



THE SCOTTISH OFFICE

National Health Service in Scotland Management Executive

NHS
MEL(1993)48

St. Andrew's House
Edinburgh EH1 3DG

Dear Colleague

SCOTTISH AMBULANCE SERVICE: CONTRACTING ARRANGEMENTS

Summary

1. This letter is to advise on the contracting arrangements which will be operated for the Scottish Ambulance Service from 1 April 1993.

Action

2. All provider units who have not already done so should enter into a Service Level Agreement with the Scottish Ambulance Service for non-emergency Patient Transport Service (PTS) for 1993/94. These agreements should be capable of adjustment to take account of changes in patterns of demand.

3. Health Boards should ensure that nursing homes and other facilities attended by patients for whom they are responsible are covered by appropriate Service Level Agreements with the Scottish Ambulance Service.

4. This letter should be copied to Unit General Managers for action as required.

Yours sincerely

G W TUCKER

30 March 1993

Addressees

For action:
General Managers,
Health Boards

Chief Executives,
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General Manager,
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For information
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To be copied to Unit
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ANNEX A

Background

1. At present the Scottish Ambulance Service is funded direct by the Management Executive for the provision of Accident and Emergency Services (A & E) and for non-emergency Patient Transport Services (PTS). In recent years resources have been made available to separate these respective functions and to designate crews and vehicles to specific duties. This is sometimes referred to as tiering and has resulted in a tiered service in the following.

Lanarkshire Health Board area
Forth Valley Health Board area
Greater Glasgow
Lothian
Some other urban areas

2. The Ambulance Service will continue to pursue this policy but in many rural areas the dual purpose vehicle will continue to provide both services since it would not be economical in these cases to separate these functions.

3. Following the movement towards the purchaser/provider split in the NHS it has been decided that the same principles should apply to the A & E services and PTS. The Ambulance Service will therefore contract with purchasers for the provision of these services through service level agreements.

4. In the case of A & E services it has been decided that the Management Executive will act as purchaser on behalf of all NHS users in Scotland. A Service Level Agreement (SLA) is being drawn up for the provision of the A & E service and the funding for this will be included in the allocation which the Management Executive makes to the CSA. There will be no costs falling on either Trusts, DMUs or GPs in respect of the use of the A & E. The criteria to define when the A & E service can be used is set out in more detail at Annex B.

5. The Scottish Ambulance Service is drawing up, in consultation with provider units, Service Level Agreements for the PTS service. For 1993/94 these agreements will contain only indicative costs and no charges will be made for 1993/94. Special arrangements have been agreed with Forth Valley and Lanarkshire Health Boards where the service has been tiered since 1987 and been subjected to market testing with the Scottish Ambulance Service being awarded the contract. The funds in these cases have been transferred for 1993/94 to the Health Boards concerned.

6. From 1 April 1994, provider units will be required to pay the ambulance service for the costs of transporting PTS patients who are treated at that unit. In turn the provider unit will recoup these costs from purchasing Boards or GP fundholders as part of treatment costs. Allocations to Boards and GP fundholders will in future reflect the current costs of the PTS service provided. In untiered areas costs will be apportioned to reflect the use of A & E vehicles for PTS services.

ANNEX B

SCOTTISH AMBULANCE SERVICE - CONTRACTING ARRANGEMENTS

1. The Accident and Emergency Service shall be provided by appropriately equipped and crewed vehicles, including aircraft when necessary and will cover the following cases:-

1.1 Emergency Cases

Any case arising from a 999 call irrespective of source, or classified by a doctor as requiring an immediate response by the Ambulance Service. In the absence of information to the contrary, maternity and suspected coronary cases will always be treated as emergencies.

1.2 Urgent Cases

Urgent cases are those where ambulances are ordered by doctors, dentists or midwives and where a definite time limit for delivery is established with the caller.

1.3 Urgent inter-hospital Transfers and High Dependency Transfers

These operate in the same way as Urgent cases.

1.4 Major Incidents

A Major Incident is one which poses such a threat to public health or safety that it may require the attendance of a number of A & E vehicles from a number of areas. All users of the service should be aware that this may cause disruption to normal A & E service.