

Developing the  
LAS five-year  
strategy:  
feedback and  
recommendations  
from health, care  
and emergency  
organisations



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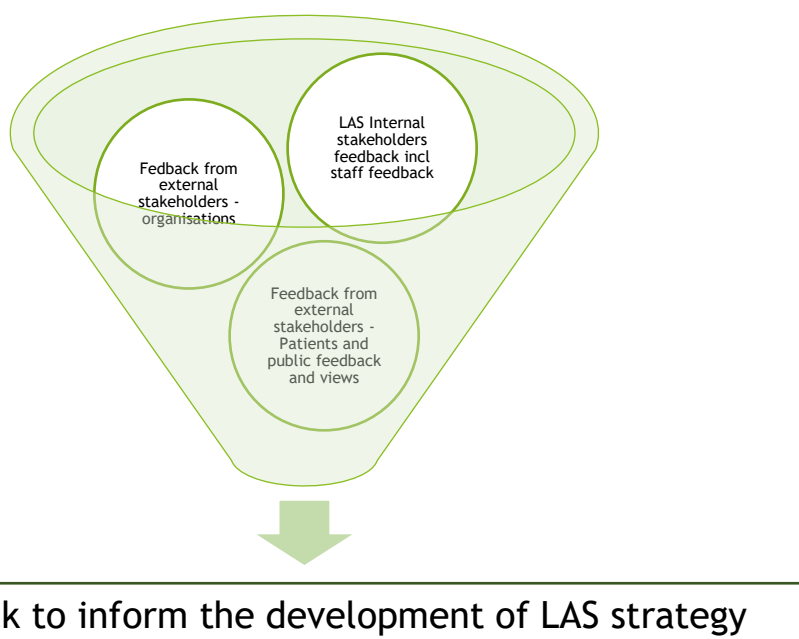




## Executive summary

London Ambulance Service NHS Trust has been engaging with a variety of stakeholder organisations to develop and shape the organisation’s vision and goals for the next five years. To achieve this, LAS has adopted a structured and inclusive approach to gaining feedback from internal and external stakeholders. This report provides a summary and key insights that LAS has gained to date from its external partners in the health and care system as well as blue light partners.

Please note that there are separate reports that focus on the feedback the Trust has gained from patients and public, and internal stakeholders which is not included in this report.



From June 2022 LAS has undertaken a structured engagement process with its external stakeholder organisations. As LAS is the only pan London NHS provider organisation, its stakeholder map is complex and multi-layered. Therefore, the organisation adopted an approach that first categorised its many stakeholders into three distinct groups:

- Stakeholders whom LAS needs to co-produce the strategy with
- Stakeholders whom LAS needs to engage with on specific aspects of the strategy
- Stakeholders whom LAS needs to keep informed about the progress and development of the strategy content

The Trust started this process in June 2022 and it will complete it by June 2023 when the LAS five year strategy is expected to be approved by the Trust Board. We also plan to continue to build on this engagement as we implement the strategy as many of these stakeholders will be key in delivering our ambitions.

A broad range of feedback and recommendations have been shared with the Trust through this process and a summary of the key themes are captured in this report. This document is intended to be used in conjunction with other internal and external engagement activity reports to provide an overview of all stakeholders’ views. A supplementary document summarising the outcomes of the engagement process between April and June 2023 will be produced later in the year.





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### Key recommendations from this engagement process:

- 1) LAS needs to establish a systematic approach to on-going engagement with external partners and stakeholders that maximises the joint impact and innovation on London's health and wellbeing and reduces health inequalities.
- 2) LAS should play its key role in supporting wider determinants of health by acting as an anchor institution, maximising opportunities for local employment and skills development, purchasing from local partners and achieving clean air for London.
- 3) LAS needs to increase its partnership working at a local, system, regional and national level on developing collaborative workforce models, data sharing to drive insight into patients' needs and estates sharing arrangements to maximise benefits to patients.
- 4) LAS needs to play a key role in public education on the usage of emergency services and navigation within the wider UEC system.
- 5) LAS should use its contacts with the public as an asset to engage, mobilise and build trust with communities - this is an important lesson from the pandemic and should be a core part of LAS strategy.
- 6) LAS should increase joint working with partners across all parts of the system to reach more diverse communities and encourage their members to consider careers with LAS.

