

# AGENDA SUPPLEMENT (1)

Meeting: Health Select Committee

Place: Kennet Room - County Hall, Bythesea Road, Trowbridge, BA14 8JN

Date: Tuesday 5 July 2022

Time: 10.30 am

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The Agenda for the above meeting was published on 27 June. Additional documents are now available and are attached to this Agenda Supplement.

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This Agenda and all the documents referred to within it are available on the Council's website at [www.wiltshire.gov.uk](http://www.wiltshire.gov.uk)

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9 **South West Ambulance Service Trust (SWAST) Update** *(Pages 3 - 38)*

DATE OF PUBLICATION: 30 June 2022
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<b>Title</b>	South Western Ambulance Service NHS Foundation Trust's (SWASFT) report to the Wiltshire Health Select Committee.
<b>Main aim</b>	To inform the Wiltshire Health Select Committee of SWASFT's recent activity.
<b>Author</b>	Nicola Ash, External Communications Manager.

## 1. Background

SWASFT has the responsibility for the provision of ambulance services across an area of 10,000 square miles which is 20% of mainland England. The Trust covers the counties of Cornwall and the Isles of Scilly, Devon, Dorset, Somerset, Wiltshire, Gloucestershire and BNSSG (Bristol, North Somerset and South Gloucestershire).

The Trust serves a total population of over 5.5 million and is estimated to receive an influx of over 23 million visitors each year. The operational area is predominantly rural but also includes large urban centres including Bristol, Plymouth, Exeter, Bath, Swindon, Gloucester, Bournemouth and Poole.



## 2. 2022/23 Trust Plan

We recently launched our 2022/23 Trust Plan, it provides us with an opportunity to reset and align ourselves behind one single aim – improving patient safety by recovering performance.

This single aim will allow us to begin our journey to achieving two incredibly important goals:

- To provide a safer service to our patients
- To make SWASFT a truly great place to work.

There are 10 programmes of work aligned to the plan to achieve improvements in patient care and embed our cultural ethos to make SWASFT a great place to work.

- The plan is designed to be proportionate in its ambition and agile and nimble in its delivery. We will approach this differently and work with you to unlock simplicity wherever we can.
- Our key to our success is all of us. By working together we can deliver something great.





# 2022/23 Trust Plan

Our priority is  
improving patient  
safety by recovering  
performance

## 01 Optimal Call Handling

Working at pace to ensure the sustainable delivery of timely, safe and high quality call handling for our patients by increasing the number of Emergency Medical Dispatchers (call takers) in both our EOCs. Alongside this, ensuring sufficient highly trained leadership and audit support to enable delivery of the very best patient care

## 02 Right Clinical Model

To review the current clinical model within the Emergency Operations Centre, and to develop in partnership with staff, a new model which is fit for purpose with the right staffing levels and the right skill sets

## 03 Increased Frontline Resourcing

To increase resourcing and maximise the availability of existing frontline resourcing and determine the optimal resource model for 2022/23

## 04 Performance and Safety Management

In addition to a focus on our performance to provide a safe and effective response to our patients, we will review our escalation planning, emergency preparedness and supporting response options. This will deliver a revised and enhanced set of escalation and incident response arrangements to support a safe response to patients during times of extremis or crisis and will enhance the EPRR performance across the Trust

## 05 System Approach

To work with system partners in tackling hospital handover delays, identifying and delivering solutions such as cohorting areas and achieving best decision making on appropriate pathways for patient care

## 06 People, Workplace and Culture Improvements

To develop a working environment which enables everyone to engage in creating and delivering solutions and improvements to the way in which we work by removing unnecessary barriers, bureaucracy and hierarchy and through ensuring our practices enable great engagement and involvement, so that all voices are heard, problems solved and great ideas enacted upon

## 07 Infrastructure Improvements and Capital Spend

To ensure the IT services and information you need are cost effective, available when and from where you need them and that they are kept up-to-date, safe from security threats and support delivery of the Trust's Green plans. Alongside that we will look at IT developments coming over the horizon and make sure our infrastructure and services are compatible and take advantage of new ideas wherever necessary and appropriate. Working to provide a fit for purpose estate which supports the changing needs of our future frontline and support services operating arrangements, in line with the Trust approved financial plan

## 08 Risk Management

To focus on patient safety and experience improvement, COVID-19 recovery and implementing a long term operating model and managed service for consumable stores. The Trust must see recovery from our response to COVID-19 as an opportunity to regenerate and transform the way in which services are provided across the organisation, ensuring that lessons that have been identified are learnt and new ways of working are established

## 09 Strategic Planning

Working together to set a long term Trust strategy and 3 year plan, that delivers our vision and meets the needs of our patients, colleagues and critical stakeholders

## 10 Communications and Engagement

To keep our people and stakeholders well-informed and engaged in the latest developments within the 2022/23 Trust Plan. Working closely with system partners and key stakeholders to successfully deliver on the work within the plan

