Summary

Central government activities in ambulance services (RiR 2012:20)

SWEDISH NATIONAL AUDIT OFFICE



Summary

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When an individual calls for an ambulance, it currently takes longer for the ambulance to arrive at the scene than was the case a few years ago. Complaints to the National Board of Health and Welfare concerning ambulance services are on the increase. In the absence of systematic follow-up of ambulance services, there is a lack of knowledge upon which to base necessary work to address the deficiencies that exist.

The Swedish National Audit Office (Swedish NAO) has audited whether the activities of central government actors contribute to an effective and secure alarm chain for ambulance care.

In this audit, the alarm chain refers to what happens from the time a person calls 112 until the time an ambulance has arrived at the scene. The Swedish NAO's overall conclusion is that the various activities operated by central government in the area do not sufficiently contribute to a secure alarm chain for ambulance care. These activities concern regulation, supervision, the management of SOS Alarm and preconditions for an effective alerting service. Central government can contribute to a better, more secure and more effective ambulance service. This can be achieved through the National Board of Health and Welfare issuing regulations and enhancing the supervision of ambulance care; through the Government exercising clearer management over SOS Alarm via the company's board and through central government ensuring that the alerting of ambulances functions well even with the inclusion of new actors. The Swedish NAO can thus see that central government, to a greater extent, can contribute to an effective and secure alarm chain for ambulance care.

Audit background

The reason for the Swedish NAO to have carried out the audit is that an effective alarm chain for ambulance care can be decisive for good results and effectiveness throughout the subsequent chain of care. An effective alarm chain for ambulances is also of great importance to people's sense of security. Complaints to the National Board of Health and Welfare concerning ambulance services have increased in recent years. Moreover, there is no comprehensive national knowledge of how the ambulance service works, with supervision in the area being limited and a risk that central government is not receiving the information it needs in order to take relevant action. The audit of central government activities in the alarm chain for ambulance care is part of a series of reports in which the Swedish NAO, from the patient's perspective, audits the effectiveness of central government initiatives in healthcare.

The purpose of the Swedish NAO's audit has been to examine central government activities in the alarm chain for ambulance care. The audit was based on the following audit question:

Do central government activities contribute to an effective and secure alarm chain for ambulance care?

An assessment of central government activities requires a picture of how the alarm chain for ambulance care functions. Since ambulance care is operated by county councils and sometimes by private operators, the Swedish NAO has obtained information about how the services are run. The Swedish NAO therefore describes activities that are run to a considerable extent by the county councils, without these being audit objects. Recommendations made as a result of the audit are directed solely to central government.

Audit results

The Swedish NAO has drawn the following conclusions from the findings that have emerged in the audit.

Too little knowledge and too little learning in the alarm chain for ambulance care

The audit demonstrates that it currently takes longer to get an ambulance than was the case a few years ago. The number of complaints to the National Board of Health and Welfare related to the alarm chain for ambulance care has also increased. There are statistics for the initial parts of the alarm chain, such as response times for the 112 number and emergency call processing. However, there is no uniform measurement of how quickly ambulances arrive at the scene with the patient, which means that it is not really possible to answer the question of the extent to which the alarm chain differs within the country and if it is functioning reliably. There are also no studies and no comprehensive national knowledge of how different skills requirements affect effectiveness and patient safety in emergency call processing and of what the trend of longer ambulance arrival times and more complaints is due to. The Swedish NAO's assessment is that central government has too little knowledge of developments in the ambulance services, with their possible deficiencies and differences in the country, in order to take the necessary measures and thereby contribute to an effective and secure ambulance care.

No systematic supervision of ambulance care

The National Board of Health and Welfare's supervision of ambulance care mainly takes place through investigations of the subject of complaints from healthcare providers or individuals. A large part of the time given to investigation is therefore placed on individual cases rather than on gathering similar problems and adopting a national approach to the issues. The Swedish NAO's assessment is that the Board has not engaged in analyses for the purpose of, for example, greater understanding of the relationship between the way of carrying out activities and their results. It has also emerged that the National Board of Health and Welfare only to a limited extent uses the regulations for ambulance care as a basis for its supervision. The Swedish NAO is also able to establish that the National Board of Health and Welfare's regulations for ambulance care do not embody the availability requirements on the provision of ambulance care resulting from the Health and Medical Services Act. The Swedish NAO's assessment is that the regulations should be further developed and used in systematic supervision with the intention of managing the risks identified in the National Board of Health and Welfare's risk analysis.

Regulations for ambulance care can be used to increase uniformity

Responsibility for organising and managing ambulance care lies with the county councils. The county councils enter into agreements with an actor for the alerting and directing of ambulances. It is also this actor that performs the function of setting priorities among ambulance cases. Most county councils have engaged SOS Alarm for this service.

