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**NATIONAL JOINT COUNCIL
FOR LOCAL AUTHORITY
FIRE AND RESCUE SERVICES**

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**To: Chief Fire Officers
Chief Executives/Clerks to Fire Authorities
Chairs of Fire Authorities
Directors of HR (Fire Authorities)**

Members of the National Joint Council

14 July 2015

CIRCULAR NJC/13/15

Dear Sir/Madam,

**PAY, TERMS AND CONDITIONS WORKSTREAMS: EMERGENCY MEDICAL
RESPONSE WORKSTREAM TRIALS**

Background

1. You will be aware that the NJC is committed to working jointly on changes identified by each Side to ensure that there is a pay framework alongside terms and conditions in the fire and rescue service which reflect the responsibilities of, and current and future demands on, the service and the profession, which includes:
 - the increasing need to consider how the workforce's skills and commitment can best be utilised, including the type of activities undertaken, any additional functions that may be required and the implications of this for the nationally agreed rolemaps
 - the potential to build upon, and expand, this piece of work to encompass a more wide-ranging and strategic look to the future taking into account the matters of interest in England, Scotland, Wales and Northern Ireland.
2. Circular NJC/7/15 provided an update on phase one of this work, which included reports from the five workstreams that had looked at specific areas. The circular also made reference to the anticipation that in moving forward with the area of emergency medical response this would include a number of trials, taking into account the issues raised by the emergency medical response workstream including co-responding.
3. In doing so it was recognised that whilst co-responding work is undertaken in a number of FRs at present not all ambulance trusts wished to take part in such work. Therefore as part of its work the workstream contacted the Association of Ambulance Chief Executives (AACE) and the College of Paramedics (CoP). This has paved the way and helped prompt substantive discussion within the AACE that's led to an internal national survey of co-responding schemes of which we understand the initial feedback is positive

in favour of rolling this out on a wider scale. The response from CoP was also positive supporting any organised and approved initiative(s) that through first and early responses could save life or reduce suffering and anxiety prior to the arrival of paramedical services.

Current position

4. The workstream defined co-responding as a scheme 'whereby appropriately trained and equipped FRS staff are mobilised to medical emergencies (as agreed with an NHS ambulance service) as part of a joint FRS/NHS response'.
5. The current position is that co-responding is carried out in some, but not all, FRSs by employees on a voluntary basis. The conclusion of the workstream was that co-responding is an activity that could be undertaken more widely by firefighters in general, and in FRSs who wish to do so, subject to:
 - a) The provision of appropriate training for example those suggested by the College of Paramedics below, or equivalent:
 - An Appointed Person First Aid Course, in accordance with the Health and Safety (First Aid)
 - First Person on Scene (FPOS) course
 - Another approved course of instruction for example that offered by some ambulance services (e.g. 5 day Immediate Emergency Care Responder (IECR) course)
 - b) The provision of appropriate equipment (including replenishment of medical equipment).
 - c) Assurance that undertaking such work does not alter a firefighter's pension or compensation scheme entitlement. (*Note - we understand that a key factor is undertaking such work as part of the core job rather than on a secondary contract basis*).
 - d) Assurances are made at local level to ensure that personal liability and indemnity issues have been covered.
 - e) Call handling – the appropriate level of response to a medical emergency should be agreed with the ambulance services. This would include the ambulance service dispatching the ambulance resources simultaneously and having jointly agreed safeguards.
6. The potential for the detailed introduction of co-responding will be considered as part of phase two of this work, which may lead to expanding the Rolemaps or treating co-responding as an additional responsibility.
7. The workstream also made reference to wider work that would be of value to the community and which in some cases would build upon collaborative working with other organisations. Some examples referred to by the workstream included:
 - working in conjunction with police and ambulance services, providing a response to high volume, low priority calls, such as falls in the home and incidents relating to mental health whilst also promoting the reduction of risk. Risk reduction to be delivered through a prevention/education service in the homes of those identified as being 'at risk' from a range of issues such as fire, falls, crime and general detrition in health and wellbeing.

- Assisting health services in the movement of bariatric patients
- Training in the use of defibrillators (for example) to the wider community
- Road safety awareness provision for new drivers, speed safety awareness courses for those caught speeding (currently undertaken, for example, by the AA and police)
- Fire stations being open to the wider community for a number of health related initiatives including; fitness training, engagement with the elderly
- Safe fitting of car child seats

Trials

8. Agreement has now been reached to put in place a number of trials.
9. In order to facilitate such trials it is jointly recognised that such work will be regarded as part of the core job for the duration of the trial in each of the respective trial fire authorities.
10. In order to further inform NJC considerations under paragraph 1 above, trial FRAs will be asked to monitor and provide the data set out in paragraph 11 below, when requested to do so.

Expressions of interest

11. The NJC is now inviting expressions of interest from fire authorities wishing to take part in a trial. Those wishing to do so are asked to respond in writing to firequeries@local.gov.uk (please indicate 'trial' in the subject heading alongside the name of your FRA):

(a) In the case of co-responding correspondence will need to:

- set out how each of the points in paragraph 5 above will be met;
- indicate whether the trial will be across the service or contained to a particular area within the service;
- indicate the duration of the trial;
- indicate whether local discussion with recognised trade unions has taken place
- commit to the provision of data to the NJC, as and when requested. The following monitoring data will therefore need to be recorded –
 - a. the number of co-responding calls undertaken , on a monthly basis
 - b. the proportion (a) represents of all incidents responded to within the service/trial area within the respective month
 - c. the breakdown of (a) responded to by wholetime or by retained duty system staff
 - d. information on outcomes e.g. lives saved
 - e. percentage of the estimated cost of providing a co-responding response that is being met from external sources

(b) In the case of wider work, correspondence will need to:

- set out the type of work to be undertaken;
- confirm that appropriate training and equipment will be provided;

- confirm how the assurances in respect of paragraphs 5(c) and 5(d) above will be met;
- indicate whether the trial will be across the service or contained to a particular area within the service;
- indicate the duration of the trial;
- indicate whether discussion with recognised trade unions has taken place;
- commit to the provision of data to the NJC, as and when requested. The following monitoring data will therefore need to be recorded –
 - a. the number of occurrences attended, on a monthly basis
 - b. the proportion (a) represents of all incidents responded to within the service/trial area within the respective month
 - c. the breakdown of (a) responded to by wholetime or by retained duty system staff
 - d. information on outcomes e.g. numbers of people trained (e.g. in use of defibrillators), number of car seats fitted, number of bariatric patients moved etc
 - e. percentage of the estimated costs of providing such support that is being met from external resources

12. Interested FRAs are asked to respond as soon as possible. It is recognised that an FRA may not be ready immediately to put a trial in place because, for example, further discussion on governance arrangements are required with the local ambulance trust. If that is the case, but your FRA will wish to do so, please provide now an indication of the date by which you expect to put forward a completed expression of interest. Please note the NJC trial period will conclude by the end of June 2016 and approved trials will be reviewed between April and the end of June 2016 to assess progress.

Yours faithfully,

SIMON PANNELL
MATT WRACK
 Joint Secretaries