

TYNE AND WEAR FIRE AND RESCUE AUTHORITY

Item No. 5

MEETING: 16 OCTOBER 2017

SUBJECT: EMERGENCY MEDICAL RESPONSE (EMR) TRIAL – UPDATE

JOINT REPORT OF THE CHIEF FIRE OFFICER/CHIEF EXECUTIVE (THE CLERK TO THE AUTHORITY) THE STRATEGIC FINANCE OFFICER AND THE PERSONNEL ADVISOR TO THE AUTHORITY

1 INTRODUCTION

- 1.1 The purpose of this report is to update members with information relating to the Emergency Medical Response (EMR) trial, covering performance and impact upon Service resources for the period from Monday 11th January 2016 to Thursday 24th August 2017. The report includes both qualitative and quantitative information.
- 1.2 Members have received periodic updates on the progress of the trial (minute 79-2015/16, minute 47-2016/17 and 77 – 2017/18 refer).

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, later extended by agreement with the National Joint Council (NJC) and Fire Brigades Union (FBU) until mid-September 2017.
- 2.2 The intention of the trial is 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 an 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 The appliance(s) responded to EMR requests that fall within an eight-minute travel time of their location.

3 EMR RESPONSE

- 3.1 In preparation for the trial, crews received enhanced medical training from NEAS and were required to have Disclosure Barring Service (DBS) checks to enable a legal response on behalf of NEAS.
- 3.2 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.
- 3.3 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.

4 PROGRESS UPDATE: RESPONSE DATA

- 4.1 During the period (Monday 11th January 2016 and Thursday 24th August 2017) TWFRS received 1,348 requests from NEAS to attend a Red 1 or a Red 2 incident. Figure 1 below shows the incident location of these requests. Table 1 below provides a breakdown of requests by district.

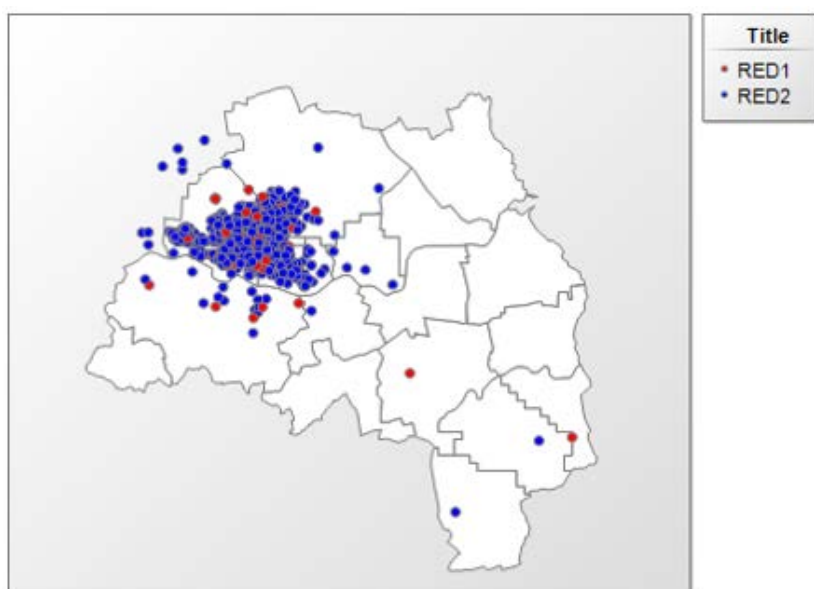


Figure 1: Location of EMR Incident requests

Authority Area	Requests	Attendances	Stand downs	Refusals / outside scope
Newcastle	1316	1110	150	56
Gateshead	18	10	7	1
North Tyneside	2	1	1	0
Sunderland	4	1	2	1
NFRS	8	8	0	0
Total	1348	1130	160	58