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## Introduction

This part of the engagement process on the Trust's developing five year strategy aimed to gather feedback and views of LAS's organisational stakeholders who operate in the wider health and care system as well as blue light services area. The insights gained through this process have influenced the development and strategic thinking on how the Trust's services need to develop and align with those provided in the wider system it operates in.

By conducting the engagement in parallel to the internal strategy development work, the Trust wanted to ensure that our partners' and wider stakeholders' views and opinions have been identified and woven into the strategic development process early on.

A further phase of the engagement process will commence when the five year strategy is finalised and approved by the LAS Board to ensure that our partners are familiar with its final version and that it lays the groundwork to continue to work together to deliver the ambitions in the strategy.

LAS would like to express its gratitude to all the stakeholders who have taken part in this comprehensive engagement process. Our teams look forward to implementing new innovative ways of working in collaboration with our partners to improve care for people living and working in London.





## Methodology

This engagement activity was conducted between June 2022 and March 2023 and focused on gathering views of our external stakeholder organisations at:

- Bespoke workshops and strategy sessions
- Virtual focus groups
- Individual meetings with key senior leaders in the system
- Presentations at existing governance system meetings or sessions.

The project was targeted to engage with our partners in a systematic and structured way to maximise the feedback and input into LAS strategy development. The method of engaging with various stakeholders was aligned with the category that a stakeholder had fallen into:

- Stakeholders whom LAS needs co-produce the strategy with
- Stakeholders whom LAS needs to engage with on specific aspects of the strategy
- Stakeholders whom LAS needs to keep informed about the progress and development of the strategy content

Over the last ten months LAS has engaged with **over 60 organisations** at borough, ICS, London and national levels, meeting with **over 300 leaders** from various health, care and emergency response organisations. This has included the following groups:

- **London governments**, including Greater London Authority, Mayor of London, London Association of Directors of Adult Services (ADASS), London Association of Directors of Public Health (ADPH), GLA Health Committee, chairs of Health and Wellbeing boards and London Councils.
- **Health and care system partners**, including ICBs, NHS acute provider trusts and NHSE (London region and national).
- **Primary care, community and mental health trusts**, including primary care networks (PCNs), London-wide LMC and Cavendish Square Group.
- **Other blue light and emergency response services**, including other ambulance services, Metropolitan Police Service, London Fire Brigade.

Our engagement with London governments includes a GLA-led call for evidence from across health and care system and a dedicated strategy session with the GLA's Health Committee that resulted in a letter of recommendations shared with the Trust (please see Appendix 1).

The qualitative feedback and views received from our stakeholders have been collated and a thematic analysis conducted. The key insights and recommendations that have emerged through that process are presented in this report. They are categorised into two sections:

1. Key themes that have emerged from the **feedback from all external stakeholder organisations**.
2. Key themes that have emerged from the **feedback from specific stakeholder groups**. This provides more detail on what specific stakeholder groups have fed back to us and recommended for our consideration in the LAS strategy development process.

There have been other, more practical and locally-focused ideas and feedback that the Trust has received through this process which have been acted upon already or have been used to shape the 2023/24 plan for the delivery of the strategy.





## Findings

The aim of our engagement is to ensure that our strategy reflects our ambition to work together in a meaningful way with our partners across the health and care system. We will use this feedback to inform the development of our five year strategy, and as the basis for ongoing conversations and partnership working.

