstrate the fall off in enquiries and positive test results during this time and help to explain why these services were withdrawn in November 2022. After this time staff enquiries were and continue to be managed through their managers, through the NIAS Resource Management Centre or through the Trust's Infection Prevention and Control (IPC) team as appropriate and dependant on the nature of the query.

Staff reporting Covid-19 positive  
01 April 2022 - 30 November 2022



Covid related Enquiries  
01 April 2022 - 30 November 2022



NIAS are continuing to work with HSC partners across Northern Ireland to ensure that services are restored post pandemic and to continue to deliver high quality clinical and experience outcomes for our patients and for our staff. We have also learned so much during this time

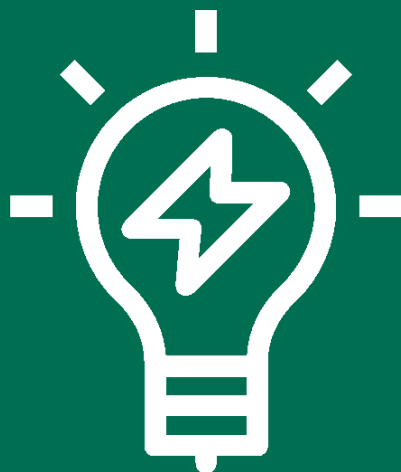
and this learning will now be taken forward to inform services going forward and to inform readiness should there be further pandemics. The NIAS alongside all HSC Trusts in Northern Ireland and across the United Kingdom (UK) are participating in the UK COVID-19 Inquiry. This

inquiry has been set up to examine the UK's response to and impact of the COVID-19 pandemic and to learn lessons for the future. It is being led by the Rt Hon Baroness Heather Hallett. It is anticipated that this will be a lengthy process which may extend over a number of years.



# Goal 1

Transforming the Culture



# Complaints and Compliments:

## Facts & Figures

### 2022/2023

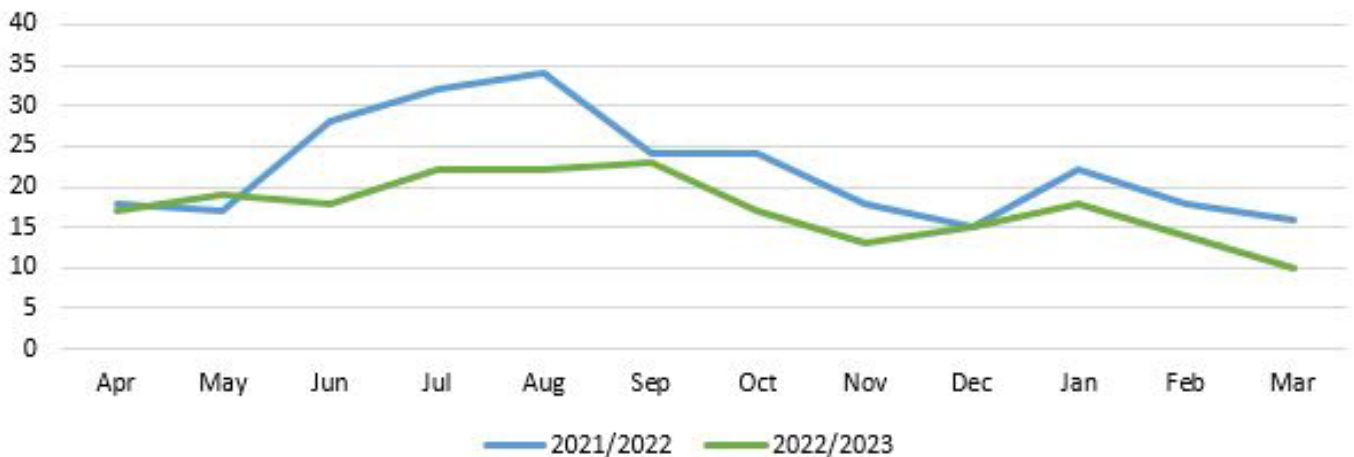
NIAS received **225,182** (12% increase on previous year) emergency calls, attended **176,517** (1.6% decrease) calls and completed **158,289** (7.8% increase) non-emergency journeys.

- **208** complaints were received. This represents a complaint rate of **0.06%** of all (334,806) emergency and non-emergency ambulance attendances, and **0.09%** of all emergency 999 calls received.
- **99%** of complaints were acknowledged within 2 working days.
- **278** complaints were closed.
- **36%** (101) of complaints were responded to within 20 working days.
- The top three issues of complaint were: 1) Delays in emergency ambulance response; 2) Quality of Treatment & Care; and, 3) Staff Attitude/Behaviour
- **406** compliments were received.

## Complaints this Year

During 2022/2023, the Trust received **208** complaints, which is a decrease from the previous year's total of **266**.

Complaints Received 21/22 vs 22/23



With the exceptions of May and December 2022, the graph above shows a consistent decrease in complaints received month on month when compared to the previous year.

Regrettably, challenges with our performance in relation to response times continue. This is likely to remain challenging until the Clinical Response Model implemented in NIAS in November 2019 is fully resourced. Additional impact is also being felt as a result of reduced operational capacity, this is caused by protracted turnaround times of emergency

ambulances at Emergency Departments and consequent unavailability of these same ambulances and staff to respond to callers in the community.

Nonetheless, the most notable decrease in complaints received relates to a reduction in concerns regarding delays in the provision of an emergency ambulance. The reason for the reduction in this category is unknown but could be due to increased public awareness of the pressures across the NHS system.

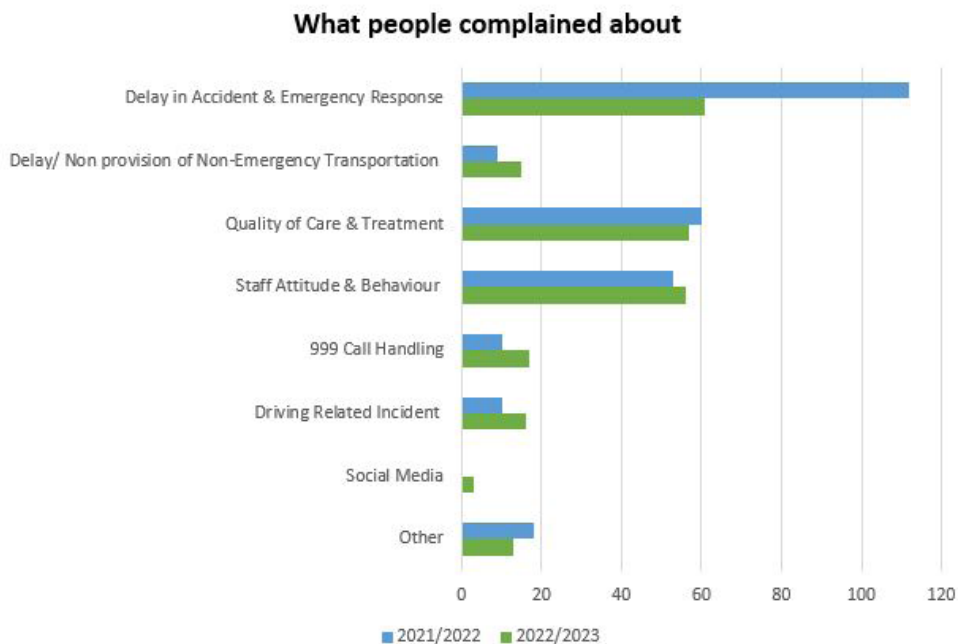
## What did people complain about?

Some complaints are multifaceted which results in a higher number of concerns (238) recorded compared to the actual number of complaints received (208). The chart below shows what people complained about during 2022/2023 compared with the previous year.

The top three areas of concern raised in the past year were: Delay in Accident & Emergency Response (61); Quality of Treatment & Care (57), and Staff Attitude & Behaviour (56). These three themes remain unchanged from 2021/22, however there were more complaints received in this year 2022/23 (n=56) about Staff Attitude and Behaviour than were received in 2021/22 (n=53)

The most notable change seen was the decrease in complaints related to delays in accident and emergency ambulance response from 112 in 2021/22, to 61 during 2022/23.

Other notable changes during 2022/23 include an increase in both driving related concerns and concerns relating to 999 call handling as illustrated in the below chart.

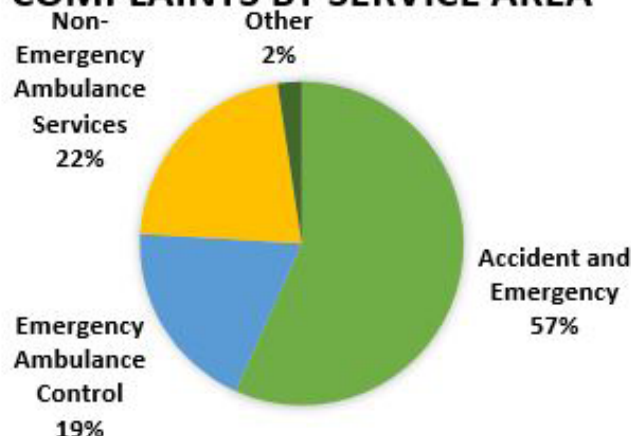


## Service Area of Complaints:

This chart shows the breakdown of the complaints received for 2022/2023 by service area.

Of the 208 complaints received by the Trust, 57% (118) related to Accident and Emergency services; 19% (40) related to Emergency Ambulance Control services, such as call handling and call categorisation; 22% (45) related to non-emergency ambulance services, used to transport patients to appointments and transfers between hospitals. The remaining 2% (5) related to other speciality services within the Trust.

### COMPLAINTS BY SERVICE AREA



## Timeliness of our Response to Complaints:

99% of all complaints were acknowledged within the target of 2 working days. The table below details the timeliness of our response to complaints received during 2021/2022 and 2022/2023 where N is the number of complaints received. As of 14 July 2023, 2 complaints received during 2022/2023 remained open.

