Northern Ambulance Alliance

Northern Ambulance Alliance Programme Plan - High Priority Initiatives

			Complexity	Time			Bene	fits Re	alisation		
			of Delivery -	IIII	escales	Non	Cost Sa	aving	Cost Saving		RAG
No.	Initiative/Project	Business Change Required	High, Medium or Low	Start Date	Completion Date	Patient Care	Resilience	Financial		Progress/Update	Status (B,R,A,G)
Digital	Workstream - CEO Lead: Yvonne Orms	ston (NEAS) Director L	ead: Mark Bra	adley/Rod E	Barnes (YAS) \	Vorkstr	eam M	lember	ship: tbd (NWAS), Paul Nicholson (NEAS) Ola Zahran (YAS) Jan	et Paul,
Steve E	Bowyer (EMAS) & Ben Holdaway (EMA	S)									
D001	Consider common CAD across YAS and NWAS Lead - tbd		н		Scoping- document to be developed by 31.08.17 ready- for presenting- to the Digital- meeting on- 15.09.17 High- Level proposal- for Carter/NHSI- due 03.11.17.	*	~	*		Document shared with CEO's 3rd September 18.— Document shared with IT leads 12.10.18 for review/comments. Next step is to hold a workshop to consider options and agree way forward. EMAS, in conjunction with YAS, currently preparing a CAD specification from which a framework will be formed via OJEU for other Trusts to use as/ when they're ready. NAA partners will be engaged throughout. Outline procurement timescale drafted taking EMAS to tender before 31st March 19 and a go live of 01/04/20. (although may be accelerated if feasible) Workshop scheduled for 1st March 19 to discuss/capture requirements - SB currently working on the objectives of this workshop. May be worth a consideration for external funding in relation to the CAD.	
D002	Consider common Telephony across NAA Lead - Ola Zahran - link in/align with CAD feasibility study		М		Scoping- document to be developed by 31.08.17 ready- for presenting to the Digital- meeting on 15.09.17	*	√	√		Highlevel timescales - Approve & Confirm finances (technical) - 20.12.18, Complete commercial evaluation - 4th Jan 19. YAS - preferred bidder agreed, evaluation report written and going to CEO for approval w/c 14th Jan 19 and Board w/c 21st Jan 19. NWAS - involved in the evaluation and identified a preferred bidder, Business Case to be submitted to NWAS DoF w/c 14th Jan 19, EMT - w/c 21st Jan 19 and FIP/Board in February 19. EMAS - looking at telephony solution 20/21. NEAS - looking at replacing telephony solution this year, currently writing the Business Case. Working Group established across the NAA plus some	

D003	Shared learning in relation to Airwave Programme (ESMCP) Lead - tbd		L		Scoping- document to be- developed by- 31.08.17 ready- for presenting- to the Digital- meeting on- 15.09.17	*	√	~	NWAS to continue sharing information/lessons with NEAS, YAS and EMAS. National Programme is delayed so timescales are still being determined/agreed. NWAS to share any relevant documentation.
D004	Shared Vulnerable Patients Database across- NAA Lead- Paul Nicholson	Review Summary Care Record already in place in the NHS.	₩		Scoping- document to be developed by 31.08.17 ready- for presenting to the Digital- meeting on- 15.09.17	*	*	*	PD to discuss with PN. Closed of due to work-potentially taking place at local level, ie Lyrca schemes-rather than through the NAA. Closed
D005	Investigate feasibility of NEAS' Simulation Tool being used in other NAA organisations Lead - Paul Nicholson	Ascertain current costs of NWAS and NEAS systems. Identify requirements.	н	25.11.16	Scoping- document to be- developed by 31.08.17 ready- for presenting to the Digital- meeting on- 15.09.17			~	NEAS have developed their own 'Optima' type tool—PN to share with PL and OZ. Web ex demonstration-arranged for 17.01.17 to ascertain if any benefits for NWAS/YAS. PN to collate costs for YAS and email to OZ. Early indictive costs, work involved and proposed timescales submitted to OZ 09.02.17. NEAS to continue to work on their own system—revisit in 6-12-months time. Work ongoing/engagement from February 18 to look at implementing into YAS.
D007	EOC back up sites Lead tbd	-Ascertain current arrangements and costs in all 3 organisations	М	12.07.17	Scope by end of August 17. Definition by Sept 17.	*	√	√	Each organisation to identify arrangements in their organisation including costs. National Deloitte Review as part of Carter will give a clear expectation on this. AACE meeting scheduled to take place on 7th March 19 to look at this subject from a national perspective.
D008	Wide Area Networks Leads - tbd	identify costs in each of the 3 organisations.	M	12.07.17	Scope by end of August 17. Definition by Sept 17.	✓	≠	≠	Costs identified by the three IT leads—need to be- confirmed by Finance Teams. Closed. Closed
D009	Develop a joint NAA NEAS proposal to NHS England for Ambulance Global Digital Exemplar funding Lead - tbd	Ascertain requirements for submitting a bid	М	03.08.17	Outline developed for meeting on 15.09.17	*	~	~	NEAS have submitted a bit but on a NEAS basis as unable to submit under NAA. If approval will look at how opportunities can be worked on together with YAS and NWAS. NEAS progressed to the next stage, 'outline proposal' further meetings to take place in Feband March 18 to prepare for the April 'funding submission'. NEAS received funding and now working through opportunites.

