

MDA No.: 1453 (Part 2)

Title: Health Committee – London Ambulance Service Letters

1. Executive Summary

1.1 At the Health Committee meeting on 24 November 2022 the Committee resolved that:

Authority be delegated to the Chair, following consultation with party Group Lead Members, to agree any output arising from the site visit with the London Ambulance Service.

1.2 Following consultation with party Group Lead Members, the Chair is asked to agree the letters to the Mayor and NHS London regarding the London Ambulance Service (LAS) as attached at **Appendices 1 and 2**.

2. Decision

2.1 **That the Chair, in consultation with party Group Lead Members, agrees the letters to the Mayor and NHS London regarding the London Ambulance Service as attached at Appendices 1 and 2.**

Assembly Member

I confirm that I do not have any disclosable pecuniary interests in the proposed decision and take the decision in compliance with the Code of Conduct for elected Members of the Authority.

The above request has my approval.

Signature:



Printed Name: Krupesh Hirani AM, Chair of the Health Committee

Date: 6 April 2023

3. Decision by an Assembly Member under Delegated Authority

Background and proposed next steps:

- 3.1 The exercise of delegated authority approving the report will be formally submitted to the Health Committee's next appropriate meeting for noting.

Confirmation that appropriate delegated authority exists for this decision:

Signature (Committee Services): 

Printed Name: Diane Richards, Committee Officer

Date: 4 April 2023

Telephone Number: 07925 353478

Financial Implications: NOT REQUIRED

Note: Finance comments and signature are required only where there are financial implications arising or the potential for financial implications.

Signature (Finance): Not Required

Date: Not Required

Legal Implications:

The Chair of the Health Committee has the power to make the decision set out in this report.

Signature (Legal): **Rory McKenna (PRINTED SIGNATURE)**

Printed Name: **Rory McKenna**, Monitoring Officer

Date: **4th April 2023**

E Mail: MonitoringOfficer@london.gov.uk

Supporting Detail / List of Consultees:

- Emma Best AM (Deputy Chairman) and Caroline Russell AM

4. Public Access to Information

- 4.1 Information in this form (Part 1) is subject to the FoIA, or the EIR and will be made available on the GLA Website, usually within one working day of approval.
- 4.2 If immediate publication risks compromising the implementation of the decision (for example, to complete a procurement process), it can be deferred until a specific date. Deferral periods should be kept to the shortest length strictly necessary.

4.3 **Note:** this form (Part 1) will either be published within one working day after it has been approved or on the defer date.

Part 1 - Deferral:

Is the publication of Part 1 of this approval to be deferred? **NO**

If yes, until what date:

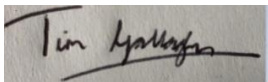
Part 2 – Sensitive Information:

Only the facts or advice that would be exempt from disclosure under FoIA or EIR should be included in the separate Part 2 form, together with the legal rationale for non-publication.

Is there a part 2 form? **NO**

Lead Officer / Author

Signature:



Printed Name: Tim Gallagher

Job Title: Senior Policy Advisor

Date: 5 April 2023

Telephone Number: 07704 348487

Countersigned by Executive Director:

Signature:



Printed Name: Helen Ewen

Date: 5 April 2023

Telephone Number: 07729 108986



Krupesh Hirani AM
Chair of the Health Committee

Sadiq Khan
Mayor of London
(Sent by email)

Dear Sadiq,

6 April 2023

London Ambulance Service

I am writing to you in my position as Chair of the London Assembly Health Committee regarding the London Ambulance Service (LAS). This follows a visit by the Committee to the London Ambulance Service Dockside Education Centre and Emergency Operations Centre (EOC) Newham on 24 January 2023. The Committee had the opportunity to question LAS representatives on the new LAS strategy for 2023-2028, and discuss wider issues facing healthcare provision in London.¹

Through our discussion with LAS representatives and a call to patient groups and members of the public for written evidence, the Health Committee set out to understand how LAS is performing, where it is delivering successfully and where improvements could be made. We looked at the emerging themes of the new LAS strategy, and explored whether these are the right priorities for LAS.