<b>Timeliness of Closed Complaints</b>	<b>Performance in 21/22 (n=266)</b>	<b>Performance in 22/23 (n=208)</b>
% of complaints closed within 20 working day target	17%	36%
% of complaints that took between 20 and 40 days to close	9%	10%
% of complaints that took over 40 days to close	55%	54%
<b>Timeliness of open cases</b>		
Average number of days cases open at 9 August 2022	187 working days	45 days
<b>Reopened Cases</b>		
% of closed cases reopened	2%	3%

NIAS, along with the other Health and Social Care trusts, has experienced system wide pressures that created challenges for the timeliness of completing complaint investigations. Whilst NIAS saw the number of complaints that took over 40 working days decrease from its 2021/22 position, the Trust remains committed to focusing on the quality of its complaints handling processes as well as improving the timeliness of resolving these complaints.

## If People are dissatisfied:

Sometimes people are not happy with the outcome of the investigation into their complaint. We encourage people to let us know if they are unhappy, and we consider other options to attempt to resolve their concerns. We routinely offer to meet complainants, as this allows the opportunity for more detailed discussions, face-to-face. We also advise complainants of the free confidential advice and advocacy support offered by the Patient Client Council.

## Ombudsman:

For those people who remained dissatisfied, they had the option to approach the Northern Ireland Public Services Ombudsman (NIPSO) directly to undertake an independent investigation of the Trust's complaints handling process. During 2022/2023, one complaint was escalated to NIPSO which was reviewed and not accepted for investigation.

## Complaints Training:

The Trust provides comprehensive complaints handling training to a wide variety of management staff in the form of both online e-learning and supportive practical training sessions.

All staff employed by NIAS are required to undertake mandatory training in Complaints Awareness every three years. During 2022/2023, 502 of our staff completed this course, all achieving a 100% pass rate.

The online course is an introduction to the issue of handling complaints and basic customer care. It is completed as part of a new staff member's induction process and as refresher training for existing staff on a 3-year rolling basis. More recently, the Trust have provided regular complaints awareness training for operational managers required to undertake complaint investigations that focuses on the practical 'how to' elements of the complaints procedure.

## Learning from Complaints:

We value complaints so that we can learn lessons and improve our services. We use this information to feed back to patients and staff on the changes and improvements made.

Complaints are discussed with the staff concerned and often the issues are brought to Trust meetings for discussion as to how services can be improved. The learning from complaints (and compliments) is also shared at the Trust's quarterly Learning Outcomes Review Group as well as the Trust's Education & Learning Development Group.

A number of improvements have been put in place during 2022/2023 following concerns brought to the Trust. Here are some examples:

## Emergency Ambulance Control:

- Role of the Mental Health Street Triage Team (MATT) in the South Eastern and Belfast HSC Trust areas provided to the clinical hub and Duty Control Managers.
- Data from Land and Property Services updated to ensure the Gazetteer (the geographical directory used in ambulance control systems) is accurate.
- Automated defibrillator range standardised for all community defibrillators.
- Learning shared to ensure all key information is recorded and forwarded to crews through their Mobile Data Terminal (MDT) to assist with their response.
- Learning shared to ensure crews are informed when an emergency call originates from a Healthcare Professional (HCP) call as this will form part of their assessment and management of the call.

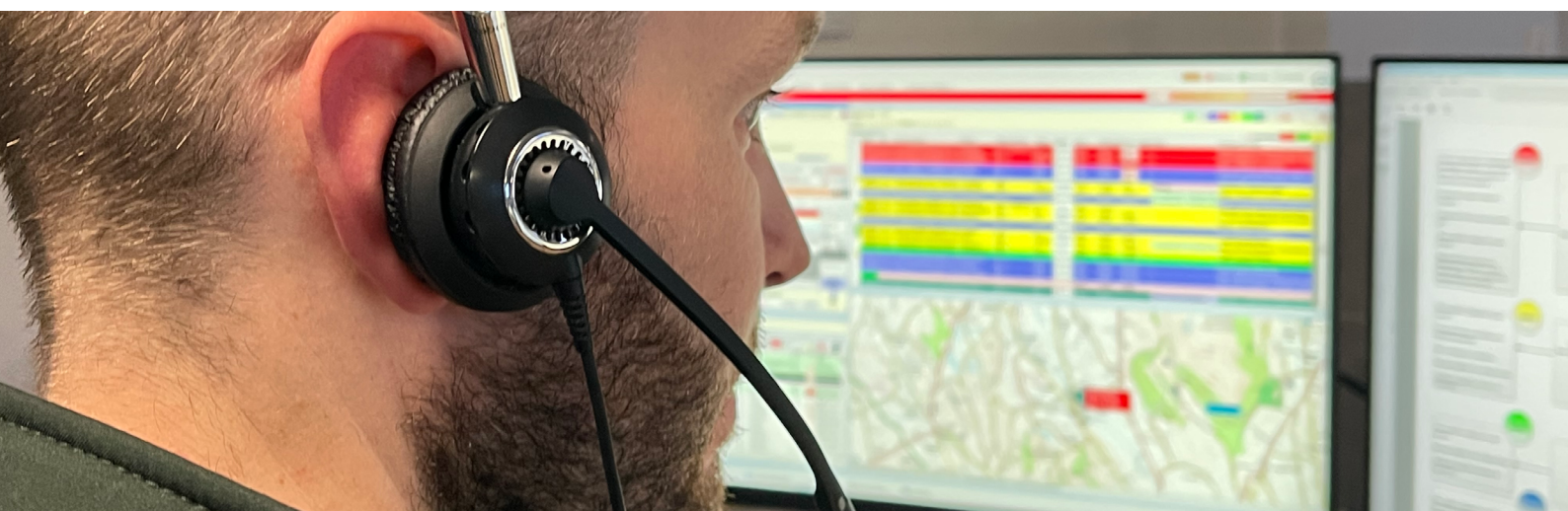
## Accident & Emergency Operations:

- Medicines memo reinforcing the NIAS Policy and Procedures for the Management of Medicines.
- Learning article in relation to the management of pregnancy related emergency calls.
- Vital signs article regarding assessment of patients with learning difficulties

## Patient Care Service:

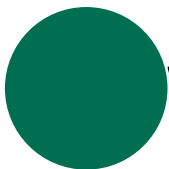
- Learning for independent ambulance service provider regarding the safe handling of patient's medication.
- Ensuring restraints for securing items in the back of Patient Care Service (PCS) vehicles are present in all vehicles regionally.
- Independent ambulance service provider's social media policy updated.
- Reminder to independent providers regarding performance requirements.

In addition to this, staff who have received attitudinal complaints have undertaken reflective practices and where appropriate, received counselling and further training, in order to prevent any reoccurrence. Where learning has been identified in relation to their clinical practice support has been provided by our Clinical Education Department.









# Serious Adverse Incidents:

## Serious Adverse Incident Reviews

NIAS are dedicated to improving processes which identify any areas of learning and improvement within the service in order to continually grow and develop. It is essential that a proactive and effective incident recording, reporting and management process is implemented to ensure learning is identified. NIAS are continually developing the Datix system to encourage all staff to report incidents with ease. NIAS actively encourages both the reporting of incidents and the open review of incidents with the staff involved, by promoting a just culture which is focussed on a consistent, fair, educational methodology, with a 'no blame' approach. It is a vital process which enables us to capture, identify, address and share learning and can help to reduce risk and improve our service.

Incidents are reviewed and learning is identified and shared at our Rapid Review Group (RRG). The Rapid Review Group (RRG) meets weekly and identifies any urgent learning from serious incidents for sharing across the Trust and/or

regionally.

The Trust is required to report incidents that meet the criteria of a "serious adverse incident" (SAI) to the Strategic Planning and Performance Group (SPPG) within the Department of Health (DoH), formerly Health & Social Care Board (HSCB).

An SAI is an incident which meets one or more of a list of specific criteria e.g. unexpected / unexplained death or serious injury or an unexpected serious risk. They may also relate to risks to maintain business continuity or serious incidents of public interest or concern.

Patients/service users and/or their families are advised when an incident relevant to them is to be reviewed as a SAI to ensure they are involved in the review as appropriate. This engagement remains a high priority and an area of renewed focus for NIAS to ensure that service users and/or their families are actively involved in the review process and frequently updated on the progress of the review.

### Facts & Figures:

NIAS reviewed 135 potential serious adverse incidents at the weekly Rapid Review Group during 2022/23. This represents a 15% decrease on the previous reporting period of 2021/2022.

From the 135 cases reviewed, 40 incidents met the criteria for reporting to SPPG as Serious Adverse Incidents. This represents a 33% increase on the previous reporting period of 2021/2022. It is felt that sustained pressures within the service such as delayed ED turnaround, delayed response and ongoing resourcing issues have impacted this increase. A small number of SAI's relating to clinical incidents have also been identified within 2022/2023. The largest increase in the themes of SAI related to delays to call answering/ despatch.

The top categories of incidents affecting patients and service users in 2022/2023 are reflected and compared within with 2021/2022 in Figure 1:

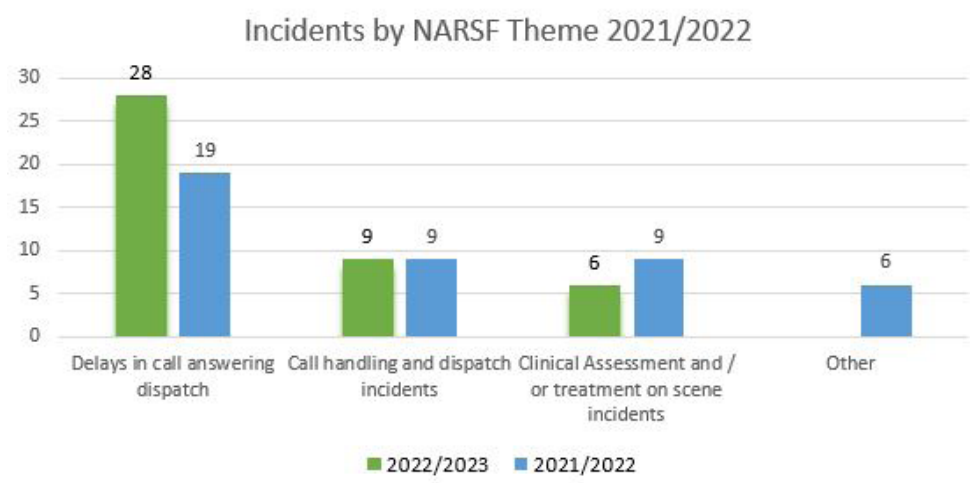


Figure 1.\*NB – Some incidents may be categorised with more than one theme

## SAI Training:

Twenty NIAS staff involved in the review of SAI's attended a 1 day SAI training programme provided by the SAI team in conjunction with representatives from the HSC Leadership Centre in March & April 2023. Staff who attended included Divisional Station Officers, Divisional Area Managers and Duty Control Managers from Emergency Ambulance Control.