Key themes that have emerged from the engagement process with all key external stakeholder organisations:

1. LAS is a **valued and trusted partner** in emergency and urgent care part of the system.
2. **Our partners broadly support our aspirations and goals for the next five years** that we intend to develop as part of the strategy development process. Our engagement approach including sharing our early thinking on key strategic aspirations has been welcomed and appreciated by our partners.
3. Our partners start having an increased awareness of LAS's key role in improving health and wellbeing of people living and working in London and **Trust's unique contribution to reducing capital's health inequalities**.
4. There is a strong will and appetite to **increase partnership working** and collaboration with the Trust at all levels of the system. They welcomed this engagement and want to continue the conversation.
5. Our partners recognise **the challenge of LAS being the only pan-London NHS provider** and in their feedback have provided the Trust with localised approaches that we need to consider when engaging with organisations that operate at that level.
6. Our partners want us to be **more flexible, and manage the balance of system-wide and local engagement**. They would like us to have a stronger voice in cross-organisational conversations with them and other partners.
7. Our partners recognise **the potential that increased sharing of data, workforce and wider resources can bring to benefit patients**, LAS and wider system it operates in.
8. There is a **need to educate our partners and wider stakeholders on services and support the Trust provides** - LAS is automatically linked to 999 and emergency response and many of our partners are not aware of our key role in providing 111 service, specialist services such as HART, public education or being the top national NHS apprenticeship provider.

The next sections of this report detail high level themes of feedback and recommendations from partners in specific parts of the system.







Feedback and recommendations from London governments:



# Feedback

- LAS is supported in its strategic goals of recruiting more within London and ensuring that the diversity of our workforce is increased to reflect London's diversity. LAS received positive feedback on its ambitions to increase its reach into secondary schools and colleges to make LAS roles more attractive.
- 111 service pathway is complicated and difficult for elderly people to navigate.
- Our partners highlighted the need to align with ICS priorities, particularly on workforce strategies and recruitment.
- Our partners reflected on the fact that our local services are rarely co-located with others ie social care teams etc
- Partners indicated that based on the feedback they receive there seems to be the need to strengthen the communication between LAS and GPs/Primary care
- Want to know more about LAS ambitions around sustainability. Clear measures and goals for reducing the air pollution produced by our fleet was wholeheartedly supported.
- Other blue light services face similar challenges to achieve zero emissions and Londoners would benefit from LAS working with LFB and Met Police working on this aim together.
- LAS should use its contacts with the public as an asset to engage, mobilise and build trust with communities - this is an important lesson from the pandemic and should be a core part of LAS strategy.
- Strong support for our direction of travel, in particular focussing on our role as an anchor institution, diversifying our workforce, working in partnership, and our role in reducing health inequalities.



# Recommendations

- Increase engagement with patients and people living and working in London to give them a greater say in how the services LAS provides are delivered.
- Increase its role in public education to ensure that the members of the public know what constitutes an emergency and when to call 999 or 111.
- Need to build and strengthen partnerships with other NHS, local government, third sector and emergency services in the London system to maximise its impact on public health, innovation, workforce sharing and public education opportunities.
- LAS was encouraged to explore how funding could be released by London Mayor to make the organisation's estate greener.
- Should extend London Living Wage to all employees across system (which LAS has achieved in March ahead of the strategy being published).
- Would like LAS to play more active role in local borough-level systems where the more granular data would be helpful to drive change, particularly around support for repeat callers.
- Actively pursue a recruitment/workforce strategy underpinned by specific measures and goals which is anti-racist and ensures 'London is reflected' at all levels of the organisation.
- LAS role as an anchor institution needs to be prominent in the strategy - especially regarding tackling health inequalities and boosting local opportunities for employment and skills development.
- A key part of our role as an anchor institution is also related to sustainability, and we should have clear goals and targets to underpin our plans.





Feedback and recommendations from health and care system partners, including ICBs, NHS trusts and NHSE London:



## Feedback

- It's important to recognise that LAS has local, system, regional and national role to play in the UEC system.
- The scope of LAS, being a pan-London provider, is seen as an advantage although there are challenges in implementing changes across London and decreasing variation in service provisions.
- Recognition of positive local operational relationships, however there was an ask for more strategic input at a system level. There is a tension between pan-London standardisation and place based partnerships.
- Resolving hospital handover issues this winter has been challenging and LAS needs to continue on-going collaboration with Trusts across London to prevent that happening next year.
- LAS data from 111/999 calls could help with preventative care for patients.
- There is a need to develop pathways that work within place approach - LAS should offer varied services.
- Encouraging to see the pilots of paramedics rotations working in primary care and it would be helpful to explore how LAS could create other rotational programmes with emergency Departments.
- All partners across the London system need to provide better care for mental health patients, and our partners fed back on the positive role of mental health joint response cars introduced across London.
- Recognition that LAS staff and leaders are stretched but too often LAS voice or presence is missing in partnership and collaboration projects and planning across ICSs.
- There is a need for more cross-system understanding of what LAS does. Would like to see evidence driven awareness raising about our role.