The Committee also asked what action the Mayor and other stakeholders can take to support LAS and improve performance for Londoners. This discussion resulted in a set of

¹ The LAS panel for the strategy session was attended by: Andy Trotter, Chair; Daniel Elkeles, Chief Executive; Dr John Martin, Deputy Chief Executive and Chief Paramedic and Quality Officer; Dr Fenella Wrigley, Deputy Chief Executive and Chief Medical Officer; Cathy-Anne Burchett, Assistant Director of Operations South East London; and Roger Davidson, Director of Strategy and Transformation

recommendations on how the Mayor can support LAS, which are set out below. The Committee has written to LAS directly with a series of recommendations, and will also be writing to NHS London and the Department for Transport to highlight recommendations specific to them.

London-wide healthcare governance

The NHS in London has undergone significant change since the development of the five integrated care systems (ICSs): North West London, North Central London, North East London, South East London, and South West London. The King's Fund has stated that "ICSs...are part of a fundamental shift in the way the health and care system is organised."² Andy Trotter, LAS Chair commented on the "complexity" that exists for LAS in managing these multiple relationships as a pan-London healthcare provider.

The Committee heard from LAS representatives including Daniel Elkeles, Chief Executive of LAS, that their desire is for the LAS to be given London-wide governance for the organisation. Andy Trotter, LAS Chair, told the Committee that this "would give a degree of coherence" and would save senior leaders more time to focus on "London-wide strategic matters". The Mayor, as chair of the London Health Board, is well placed to initiate the debate around how best to structure the governance of healthcare provision in London. The Committee has also made a recommendation to NHS London with regards to providing the healthcare system in London with additional resources and support to embed the relationships between LAS and the five integrated care systems.

Recommendation 1: The Mayor should work with LAS, NHS London and the five Integrated care systems (ICSs) to explore options for a more simplified London-wide governance structure for LAS.

LAS Sustainability Funding

LAS has identified climate change as "one of the most significant public health emergencies" and has committed to working towards targets for all NHS organisations to be net zero for directly controlled emissions by 2040, and net zero for wider emissions that they influence by 2045.³ The Committee welcomes this focus. A response to our call for evidence from NHS South East London Integrated Care Board (ICB) said that it was "essential" that the new strategy linked in with the LAS Estates Strategy and its sustainability plans, arguing that these plans "cannot work in isolation".⁴ The Committee heard that LAS has made good progress towards making its fleet more sustainable, but there remains the significant challenge of 'greening' the service's estate.⁵ According to LAS' Carbon Neutral Plan, making the existing estate more energy efficient and replacing gas boilers with renewable sources of heating by 2032 are required for LAS to achieve its net zero targets.

LAS told the Committee that financing is the biggest obstacle to the organisation achieving this. The LAS Carbon Neutral Plan sets out how this "scale of transformation will require multi-year financial commitment to prioritise sustainability improvements across the next decade" and that external funding will be required as "internally generated capital funding will not be

² The King's Fund, [Integrated care systems in London](#)

³ LAS Carbon Neutral Plan April 2022 – March 2025 – [London Ambulance Service Carbon Neutral Plan April 2022 – March 2025 - London Ambulance Service NHS Trust](#)

⁴ NHS South East London ICB, Call for Evidence: London Ambulance Service strategy 2023-28, Submitted to London Assembly Health Committee, 11/1/23

⁵ Health Committee Meeting Transcript – London Ambulance Service Strategy 2023-2028, 24 January 2023

sufficient”⁶. At the meeting, LAS representatives noted that the Mayor of London could potentially offer support in securing this funding, particularly through the GLA’s Green Bond Programme that was announced in February 2022. The scheme has already identified electric vehicle charging infrastructure, the development of district energy networks, and social housing retrofitting as investment priorities.⁷ It would be worth exploring whether this programme could also include retrofitting the estates of organisations such as LAS.

Recommendation 2: The Mayor should explore opening up the GLA Green Bond Programme to organisations such as LAS to allow for retrofitting of their estate.