The training was very well received and provided a range of review tools and case studies to inform learning around review techniques. The course programme covered the following areas:

- Family/Patient Engagement techniques including the sensitive delivery of difficult information
- Staff Engagement techniques utilising Just Culture and the Supporting Staff Policy
- Report Compilation including fact finding, identifying causal and contributory factors, identification of learning and formulation of recommendations.

From staff feedback from the session it was noted that it was very practical, detailed, informative and provided techniques and tools required to conduct a robust, open and honest review. There was also very positive feedback around the inclusion of representatives from the HSC Leadership Centre as they brought a wealth of expertise and knowledge from their wide ranging careers within the HSC Trusts.

## How the Organisation Learns:

The Trust seeks to learn continually from both good practices, which we wish to see replicated throughout the organisation, and from instances when the service and care we provide to our service users falls below the standard we aim to deliver.

The dissemination of learning following a SAI review is core to reducing the risk of re-occurrence and to ensure shared lessons are embedded in practice and maximise the safety and quality of care provided.

The Trust utilises the following systems for sharing learning from SAIs:-

- Learning is shared with the relevant local area where the incident occurred and with staff involved following completion of a SAI through their local line management.
- Learning is shared Trust wide (if appropriate) through the Rapid Review Group (RRG). RRG is attended by representatives from all the service Directorates including the Directors who decide how best to share the learning which may include through specific forums/groups.
- It is the responsibility of the SPPG to share any regional learning from the final report across the region.
- Learning is also shared generally through a number of mediums including our Vital Signs Newsletter, Daily Bulletin, Learning Outcomes Group and Learning from Practice updates.

## Thematic Review:

NIAS in conjunction with Clinical Leadership Solutions, commenced a Thematic Review of adverse incidents in 2022/2023. The report details the thematic review of those incidents and seeks to provide assurance of actions taken and to identify further learning and improvement through the recognition of causal and contributory factors.

It has been recognised by the National Ambulance Risk & Safety Forum that December 2022 was the most significant on record for all UK ambulance services in the context of delayed response.

The report will be completed and published in the near future.

## Going Forward:

NIAS recognise the impact that Serious Adverse Incidents have on mental and physical wellbeing of service users, their families and the staff involved in incidents. NIAS will continue to promote and further embed an open, learning and just culture that supports the reporting of adverse incidents including those identified as Serious Adverse incidents.

Training will continue to be delivered to enhance and develop the skills of staff participating in SAI reviews.

NIAS will continue to work with SPPG to improve timeframes around reporting.



# Involvement and Co-Production:



NIAS values the lived experience and involvement of service users, carers, communities, and staff in influencing change and improvement. The Trust also recognises that this involvement can build a collective understanding of the need for and benefits of the ongoing transformation of its services. During 2022 – 2023, NIAS began developing an Involvement and Co-production Strategy to clearly define how it will:

- Use lived experience data both to identify areas of excellence and to drive service improvement.
- Create partnership working opportunities which enable service users, carers, communities, and staff to influence decision making and goal setting.
- Empower service users, carers, communities, and staff to design solutions which enable better outcomes for those who use our services.
- Measure the improved outcomes for staff, service users, carers and communities and share this learning across the Trust and with relevant stakeholders.

As part of the consultation phase of the strategy development, NIAS hosted focus groups and workshops and conducted online surveys with service users, carers and communities of interest seeking their thoughts on how it could develop its Patient Client Experience (PCE) and Personal and Public Involvement (PPI) processes and opportunities into a more comprehensive and cohesive Co-production model. It also conducted an online survey with staff to discover what supports they needed to work in partnership with service users, carers and communities in designing and improving our services. 47 service users and carers and 53 members of staff contributed to the development of the Involvement and Co-production strategy and NIAS are grateful to the Cedar Foundation, Disability Action, AGE NI, Diabetes UK NI, The Rainbow Project and NHSCT for their support with sharing our online survey with their service user groups and for participating in workshops and focus groups.

The Strategy will be launched during 23/24 and will set out an ambitious programme for Involvement and Co-Production, this will be supported by appropriate and effective assurance and governance structures.

## 10,000 More Voices:

The project sought to:

- Understand the lived experience of people who engage with NIAS during an urgent or emergency presentation
- Explore experience in relation to the pathways available through NIAS
- Identify good practice which should be enabled across the whole system
- Identify areas for improvement, embedding the principles of coproduction and informing actions which adopt quality improvement methodology.

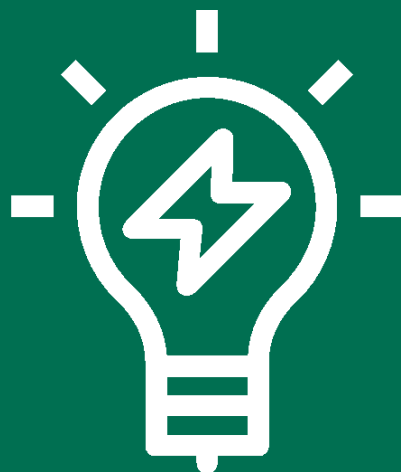


The project closed on 31st of March 2023 with 141 submissions. NIAS and the Regional 10,000 More Voices team are currently analysing the enhanced qualitative information to identify themes, and recommendations and actions to be included into a service improvement plan. The full report will be published in 2023/24.



## Goal 2

Strengthening the  
Workforce





# Strengthening the Workforce

Underpinning the strategic goal of 'strengthening the workforce' are the objectives of:

1. Provide the right education, training and support to deliver high quality service.
2. Develop leadership skills at all levels and empower staff to take decisions and make changes.

These are important as no matter how good our systems and procedures are, they all rely on staff who are motivated, skilled and trained to implement them. This is fundamental to the delivery of safe and effective services. Strong leadership is also key to effecting change and we believe that giving staff autonomy to take more decisions locally, provided this is balanced with clear accountability, is the best way to secure improved quality and productivity.

There are a number of ways to know that we are 'strengthening our workforce' and during the 22/23 period NIAS have focused on the following:

- Increasing levels of training and competence amongst our staff
- Increasing leadership capability and capacity by providing access to high quality leadership training opportunities
- Appointment of senior paramedical staff to leadership roles to support the organisation, teams and individuals to be involved in making their work safer, more effective and patient/client centred.

# Clinical Education

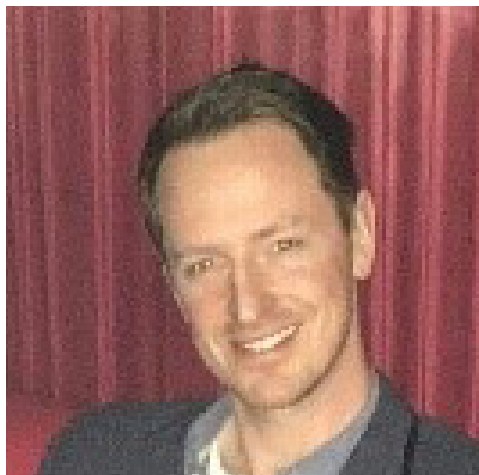
Despite widespread healthcare and ambulance service pressures in 2022 /2023, the clinical education department, formally known as the Regional Ambulance Clinical Training Centre, continued to develop and modernise towards the goal of delivering high quality professional and clinical education for all patient facing staff.

The department expanded with the addition of 3 new members.



## **Emma Boylan - Consultant Paramedic for Clinical Education and Standards**

Emma has been with NIAS since 2004, working in a variety of patient facing roles as well as other roles within the education department, serious incidents and clinical service improvement. Education has always been the corner stone of Emma's clinical practice and career completing her Master's in Practice Development (2017) and Post Graduate Certificate in Education for Health Professionals (2020).



## **Paul Corns - Consultant Paramedic for Clinical Education**

Paul joined NIAS in January 2023 having most recently worked in the Higher Education sector within Northern Ireland and England. Prior to that Paul worked in patient facing roles in an acute hospital setting in the Midlands, South East Coast Ambulance and London Ambulance Services. Paul has an MA in Clinical Education from Kings College London, and holds Postgraduate Certificates in Education and a Bachelor's Degree in Human Biology. Paul hopes to bring his experience of delivering high quality learning in Higher Education settings to play his part in continuing to rejuvenate and expand the education within NIAS.



## **Phil Lockhart - Clinical Education and Standards Manager**

Phil joined the Northern Ireland Ambulance Service in 2017 after moving from a lecturing post within Teesside University to become an operational manager within Belfast Division. Having spent five years in operations, he has recently moved to the Clinical Education Team where he continues in his area of interest of prehospital care and education

The Clinical education Department started to deliver more face-to-face clinical education as COVID-19 restrictions began to ease, which was welcomed by both tutors and student's alike, and divisional education teams were able to deliver more face-to-face CPD opportunities.

## Associate Ambulance Practitioner (AAP) programme:

In April 22 AAP 13 Cohort B completed their emergency driving qualification (L3CERAD). May 22 saw the commencement of AAP 14 with 21 students successfully completing the academic aspect of their programme by October 22 and continuing to their practice placement element.

