

Hampshire Fire and Rescue Authority

Performance Review & Scrutiny Committee

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Update on the co responders scheme – a partnership between Hampshire Fire and Rescue Service and South Central Ambulance Service

Report of the Chief Officer

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1. Summary

- 1.1 This report summarises the aims, objectives and the performance achieved by the co responder scheme operated by Hampshire Fire and Rescue Service (HFRS) in partnership with South Central Ambulance Service (SCAS).
- 1.2 In 2009/10 HFRS co responders attended 7,635 emergency calls and increased the overall response performance of SCAS. This demonstrates a successful outcome of the partnership; dramatically increasing the chances of survival of a patient in the rural community suffering from a life threatening injury or illness by providing immediate medical care .

2 Recommendations

- 2.1 That the Committee support the considerable improvements in the health and well being of our communities, and the increased life chances delivered through the partnership.
- 2.2 That the Committee supports the proposal to increase the medical skills of co responders to enhance the care given to patients and thus increase the chances of survival from a life threatening injury or illness (subject to SCAS funding).

3 Introduction and Background

- 3.1 The Communities and Local Government Fire and Rescue National Framework 2008-11 document states that:

Co responder schemes are an example of innovative ways of working which can have significant impact. Assessment of outcomes has shown that firefighters, working in partnership with their local ambulance NHS Trust on co responder schemes, have had an impact on patient outcomes.

The introduction and maintenance of such schemes is a matter for Fire and Rescue Authorities, based on local needs, risk and resource and discussions with partners.

- 3.2 The Health Overview Scrutiny Report has recently been published and it highlights the work HFRS undertakes in the form of co responding. It also states that the co responder scheme in Hampshire is an exemplar and should be rolled out in other areas.
- 3.3 Since the co responder agreement started in 2009, the delivery of the initiative has been cost neutral to HFRS. The agreement has led to a sustainable way of working and paved the way for the project to be developed further.
- 3.4 The initial increase in skill base, detailed within the SMT paper dated April 2009, will be implemented from the 25th October. This will mean co responders will be able to administer Aspirin to patients with Cardiac Sounding chest pain, to use Pulse Oximetry monitoring equipment for use in conjunction with Oxygen Therapy and be able to use the Automatic External Defibrillator (AED) to children down to one year of age with special adapter pads.

4 Original aims and objectives of co responders

4.1 The aim is to operate a co responder scheme at fire stations in specific rural localities where, due to geographical locations, the Ambulance Service were encountering difficulty in achieving the eight minute government response target time. By achieving this response, the co responders contribute towards increased patient care for those suffering in the following ways:

- in cardiac/respiratory arrest
- unconscious and at risk of asphyxiation due to a compromised airway
- in respiratory emergency events
- in cardiac events
- needing control of serious bleeding
- having a cerebral vascular accident (Stroke)
- diabetic emergencies
- traumatic injuries

4.2 These types of emergencies are life threatening and fall into Category A, which the government standards state, are to be reached by an appropriately trained person within eight minutes of the 999 call being made to the Ambulance Service, for 75% of calls.

5 Performance

- 5.1 It should be acknowledged that when assessing the contribution of the co responder to positively influence patients suffering from a life threatening condition, the later interventions of clinicians and pre-existing medical conditions need to be taken into account. It is therefore difficult to measure the exact effect on the patient's outcome.
- 5.2 In the financial year ended March 2010, the co responders attended 7,635 emergency calls. HFRS co responders delivered a percentage of 6.9% on top of the overall performance of SCAS. This figure indicates that the co responders were the only resource to have reached the patients within the set government standard of eight minutes for a life threatening incident.
- 5.3 In the six months from 1 April to September 2010, the co responders have attended 4,852 emergency calls. Therefore HFRS co responders have so far this year delivered an average of 8.2% on top of the overall performance of SCAS.

- 5.4 These statistics demonstrate a successful outcome from delivering the co responder partnership. By improving the overall performance standard of SCAS and by dramatically increasing the speed that medical care is given to people suffering a life threatening injury or illness in rural communities, the scheme contributes to HFRS' aim of "making life safer".

6 Resource implications

6.1 Human resources

- 6.1.1 200 firefighters currently carry out co responder duties from the 18 retained fire stations currently undertaking the role.
- 6.1.2 It is a requirement for these personnel to have had an enhanced Criminal Record Bureau check, attended a medical training course to the co responder standard, and completed appropriate driver training.
- 6.1.3 Each co responder must re qualify every six months to maintain their medical qualification.
- 6.1.4 The co responders continue to work within their current retained contract, for their station. They are paid within this contract when appropriate.

6.2 Physical Resources

- 6.2.1 No HFRS physical resources are used to complete the co responder work. All physical resources are supplied by South Central Ambulance Service.

6.3 Financial Implications

- 6.3.1 From April 2009 the whole cost of delivering this service has been met by South Central Ambulance Service, with the effect that the operation of co responding is cost neutral to HFRS.
- 6.3.2 The total cost for delivering the co responder initiative for HFRS in the financial year ended March 2010 was £290,710. This total cost was funded by SCAS who also had outlay for cost of equipment, vehicles, communications and instructors to the value of £390,000. Therefore the total cost of delivering the project in 2009/10 was £680,710.
- 6.3.3 The LPSA level 2 award grant (Performance Reward Grant (PRG) has been achieved with a total of £1,846,091 being split equally between both services. The first instalment of £461,852.00 was paid in 2009/10. Unfortunately the second half of the reward grant will not be paid due to budget cuts at government level.

7 People Impact Assessment

- 7.1 No significant issues were highlighted during this assessment.
- 7.2 The proposals within this report are considered compatible with the provisions of the European Convention on Human Rights, the Human Resources Act 1998, and the Race Relations (Amendment) Act 2000.

8 Future developments

- 8.1 We will increase the co responders skill base and equipment used which will improve the level of care we can provide to the people we respond to.
- 8.2 We will carry out a cost benefit study into increasing the total number of co responder stations from 18 to 22.
- 8.3 To look at how co responders can be used differently within HFRS and SCAS to achieve the strategic objectives of both services.

9 Conclusions

- 9.1 The co responder agreement has paved the way for a successful and efficient way of supporting our communities within the emergency environment. The project is now being developed elsewhere within the region as well as nationally. The “Hampshire Model”, as it is known, has already been implemented in Gloucestershire, Buckinghamshire, Berkshire and Oxfordshire with the HFRS manager helping them develop the project plan.
- 9.2 The co responding role has been embraced as it has brought benefits to station personnel. These include additional medical and driver training and increased operational incident experience. This has lead to increased morale and motivation.
- 9.3 The co responder project has scope for development in many areas, including helping HFRS performance in the future. However this will need to be developed in conjunction with SCAS from the outset as there is a formal agreement in place.
- 9.4 The firefighters that operate as co responders see the difference this project brings to their local communities. They have built up improved working relationships with the ambulance crews which leads to a better understanding of each other's roles at incidents such as road traffic collisions, and fires.
- 9.5 Co-responding is raising the profile of HFRS in rural areas and is without doubt “Making Life Safer”.

Background Information (Section 100D of Local Government Act 1972)

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:

“None”

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