Workforce Workstream - CEO Lead: Mick Forrest (NWAS) Director Lead: Christine Brereton (YAS) Workstream Membership: Carol Offer (NWAS), Caroline Thurlbeck (NEAS), Jane Mundin (EMAS), Sarah Akhtar (YAS), Helen Houghton (YAS), Ann-Marie Walker (YAS), Kez Hyatt (YAS), Claus Madsen (YAS) & Janet Paul.

Janet Paul

Phase	1 Projects/Initiatives:								
Collab	orative projects/sharing of good pract	tice:							
W001	Staff Survey Lead: Sarah Akhtar (YAS) Katie Evans (NWAS), Jane Mundin (EMAS), Mary Darroch and Lyndsay Duggan (NEAS)	Collective review of the staff survey approach, results & contract.	M	06.03.17	tbd	٧	V	V	Staff Survey Response Rates for 2017 - NWAS - 41.6%, NEAS - 54%, YAS - 35%, EMAS - 37.8%. 2018 - NWAS - 46% 3 elements to this work: 1. How to increase survey response rates - ouput - increase in staff survey response rates across NAA and individual 4 trusts 2. Review of survey results. 3. Potential of all using one supplier - output - decrease in overall NAA costs and individual 4 trusts Common themes identified include staff engagement, BME responses and incentive schemes. First priority - review NWAS and NEAS Comms & Engagement plan re survey response rates. (A) YAS (SA) to chase up Quality Health re offering a prize draw similar to Picker. Sub group established and draft plan completed focusing on analysis of results (Feb 19) - currently pulling lessons learnt together,including whether protected time to complete survey is feasible, dissemination to staff (April 19), survey management, including corporate staff v operational staff (July 19) and engagement methods (July 19) including incentives (August 19). Also looking at contracts synergy by 2020. SA to send 2018 completion rates to group to compare against 2017 rates - available after 25th Feb 19.
W004	Flu Vaccine Lead - Jane Mundin (EMAS) Chris Brown (NEAS), Katy Evans (NWAS), Helen Houghton (YAS)	Collaborative approach to increase flu vaccine uptake including incentives and comms & engagement plan.	L	01.06.18	29.03.19	٧	٧	٧	Flu Uptake rates - NWAS - 16/17 - 52% v 17/18 - 67%. EMAS - 16/17 - 61% v 17/18 - 73.5%. YAS - (A) - HH to provide figures NEAS -16/17 - 43% v 17/18 - 54%. •Review Comms & Engagement Plan in each trust to increase uptake - consider incentives - output - improve flu uptake results across NAA and 4 individual trusts. •Focus tbd on 2019 data collection tool, ie manual (YAS) v electronic (NWAS). Consider purchase of flu vaccinations across all 4 trusts - output - decrease in costs/spend across NAA and 4 individual trusts. (A) Review Flu Uptake @ end of October 18 compared to Oct 17 and see if any improvements, if yes, how they have been implemented. Sub group established, high level project plan developed. JM to send Flu uptake rates to group for comparison