Table 1: EMR incident requests by local authority area

- 4.2 TWFRS attended 1,130 incidents, of which 356 recorded as having ‘no service rendered’. There were 160 occasions where NEAS stood down TWFRS crews.
- 4.3 Of the 1,348 requests, 9.5% were categorised as Red 1 and 90.5% as Red 2. This difference may be due to the number and location of NEAS resources in and around the Newcastle area that attend Red 1 incidents. This trend is in line with the other regional FRS.
- 4.4 NEAS requested TWFRS to attend 32 incidents outside of Newcastle (and the surrounding area) and we accepted and attended 20 of these requests, for example, A02 attended an EMR incident in Houghton whilst on stand-by at Rainton Bridge Fire Station.
- 4.5 There were 1,150 requests within West Denton Station Area of which TWFRS attended 985 EMR incidents. TWFRS attended 8 ‘over the border’ incidents in NFRS area (6 in Ponteland and 2 in Heddon-on-the-Wall).
- 4.6 The table below shows TWFRS response times to EMR incidents.

	Average time
Time call received by TWFRS to ‘Send’	00:01:20
‘Send’ to TWFRS booked in attendance at incident	00:05:45
Time call received by TWFRS to IA	00:07:05
Time spent at scene	00:14:53
TWFRS IA to NEAS IA	00:08:39

Table 2: Response and attendance times at EMR categories

- 4.7 Requests for TWFRS assistance are less frequent between 02:00 and 08:59 hours and experience peaks between 09:00 and 09:59 hours, 20:00 and 20:59 as well as between 22:00 and 22:59 hours.

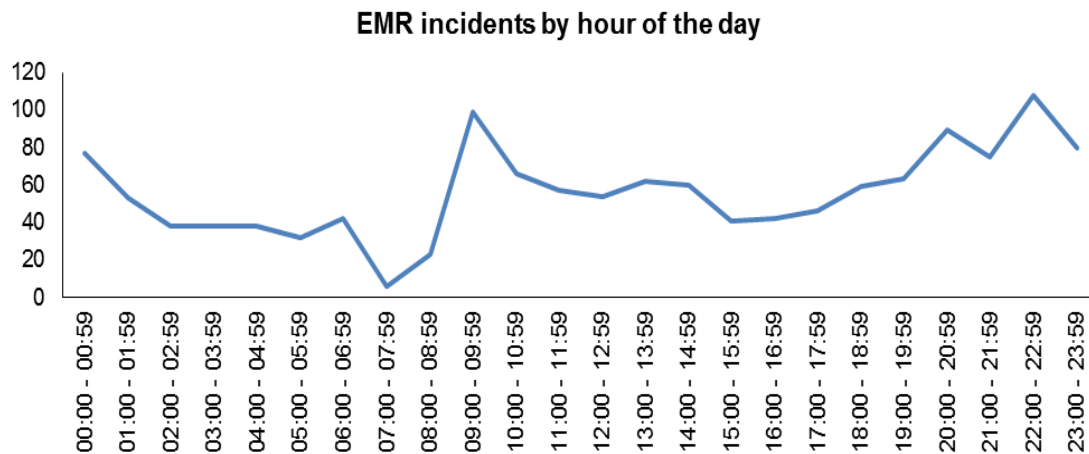


Figure 2: EMR requests by hour of the day

- 4.8 The majority of incidents attended involved patients complaining of either ‘breathing difficulties / impairment or respiratory arrest’ or ‘Chest Pain / Cardiac Arrest / Heart condition’. The graph below shows the breakdown of the types of medical emergency attended as recorded in the Incident Recording System (IRS).