## Recommendations

- LAS needs to be supported in standardising its care across London without losing the ability to offer local solutions and innovation.
- To increase collaboration with ICSs and other NHS Trusts, where LAS can work in a supporting capacity for innovation within the acute and primary sector.
- Connections and collaboration with LAS should be strengthened across all the ICSs, particularly by sharing plans, data, feedback and best practice.
- LAS should be working closely with ICS partners such as acute provider collaboratives to run pilots with robust evaluation processes to ensure that 'value for money' solutions are adopted and scaled up by the systems.
- There is potential for cross-system partnering particularly in regards to collaborative workforce models across UEC partners in London and LAS should play a key role in its development.
- LAS should play a role of connecting and sharing best practice in UEC across five ICSs.
- Work linked with being an anchor institution is very important and LAS should be leading it across London communities.







## Feedback and recommendations from primary care, community and mental health trusts:



### Feedback

- There is a window of opportunity for LAS to work with primary and community partners around implementation of the Fuller stocktake that should be fully capitalised by the organisation.
- Our partners are keen to work together, particularly on reducing health inequalities in London's diverse communities.
- There is a need for pooling resources across the system, particularly around workforce. It has been fed back that the current paramedics rotational programme with PCNs does not always offer best value for money.
- Working with primary care at scale has been a challenge and LAS needs to adapt its approach to recognise that.
- Community trusts would welcome the opportunity to work together on hosting paramedic roles and exploring opportunities of increased collaboration on rapid response services.
- There is a need to agree some of the terminology used to avoid confusion on clinical responsibility ('referrals' vs 'sending data for information').
- The current system with 111 GP slots could be more effective, for example and could be better to reduce the number of appointments but pool them and drive the utilisation up. This would need to be done at scale.
- 111 algorithm could be improved as currently it sometimes adds to the workload rather than resolve the need and demand.



### Recommendations

- There is a need for increased partnership working and closer links between 111 and 999 services, and GPs and PCNs.
- LAS needs to share the data with primary and community care in an efficient and insight-driven way to help drive the improvement of care and reducing health inequalities.
- Primary care colleagues would like to increase collaboration with LAS on frequent callers cohort of patients. There is also scope for better and more effective interventions when the third sector is involved in support for this cohort on a neighbourhood basis.
- LAS should work together with GPs on urgent care plans to streamline the response across the system and reduce conveyances to hospitals.
- Collaboration between LAS and primary care to explore how CAS could be used in the home visits system.
- Using the same language, codes and systems across primary care, LAS and secondary care **could** revolutionise the way we communicate and remove the inefficiencies in the system.
- LAS should explore opportunities of supporting those practices that are struggling with meeting the demand with their telephony systems. LAS could target work to those who don't have systems in place to deal with the overflow to screen the clinical need of those patients and building on the existing e-hub models.





Feedback and recommendations from other blue light and emergency response services:



# Feedback

- Very positive response to the strategy and its key goals and objectives.
- Keen to strengthen and increase partnership working at the strategic development level
- Skilled workforce sharing approach a key opportunity to work together.
- There is a need to ensure language for mental health patients is inclusive.
- Potential for collaboration on pre-hospital piece.
- Working at place level is recognised as a challenge for LAS as a pan London organisation
- LAS is recognised as a key partner for other emergency services in London and a link to wider health system and its stakeholders.
- Police experience high level and growing demand from members of the public in mental health crisis.
- We must work together to share lessons and best practice in regards to diversity and inclusion as our organisations are facing similar challenges and opportunities.



# Recommendations

- Increase joint working to reach more diverse communities who are less aware of how to access emergency services.
- Increase joint working on developing and implementing innovative recruitment and retention strategies to increase the diversity of workforce across London's emergency services.
- LAS needs to play a leading national role in ambulance sector in sharing best practice and approach to engagement, data-driven population health insights and collaboration in a complex London system.