Since the regulations for ambulance care only regulate ambulance services with respect to a few points, the county councils can set different requirements for alerting and directing services. For example, there are differences in the county councils' skills requirements for emergency call personnel, with some county councils requiring nurses in emergency call processing with the intention of strengthening the medical assessment in cases where treatment may be needed. Another example is the variation in the goals for availability. The Swedish NAO's assessment is that if the National Board of Health and Welfare were to examine whether the right to issue regulations can be used to make the requirements for ambulance services more explicit, the regulations would also affect the agreements signed between county councils and those actors involved in emergency calls. This would help those

in need of assistance to have more equal access to ambulance care.

The responsibilities of supervisory agencies should be clarified

The Swedish NAO's audit demonstrates that there is doubt as to which agency has supervisory responsibility for the transfer of emergency calls from SOS Alarm to other actors that alert and direct ambulances. Today, neither the National Board of Health and Welfare nor the Swedish Civil Contingencies Agency performs any supervision of the transfer of emergency calls between actors. The Swedish Civil Contingencies Agency's interpretation is that this is not part of its supervisory remit since the agency believes that the transfer of emergency calls is covered by statutory healthcare. The National Board of Health and Welfare conducts no systematic supervision in the area and thus performs no supervision unless the Board receives a complaint. This means that supervision falls between the remits of the two agencies, and therefore the responsibility is unclear in a way that involves risks for individuals and also ineffectiveness in the agencies' work.

The preconditions for actors in alerting services are unclear

SOS Alarm is no longer the only actor in Sweden commissioned by the county councils to manage the alerting and directing of ambulances. In conjunction with SOS Alarm not being solely responsible for all alerting and directing of ambulances, uncertainties have arisen in the cooperation between SOS Alarm and the new actor. This has primarily related to issues concerning the transfer of A-numbers, that is, information on telephone numbers and the localisation of the person in need of assistance, technical solutions and costs. Since all emergency calls go via the 112 number, other actors that want to establish themselves in alerting services are dependent on receiving A-number information from SOS Alarm. Currently, there is no technical solution to enable the transfer of this information. The Ministry of Defence has been made aware of the issue of transferring A-numbers.

The alerting agreement between central government and SOS Alarm only regulates the service with respect to the emergency number 112. Other questions that have arisen need to be resolved if the alarm chain for ambulances is to function effectively. These include questions concerning delays due to transfer from SOS Alarm to other actors that alert and direct ambulances and about technology and costs for transferring information, as well as questions concerning the division of responsibility. The Swedish NAO's assessment is that the issues that have been observed in this audit should be able to be considered within the framework of the deliberations made by the Alerting Service Inquiry.

Central government has not been sufficiently active as the owner of SOS Alarm

SOS Alarm has become one of several tenderers in a procurement procedure for the alerting and directing of ambulances. This has led to differences in the company's agreements with county councils, and the company has become adapted to regional requirements. This has meant a lack of clarity on the activities that have been carried out by SOS Alarm. What applies in one county council is not valid for another.

It has also emerged that agreements exist between county councils and SOS Alarm that lack profitability. One consequence of this has probably been that some of SOS Alarm's customers have contributed to the financing of ambulance services with other customers. If the company management has chosen to enter into agreements that have been unprofitable even at the time of their signing, this should have been done with the support of the company's board, which consisted of members appointed by central government and the Swedish Association of Local Authorities and Regions. However, SOS Alarm's current management has taken the issue seriously, and its board is devoting considerable time to this. The Swedish NAO assesses that unprofitable agreements have not been

compatible with the requirement of a business rationale. Finally, central government has not been sufficiently active in its role as owner of SOS Alarm, even though it has had representatives on the board.

The Swedish National Audit Office's recommendations

Based on the audit findings and conclusions, the Swedish NAO submits the following recommendations:

To the Government:

- The Government should follow up that the National Board of Health and Welfare or the new supervisory agency exercises its right to issue regulations with respect to ambulance services.
- The Government should follow up that the National Board of Health and Welfare or the new supervisory agency performs systematic supervision of ambulance services.
- The Government should clarify which agency has supervisory responsibility when calls are transferred from SOS Alarm to other actors that alert and direct ambulances.
- The Government should communicate the findings in this report, relating to the transfer of Anumber information and to the transfer of information from SOS Alarm to another actor, to the Alerting Service Inquiry for consideration.
- The Government should, as the owner of SOS Alarm, follow up that the company's board acts so that services are operated with a business rationale.

To the National Board of Health and Welfare:

- The National Board of Health and Welfare or the new supervisory agency should supplement its
 regulations for ambulance care with clearer requirements on the availability and provision of
 ambulance care.
- The National Board of Health and Welfare or the new supervisory agency should implement systematic supervision of ambulance care.
- The National Board of Health and Welfare or the new supervisory agency should in its supervision follow up the requirements stated in the regulations for ambulance care.