



About ERS Medical



ERS Medical operates nationally from 20 sites across the UK. Employing 1000 staff and 500 vehicles.

ERS Medical provides a wide range of specialist patient transport and courier services to the NHS and the wider healthcare sector. Clients include:

- Clinical Commissioning Groups
- Acute Hospital Trusts
- Mental Health Trusts
- Local Authorities
- Care Home Groups
- Private Individuals

In addition, ERS provides a comprehensive selection of internal and external training.







Member and Director



Corporate partner

ERS Medical role in discharge of individuals from hospital

- ERS Medical is commissioned by North Tees NHS foundation trust to facilitate the discharge of individuals from North Tees hospital
- ERS supply three double crew stretcher vehicles 365 days per year based out of our site in Bowburn Durham. The service is carried out between the hours of 9am-10pm and an ADHOC service is also provided through the night outside of the contracted times
- Mental health secure transport vehicles are also available to carry out sectioned- non sectioned transfers including covert and cell vehicles
- In 2020 ERS carried out an average of 450 discharges per month on behalf of North Tees Hospital
- Extra vehicles are also provided as required to facilitate out of area discharges. The extra vehicles
 are used to reduce pressure on the contracted resources
- Journeys are requested and booked from North Tees bed management via the Cleric passenger transport logistics system. The Cleric system provides real time support designed to maximise operational efficiency to reduce waiting time and delays for the service users



Communication(Feedback/Concerns

- On Board patient survey cards are handed out and completed daily. ,Providing both positive and negative feedback, the information received is cascaded across all ERS sites to provide shared learning and measures put in place as required. Further training will also be implemented if the need arises due to the feedback received
- Concerns are raised and completed as a matter of course. Radar healthcare and incident hotline is available 24 hours a day to raise any issues. All ERS staff have access to the system and are encouraged to raise any concerns, safeguarding or incidents .Referrals are then raised with the appropriate Social Services, Hospitals or trusts and investigated appropriately. Confirmation of these are then passed to local Ops as reassurance that they have been made. This also allows us to thank the crew for their referral and also to assure the crew that there concerns have been acted on, the crews will also be provided with Technical Feedback post event which again is passed on to the crew and recorded on a ROD form for future use
- Monthly operational meetings to review KPIs and raise any concerns .Agree on any actions that we feel
 will benefit the contract and patient requirements
- Hospital leads are encouraged to contact site as soon as possible with any concerns and not to wait until
 the next operational meeting. In doing so reducing the risk of repetitive incidents and allowing ERS to
 put actions in place at the soonest opportunity



issues relating to discharges

As a PTS service staff have little or no involvement in home provisions or medication requirements. Issues the crews tend to have in regards to patients discharge

- medication not ready when transport has been booked
- Care packages not in place as expected potentially having to return the patient to hospital
- Patients family or carers not aware the patient is returning home
- Equipment not in place to support the patient home living
- Access to property (key safe)
- Lack of information at time of booking delaying the transfer



Impact of Covid-19

- It quickly became clear that COVID-19 required the focus of the entire business and central coordination was needed to manage all aspects of our response.
- The impact of measures designed to slow the spread of COVID-19 are likely to persist into the longer term. These measures reduce the efficiency of NEPTS services and unless mitigated may have a detrimental effect on NEPTS service quality, performance and cost.
- Shielding high risk patients Travel alone of COVID-19 patients reducing efficiency
- High risk staff furloughed reducing manning levels
- Rise in sickness levels due to shielding
- Social distancing Drop in efficiency due to 2 metre distance on vehicle
- Time taken to accommodate additional IPC (Deep clean after every Covid patient)
- Level 2 PPE Increase use of PPE
- Bulkheads fitted to all vehicles



Managing PPE

From the outset, ERS Medical prioritised the procurement and management of PPE and have successfully maintained the correct levels at all sites across the UK. To overcome potential issues with quality, all orders are checked for suitability and compliance by an ERS Medical Quality Manager before entering the system.

This has been achieved by the swift implementation of our robust Business Continuity Plan and through our national escalation plan, ensuring the continual flow of information between all of our sites. To ensure supplies are maintained, ERS Medical has implemented a dedicated stock management strategy, creating a central hub for fulfilment and distribution to all our operational sites across the UK.

By sourcing from multiple suppliers; manufacturers direct, wholesalers, retail, and working with CCGs and Trusts we spread risk as much as possible. Equipment has been sourced nationally and internationally.

As part of this strategy, weekly meetings with Operational Teams are conducted along with regular stock takes. This delivers accurate planning and forecasting to ensure adequate supplies, and any unforeseen events are addressed immediately.





Partnership Working

It was clear that the situation required a coordinated response between providers, commissioners and customers.

ERS Medical took a proactive approach to engage with as many stakeholders as possible. We did this through a number of channels and took an open and transparent approach to sharing information (including with competitor organisations).

Customers

- Commissioning Groups
- NHS Hospital Trusts

Governing Bodies, Regulators, Trade Associations

- NHSE/I
- PHE
- CQC
- Independent Ambulance Association

Providers

- NHS Ambulance Trusts
- Independent Ambulance Providers





Thank You