## Conclusions

The external stakeholder organisations engagement process has been key in understanding our partners' feedback and view on how we could develop as an organisation and maximise our positive impact on the wider system to best serve the needs of the people living and working in London.

Through this process the Trust has achieved the following goals:

- Collate the high level themes of stakeholders' feedback and ideas across the health and care system and blue light organisations,
- Gather locally-focused feedback and ideas that our local teams will be exploring and implementing with the partners
- Demonstrate the Trust's commitment to working in partnership with other organisations in the wider health and care system as well as blue light partners to improve care and outcomes for London.





## Recommendations

Key recommendations from this engagement process:

1. LAS needs to establish a systematic approach to on-going engagement with external partners and stakeholders that maximises the joint impact and innovation on London's health and wellbeing and reduces health inequalities.
2. LAS should play its key role in supporting wider determinants of health by acting as an anchor institution, maximising opportunities for local employment and skills development, purchasing from local partners and achieving clean air for London.
3. LAS needs to increase its partnership working at a local, system, regional and national level on developing collaborative workforce models, data sharing to drive insight into patients' needs and estates sharing arrangements to maximise benefits to patients.
4. LAS needs to play a key role in public education on the usage of emergency services and navigation within the wider UEC system.
5. LAS should use its contacts with the public as an asset to engage, mobilise and build trust with communities - this is an important lesson from the pandemic and should be a core part of LAS strategy.
6. LAS should increase joint working with partners across all parts of the system to reach more diverse communities and encourage their members to consider careers with LAS.

## Acknowledgments

The Strategy and Transformation team would like to thank all clinicians and Trust's senior managers who attended meetings, workshops and sessions with LAS stakeholders to present and answer questions on the developing the five year strategy.

LAS would like to express its gratitude to all the stakeholders who have taken part in this comprehensive engagement process. Our teams look forward to implementing new innovative ways of working in collaboration with our partners to improve care for people living and working in London.





## Appendix 1: Letter from London Assembly Health Committee Chair

### **Krupesh Hirani AM** **Chair of the Health Committee**

Daniel Elkeles

Chief Executive Officer, London Ambulance Service (Sent by email)

Dear Daniel,

20 February 2023

### **London Ambulance Service Strategy** **2023-2028**

Thank you for inviting the Health Committee to the London Ambulance Service (LAS) Dockside Education Centre and Emergency Operations Centre (EOC) in Newham on 24 January 2023.

The Committee appreciated the time that LAS staff took to show us around, and it helped bring to life the work that LAS does in taking calls from the public and training paramedics. We also appreciated being able to question LAS representatives on the new LAS strategy.<sup>1</sup>

The Health Committee welcomes the opportunity to contribute to the new LAS organisational strategy for 2023-28. The Committee hopes to meaningfully feed into the strategy through the recommendations included in this letter.

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 also looked at the emerging themes of the new LAS strategy, and explored whether these are the right priorities for LAS. The Committee was interested in what further objectives should be included in LAS'

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<sup>1</sup> The LAS panel for the strategy session included: 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.





strategy for 2023-28 in order to drive up performance for Londoners, and what action the Mayor can take to support LAS and improve performance.

## Involving patient voice in LAS decision-making

Evidence presented to the Committee through our call for evidence suggests that the LAS could do more to involve patient groups in policy development and decision-making processes. In particular, responses mentioned the desire for patient groups to have greater access to LAS performance data.<sup>2</sup> High levels of engagement and transparency should be the norm, in order to allow patients to constructively feed into decisions on how services are delivered.

Patient groups can provide insights into patient needs. Healthwatch Kingston carried out community engagement from November 2022 to January 2023 on the subject of LAS performance in the local area and where improvements could be made.<sup>3</sup> One of its findings was around how LAS could improve service provision for those who are neurodiverse or have a learning disability. This kind of insight is invaluable in supporting the organisation to adapt to the diverse needs of Londoners, and LAS must ensure that there are processes in place for patients, particularly those with specific needs or from disadvantaged backgrounds, to provide this kind of feedback.