Janet Paul 25/03/2019 3 NAA Delivery Planv1.0

	Health & Well Being Lead - Helen Houghton (YAS), Lorraine McConnell (NWAS), Jane Mundin (EMAS), Leslie Ellison (NEAS) (Incorporates previous initiatives - Improving attendance (W011) & Occupational Health (W003)	Collaborative working to improve attendance, share best practice and potentally resources. Reduction in sickness % (NHSI 1% or achievement of 5% target)	М	01.06.18	tbd	٧	٧	٧	Establish sub group & have first conf call by 31.10.18, 07.03.19 to consider 2 elements: 1. Health & Well Being - identify common themes, output reduction in sickness (against 5% target or NHSI 1%) - National meetings also taking place so need to ensure aligned with those. 2. NAA Occupational Health - assess current position in each trust, consider potential of one supplier across NAA providing Occ Health Service to all 4 individual trusts - output - decrease in costs across NAA and 4 individual trusts, improved and consisent service. (NEAS currently have an in house Occ Health) Group to continue taking forward whilst ensuring alignment/consideration to national work.
	Diversity and Inclusion Lead - Kez Hyatt (YAS) Steph Chadwick (NWAS), Jackie Moore (EMAS), Mark Johns (NEAS) May link into the staff survey initiative (W001)	Collaborative working to address key areas and share good practice to improve key indicators							Progress to date - YAS have developed a strategy and implementation plan which can be shared with the sub group. May want to consider shared learning, recruitment practices/attractive employer, training provision, estabishment with networks and mediation services - ouputs - increase BME workforce across NAA and in 4 individual trusts, improved awareness and knowledge, decrease in provider/service costs, ie training, mediation etc. First sub group call took place 03.12.18, discussions focused around Training, use of websites, elearning in relation to S&M training, mediation resources, E&D health check, accessible information standards & other disabilty related work. KH to develop a 'critical friend approach' framework, ie a peer assessing diversity and inclusion across all services - outline being developed.
	Talent Management/Leadership Development Lead - Carol Offer (NWAS) Claus Madsen (YAS), Mary Darroch (NEAS), tbd (EMAS) Will incorporate Succession Planning (W015)	Consideration to senior roles/rotational development across 4 NAA organisations.							Establish sub group to consider 3 elements - 1. Ready soon - succession planning - rotational working across NAA trusts, leadership pathways, recruitment, induction and cpd. 2. Ready now - essential learning, mandatory training. 3. Ready later - coaching opportunities across the NAA organisations. (A) - Sub group led by CO to scope out proposals.
Trust Le	d Projects:					ı			
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Initiati	ves on Hold:					I					
W002	Apprenticeship Levy - Development of a										
	Paramedic Apprentice role										
	Lead: Claus Madsen, YAS										
	Caroline Thurlbeck (NEAS)										
W003	Occupational Health Contract										
	- Lead - tbd.										
W005	Payroll Contract Lead -	Ascertain position in each								NWAS current contract for 2 years ending in April	
	Ann-Marie Walker (YAS), Karen	Trust.			NEAS live.					2020. EMAS to discuss their current arrangements-	On hold until
	White (NEAS)		L	01.05.17	EMS -		٧	٧	3044.00	with YAS paying particular attention to procurement	NWAS -
					contracted with					rules - output - decrease in costs for NAA	2020.
					a local provider.					organisations, improved quality and consistency	
Operat	tions/Quality Workstream - CEO Lead:	Richard Henderson (EN	/AS) Directo	r Lead: Ste	ve Page (YAS)	Works	tream	Membe	ership: Ged Bleza	ard (NWAS), Nick Smith (YAS), David Ratcliffe	(NWAS).
-	e Power (NWAS), Neil Barnes (NWAS),										, ,,
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	Resilience - implement the interoperability	Align with the NDOG						1		NWAS - EMAS - live, NWAS - YAS & NEAS - ready to go	
OQUUS	module into the 3 EOCs to enable electronic	Implementation								live from an IMT perspective, waiting on EOC/Ops	
	passing of calls. Lead - Ben	programme. Ensure all								approval following further testing.	
	Holdaway (EMAS), Steve Bowyer (EMAS),	system and process								YAS live with EMAS, testing with NWAS and not yet	
		requirements are in place	М	19.08.16	30.06.17	✓				started testing with NEAS.	Red
		across all 4 Organisations.								NEAS live failed with EMAS, not yet tested with NWAS	
										or YAS. Further YAS and NEAS testing to take place.	
										Ben Holdaway to share the latest position to JP by	
										08.03.19 for further sharing.	
OQ015	Volunteer/CFR type recruitment/process	tbd								Workshop took place on 11.09.18 at YAS - Awaiting-	
	etc???									feedback from participants. Three key areas identified	
	Lead - Nick Smith (YAS)									to work on: Patient Advocacy, Response & Sharing	
										expertise.	
										SP to liaise with PF on circulation of YAS workshop	
				20.06.40	20.00.10					notes and potential joint working around CFR and	
				29.06.18	30.09.18	✓				voluntary sector developments.	
										DR and SD to liaise to work up a scope for potential	
										automated intelligent dispatch model for alternative	
										responses. DR has discussed with GoodSAM who has	
										the technology working elsewhere. NS and SP to share	
										the notes from the YAS away day and see if any	
<u> </u>	ļ.	ļ			ļ		1	1	1	opportunities.	