## Paramedic Programme:

NIAS have been providing paramedic education in Northern Ireland for over 30 years. This year the final cohort of the Foundation Degree in Science in Paramedic Studies (FdSc) programme, delivered in partnership with Ulster University concluded and marked the end of an era for NIAS. The final cohort of 36 students completed the FdSc programme and gaining entry to the Health and Care Professions Council register. A 12 month programme of support and clinical supervision was developed to empower these individuals to develop their practice and demonstrate their transition from novice to expert. NIAS will continue to be involved in the support of paramedic students from academic programmes through provision of practice placement opportunities.

## Newly Qualified Paramedic (NQP):

In line with national principles, NIAS devised and delivered a structured programme to integrate and support NQPs into ambulance service workplace. In total nine NQPs joined NIAS, all at various stages on their NQP journey in 22/23.

## Induction of Qualified Staff:

Between September 22 and January 23 NIAS welcomed 19 externally qualified paramedics. These staff undertook local induction and orientation programmes to enable them to integrate into the workforce.

## Continuing Clinical Education (CCE):

The education team continued to deliver the CCE training days across 22/23 with a further 149 staff updated in the REACH devices. Ambulance Care Assistant (ACA) CCE days were also provided, ensuring that all ACA staff had the opportunity to participate in this education day.

## 'Out of Hospital Cardiac Arrest Masterclass':

As part of a wider programme of improvement, the education team, in collaboration with NIAS Clinical Service Improvement leads, Community Resuscitation team and Research lead, developed the syllabus for an 'Out of Hospital Cardiac Arrest Masterclass'. This was delivered to 36 of the key clinical educators in NIAS and this will continue to be delivered to all patient facing staff over the next 10 months, as part of CCE.



## Continual Professional Development (CPD):

Several CPD events were delivered throughout the year 22/23. CPD events, in collaboration with HSC Trusts, focussed on learning & developing knowledge of existing patient care pathways that NIAS clinicians are able to directly refer patients into e.g., Regional Hospital at Home teams. The impact of these CPD events were demonstrated in the increasing number of referrals made by NIAS clinicians on these specific care pathways and the number of patients accessing appropriate & timely care, who may have otherwise presented at the emergency department.

Education team development was also a focus of 22/23 with four clinical training officers completing their Diploma in Emergency Driving Instruction qualification (DERADI).

There were a number of 'Moving People Train the Trainer' courses provided with a total of 24 of the education team and four individuals from the other departments successfully completing this qualification. In addition, update training for existing Moving People Instructors were provided with a total of 13 education team staff completing this. This enables the education team to provide safe and appropriate instruction of manual handling principles and techniques to all staff.

Two 'Conflict resolution Train the Trainer' courses were provided and a total of 10 from the education team successfully completed these. This enables the education team to provide operational staff with the knowledge & skills to deescalate violent and aggressive incidents that can occur as they attempt to provide care in all of our communities.

Equipment related 'Train the Trainer' courses were provided ensuring that a further 26 members of the education team were able to provide expert instruction in new equipment that is essential in supporting operational staff to deliver safe and efficient care.

In conjunction the Health and Well Being team, three clinical support officers completed the Applied Suicide Intervention Skills Training (ASIST) train the trainer course, providing a vital resource to support the ongoing focus on staff well-being and support.



# Infection, Prevention and Control:

## Mandatory training (E-learning)

**Level one IPC: KPI – Standard, 100% of all Non-Clinical Staff to undertake Level 1 IPC E-learning once every 3 years**

Roll out of this program began in Jan 2018. From 1st of Jan 2018 to the 31st of March 2023, 1,196 staff have undertaken IPC Level 1 E-learning within NIAS. There are currently 469 staff in NIAS who this training would apply to.

Year	Number of Staff
Jan 2018 – March 2019	125
April 2019- March 2020	122
April 2020 - March 2021	276
April 2021 - March 2022	402
April 2022 - March 2023	271
Total	1,196



**Level Two IPC: KPI – Standard, 100% of all Clinical Staff to undertake Level 2 IPC E-learning once every 2 years**

Roll out of this program began in May 2019. From May 2019 to 31st of March 2023, 1,293 staff have undertaken IPC Level 2 E-learning within NIAS. There are currently 1083 staff in NIAS who this training would apply to.

Year	Number of Staff
May 2019 - March 2020	603
April 2020 - March 2021	248
April 2021 - March 2022	156
April 2022 - March 2023	286
Total	1,293



**Antiseptic Non TouchTechnique: KPI – Standard, 100% of all Clinical Staff to undertake ANTT E-Learning every 2 years. This includes all staff who undertake clinical procedures, paramedics and EMTs. There are currently 781 staff in NIAS who this training would apply to.**

Roll out of this program began in April 2021. From April 2021 to 31st of March 2022, 572 staff have undertaken ANTT E-learning within NIAS. There are currently 781 staff in NIAS who this training would apply to.

<b>Year</b>	<b>Number of Staff</b>
April 2021 - March 2022	575
April 2022 - March 2023	373
Total	948

# Human Resources and Organisational Development (HR & OD):

## Staff Development:

NIAS continues to support staff development through their 'Assistance to study' programme. This year 56 staff successfully completed programmes in further education, personal development and conferences.

- MSc Quality Improvement & Patient Safety
- MSc Developing Practice in Healthcare (DPHC)
- BSc (Hons) Paramedic: Practice Development (Top Up)
- BSc (Hons) Paramedic Practice Development
- Level 7 CPD Violence Prevention. Reduction & Public Health.
- ILM Manual Handling Instructors Course
- QA Level 3 Award in Education and Training
- BCI Policy and Programme
- PRINCE2 Foundation
- London Trauma Conference 2022
- NHS Complaints Handling Conference
- RCEM - Pre- Hospital Emergency Medicine Event
- NIHR Emergency Care Incubator Symposium
- UX Training
- Infection Prevention & Control Conference
- Emergency Medical Retrieval Service – Retrieval 2023
- Managing Successful Programmes Foundation
- Interview Skills Band 7 and below – Zoom Virtual
- NICON 22
- ALF Conference

## Health and Social Care Leadership Centre

We had a number staff complete development courses through The Leadership Centre for the period April 2022 - March 2023. These courses included:

- MSc Business Improvement
- PG Dip HSC Management
- Accelerated Management Development Programme
- Aspire Leadership programme



## Corporate Induction:

Since April 2022, we have welcomed 66 new staff members to NIAS through our corporate induction days. Corporate induction has been delivered using a blended approach utilising, e-learning, ZOOM and self-directed study.



# LearnHSCNI

*Coming Soon*

A new Regional Learning Management System is coming to HSCNI in Spring 2023!



## Mandatory Training (e-learning):

The Learning and Development team manage the eLearning site which hosts our mandatory e learning programmes. The team supports subject experts in developing new engaging programmes to meet the statutory duties of the Trust.

The team have been involved in the regional project to implement the new HSC Learning Management System (LMS).

The LMS is intended to improve the learner experience by being more accessible, user friendly, and intuitive. It will also allow

managers to see at a glance where team members are on their learning journey and assign relevant training activities to individuals and teams. Instead of having fragmented platforms, systems, apps and formats for training within organisations this will be our one stop shop for all learning activities. The LMS was partially rolled out in 22/23 and full roll out is expected in 23/24. The system will enable individuals to book onto and undertake the mandatory training that is relevant to them and will also enable managers to look at training compliance across their teams and for organisations to look across a whole organisation.

## Work experience & student placements:

NIAS receives requests from students exploring opportunities for work related experience & placements. As a consequence of COVID-19, 'in person' Work Experience Placement (WEP) activity was stood down across the HSCNI.

However, it has now been agreed by the HSC Regional OD Network, that resumption of 'in person' WEP's will be the responsibility of individual HSC Trusts.

Applicants were contacted and whilst many had secured alternative placements we worked with the HSC Regional network to develop a scheme that piloted opportunities for WEP within NIAS. These departments included Pharmacy, IT, organisational development and a visit to the HEMS base.

Feedback from students was positive and all thoroughly enjoyed their time with NIAS. Northern Ireland and UK AHP Awards

The Advancing Healthcare Awards Northern Ireland ceremony was held in Belfast at the Stormont Hotel on 24 November, with 70 entries across 8 different categories, the Complex Case Team were a 'top 3' finalist in the NI Advancing Healthcare 'Award for Service Improvement' in November 2022.

## Health and Well Being:

In conjunction the Health and Well Being team, three clinical support officers completed the Applied Suicide Intervention Skills Training (ASIST) train the trainer course, providing a vital resource to support the ongoing focus on staff well-being and support. 17 colleagues gained training to deliver suicide prevention SafeTALK they have delivered the training to almost 100 colleagues in the first year of the programme to increase the number of NIAS staff who are suicide alert. A further 17 colleagues also completed SafeTALK train the trainer and delivered SafeTALK to 78 staff across teams including to all AAP and PCS students. The capacity of our peer support programme was increased by 55% when 18 colleagues completed Critical Incident Stress Management training to provide support following incidents to staff.

**Promoting compassionate approaches** to caring for colleagues is as central to the health and wellbeing and culture programme as it is to patient care. The Compassionate Peer Relationships (CPR) programme developed and delivered by Dr Sarah Meekin developed capacity for the approach among line managers. A bespoke leadership programme with the Leadership Centre, that included a focus on compassionate leadership, supported this further. NIAS worked with colleagues in the Western Health and Social Care trust to host Dr Deborah Lee to share her expertise and experience of using a compassionate approach to improve staff wellbeing and patient outcomes. Over 200 colleagues across HSC attended the for the webinar or have accessed he webinar showing the interest in Dr Lee's research and practice at Berkshire Healthcare NHS Trust and the positive impact the approach has had over four years. Evaluation of the intervention showed that 100% of participants intended to use the information in the webinar and 67% wanted to see a compassionate leadership approach embedded across their trust.

### 1. What percentage of the information was new to you? (Please tick)

[More Details](#)

[Insights](#)

100%	7
75%	21
50%	33
25%	14
0%	0

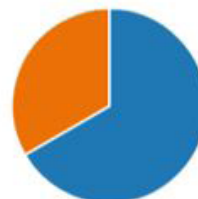


### 2. How likely are you to use the webinar information? (Please tick)

[More Details](#)

[Insights](#)

Very Likely	50
Likely	25
Not Likely	0



Blossoms at Larne Lough (BLL) provides a structured to individuals experiencing mental health problems (including stress, anxiety, depression, PTSD) with the aim to improve their health and wellbeing.

