

Hampshire Fire and Rescue Authority

Performance Review and Scrutiny Committee

Item: 8

6 May 2014

Improving public community health and acute medical intervention

Report by the Chief Officer

Contact: AM Stewart Adamson - Telephone: 07918 887596

1 Summary

- 1.1 Hampshire Fire and Rescue Service (HFRS) have had prevention at the heart of our activities for a number of years and thus the demand for our services has reduced dramatically. We are responding to medical emergencies via our co-responder scheme successfully in partnership with South Central Ambulance NHS Trust (SCAS).
- 1.2 This paper sets out an opportunity for HFRS to be part of the drive to improve public community health and reduce the number of acute medical responses, using our experience in prevention and response.

2 Recommendation

- 2.1 That the Committee endorse and support the development of extended work within the public community health and acute medical intervention environment.

3 Introduction and background

- 3.1 HFRS medical response (commonly referred to as the co-responder scheme), has been running since 2004, primarily in rural communities. Working collaboratively with SCAS, HFRS contributes 5%-6% of our partner's overall performance. HFRS run the scheme on a cost recovery basis at a cost to SCAS of approximately £360k.
- 3.2 Recently HFRS have become more involved with partners in wider community health and social programmes such as Supporting Troubled Families Programme and Challenge and Change. Our strong track record of reducing all types of incidents and our ability to engage with our communities has made us an attractive delivery partner for other organisations.

4 Community health

- 4.1 Demand on community health partners to respond to the health needs of the community continues to grow at an alarming rate. We have established closer relationships with partners such as SCAS, Directors for Public Health and Clinical Commissioning Groups (CCG). Our research and discussions indicate the need for a multi agency approach to stem this demand – as demonstrated well through the Supporting Troubled Families Programme. HFRS are well placed to be part of this work and, due to our unique skills are a partner of choice, supporting the opportunity

for us to be involved in solving the current issues.

- 4.2 The model commonly used to resolve problems within this field is via commissioning, where organisations are paid to provide services which form part of the agreed strategic health plan.

5 Preventing demand

- 5.1 HFRS has earned itself an enviable position in this area. Our preventative work has seen headline figures showing reductions over ten years, including:
- 47% reduction in fires affecting people and property (primary fires);
 - 76% reduction in other fires (secondary fires);
 - 80% reduction in all arson incidents;
 - 47% reduction in automatic fire alarms (AFAs);
 - 41% reduction in incidents where people are stuck in lifts.
- 5.2 HFRS has a well established approach to analysing risk and targeting our services accordingly. This, together with our strong staff culture of “prevention before response”, helps to reduce the demand for an emergency response.

6 Opportunities for HFRS

- 6.1 With our community health partners we have identified three areas for consideration to develop our work this field:
1. To develop joint community health improvement activities within fire and rescue service core work, to preventing long term ill health and critical incidents, which currently create demand on public services.
 2. To commission a fire and rescue response to include other demands currently placed on SCAS.
 3. To extend the existing co-responder scheme into other areas of need.
- 6.2 Whilst the actual activity in this proposed partnership is yet to be agreed, HFRS will visit thousands of households this year and will respond to increasing medical emergencies. This potential positive impact on our community, reduced costs for health and the chance of further income for our Authority provides the basis of this proposed work.
- 6.3 It is intended that any changes or developments will form part of the delivery model for HFRS in the future and will be aligned to continuing Risk Review work.

7 Supporting our corporate aims and objectives

- 7.1 Developing our work to support partners to make communities safer and healthier sits at the heart of our organisation. Development within this field will ensure more effective use of the public purse, as many of the risk groups we target and engage with are the most vulnerable, and already known to public services.

8 Risk analysis

- 8.1 There is a risk that other organisations may perceive our intentions as a move

towards taking over their responsibilities. This is mitigated by the excellent relationships and on going dialogue we have with these organisations.

9 Impact Assessment

- 9.1 An impact assessment relating to people, environment, and economic factors will be produced with the development of any project.

10 Resource implications

- 10.1 Subject to approval of the recommendation, we intend to submit this project as a possible bid for consideration for funds from DCLG Transformation Funds. It is important to note that partners have expressed support for our involvement and will endorse any such bid.

The commissioning model used to deliver these services within the community, could provide HFRS with key funding in the future. This may help to prevent the loss or erosion of existing prevention services we offer, as we develop a newer and more collaborative approach to prevention services.

11 Conclusion

- 11.1 HFRS' strong background in prevention and response make a strong case for us to be involved in this multi agency development to improve community help, whilst also reducing demand for NHS services under pressure.
- 11.2 HFRS have well established links with local communities across Hampshire and there is an opportunity to exploit both these links and the skills of our staff in order to play an important role for the wider community.

12 Background papers

- 12.1 The following documents disclose the facts or matters on which this report, or an important part of it, is based and has been relied upon to a material extent in the preparation of the report:

1. Fire and Rescue Authority Transformation Funds for 2015 to 2016

Note: The list excludes: (1) published works; and (2) documents that disclose exempt or confidential information defined in the Act.