Patient	111 benchmarking/shared learning Lead tbd () Sue Tuker (NEAS), Claire Olive, Jackie Bell- (NWAS), Mark Leese (YAS)			+	*	4	Call took place 04.10.18, (ST, CO, JB & ML) possibilities discussed included shared learning in relation to IUC activity and KPI reporting (original & updated NHSE version), benchmarking across metrics and recruitment & retention especially over the winter—staff incentives/encouragement to work over the winter. Action from today's call—share learning with each other over winter pressures. Next call to take place 10.01.19 to discuss potential opportunities relating to: Clinical Workforce Technology including potential economies of scale (Adastra, NHSP) NAA Central Comms re IUC, winter pressures (19/20), NHSP. Group to conside scheduling a face to face meeting to
OQ018	Health Science Network (AHSN) to enable	Identify the key components required to deliver the behavioural changes to maximise local variability on the rates of conveyance and their links to local systems and behaviours.		٧	V	٧	DR to write to JM (03.08.18) to arrange a meeting with AHSC to discuss this - consider Health Foundation Funding. Further discussion took place at NASMED, DR arranging a meet between all three MDs. DR has also commenced discussions with The University of Manchester to explore some academic support who are interested as part of the Manchester network but also understand the need for collaboration. Options for research outlined. DR to raise potential for exploratory research work with J Benger on 17.12.18 through national workstream, to gauge potential for support and alignment. DR presented to NAUEG via a paper, with this route being supported. DR to discuss with Sheffield University - meeting in the diary (07.03.19) - Jeanette (Sheffield University) to scope a piece of work out and get back to DR.