One of the development principles of the LAS Strategy 2023-2028 is that it should be co-developed and co-produced with partners including patients and the public. The Health Committee believes that this should be an overarching principle for the LAS and should guide their operations throughout the lifespan of the strategy, not just in its development. By better involving the patient voice, in particular those experiencing health inequalities, the LAS can become a more responsive organisation better placed to serve London's diverse communities. Roger Davidson, Director of Strategy and Transformation, told the Committee that LAS has "a patient and public council... in the organisation now and we also have ways of understanding what the experience of our patients is. However, we do recognise that we want to get better at this and in particular we want to understand well things like health inequality." The Committee believes that the 2023-2028 strategy should set out how this will be achieved.

**Recommendation 1:** *The LAS should include in its new strategy commitments to increase levels of patient engagement, in order to give patients a greater say in how services are delivered.*

## Public Awareness and Education

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. 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.<sup>4</sup> The Healthwatch Kingston consultation also found that "people wanted more education for the community on how to

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<sup>2</sup> Patients' Forum for the London Ambulance Service, Evidence Regarding Performance of the London Ambulance Service – Submission to the London Assembly Health Committee, 11/1/23

<sup>3</sup> 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

<sup>4</sup> Ibid







support themselves before emergency intervention is required.”<sup>5</sup> 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. These initiatives and campaigns are welcome. However, during the meeting, LAS representatives noted that there was a challenge in measuring the effectiveness of these public awareness campaigns. Specific and measurable targets should be included in the new strategy to make sure that LAS is making progress in this area, and that the public in London know how to most appropriately utilise ambulance services.

**Recommendation 2:** *The LAS should include in its new strategy specific commitments and targets around public awareness and education initiatives. These should relate to issues such as when the public should call 999, how they should do so, and actions they can take to prevent emergency care being required in the first place.*

## LAS Workforce Diversity

Theme 5 of LAS’ new 2023-2028 strategy includes the commitment “to improving our diversity so we better represent the people of this city”.<sup>6</sup> According to LAS data, 20 per cent of the LAS workforce is from a BAME background.<sup>7</sup> Although this proportion is increasing, the level of BAME representation varies at different levels in the organisation with 40.9 per cent in the lowest 4 employment bands, compared to 15.9 per cent in the highest.<sup>8</sup> LAS conceded to the Committee that this was an area in which it wanted to improve. As you told the Committee at the strategy session on 24 January, LAS is “at only 20 per cent diverse workforce. In a city where 50 per cent of people are not white British, that feels totally wrong.”

One specific area of focus that LAS highlighted is creating different pathways into paramedicine beyond the traditional route through university. LAS representatives suggested to the Committee that by increasing take-up of different routes into paramedicine such as the entry- level ambulance practitioner programme, and by training and upskilling LAS call-handlers, the LAS workforce will become more ethnically representative of London.

The Committee welcomes LAS’ desire to better represent the population that it serves, and create pathways for people of diverse backgrounds to achieve fulfilling careers in the organisation. The 2023-2028 strategy should include a detailed action plan with specific targets for how it will improve diversity in paramedicine and in the organisation as a whole.

**Recommendation 3:** *The LAS strategy should include targets and an action plan for how it will improve workforce diversity, in particular for paramedics.*

## LAS outreach with schools and colleges

The Committee heard the LAS has a recruitment team that carries out engagement work with schools and colleges, in order to encourage more people to pursue a career in the organisation. Given that it takes several years to train as a paramedic, this work is important in attracting

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<sup>5</sup> Ibid

<sup>6</sup> Information provided to the Health Committee by LAS

<sup>7</sup> Integrated Performance Report, May 2022, [London-Ambulance-Service-Integrated-Performance-Report-May-2022.pdf \(londonambulance.nhs.uk\)](https://www.londonambulance.nhs.uk/Integrated-Performance-Report-May-2022.pdf)

<sup>8</sup> Ibid







people to the profession from a young age. It is also essential that young people are made aware of the various routes into the profession, including through apprenticeships. In relation to outreach work with schools and colleges, Roger Davidson noted that ‘we do not think we have cracked it in any way, shape or form, but it is going to be a focus in terms of ambition’.

