### London Ambulance Service Computer Aided Disaster

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Software Engineering 3B03

They made virtually every mistake in the book.

— Paul Williams LAS Inquiry Member<sup>9</sup>

I have decided the honourable course of action is to offer my resignation.

— John Wilby chief executive of LAS and primarily responsible for CAD system October 28 1992<sup>5</sup>

#### Outline

- Stakeholders: The key players and their role
- Lead Up: Gearing up for failure
- Failure: 900 Complaints
- Aftermath: *Taking responsibility*
- Epilogue: Ethics or Lack Thereof
- Conclusion and Discussion

### Stakeholders:

# London Ambulance Service (LAS)

- Management
  - John Wilby Chief Executive
  - LAS Board
- Workers
  - NUPE (National Union of Public Employees)
- Procurement Team

### Stakeholders:

# Apricot Computers/Systems Options

- Apricot Computers (Apricot)
  - UK Based hardware manufacturer
- Systems Options (SO)
  - Small UK software developer
- Lost bid for simpler Cambridgeshire Ambulance Service CAD system.<sup>12</sup>
- Won Bid for LAS CAD

#### Stakeholders: British Government

- Virginia Bottomley Health Secretary under John Major (Prime Minister)
- David Blunkett Shadow Health Secretary
- Oversaw LAS indirectly through National Health Service (NHS)

#### Stakeholders

- Citizens of London
  - Need access to LAS for emergency medical care
- Local and Regional Health Organisation
  - Health Councils, Hospitals, District Health Authorities
- Competing Bidders
  - Recognised Apricot/SO proposal and implementation was flawed

# Lead Up:

# LAS Background and Motivation

- Serves 6.8 10 million people
- Over 700 Ambulances
- Largest Ambulance service in the world<sup>12</sup>
- Manual dispatch system was inadequate<sup>2</sup>
  - Slow, New standard required 3 min mobilization
  - Error Prone
- LAS believed CAD was the only possible solution

### Lead Up: The First Try

- Development began in 1987<sup>2</sup>
- Specification changed drasticaly in 1989<sup>2</sup>
- Canceled October 1990 after two failed tests<sup>2</sup>
- Independent investigation recommended<sup>2</sup>
  - Modifying another districts system
  - Expected cost of £1.5 million and 19 months
  - Costs and timeframe would increase if developed from scratch

### Lead Up: Specification and Bidding

- Extremly ambitious design
  - All decision making removed from operators
- Unrealistic rigid timeframe and budget<sup>12</sup>
- Bid awarded to Apricot Systems/Systems Options
  - Price £937 463
  - Next two lowest £1.6 and 3 million<sup>2</sup>
- Negitive references for Apricot/SO ignored<sup>2</sup>
- Reason behind low cost not investigated<sup>2</sup>

### Lead Up: System Development

- Apricot had pressured SO into bidding<sup>12</sup>
- Underestimated complexity of software (4% of budget)<sup>2</sup>
- 6 month time scale<sup>2</sup>
- No formal project management/methodology<sup>2</sup>
- No Quality Assurance<sup>2</sup>
- No test plan<sup>2</sup>
- December 1991 deadline moved back 9 months<sup>2</sup>

### Lead Up: Warning Signs

- First two phases plagued by problems<sup>2</sup>
- NUPE called for inquiry in March 1992 after major system crash<sup>2</sup>
- Computer and safety experts warned government of serious flaws<sup>8</sup>
  - Dismissed by Health Secretary
- LAS board received non-confidence vote from internal department<sup>2</sup>
- LAS under government pressure to reduce budget<sup>2</sup>

#### Failure: Day 1 & 2

- CAD system went live October 26 1992 at 3 A.M
- 2 serious errors, 44 operational errors and 35 minor problems known<sup>2</sup>
- Mid-morning ambulances were late and and "doubling up" on calls<sup>2</sup>
- Terminals flooded with error messages<sup>4</sup>
- Kept up for 35 hours
- LAS received over 900 complaints<sup>2</sup>

#### Failure: Day 3

- October 27 1992 system returned to Phase 2<sup>4</sup>
- Up to 46 people may have died prematurely<sup>2</sup>
- October 28 John Wilby Chief Executive of LAS resigned<sup>5</sup>
- Martin Gorham took over the position
- Health Secretary called for immediate inquiry<sup>5</sup>

### Failure: Day 10

- System fails again resulting in 30 minute delay<sup>7</sup>
- Back up systems failed to function adequately<sup>2</sup>
- Manual dispatch resumed<sup>7</sup>
- Most units reported dramatic improvements in efficiency after the switch back to manual operations<sup>2</sup>

#### Aftermath: Dealing with Failure

- Numerous technological and design failures
- Serious management and accountability failures<sup>12</sup>
  - John Wilby resigned<sup>5</sup>
  - Jim Harris LAS Board Chairman resigned<sup>10</sup>
- SO lost contract with Staffordshire Fire and Rescue Service<sup>2</sup>
- Public faith in ambulance service destroyed<sup>2</sup>
- RES ambulance service offered private ambulance service for £37.50/year<sup>2</sup>

#### Aftermath: Social Causes

- Poor lines of accountability
- Poor division of management
- Lack of knowledge of procurement committee
- Lack of professional conduct
- Unrealistic demands
- Lack of communication

### Ethical Principle 1: Competency

"You shall not claim any level of competence that you do not possess. You shall only offer to do work or provide a service that is within your professional competence"
British Computer Society<sup>1</sup>

- Violated by LAS procurement team
  - Of two members only one had adequate technical knowledge
- Violated by Apricot/SO
  - Neither company had the knowledge or experience to satisfy the design specifications

#### Ethical Issues 2: Public Welfare

"In your professional role you shall have regard for the public health, safety and environment."

- British Computer Society<sup>1</sup>

- Violated by LAS Management and British Government
  - Failed to investigate warnings of danger
  - Failed to follow up known failures
- Violated by Apricot/SO
  - Designed safety critical system inadequately using untested methods and software

# Concluding Remarks For Software Engineers

- Recognise the complexity of the problem before hand
- Seek help when needed and recognise your limits
- Use formal design methodologies and established techniques
- Be aware of the user and their needs
- Do not blindly trust technology

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