

**TYNE AND WEAR FIRE AND RESCUE AUTHORITY**

**Item No. 6**

**MEETING: 12<sup>th</sup> DECEMBER 2016**

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**SUBJECT: EMERGENCY MEDICAL RESPONSE (EMR) TRIAL UPDATE**

**REPORT OF THE CHIEF FIRE OFFICER AND CHIEF EXECUTIVE (CLERK TO THE  
AUTHORITY)**

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**1 PURPOSE**

- 1.1 This report provides members with a progress update on TWFRS' involvement in the National Emergency Medical Response (EMR) trial.
- 1.2 Data contained in this report relates to the first six months of this trial (Monday 11<sup>th</sup> January to Sunday 10<sup>th</sup> July 2016) and includes both qualitative and quantitative information.

**2 BACKGROUND**

- 2.1 As part of the National EMR trial, TWFRS, along with Durham and Darlington Fire and Rescue Service (DDFRS), Northumberland Fire and Rescue Service (NFRS) and Cleveland Fire Brigade (CFB), are co-responding to medical emergencies along with North East Ambulance Service (NEAS). Initially the trial was for a six-month period from January 2016, and then later extended by the National Joint Council (NJC) until the end of February 2017.
- 2.2 The trial is intended to gain a better understanding of the impact the Fire and Rescue Service (FRS) can have when responding to patients who are experiencing life threatening medical emergencies. It will also provide the opportunity to assess what effect responding to emergency medical incidents has internally within TWFRS.
- 2.3 There are differing response arrangements within the four FRS across the region including cover from whole time, retained and day crewing stations, to test the efficiency and logistics of response.
- 2.4 After analysis of both NEAS and TWFRS incident data, West Denton Fire Station was selected as the initial pilot station for the duration of the trial. Utilising both crews/appliances (A01 and A02) for the trial.
- 2.5 In preparation for the trial, crews received enhanced medical training from NEAS and were required to have Disclosure Barring Service (DBS) checks to enable them to legally respond on behalf of NEAS.

2.6 Fire crews respond to incidents within two NEAS categories:

- **Red 1** (Respiratory/cardiac arrest) - presenting conditions which may be immediately life threatening and should receive an emergency response within eight minutes. NEAS will deploy two resources to these incidents where possible.
- **Red 2** – All other life threatening emergencies which should receive an emergency response within eight minutes.

2.7 There are a number of exemptions that NEAS despatch operators will not currently deploy a FRS EMR response to, for example to patients under 16 years old, Maternity/gynaecological emergencies.

2.8 The National EMR trial has been fully supported by the Fire Brigades' Union (FBU) during all stages of the NJC consultation, and they are fully aware of the contribution that firefighters can make within this innovative collaboration between public services for the continued safety of the public both now and in the future.

### 3 PROGRESS UPDATE: RESPONSE DATA

3.1 During the first six months of the trial (Monday 11<sup>th</sup> January to Sunday 10<sup>th</sup> July 2016):

3.1.1 TWFRS received 542 requests from NEAS to attend a Red 1 or a Red 2 incident.

3.1.2 TWFRS attended 445 incidents, of which 137 have been recorded as having 'no service rendered'. TWFRS declined to attend eight incidents, six due to an appliance already at an incident (four of which were EMR incidents), one due to a fault on an appliance and one due to the location of the incident being deemed too far away from the appliances home station. On an additional four occasions NEAS requested assistance at incidents 'outside of the scope' of the EMR trial (see section 2.6). There were 85 occasions where TWFRS were stood down by NEAS.

3.1.3 Of the 542 requests 9% were categorised as Red 1 and 91% as Red 2. This difference may be explained due to the number and location of NEAS resources in and around the Newcastle area that are prioritised to attend Red 1 incidents. This trend is in line with the other regional FRS'.

3.1.4 TWFRS were requested to attend 24 incidents outside of Newcastle (and the surrounding area) and accepted and attended 13 of these requests, for example, A02 attended an EMR incident in Houghton whilst on stand-by at Rainton Bridge Fire Station. TWFRS were stood down by NEAS on ten occasions and Control declined one request due to location / travel time from Newcastle.

- 3.1.5 There were 444 requests within West Denton Station Area of which TWFRS attended 376 EMR incidents. The full extent of the impact on the regional Fire and Rescue Services is being evaluated by Teesside University.
- 3.1.6 Requests for TWFRS assistance are less frequent between 02:00 and 08:59 hours, with a peak between 09:00 and 10:59 hours, 20:00 and 20:59 as well as between 23:00 and 00:59 hours. This pattern will be continually monitored over the period of the trial.
- 3.1.7 The majority of incidents attended involved patients complaining of either 'Chest Pain / Cardiac Arrest / Heart condition' or 'breathing difficulties / impairment or respiratory arrest'.

#### **4 PROGRESS UPDATE: EMPLOYEE SURVEY FEEDBACK**

- 4.1 Surveys of both Control and Operational Crews have been undertaken.
- 4.2 The surveys attracted a positive response regarding the trial and highlighted some areas to consider for the extended trial period. Changes to procedures have been enacted as a result.

#### **5 RISK MANAGEMENT**

- 5.1 A risk assessment has been undertaken to ensure that the risk to the Authority has been minimised as far as practicable. The assessment has considered an appropriate balance between risk and control, the realisation of efficiencies, the most appropriate use of limited resources and a comprehensive evaluation of the benefits. The risk to the authority has been assessed as low utilising the standard risk matrix based on control measures being in place.

#### **6 FINANCIAL IMPLICATIONS**

- 6.1 The cost of training staff to the level required by NEAS to participate in this trial to date is £13,600.
- 6.2 The cost of Disclosure and Barring Service (DBS) checks was £1549.76 (32 x £48.43).
- 6.3 Full financial implications associated with the pilot will be included in the planned final evaluation report and may need to be considered as part of any decision regarding the future of any co-responding schemes.

#### **7 EQUALITY AND FAIRNESS IMPLICATIONS**

- 7.1 There are no equality and fairness implications associated with this update report.

#### **8 HEALTH AND SAFETY IMPLICATIONS**

- 8.1 There are no health and safety implications in respect of this report.

## **9 RECOMMENDATIONS**

9.1 The Authority is recommended to:

- a) Review the content of this update report;
- b) Support ongoing participation in the pilot;
- c) Receive further reports as appropriate;

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## **BACKGROUND PAPERS**

The under mentioned background papers refer to the subject matter of the above report:

EMR Trial Update July 2015 to January 2016