999 Public Education Campaigns

Londoners have a key role to play in supporting LAS to manage demand on ambulance services. This was evident during the most recent period of industrial action, when Londoners were urged to only use 999 for the most serious cases. During its meeting with LAS, the Committee heard that this was successful in reducing the number of 999 calls during the strike period. Healthwatch Kingston, as part of its community engagement work, found that there was an issue with the “public’s lack of understanding about when to use the service and when to use alternatives”, in particular whether someone should call 999, call 111, or contact their GP.⁸ The Healthwatch Kingston consultation also found that “people wanted more education for the community on how to support themselves before emergency intervention is required.”⁹ LAS representatives at the meeting explained that public knowledge of how to make 999 calls and what to expect when making the call is highly valued by LAS staff.

LAS representatives told the Committee that they do take action in this area, highlighting a recent campaign advising people celebrating New Years’ Eve to drink sensibly and behave appropriately to ease demand on ambulance crews. The Mayor has the power to support and amplify these campaigns to have greater reach and educate more Londoners.

Recommendation 3: The Mayor should work with LAS on public awareness campaigns to educate Londoners on correct usage of the 999 emergency service.

The Committee would welcome a response to this letter by 19 May 2023. Please send your response by email to the Committee’s Clerk, Diane Richards (diane.richards@london.gov.uk).

Yours sincerely,

⁶ LAS Carbon Neutral Plan April 2022 – March 2025 - [London Ambulance Service Carbon Neutral Plan April 2022 – March 2025 - London Ambulance Service NHS Trust](#)

⁷ Mayor of London, [Mayor announces £90 million towards new green bonds](#)

⁸ Healthwatch Kingston, Community Engagement – London Ambulance Service Strategy 2023–2028, Submission to the London Assembly Health Committee, 13/1/23. Local Healthwatch groups are independent organisations whose purpose is to make recommendations to healthcare providers on behalf of patients

⁹ Healthwatch Kingston, Community Engagement – London Ambulance Service Strategy 2023–2028, Submission to the London Assembly Health Committee, 13/1/23.

A handwritten signature in black ink, appearing to read 'Krupesh Hirani', written in a cursive style.

Krupesh Hirani AM
Chair of the Health Committee



Krupesh Hirani AM
Chair of the Health Committee

Martin Machray RN
Executive Director of Performance
NHS London
(Sent by email)

Dear Martin,

6 April 2023

London Ambulance Service

I am writing to you in my position as Chair of the London Assembly Health Committee regarding the London Ambulance Service (LAS). This follows a visit by the Committee to the London Ambulance Service Dockside Education Centre and Emergency Operations Centre (EOC) Newham on 24 January 2023. The Committee had the opportunity to question LAS representatives on the new LAS strategy for 2023-2028, and discuss wider issues facing healthcare provision in London.¹

Through our discussion with LAS representatives and a call to patient groups and members of the public for written evidence, the Health Committee set out to understand how LAS is performing, where it is delivering successfully and how it could improve. We looked at the emerging themes of the new LAS strategy, and explored whether these are the right priorities for LAS.

¹ The LAS panel for the strategy session was attended by: Andy Trotter, Chair; Daniel Elkeles, Chief Executive; Dr John Martin, Deputy Chief Executive and Chief Paramedic and Quality Officer; Dr Fenella Wrigley, Deputy Chief Executive and Chief Medical Officer; Cathy-Anne Burchett, Assistant Director of Operations South East London; and Roger Davidson, Director of Strategy and Transformation

The Committee also asked what action the Mayor and other stakeholders – including the NHS in London – can take to support LAS and improve performance for Londoners. This discussion resulted in a series of recommendations on how the NHS in London can support LAS, which are set out below. The Committee has written to LAS directly with a series of recommendations, and will also be writing to the Mayor of London and the Department for Transport to highlight recommendations specific to them.