OQ022	Falls Management - Care Homes Lead - tbd Julie Butterworth (NWAS),	Consider prevention & dispatch methods.					SS {YAS} to set up an initial conf call to discuss falls- management, including who has a duty to respond to
	Cathryn James (YAS, AACE) & Suzie Southey	dispatch methods.					falls, considering local council responding v ambulance
	(YAS)						trusts and the quality and cost associated with this.
							Also consider prevention and dispatch models. Call took place 19.11.19 (JB, SS & CJ) - agreed to align the
							NAA work with Project A work by NHSE & directly
							input into this requesting further guidance on what
			05.10.18	✓			long lies for falls is, interventions and categorisation.
							All currently exploring options in relation to utilistation
							of eCFRS to respond and pick up appropriate falls (NWAS looking at a pilot with Rossendale ECFRS) as
							well as local authorities. YAS to review the work
							completed by NWAS on frailty. NEAS (JB) developing a
							presentation to QGARD with JB/ PL will share once
							complete.
OQ023	Data Science Institure (DSI) - Undertake an	Application of intelligence					DR at NWAS to contact researcher/Chris Grant,
	evidence based research study, in	output to rostering and deployment methods.					following funding approval from NWAS to commence
	conjunction with Lancaster University to look at queuing theories and how it impacts on	deployment methods.	16.10.18	✓			study.
	rostering and deployment practices at peak						
	times						
Workf	orce:					1	,
OQ019	Look at funding (Efficiency Resource						SS/SP to link in with Jane Shewin & Christine Brereton
	Programme) - from Health Foundation re Clinical workforce retention in a non hospital						(YAS) to contact the other R&D leads in each of the- NAA Trusts and identify potential academic partners to
	background SS/SP to link in with Jane						then establish a meeting - contact made with a
	Shewin & Christine Brereton (YAS) to contact						research team and a meeting took place with one of
	the other R&D leads in each of the NAA						the Professors to develop a draft proposal around
	Trusts and identify potential academic partners to then establish a meeting.						paramedic retention. Applications need to be in by 24th Sept, interviews Oct and November, final-
	partitiers to their establish a meeting.			V	٧	V	decision – December 18.
							Partnership with credible research team established.
							Decision taken not to bid for HF funds, but to work up
							a larger study for funding via MRC. National discussions to be stimulated via R&D leads
							network on importance of workforce related R&D
							funding for the sector.
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Chaman	Learning:	l		1		1	

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OQ006	Shared learning from SI/reg 28 etc through PROCLUS Lead - Steve Page	Share information, ability to view other NAA Trust's SI data.		01.04.17	tbd	~		Email confirmation received, SP to develop an information sharing form that all 4 organisations will-need to sign up to - SP sent out 03.10.18 - All present agreed to support a request for shared access to STEIS for NAA Trusts and to progress to next stage, SP has now submitted this to NHSI. National work to populate Proclus ongoing. QGARD has agreed a more standardised approach to reporting delayed response SIs - for further review by NASMED before finalising. Proposed indicator for safety forwarded to J Benger via QGARD chair. Currently feeding into the National Data Group. SP still progressing with NHSI re NAA sharing of SI information - waiting on NHSI to get back to SP.
OQ005	Development of nursing role within ambulance services/multi professional workforce - review of pilots in place across all 4 organisations, next steps Jackie Bell (NWAS), Iffa Settle (YAS), Judith Douglas (EMAS), Steve Adams (NEAS).	Shared learning. Deployment Practices. Utilisation, Productivity, Evaluation.	L	01.09.16	tbd	*		Agreement to work together on common competencies and education/training for rotational roles. YAS internship pilot and NWAS rotational model shared with intention to develop commonality across related nurse competencies and links to education across the 3 organisations. NWAS have carried out a study of nurse and paramedic productivity and non conveyance rates- DR to share if able to do so. SP to ask Iffa Settle to liaise with Jackie Bell on learning from respective pilots. SP attempting to organise a national workshop on multi-professional workforce further to agreement of the ioint statement
0Q010	Care Homes Initiative Lead - Jo Baxter (NEAS), Karen Owens (YAS), Julie Butterworth (NWAS), Mark Gregory (EMAS)	Sharing best practice.		02.06.17	tbd	*		Work-happening in individual Trusts with a focus on care homes. YAS involved in Sheffield with project-building on NWAS care home patient assessment tool. Need to agree potential next steps for collaborative work. JP to request Julie Butterworth share reports/data that NWAS have—shared with the Group-13.08.18. Continuing to share pilot work and evaluations. Progress in Sheffield project using elements of NWAS-approach noted:
OQ020	Fit Testing Challenges	Sharing best practice.		05.10.18				SP and BH to share business cases for deployment of hoods v current masks to address the challenges associated with fit testing and consider opportunities for joint development. Conf Call took place 07.12.18 with Dr of Ops at 4 NAA Trusts to discuss hoods v-masks, costs and challenges. YAS have agreed to go with the Hoods option - NS to share final documents (business case, risk assessment with BH and GB). Ascertain how long YAS contract is for, can EMAS and NWAS do something together. SP to liaise with BH and GB re training materials/plans.