Compassionate approaches to wellbeing continue to be promoted through interventions such as the 8-week horticultural therapy programme at Blossoms at Larne Lough. 29 NIAS staff were referred to the programme from peer support.

Participants who presented as in moderate/severe and severe distress experienced the greatest improvement.

# Operations:

## Station Officers:

Operations welcomed eight new station officers to their team. Along with their existing colleagues across the management team, bespoke training and education was delivered to this cohort across a range of areas including; grievance, absence management, investigations, performance management and financial management.

## Welfare Hub at Antrim Hospital:

A project has been ongoing to install a bespoke welfare hub at Antrim Emergency Department. This is a two-storey modular building that will provide welfare facilities for crews and office facilities for Vehicle cleaning operative and the Hospital Liaison Officers. The hub is in its final stages of commissioning and plans to be operational within the early part of 23/24



## Coleraine Ambulance Station:

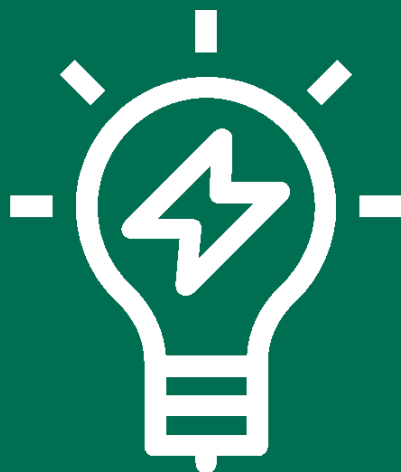
A new station was commissioned on the same grounds as the former Coleraine Ambulance Station. The new station offers improved staff accommodation in addition to 'make ready facilities' for the vehicle cleaning operatives.





## Goal 3

Measuring the Improvements







# Measuring the Improvements

Underpinning the strategic goal of 'measuring the improvements' are the objectives of:

1. Improve outcome measurement and report on progress for safety effectiveness and the patient/client experience.
2. Promote the use of accredited improvement techniques and ensure that there is sufficient capacity and capability within the HSC to use them effectively.

These are important as safe, effective treatment and a good experience of the care received, lies at the heart of a high quality service. We need to compile good baseline data and be able to measure that this is happening and to let everyone have this information in as accessible a way as possible. Within the large and complex health and social care system there is always scope for improvement. To achieve best outcomes it is important to review what happens and look for improvements with the aid of skilfully applied accredited techniques.

There are a number of ways to know that we are 'measuring the improvement' and during the 22/23 period NIAS have focused on the following:

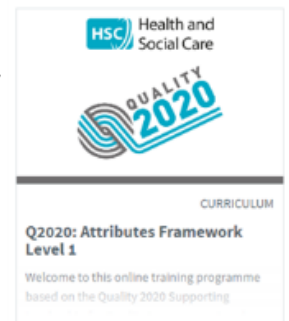
- Strategically targeting key services which contribute to the patient safety agenda to upskill their leaders in QI methodology, for example Infection Prevention and Control (IPC) and Environmental and Vehicle Cleanliness (EVC)
- Ensuring and facilitating access to level 1, 2 and level 3 QI programmes for staff across the service
- Developing a bespoke quality strategy for NIAS with specific and measurable outcomes
- Undertaking a range of QI projects designed to reduce harm, for example work in relation to patients deteriorating in the back of ambulances, management of falls and falls response.

# Quality Improvement:

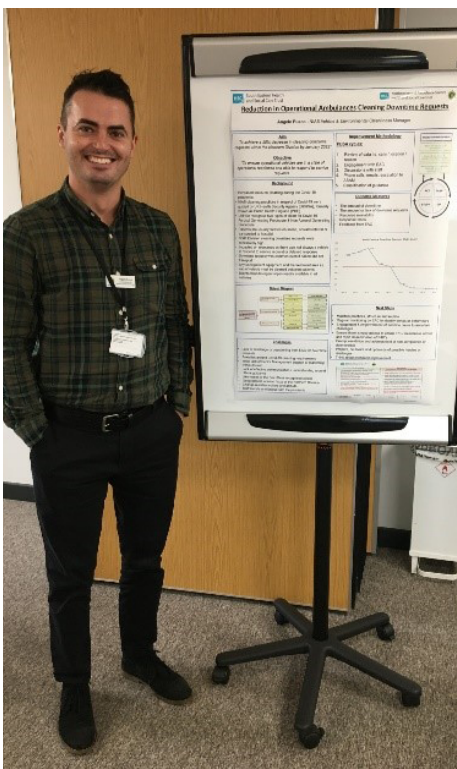
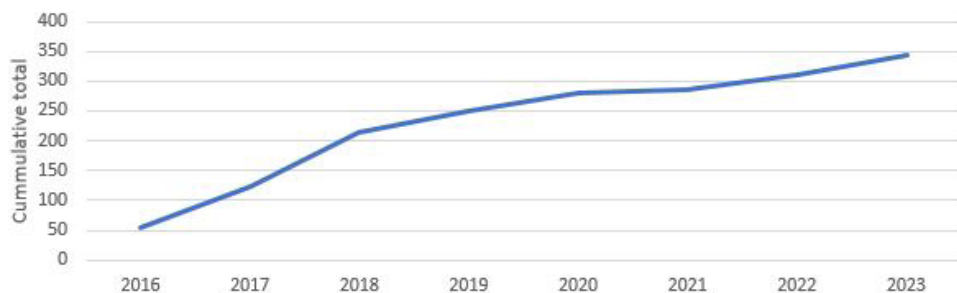
The Trust remains committed to embedding a culture of quality improvement (QI) across all levels of the organisation. Increasing capacity and capability of staff in QI, will empower them to engage and lead on improvement projects through adoption of the methodologies and principles of QI into their work streams.

In keeping with the regional direction of Q2020, NIAS continues to seek to increase the capability and capacity for QI. NIAS continues to support staff through QI programmes which introduce the methodology and applications of QI and how it can be integrated across all areas of work to improve outcomes for patients and staff in an evidence based and measurable way. Staff are encouraged to register and complete the Q2020 Attributes framework e-learning programme which gives them an introduction to the world of QI.

Year on year our numbers continue to increase, despite the system wide challenges affecting crews and the delay in handover times which allow little respite or time to access these online programmes.



Q2020 - Attributes Framework  
Level one e-learning  
2016 - 2023



Collaborative working arrangements with the South Eastern HSC Trust has provided NIAS staff the opportunity to participate in their Quality4U programme, formerly the Safety, Quality and Experience (SQE). Two staff successfully completed the programme this year with a further seven NIAS staff being enrolled, with a range of exciting improvement projects being established including Standardisation of Paediatric Response Bags, Improving Vehicle Maintenance Schedules, FIT testing, Falls Response, Body Worn Cameras and Appropriate Care Pathways.

A further two staff went on to commence a level three qualification with the Scottish Improvement Leaders programme. This programme builds upon existing knowledge and skills to allow graduates to lead projects for improvement.

A programme of mentoring and support has been established for these programmes and our ambition is to establish regular QI clinics where any member of staff can come to discuss improvement ideas or become involved in quality and safety projects.

The QSI leads have represented the Trust at local, regional and national groups across the wider Health and Social Care (HSC) and Ambulance Service networks, including the regional Health and Social Care Quality Improvement Hub. NIAS welcomed the release of the HSCQI regional strategy in October 2022. The vision of this strategy is “to inspire and influence Northern Ireland’s Health and Social Care Community to become a Global Leader in Quality Improvement and Innovation by working together and focusing on person-centred care”



## Quality Strategy:

A series of visits, to EDs, throughout the year provided opportunities to engage with staff to seek their feedback on new initiatives, explore their ideas for improvement and to identify what matters to them which has informed the development of our Quality Strategy. We have valued their input and feedback and will continue to provide opportunities for future sessions. The purpose of the strategy is to provide a framework for quality utilises the four key lines of enquiry, as identified by Regional Quality Improvement Agency and further includes ‘Responsive’ from the Care and Quality Commission.

The key lines of enquiry ask the overarching question :-  
“ Is the care .....

- **Safe**- to avoid and prevent harm to patients and clients.
- **Effective**- care, treatment and support achieves good outcomes & helps maintain quality of life.
- **Compassionate**- All patients are treated with dignity and respect.
- **Well - Led**- leadership encourages learning, innovation and a fair culture
- **Responsive**- are services organised to meet the needs of the population

The Quality strategy has been approved and will be officially launched as part of World Quality Week in the coming months.





## Delayed Handovers:

Whilst acknowledging the challenges faced across the HSC regionally, which has impacted upon the handover times at Emergency Departments (EDs) and our ability to respond to calls in the community, we continue to work in collaboration with our colleagues in the other HSC trusts to mitigate the risk of harm to patients resulted in the development of a regional procedure to standardise the pathway for the escalation of the deterioration in a patient's clinical condition to ED staff.

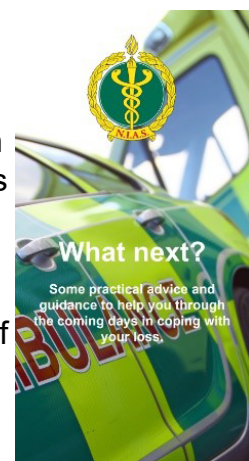
## Falls Improvement:

The introduction and testing of change ideas is integral to the reduction of falls. A pilot scheme was launched in the SouthEastern and Belfast areas aimed at improving the response to level one falls in the over 65 years age category. The outcome results of the pilot were inconclusive due to low number of calls over the project duration.

NIAS have been exploring other opportunities to establish and test other change ideas, including the use a dedicated falls response resource in partnership with one of our voluntary service providers.

