RSH ED Maximum Ambulance Handover Threshold: 3 and 2 hours

SaTH Improvement Hub

Theme | MECTP

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The Shrewsbury and Telford Hospital NHS Trust

REASON WHY?

Delays in offloading patients from ambulances increase the risk of deterioration. Transferring patients within 45 minutes ensures timely clinical assessment and intervention in the ED. It also frees ambulance crews to respond to other emergencies, improving overall patient safety across the system.

SMART AIM

- To accept handover of all patients arriving by ambulance within 3 hours of arrival to ED during February 2026 and 2 hours during March 2026.

PLAN

Following on from the success of the 4-hour maximum handover threshold in January 2026, the 3-hour threshold was planned to go live on 16th February 2026 and 2 hours on 11th March 2026.

Following feedback during the 4-hour handover threshold, teams in ED reported minimal observable impact from the 2222 bleep escalation process. As a result, it was agreed that this approach would be replaced with huddles involving key stakeholders. These huddles will aim to support proactive planning and create additional capacity during periods of increased pressure, such as surges in ambulance arrivals or when handovers are approaching the maximum threshold.

DO

There were regular feedback meeting with the teams around the maximum ambulance handover threshold process.

The ambulance navigator escalated patients awaiting handover at 2 hours to the Nurse in Charge (NIC) and Clinical Site Manager (CSM), to enable them to plan to create capacity.

The decision to enact immediate handover was made fifteen minutes prior to the maximum handover threshold to avoid exceeding the threshold. The patient was then offloaded into the department and then the crew released promptly.

Huddles with key stakeholders were carried out as an escalation process at times of surge in ambulance arrivals , or when ambulances were approaching the maximum handover threshold to help create capacity.

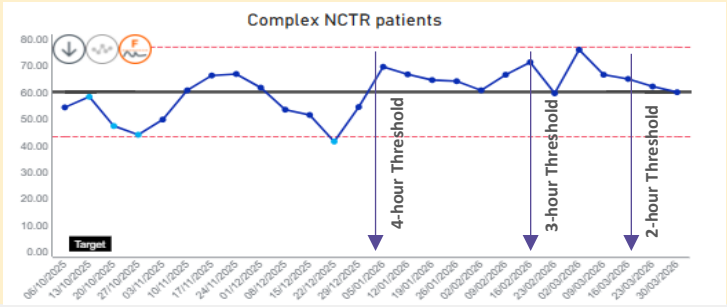
STUDY

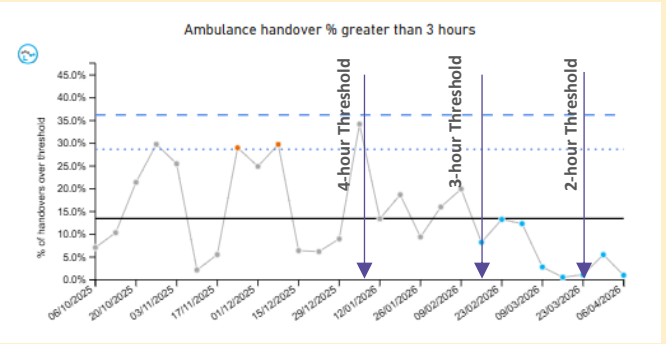
The SPC charts for ambulance handover performance demonstrate improvement over the 3-hour and 2-hour handover threshold processes, showing a reduction in prolonged handover delays and suggesting that the process is having a positive and sustained impact.

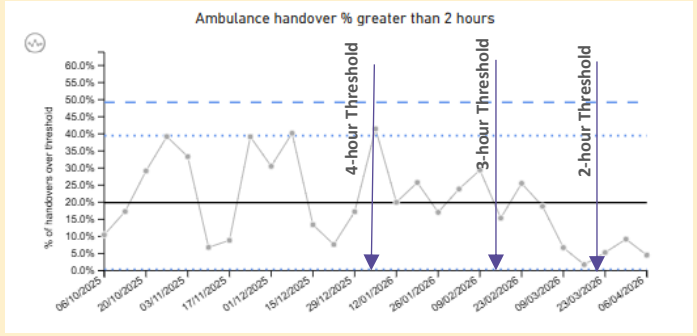
Throughout the 3-hour and 2-hour Maximum Ambulance Handover Threshold mean No Criteria to Reside (NCTR) performance remains stable, slightly above target showing common cause variation. The improvement and downward shift in the ambulance handover charts aligns with periods where pressure appears to ease suggesting that improvements in patient flow and capacity in the wider system due to the additional 94 beds created over the winter period has also contributed to reduced ambulance delays.

The mean ambulance handover time reduced from **58 minutes** in March 2025 to **46 minutes** in March 2026, representing an **18% improvement**. This has enabled ambulance crews to be released more quickly to respond to patients in the community and demonstrates that the Trust is on track to achieve the 45-minute maximum handover standard.

Feedback from teams within the Emergency Department (ED) has been positive. Staff report a strong sense of ownership and pride in their ability to release ambulances back into the community, which plays a vital role in maintaining patient safety.







ACT

The Division will adopt the maximum offload threshold process and continue with the proposed trajectory of reducing the threshold to 45 minutes in April 2026.

ACKNOWLEDGEMENTS & REFERENCES | Consultant and Nursing Teams in RSH ED.