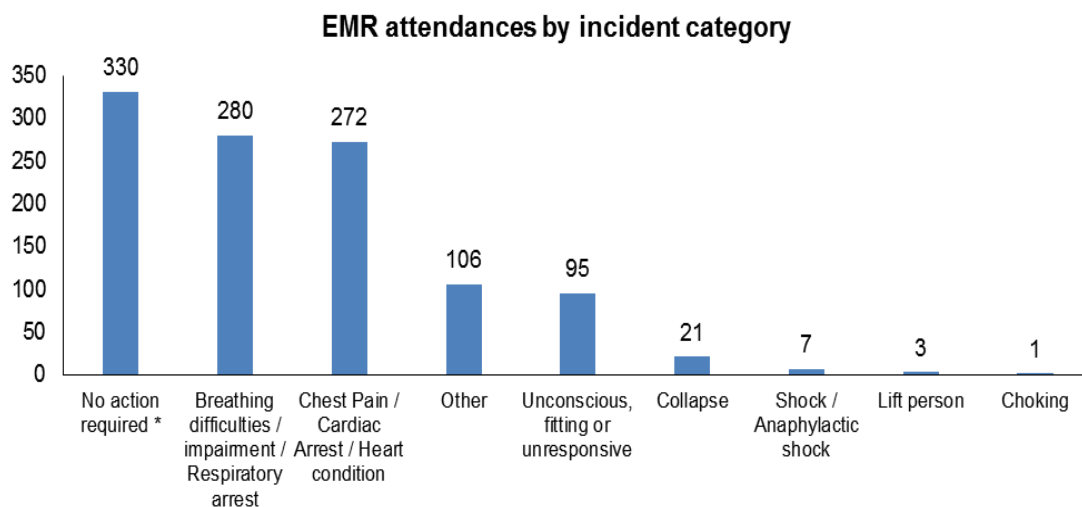


Figure 3: EMR attendances by incident category

**No action required is recorded in the IRS when TWFRS attended an EMR incident where no medical intervention occurred.*

- 4.9 There have been 21 EMR incidents attended which have resulted in a fatality (20 in West Denton’s Station Area and one in Newcastle Central). The table below shows the distribution of these incidents by watch and shift.

Watch	No of Fatalities
Blue	7
day	3
night	4
Green	4
day	2
night	2
Red	7
day	3
night	4
White	3
day	3
night	0
Total	21

Table 3: Fatalities by Watch and Shift

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 was assessed as low utilising the standard risk matrix based on control measures being in place.

6 EQUALITY AND FAIRNESS IMPLICATIONS

- 6.1 There are no equality and fairness implications in respect of this report.

7 HEALTH AND SAFETY IMPLICATIONS

- 7.1 There are no health and safety implications associated with this report. The Occupational Health Unit and Trauma Support Teams supported the wellbeing of staff providing EMR throughout the trial.

8 FINANCIAL IMPLICATIONS

- 8.1 The cost of training staff to the level required by NEAS to participate in this trial to date is £13,600.
- 8.2 The cost of Disclosure and Barring Service (DBS) checks was £1549.76 (32 x £48.43).
- 8.3 Full financial implications associated with the trial 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

9 CONSULTATION UNDERTAKEN

- 9.1 Consultation with staff at West Denton Community Fire Station and the Control Room was undertaken throughout the trial. A qualitative survey, issued at the 6-month point, will be repeated once the end of the trial has been confirmed. Feedback from these activities has been considered and used to inform future improvements.

10 CONCLUSION

- 10.1 The statistics indicate TWFRS have been able to meet the requirements of the trial effectively for the period, with a negligible impact upon the provision of fire cover in the West Denton and surrounding station areas. Even with the removal of A02 in October 2016, only 3.9% of EMR incidents occurred simultaneously with a fire call, and appropriate standby arrangements were in place.
- 10.2 It is worth noting that the choice of station for the trial, along with staffing and fire cover arrangements that are in place, have been an important factor contributing to this result, that may not be replicated at other locations across the Service.
- 10.3 TWFRS have contributed to the national NJC evaluation, and additionally an external, regional evaluation of the EMR trial, co-ordinated by Cleveland Fire Brigade. This evaluation is being conducted by Teesside University and results are expected in late 2017.
- 10.4 A full TWFRS evaluation, collating both qualitative and quantitative evidence, is scheduled to take place following the conclusion of the trial.

11 RECOMMENDATIONS

- 11.1 The Authority is recommended to:
- a) Note the contents of this report
 - b) Receive further reports as appropriate.

BACKGROUND PAPERS

The under mentioned Background Papers refer to the subject matter of the above report:

- a) EMR Trial – Six Month update (March 2016)