## Bereavement Guide:

NIAS also developed and launched a bereavement guide designed to be left with families and carers in the event of a sudden unexpected death at home. This was designed as a resource that would provide information and advice on what to do next. A list of support agencies was included to sign post families and carers to the appropriate services. We thank Marie Curie and the Northern Ireland Bereavement Network for there help and guidance in producing this guide. one of our voluntary service providers.



# Patient Care Service Improvement Programme

Non-Emergency transport or Patient Care services is a significant and valued service connecting patients to their Care Pathways with over 158,000 journeys completed in 2022/23.

## PCS Improvement programme:

The early focus in this programme has been on ensuring the data was available to properly assess the demands and performance of the service and then devise potential changes to better address the needs and challenges facing the Service.

The agreement of a set of key performance indicators (KPIs), predominately focused on the quality of the patient experience and governance measures, gave the baseline for objective evaluation of the Service and identified where the ongoing focus for improvement needs to be directed. Key to this planning stage was a trial implementation of new journey booking and planning procedures in Non Emergency Ambulance Control in October '22, in an effort to improve our overall PCS performance in terms of our utilisation and productivity levels and ultimately to improve the quality of service delivered to our patients.

Evaluation of this trial which was conducted in the Belfast and South Eastern Trust areas indicated how some changes to how the booked Journeys were allocated to the PCS crews had a positive

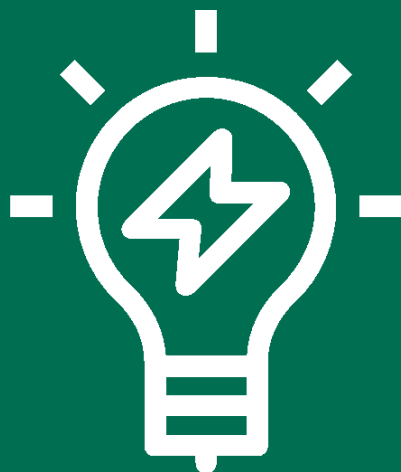
Measure	Outcome	Comment
Bookings	↔	No. of booking where almost at pre-pandemic levels
Journeys	↑	Ratio of journeys to bookings improved over pre-pandemic levels
Abortive and Cancelled Journeys	↑	Ratio of abortive and cancelled journeys reduced over pre-pandemic levels.
Arrival Time KPI	↑	Substantial improvement in no. of patients arriving on time for appointment. Room for improvement.
Departure Time KPI	↑	Good improvement in departure time and reduced no. of patients experiencing long waits.
Time on Vehicle KPI	↑	KPI reached 100% against this measure which represents slight improvement over previous years.
Allocation Time	↑	Substantial improvement of allocation times with benefits to wider healthcare system
Patient Loading	↔	Lower than pre-pandemic levels, however, constrained by social distancing measures. Has improved from 2021 levels.
Average Patients moved per resource	↔	Lower than pre-pandemic levels although better than 2021. Social distancing will have affected efficiency. Operation of new rules across whole of NI would provide additional efficiency opportunities
Data Assurance	↑	Increased data capture of timestamps during test gives high assurance of data on the day.
Staff Feedback	↑	NEAC had a very positive response to trial whilst ACAs responded positively although a few concerns were raised
Patient Feedback	↔	Patients recorded favourable comments with regard the service. Most stated that they were not aware of any difference in delivery.

Moving on to the implementation phase, these changes to how the Service operates are being rolled out on a permanent basis across the province from April 2023 with similar improvements expected. Implementation of other aspects of the Improvement Plan will follow early in 2023/24.



## Goal 4

Raising the  
Standards





# Raising the Standards

Underpinning the strategic goal of raising the standards are the objectives of:

1. Establish a framework of clear evidence-based standards and best practice guidance
2. Establish dynamic partnerships between service users, commissioners and providers to develop, monitor and review standards.

These are important as it is essential that we work to agreed standards that represent best practice and are clearly understood by staff, users and relatives alike. Standards should be authoritative and concise and help achieve high quality in the most cost effective way. Increasingly standards should span both health and social care sectors and be developed by partnerships that include all those involved in providing and receiving a service. They should also be monitored periodically and reviewed if they are to continue to be fit for the purpose they were designed. There are a number of ways to know that we are 'raising the standards' and during the 22/23 period NIAS have focused on the following:

- Auditing and monitoring IPC and EVC Key Performance Indicators
- Working in partnership across the organisation to drive improvement in relation to IPC and EVC KPIs
- Working to ensure that NIAS EVC KPIs are aligned to new NHS Cleanliness Standards
- Ensuring that staff have access to facial fit testing to ensure that standards related to FFP3 masks are realised

# Infection Prevention & Control

The aim of the Infection Prevention and Control team (IPCT, is to prevent avoidable healthcare associated infections, by ensuring that care is delivered in a safe and effective manner according to evidence based policy, and procedure. Audit is an important tool used by the IPCT to measure compliance with agreed

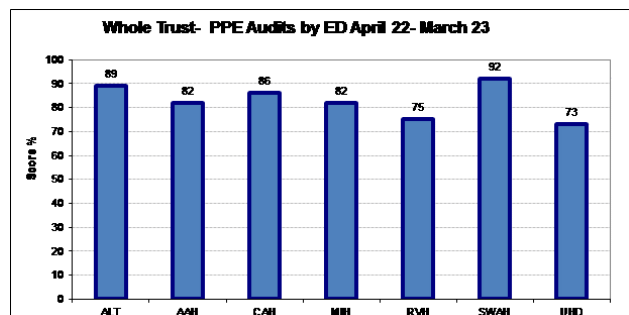
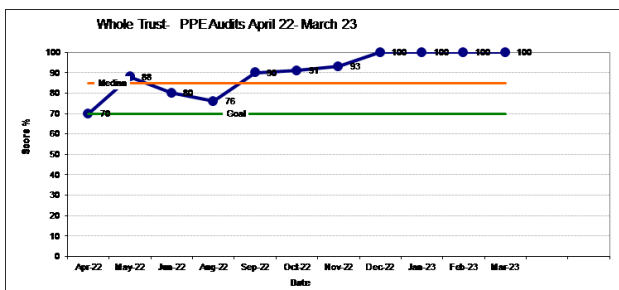
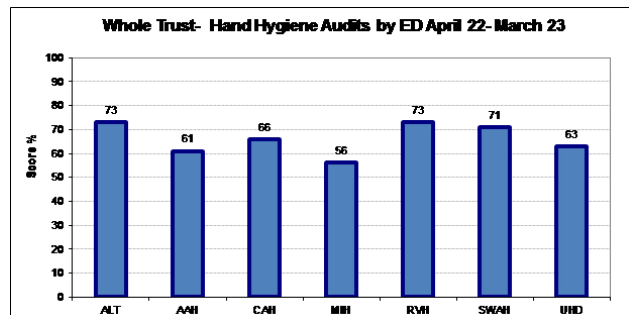
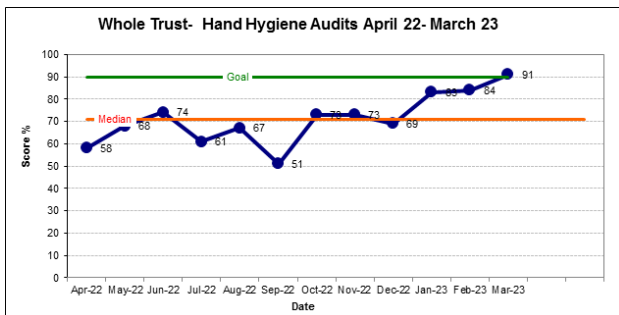
KPIs. Audit provides insight into causes of non-compliance, allowing the team to support staff overcoming these.

Two central KPIs with in NIAS in relation to IPC are hand hygiene (HH) and use of Personal Protective Equipment (PPE).

## Audit KPI and process:

Auditing of HH and PPE is undertaken monthly in each of the 7 major emergency departments regionally. It is important to acknowledge that ED performance levels do not just represent the performance of crews from the Division that the ED is located in as crews from other Divisions may frequent various EDs, for example crews from North Division may convey to the Mater Hospital; crews from South East may convey to the RVH and vice versa. In 2022/23 the KPI compliance rate for HH was set at 90%, an interim compliance rate for PPE was set at 70% with a view to increase this to 90% in April 2023. The charts below show performance against these KPIs.

The audits are completed on the DocWorks audit platform and reports are compiled monthly with results shared at the IPC/EVC group and the Safety, Quality, Experience and Performance Committee (SQEP). Area managers are provided with the staff members details where non-compliance is observed during an audit. This is also added to the DocWorks audit report under 'comments'



The charts demonstrate that the Trust has not met the KPI of 90% compliance with HH but indicate an improving trend towards the compliance of 90%. The KPI of 70% for appropriate use of PPE was not achieved on three occasions. Given the positive Trust performance in relation to PPE the KPI for PPE compliance was increased to 90% from 1st April 2023.



A number of actions have been undertaken by the IPCT and the IPC and EVC group in relation to these audits:

Trends of non-compliance identified as:

- Staff not being bare below the elbow (a non-compliance for HH)
- Staff not removing gloves immediately after care was provided
- This learning was shared through the IPC and EVC group to engage all members of the MDT to drive improvement through strong leadership
- Face to face engagement with staff at both the Emergency Departments and Stations, around the issues identified with respectful challenge by the IPCT

- Area managers are provided with any non-compliant staff members details to identify trends and to allow for appropriate follow up

- Promotion and engagement with World Hand Hygiene Day 2022. World Hygiene Day takes place every year on 4th May, however with NIAS the month of May is used to promote, and refocus on the importance of HH.

- Based on feedback from staff around the convenience of personal hand sanitisers, a project was developed in which several different sanitisers were trialled with feedback provided. This ensured that the individual hand sanitisers were an effective product that was available in the most convenient packaging for ease of use. Once the project was concluded the preferred product was made available to all operational staff.

- Educational information including newsletters and staff leaflets were prepared and shared widely in the Trust.