LAS relationship with the Integrated Care Systems in London

The Committee is aware that the NHS in London has undergone significant change since the development of the five integrated care systems (ICSs): North West London, North Central London, North East London, South East London, and South West London. The King’s Fund has stated that “ICSs...are part of a fundamental shift in the way the health and care system is organised.”² According to the King’s Fund, these are “intended to encourage closer collaboration not only between NHS services, but also between the NHS and local authorities, the voluntary sector and other organisations.”³

The Committee discussed with LAS representatives the challenges that come with dealing with each ICS as the only pan-London healthcare provider. Andy Trotter, Chair of LAS, commented on the “complexity” that exists for LAS in managing these multiple relationships.⁴ Successful working relationships and collaboration between LAS and the ICSs are vital to ensuring the effective provision of healthcare in London. In 2021, the King’s Fund noted that collaboration across London’s health system “may require leadership and organisational development support to help embed new ways of working and overcome the remaining hurdles”.⁵ The Committee has also made a recommendation to the Mayor of London to work with LAS, NHS London, and the ICSs to explore options for a more simplified London-wide governance structure for LAS.

Recommendation 1: NHS London should consider providing additional resource and support to the healthcare system in London to help embed relationships between LAS and the five integrated care systems (ICSs).

LAS support offer to primary care

LAS representatives told the Committee that there is scope to develop closer links between LAS 999 and 111 services and primary care and GP practices, which could lead to improved outcomes for patients and the NHS. This could include linking LAS telephones to each primary care network and GP practice and answering calls on their behalf. The rationale presented by Daniel Elkeles, Chief Executive of LAS, was that it was easier for LAS “to recruit call handlers on that scale than it is for every GP practice in London to do that.” Daniel Elkeles also commented that this would free up “capacity for the GPs in practice to actually have more time to spend with the patients who really need them”. By exploring these options in London, there is potential learning for how ambulance services across the country can work better with primary care networks.

Recommendation 2: NHS London should explore how best to utilise LAS capabilities in relation to 999 and 111 services in its offer to primary care networks and GP practices.

² The King’s Fund, [Integrated care systems in London](#)

³ The King’s Fund, [Integrated care systems in London](#)

⁴ Health Committee Meeting Transcript – London Ambulance Service Strategy 2023-2028, 24 January 2023

⁵ The King’s Fund, [Integrated care systems in London](#)

North east London hospital bed stock

Hospitals and ambulance trusts across the country have been dealing with significant delays in hospital handovers in recent months. In discussion with the Committee, LAS representatives identified north east London as being the area in the capital where this issue is greatest, with Daniel Elkeles, Chief Executive of LAS, arguing that this is because “the population of north east London has grown absolutely massively and the hospital bed stock has not”. According to the King’s Fund, ‘north east London has the fastest growing population anywhere in the UK’.⁶

Hospitals across London need to have sufficient bed stock to match the surrounding population in order to avoid handover delays and allow ambulances to reach people in need. The hospital bed stock in north east London in particular should be reviewed to ensure that it is keeping up with rapid population growth.

Recommendation 3: NHS London should review hospital bed stock in London and ensure that plans for future hospital bed provision take into account and are able to respond to rapid population growth in parts of London.

Ambulance vehicle procurement

The Committee heard of the LAS’ difficulties in procuring vehicles to suit the specific needs of driving in London. Daniel Elkeles, Chief Executive of LAS, described the national specification ambulance made by Fiat as “totally unsuited to driving in London.” Daniel Elkeles told the Committee that ambulances in London needed to be automatic, low-weight and of a size that enables them to drive down small roads. However, the LAS experienced challenges when looking to procure different types of vehicles, as few manufacturers make vehicles to this specification. The Committee was told that LAS has been working with manufacturers such as Ford to overcome these barriers.

There is potential scope to bring down costs for ambulance trusts such as LAS if there is greater flexibility in national specifications, and greater collaboration between trusts to carry out joint procurement, recognising that similar challenges may also exist in other major cities across the country.

Recommendation 4: NHS England should explore options for making ambulance specifications more flexible, as well as facilitating joint procurement between trusts.

The Committee would welcome a response to this letter by 19 May 2023. Please send your response by email to the Committee’s Clerk, Diane Richards (diane.richards@london.gov.uk).

Yours sincerely,

⁶ The King’s Fund, [Integrated care systems in London](#)

A handwritten signature in black ink, appearing to read 'Krupesh Hirani', written in a cursive style.

Krupesh Hirani AM
Chair of the Health Committee