	NAA Quality Improvement Event 19/20	Sharing best practice:		05.10.18		_				Follow on discussion to take place at next Ops/Quality- workstream meeting re-holding a NAA Quality- Improvement Event for 19/20 building on Project A- and Trust developments. All to discuss with their QI- leads.	Remove asper call on 07.03.19
Closed	/Completed Initiatives:			l.					•		
OQ014	PTS Opportunity within EMAS & YAS (Lincolnshire) Lead - Will Legge (EMAS), Chris Dexter (YAS)									Tender is out. Joint bid to be submitted by EMAS and YAS. Bid unsuccessful but positive learning from collaborative model, with potential for future application.	Complete
OQ004	Quality & Compliance Alliance Lead - Steve Page. Paul Benton (EMAS)	-	F	01.09.16	30.09.17		✓	✓	22000.00	Complete and in place	Complete
0Q007	Shared Public Health/Prevention Post across- YAS and NWAS	Identify need and recruit to one position rather than 2.	F	01.08.16	31.03.17			¥	35000.00	Complete and in place	Complete
											
	s, Fleet and Procurement Workstream ement Rep (tbc), Judith Hurrell (NEAS)		-			•			•	Neil Maher, (NWAS), Richard Moyes (YAS), YAS	
EED004			·	,	,, steve rurnsv	, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	EIVIAS	Ø Jane	et Paul.		
EFP001	Consider and identify shared sustainability ideas/plans. Lead - Clare Winter (NEAS)			01.06.17	31.03.2019		EIVIA3) √	∀		POSITION AS AT 18.03.19 - initially 16 projects were identified - all either closed, no longer being taking forward or individual Trusts to take forward. Each Trust to identify any savings that may have been paid from this initiative and send to JP.	Complete

EFP005	Use of Electric Vehicles Lead - Neil Maher (NWAS)	Ascertain costs of current vehicles v electric vehicles and associated costs in relation to charging facilities etc.	L	01.07.17	31.07.18	*	441500.00	NWAS developing a further paper/option re replacing 29 Skodia Octavia's with 25 BMW i3's and 4 Skoda Kodiag (4x4) which will strengthen the 4x4 capability, reduce costs/make savings and help deliver the Trust's sustainability agenda—approved. POSITION AS AT 18.03.19 - NWAS Business Case approved for additional electric vehicles - NM to share efficiency savings with JP—£437.5k over 5 years. NEAS currently reviewing their Fleet and will then review electric vehicle capability based on evidence from NWAS trial. YAS to look at over the next 6 months. EMAS also looking at over the next 12 months.	G
EFP006		A number of key stakeholders, ie Ops, Fleet would be involved in this change in relation to the switch and the roll out.	М	14.11.16	30.09.18	*	30000.00	YAS savings to be estimated at £100k over the 12 month period - to be confirmed March 19. NEAS to review throughout 17/18 with potential to move to new supplier, currently NEAS in the process of developing a Business Case to look at changing supplier. POSITION AS AT 18.03.19 - NEAS developing Business Case and considering MGS as a supplier going forward. DS to identify savings from YAS perspective and let JP know.	G
	ERIC opportunities Lead - Neil Maher (NWAS)							Scope opportunities from ERIC data returns.—ERIC have now released the data and a meeting has been arranged for 11th December 18 with other Trusts to review data and identify priorities/way forward. POSITION AS AT 18.03.19 - Next meeting (National Estates meeting) scheduled for 20th March 19 to scope out opportunites, look at reporting measures/methods and how they may generate some opportunities.	