# FIT Testing

NIAS staff, agency staff, bank staff, students and visitors are required to take part in a fit test where it has been identified, via risk assessment and on the basis of their role, that they may be exposed to hazardous airborne particles. To ensure suitable protection in these circumstances, tight-fitting facepieces (masks) are required to be worn. Fit testing ensures

that a specific model and size of tight-fitting facepiece matches the wearer's facial features and seals adequately to the wearer's face. During a fit test individuals are tested to two FFP3 mask types. If neither mask type is deemed suitable for an individual then they are issued with a respirator hood system.



3M 1863+  
FFP3 Mask



Denpro  
DPL01  
FFP3 Mask



3M Versaflo  
Respirator  
Hood  
System

Fit Testing is carried out by competent NIAS staff who have attended Fit2Fit accredited 'Fit Testing – Train the Tester' training using a TSI PortaCount Pro Respirator Fit Testing machine. Fit Testing is carried out in accordance with Health and Safety Executive (HSE) 'INDG479 - Guidance on Respiratory Protective Equipment (RPE) Fit Testing'.

## Facts and Figures 2022/2023

344 individuals attended a successful fit test during 2022/2023. This is a decrease of 29 on the 2021/2022 total (373). Individuals tested include NIAS Staff, Bank Staff and Paramedic Students at Ulster University.

Status	TOTAL
NIAS Staff	302
Bank Staff	5
Ulster University	37
Total Tested	344

The number of individuals who attended a fit test in 2022/2023 (344) fell significantly below the number of individuals who were due a repeat fit test in the same period (1324).

This is primarily due to the mass fit testing carried out in 2020/2021 following the onset of the Covid-19 Pandemic. Large numbers of staff were fit tested within short timescales which has subsequently resulted in a mass expiration of valid fit tests within a short timescale two years on from the initial tests, the required frequency for repeat fit testing.

The table and chart below outline the number of staff who were due to attend a repeat fit test in each month through 2022/2023. Repeat fit tests were required on the 3M 1863+ model from May / June 2022 onwards and the Denpro DPL01 model from February 2023 onwards, resulting in higher figures for those months.

# Fit Testing Total Individuals Due per Month 2022/2023:

Month	TOTAL Staff Due
Apr-22	0
May-22	337
Jun-22	353
Jul-22	61
Aug-22	54
Sep-22	48
Oct-22	13
Nov-22	33
Dec-22	11
Jan-23	15
Feb-23	59
Mar-23	340
<b>TOTAL</b>	<b>1,324</b>



## Other Headlines in 2022/ 2023

The following have been developed during 2022/2023:

- Fit Testing Co-Ordinator role including standardising processes and operating procedures
- Fit Testing Policy to outline fit testing roles and responsibilities
- Fit Testing Risk Assessments to identify and control fit testing related hazards
- Fit Testing Standard Operating Procedure to standardise fit testing process
- Fit Testing SharePoint page to share information with staff
- Fit Testing Dashboard to record and report on fit testing performance
- Fit Testing Calendar to improve access to Fit Testers for staff
- Fit Testing Management Survey to identify challenges and potential improvements
- Fit Testing Training - 17 staff trained as competent Fit Testers
- Servicing and Calibration - 11 x TSI Portacount fit testing machines serviced and calibrated
- Ulster University - Fit Testing Programme for Paramedic Students at Ulster University
- Policies and Procedures - General strengthening of fit testing information across wider relevant NIAS Policies and Procedures
- Engagement - Engagement with management, staff and trade unions across NIAS, including at Health & Safety Committee

# Environmental Cleanliness - Northern Ireland Cleaning Awards



Every workplace needs to have a clean environment to provide a healthy workspace for their staff and patients. The Northern Ireland Cleaning Awards (NICA) honour and recognise those who have an expertise in cleaning, hosted annually supported by British Institute of Cleaning Science (BICS) and funded by Facilities Management Contracts throughout Northern Ireland and the UK.

There were a host of categories to enter for the NICA. NIAS entered the following categories, Healthcare Cleaning Team of the Year, The Making a Difference Award and Cleaning Team of the Year Award.

NIAS was successfully shortlisted for Healthcare Cleaning Team of the Year- NIAS VCO Supervisory Team and The Making a Difference Award.

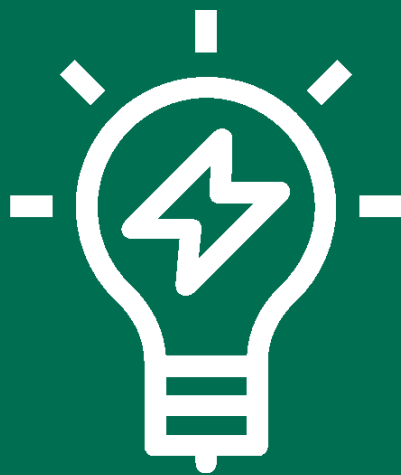
It was a great honour to be shortlisted as nominations exceeded thousands.





## Goal 5

Integrating the Care





# Integrating the Care

Underpinning the strategic goal of 'integrating the care' are the objectives of:

1. Developing integrated pathways of care for individuals
2. Make better use of multidisciplinary team working and shared opportunities for learning and development in the HSC and with external partners.

These are important as Northern Ireland already has an integrated health and social care system, but in order to be truly effective there should be seamless movement across all professional boundaries and sectors of care. This has implications for the timely transfer of information and how data is held. Improvements in this area will make a significant contribution to raising the quality of care and outcomes experienced by patients, clients and their families. It is increasingly recognised that the effectiveness of treatment and care given to patients and clients is enhanced by a holistic approach that encourages co-operation between all those involved at every stage. Failure to address this can produce an "us" and "them" mentality, which has the potential to be detrimental to outcomes and wasteful of resources.

There are a number of ways to know that we are 'integrating the care' and during the 22/23 period NIAS have focused on the following:

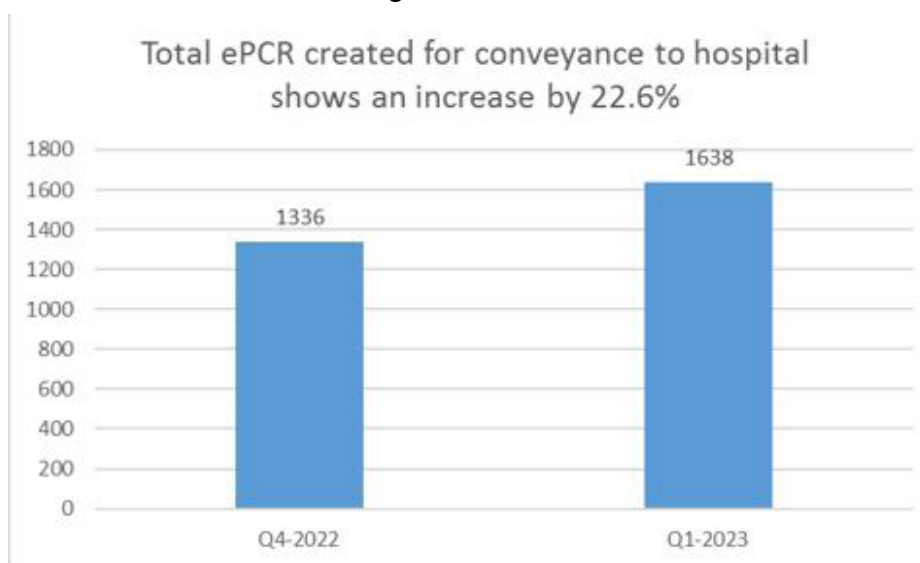
- Patient and client information will be available to staff and carers when it is required.
- There will be evidence of consistent quality of care experienced by patients and clients across all settings.
- There will be a more effective skills mix on teams.
- There will be increasing evidence of joint working across professional disciplines to improve quality.

# Regional Emergency Ambulance Communications Hub (REACH)

The REACH programme's primary purpose is to drive forward the technologies that will better connect our clinicians, connect our patients and support quality and safe patient care through the implementation and use of electronic Patient Care Records (ePCR).

The development and implementation of hardware and software to enable the creation of ePCRs has been rolled out across the region.

To date over 700 Emergency Ambulance staff have received training and 10 of the 14 Acute Hospitals are equipped and receiving ePCRs. The transition from paper records for patients to electronic patient care records as normal practice remains challenging but in the last six-month period (October 2022 to March 2023) we have observed a marked increase in the number of ePCR created.



As the programme progresses towards project closure two primary objectives remain:

1. Implementation of electronic patient care records to the remaining hospitals
2. Developing and implementing a solution for referring to other Urgent Care Pathways.

Full roll out of REACH across all HSC Trusts will be impacted by the roll out of ENCOMPASS in October/ November 2023.

# Urgent Care Pathways



During 2022/23 the NIAS Urgent Care team relaunched Pathways within the Service under a new branding 'Patient Care Pathways'. This was to ensure the patient and most appropriate pathway for them was right at the centre of everything. The NIAS Urgent Care team worked with the developers of the national clinical guidelines mobile application 'JRCALC Plus' to develop a bespoke Digital Pathways Directory for our clinicians to access, right at the patient's side, to aid in making the most appropriate clinical decisions around pathways.