**Recommendation 4:** *The LAS strategy should include commitments and targets in its strategy to increase its outreach work in schools and colleges, in order to encourage more people into the profession.*

## LAS and Public Health in London

LAS has a significant public health function and a role as an anchor institution to improve the health of Londoners. One of the new strategy’s themes, ‘Contribution to life in capital’ includes a focus on public education, where LAS says that it has “dedicated public education teams” and that it runs “public health campaigns that are aimed at improving public health, tackling inequities and contributing to developing thriving local community”.<sup>9</sup>

The Committee heard that LAS is carrying out hundreds of thousands of blood glucose and blood pressure checks across London when treating patients at the scene. Through these health checks, LAS is gathering information that could provide valuable insights into the health of particular communities across London. However, Roger Davidson, Director of Strategy and Transformation told the Committee that “there is not necessarily a natural flow of information about what we are seeing”.

It is essential that LAS develops these links into the wider public health system to facilitate information sharing, and collaboration on public health initiatives. The Committee found that there had been minimal contact between LAS and the new GLA Group Public Health Unit (PHU). The PHU was established in April 2022 to provide independent public health advice and support across the GLA Group.<sup>10</sup> LAS should set out how it will work together with bodies such as the GLA Group PHU and others to create a collaborative environment of information-sharing and joint working to improve the health of Londoners.

**Recommendation 5:** *The LAS should include in its strategy plans for how it will work collaboratively with London’s wider public health system, including the new GLA Group Public Health Unit.*

## LAS and Sustainability

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.<sup>11</sup> 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”.<sup>12</sup> 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. According to LAS' Carbon Neutral Plan, making the existing estate more energy efficient, and replacing gas boilers with renewable sources of heating by 2032, is 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 sufficient"<sup>13</sup>. At the meeting, LAS representatives noted that the Mayor of London could potentially offer support in securing this funding, and that this should be explored further.

**Recommendation 6:** *The LAS should include in its strategy how it will explore working with the Mayor to release funding for greening the LAS' estate.*

The Committee would welcome a response to this letter by Friday 31 March 2023. Please send your response by email to the Committee's Clerk, Diane Richards ([diane.richards@london.gov.uk](mailto:diane.richards@london.gov.uk)).

We would also welcome an update from LAS in 12 months on actions taken in response these recommendations and progress in implementing the new strategy.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'Krupesh Hirani', written over a light blue horizontal line.

**Krupesh Hirani AM**

**Chair of the Health Committee**





**Appendix 2- Engagement overview with health and care and system partners  
(a full list of all the meetings is available)**

<b>London Governments</b>	
Greater London Authority (GLA)	Including a strategy session with GLA Health Committee and meetings with Dr Tom Coffey, Health Advisor to the Mayor of London. Fiona Twycross, Deputy Mayor, Fire and Resilience Jazz Bhogal, Assistant Director, Health, Children and Young Londoners
London Association of Directors of Adult Services (ADASS)	
London Association of Directors of Public Health (ADPH)	
Chairs of Health and Wellbeing Boards (HWBBs)	
London Councils	
Meeting with Professor Kevin Fenton, Regional Director for London in the Office for Health Improvement and Disparities (OHID)	
<b>Health and care system partners</b>	
Integrated Care Boards (ICBs)	Including forum with ICS Strategy and Transformation Directors Group, and meetings with UEC leads and other key representatives.
NHS acute provider trusts	
NHS acute provider collaboratives	
NHS England London region	
NHS Confederation	
Pan London UEC Board	
College of Paramedics	
Royal College of Emergency Medicine	
<b>Primary care, community and mental health trusts</b>	
Primary Care Networks	Bespoke two focus group sessions with PCN Clinical Directors from across London
Community trusts	
London-wide LMC	
Cavendish Square Group	
GP Federations	
<b>Health, care and emergency organisations</b>	
National Ambulance Strategy and Transformation Directors Group	
Association of Ambulance Chief Executives	
Metropolitan Police Service	
London Fire Brigade	
London Air Ambulance	
St John's Ambulance	