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Bar Coding (equipment, drugs etc)							NWAS looking at a scheme re their Inventory Control System - Phase 1 - Implementation - Medicines Store, Uniform Store & Medical Consumables, Phase 2 - Roll Out - 6-12 (?)months of original store set up. LH to share a pilot in NEAS re RFID tagging (passive and active tags) on bags and some of the other expensive equipment with NAA members once proof of concept determined, currently looking at costs/obtaining of quotes before going out to tender - LH to share information with NAA members to asceratin if beneficial - hoping to be live early January 19. Trial still ongoing with paper presented to NEAS Audit Committee 9th Jan 19 re the trial and possible solution, business case currently being developed - expected June 2019. Go live subject to funding approval. POSITION AS AT 18.03.19 - NEAS still going through RFID trial, Business Case being developed. NWAS Inventory Control system looking at going live in the uniform store from 01.04.19, work also progressing re medicines management - possibly June or July 19. DH to provide further updates once go live has taken place.
EFP007 Tyres Lead - Sean Dineen (NWAS)	Stakeholders would need to support and agree to any change in supplier/type of tyre. Determine the most appropriate whole life tyre product, manufacturer supply, roadside assistance and effectiveness of TPMS.	н	01.05.16 01.05.18	31.12.18		~	Trial tryes still not receivied – possible date May 18. Trial will involve two operational vehicles and incorporate the use of a Tyre Pressure Monitoring System. Recommendations to be made to NAA Board by Dec 18. Project currently on hold due to problems with suppliers/supply chain. On Hold
Medicines Management	Consider in relation to bar coding.						
Ability to share facilities at appropriate	·						JP to raise at the Ops/Quality Workstream.
boundaries/borders (eg bunkered fuel)							

EFP003	Richard Moyes (YAS) in with Make Ready initiative-	Agree standard specification for 5 vehicle- types: DMA, box- conversion, van- conversion, RRV and PTS	M	01.04.17	tbd	-4	-4	-4	1486000.00	Box body tender now in place for organisations to call off against, MF shared joing specification (80%) with NHSI (Wilker supplier with WAS as second supplier) prototype vehicle to be built as soon as possible for view by NAA partners—awaited from Fiat—delayed until Sept 18. Van Conversion—two prototypes being considered. Other NAA Trusts wishing to use YAS 117 to purchase Van Conversions to liaise with MF to ensure co-ordination at YAS' end. RM to provide a proposal for NAA Board re the different concept/type-vehicles (eg UCS type, hydrogen) and proposal for minitender—RM to contact WAS re an electric DCA they are looking at—to be picked up as part of Carter-Report. DH and MB to review if existing joint tender-could be used for the Fiat chassis and cab. YAS and NEAS to discuss potential of working together on Cdrcars—RM to lead on. (NWAS use individual Cdr leasecars)—Specific meeting to be set up (post 6th-November-VfM event) to consider Carter Review in-relation to NAA Programme—JP to arrange.	Closed — will- be picked up- under the VfM- workstream
EFP004	Identify common medical equipment/kit used on all Trust vehicles (Supply Chain Basket of Goods) Lead - Judith-Hurrell (NEAS)	Each individual Organisation to identify- medical kit on their- vehicles and then agree- common list for discussion- with Procurement to- support an appropriate- route to procure.	£	25.11.16	ŧbd	.≠	.≠	-↓	-	Agree & recommend standard lists for each of the 5-different vehicle types to the Clinical Boards in each of the 3 Trusts – awaiting feedback from NWAS Clinicians. Once approved and all comments incorporated. JH to send list to SF for completion by EMAS – awaiting response. JH shared details with the Clinical Group (Sue) for comments – awaiting update.	
EFP008	YAS to develop AVP (Make Ready)- specification which will enable NEAS and- NWAS to piggy back on to the- specification/contract if appropriate. Lead tbd	Identify current- arrangements in place in- all 3 organisations and- consider outsourcing- solutions. Share lessons- learnt across all 3- organisations	M	01.01.17	30.04.18	*	*	_		MF and DH to determine savings made, although AVP-increases quality, to date, no cash releasing savings-have been made. YAS have now moved to an in house solution, however, framework remains in place should other NAA trusts wish to use. SF to confirm if this issomething EMAS would like to consider (Dave-Whiting). DH to share the details of the contract with LH (NWAS currently utilising for a cleaning contract)—emailed across 12:11.18.	