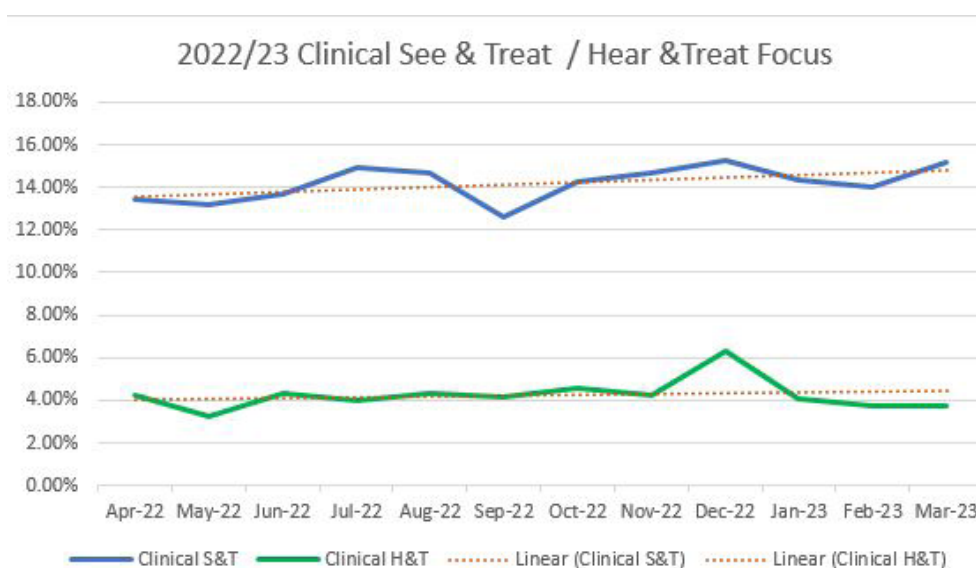
This was supported by a complete review of all existing Urgent Care Pathways and the issuing of a new Clinical Practice Guideline (CPG) – the NIAS Patient Care Pathway CPG to support our clinicians in making safe and robust clinical decisions. We also ran a number of engagement sessions during this period and voluntary CPD (Continuous Professional Development) sessions around certain pathways to promote their use, in particular, Hospital at Home teams and our Falls pathway.



A number of new pathways were also launched in collaboration with HSC Trusts regionally for NIAS clinicians to refer patients directly to for the first time. This included, referral to an Epilepsy Specialist Nurse (ESN) service; The Downe Hospital Single Point of Contact for Urgent Care and Rapid Assessment Centres; Medicines Adherence for Older People; and Older Persons Assessment Units (OPAs).

As a result of the work around the Urgent Care Pathways and the ongoing desire of NIAS clinicians to provide the best possible outcomes for patients, we saw a 1.71% increase in clinical See and Treat figures from April 22 –March 23. This translates to around ten patients more a day being managed by NIAS operational clinicians without the need for conveyance to an Emergency Department.

Work continues within the team on a number of other new pathways anticipated to launch in the near future. Work is also well underway to incorporate automatic digital referrals from ePCR to remove the need for operational clinicians to ring these through Emergency Ambulance Control and early plans are in development for a rolling education programme for NIAS clinicians on the topics of Clinical Decision Making, Urgent Care Pathways.





# Helicopter Emergency Medical Service (HEMS)

HEMS is delivered through a partnership between NIAS and the Air Ambulance Northern Ireland (AANI) charity. The service is led by an Operational Lead with a team of 8 HEMS Paramedics as well as a Clinical Lead working with a team of 15 consultants from across five Health and Social Care Trusts. HEMS currently operates 7 days a week for 12 hours per day. From the operational base in Maze Long Kesh site, the helicopter can reach anywhere in Northern Ireland in approximately 25 minutes.

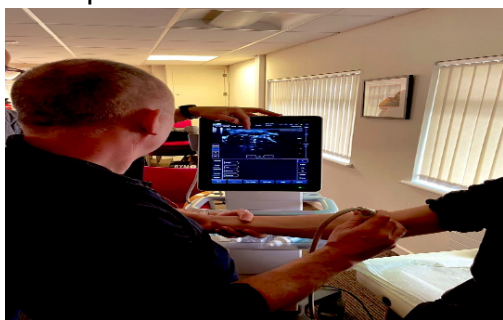
HEMS brings an advanced level of prehospital critical care to the seriously ill and injured patient anywhere in the province and transports them to the most appropriate hospital for their specific condition. For patients affected by serious trauma and illness, delivery of pre-hospital critical care can save life, brain and limb.

The main ethos of the service is to bring the HEMS Doctor and HEMS Paramedic, along with the lifesaving equipment including prehospital blood, rapidly to the patient.

The most common category of calls are Road Traffic Collisions (RTC's) with Newry, Mourne and Down District being the most common council area. Adult patients make up 90% with children comprising of 10% of calls.

HEMS responded to 635 missions in 2022/2023. The deployment of the Helicopter (HM23), accounted for 449 (70%) of the 635 missions whilst the remainder - of the 186 missions (29%)- being responded to in Delta 7 their rapid response car.

In September 2022, AANI changed aircraft operator to Sloane Aviation who operate the AW109. This aircraft is lightweight, twin-engine, multi-purpose helicopter.



NIAS developed and commenced the Advanced Paramedic Critical Care (APCC) project in September 2022. With continual mentorship and learning within HEMS, this service development will complement the pre-hospital care provided by NIAS and offer an additional tier of advanced assessment and treatment.

The APCC will provide high-quality clinical care for patients with a variety of clinical conditions relating to patients critically injured and unwell. Developing as an autonomous practitioner, working in line with the scope of practice defined by the supporting NIAS/ HSC partner's clinical governance framework, the Advanced Paramedic will provide advanced clinical management and decision making to patients requiring complex and challenging care.





# Complex Case Team

## Potential Frequent Callers Research Publication

Original research completed by the Complex Case Team was published in the peer reviewed Journal of Paramedic Practise in November 2022. The research was titled 'The Impact of a Mass Distribution Letter as an Early Intervention for Potential Frequent Callers to a UK Ambulance Service' and was the first study of its kind, looking at ways of preventing a service user becoming a frequent caller.

The research project was a success, recording a 57.5% reduction emergency calls from the 96 recipients across Northern

Ireland in the 10 weeks following letter distribution compared to the 10 weeks before.

The Complex Case Team have taken steps to develop NIAS staffs understanding of the role of the Team through contributed to the NIAS Clinical Newsletter.

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## Staff Updates:

In the edition of the Newsletter that was published on 4th November, the Team developed a '7 minute briefing' that outlined the work of the Team and process of engaging with the vulnerable adults who call 999 on a frequent basis for assistance. To give further context, the Team provide four case studies of service user's who have engaged with the Complex Case Team, a run chart showing a reduction in their calls to NIAS and a brief background to the service user's health and social care circumstances.

## Inclusion Service Pathway:

In 2019 the Complex Case Team developed a bespoke pathway to assist vulnerable adults who are homeless within the Belfast Trust area. In 2022 a '7-minute briefing' for NIAS Daily News Bulletin was published to inform staff about the pathway and to promote it's use. This was followed by further information being dissemination to all clinical staff in the Belfast and Southeastern trust areas.



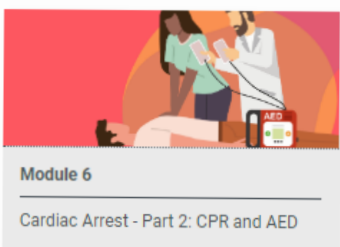
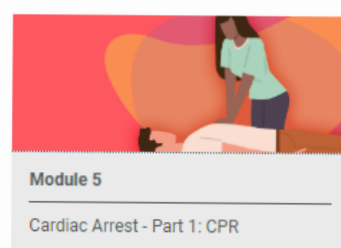
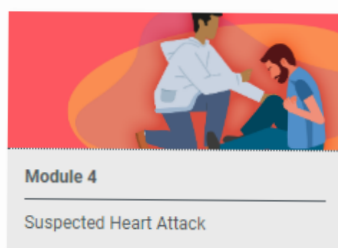
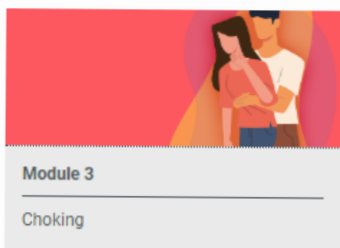
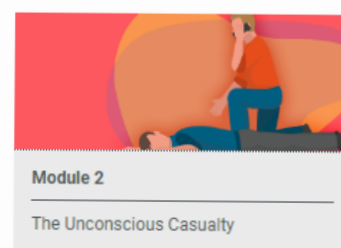
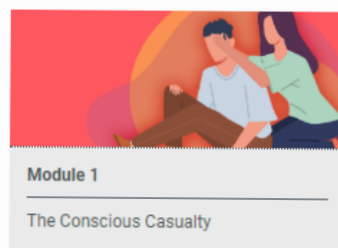
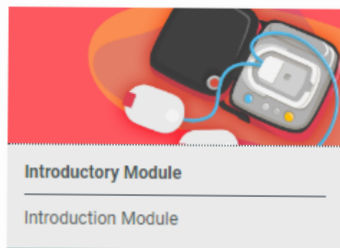
# Automated External Defibrillators (AED)

There are now over 2,700 AEDs registered with NIAS on the Circuit National defibrillator database. There has been significant work carried out, with over 50% of our Community AEDs having an information tag attached. This will enable a bystander to return the AED to its permanent location if brought to the scene of an Out of hospital cardiac arrest. The tagging process is enabling NIAS to audit Community AEDs in relation to their location and accuracy of information provided when the AEDs are registered. This information provided from the audit enabled us to shape key messages which were used in our first ever defibrillator campaign in Oct 2022 called 'Shoctober'. During the campaign which ran over 4 weeks, over 120 new AEDs were registered and the key messages shared with all our partners across statutory and community/voluntary organisations.

## Community of Lifesavers Education Programme



In April 2022 a partnership was established with the Department of Education, Council for the Curriculum, Examinations & Assessments, and Education Authority NI to progress and develop resources for Post Primary and Special Needs settings. This online resource would go hand in hand with Lifesaver Ambassador training provided by the NIAS Community Resuscitation Team.



All six modules of the core programme have been developed and additional optional modules are being finalised as well as a mobile phone App for pupils to use to ensure their skills and knowledge remain current following their training. Since launch of the programme in January 2023 over 200 teachers have received Lifesaver Ambassador training.

## GoodSAM

Northern Ireland have over 4000 members of the public who have a minimum of Basic Life Support training and have registered to be a GoodSAM responder. In February 2023 we were proud to announce the activation of these GoodSAM Responders.





# References:

NIAS Corporate Plan 22/23

DHSSPS (2011) 'A Ten Year Strategy to Protect and Improve Quality in Health and Social Care in Northern Ireland'. Available from [www.health-ni.gov.uk/sites/default/files/publications/dhssps/q2020-strategy.pdf](http://www.health-ni.gov.uk/sites/default/files/publications/dhssps/q2020-strategy.pdf), accessed 03.10.23