Value for Money Workstream - CEO Lead - Rod Barnes (YAS), Director Lead - Steve Page (YAS). Membership (tbc) Lynne Hodgson (NEAS), Michelle Brooks (NWAS), Mark Bradley (YAS), Angela Wetton (NWAS), Will Legg (EMAS) & Janet Paul.

VfM001	Joint CIO role with YAS and NWAS - Lead Will Legge (EMAS)	Ascertain costs of both organisations having their own CIO role.	М	16.11.16	01/02/2018 - need to review this date based on current timeline for CAD/ telephony options review			√	Update 5 June 2018 work under way to review potential opportunties for joint CAD and Telephony. Consider potential around ICT and informatics and case for joint or separate CIO roles once this is completed. Awaiting outcome of Barry Thurstonstudy. Conf Call took place (25.09.18 TE, MP, JP, WL, LH, YO, MB), all 4 trusts agree in prinicple with CIO role, EMAS to consider their involvement. WL to develop a proposal/draft JD etc by 31.10.18 for sharing. Role could be potentially for 6 months and hosted by NEAS due to YO being the Digital CEO Lead. Draft JD developed by WL and currently sitting with Rod Barnes for banding and approval - will be progressed once NAA MD is in post.
VfM002	VfM Data Gathering Exercise - consider opportunities - Lead Michelle Brooks (NHSI data pack), Will Legge (EMAS)	Produce baseline analysis- for each Organisation.	Ł	01.11.16	-			-	MB collated a spreadsheet of NAA Corporate Service-Benchmarking. Initiative to now be picked up under-VfM002a (Benchmarking exercise)
VfM002 a	Benchmarking Exercise		Н	09.02.18		*	*	*	Group agreed that a workshop event be arranged with senior leads for relevant functional areas, to discuss the benchmark information and identify priorities for action. All to submit to NHSI returns to NWAS who would carry out some analysis. Release date of corporate benchmarking to individual trusts – 18.10.18 and 02.11.18 on Model Hospital. MB met with NHSI (Ed Hindle), NHSI have agreed to work with NAA on corporate benchmarking – 24th October 18. VfM workshop arranged for 6th November 18, Ed Hindle also invited. Group reviewed and agreed some priorites for further discussion: Phase One - 1. IMT specific systems and licenses 2. Risk Management Service 3. Legal Services 4. Clinical Audit & Quality Corporate Team 5. Recruitment. Phase Two - 1. Clinical Governance 2. IMT Enabling - End User Devices 3. Information Services 4. Corporate Governance. SP to write to Rod Barnes re the way forward/next steps re benchmarking priorities.
VfM003	Establishment of Commercial Company within NEAS Lead - Lynne Hodgson (NEAS)	Ascertain full requirements and legalities of company and identify associated benefits.	М	01.12.16	28.02.18			~	LH informed the group that changes have been madere the establishment of subsidiary companies and a national consultation needs to be concluded before any further progress can be made with this across the NAA. Next steps to be considered following the national consultation in line with NHSI. NHSI have stated that business cases must go through them. NWAS and YAS to consider if this is an option for them going forward.

III .	Lead - Angela Wetton (NWAS). Karen	Identify current arrangements in each Organisations and associated costs.	М	01.02.17	30.04.18	√		Focused discussion required asap involving the Trust- leads to agree recommendations to put to the NAA- Board. (NWAS Lead is AW – AW to update the NWAS- section re-structure and update annual figures for- 17/18. AW to develop a proposal as soon as possible to agree the way forward and progress this initiative. SP to progress the paper with AW and then share with	R
								SP to progress the paper with AW and then share with CEO's.	
TOTAL	TOTAL SAVINGS						2997844.00		