Underpinned  
by integrated  
investment,  
workforce and risk  
and quality plans

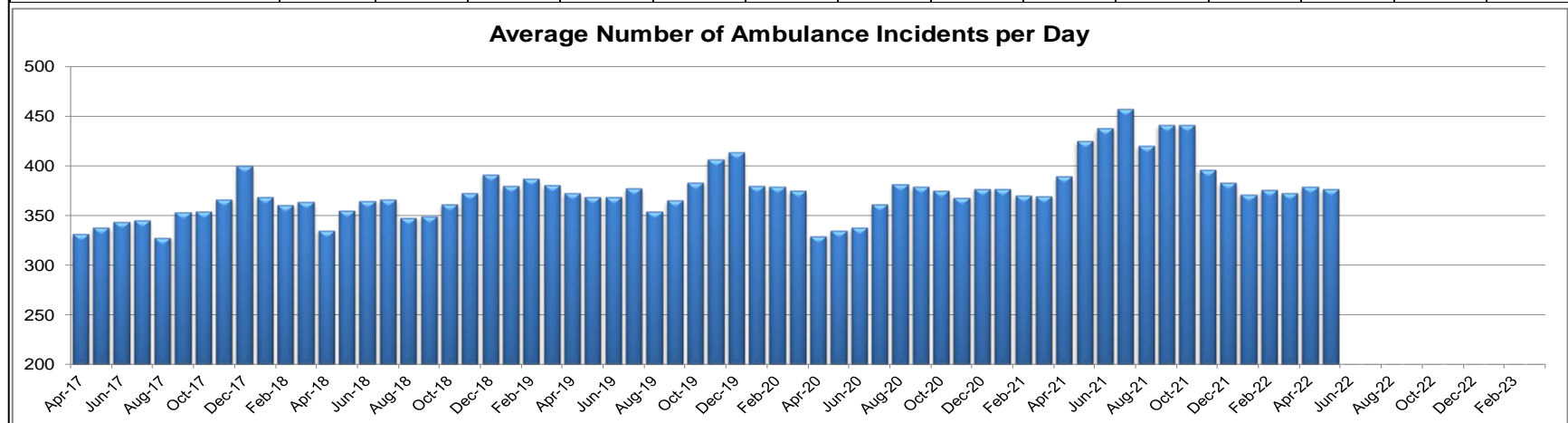


### 3. Performance

#### SWASFT's Performance in Wiltshire

<b>BSW</b>														
<i>Ambulance Incidents per Month</i>														
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD	Total
2017/18	9,947	10,473	10,301	10,698	10,146	10,596	10,966	10,977	12,393	11,425	10,097	11,263	<b>20,420</b>	<b>129,282</b>
2018/19	10,044	11,002	10,937	11,356	10,758	10,468	11,193	11,182	12,126	11,765	10,823	11,784	<b>21,046</b>	<b>133,438</b>
2019/20	11,165	11,432	11,063	11,684	10,969	10,947	11,879	12,195	12,808	11,764	10,982	11,614	<b>22,597</b>	<b>138,502</b>
2020/21	9,871	10,376	10,121	11,194	11,829	11,359	11,608	11,036	11,679	11,818	10,350	11,439	<b>20,247</b>	<b>132,680</b>
2021/22	11,673	13,158	13,127	14,170	13,030	13,233	13,680	11,881	11,864	11,495	10,511	11,553	<b>24,831</b>	<b>149,375</b>
2022/23	11,362	11,667											<b>23,029</b>	
% Variance 22/23 vs 20/21	15.10%	12.44%											<b>13.74%</b>	
% Variance 22/23 vs 21/22	<b>-2.66%</b>	<b>-11.33%</b>											<b>-7.26%</b>	

<i>Average Number of Ambulance Incidents per day</i>														
	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	YTD	Total
2017/18	332	338	343	345	327	353	354	366	400	369	361	363	<b>335</b>	<b>354</b>
2018/19	335	355	365	366	347	349	361	373	391	380	387	380	<b>345</b>	<b>366</b>
2019/20	372	369	369	377	354	365	383	407	413	379	379	375	<b>370</b>	<b>378</b>
2020/21	329	335	337	361	382	379	374	368	377	381	370	369	<b>332</b>	<b>364</b>
2021/22	389	424	438	457	420	441	441	396	383	371	375	373	<b>407</b>	<b>409</b>
2022/23	379	376											<b>378</b>	





### **SWASFT's Performance in Wiltshire – Supporting Narrative**

Activity in the BSW CCG area saw substantial increases last summer, with the average number of incidents per day rising to over 450 incidents through the main summer months.

After the level of unprecedented activity, which was replicated across a large proportion of the South West of England, activity levels have reverted to a more reasonable level and it much closer to the levels of activity SWASFT was seeing in the period prior to COVID-19.

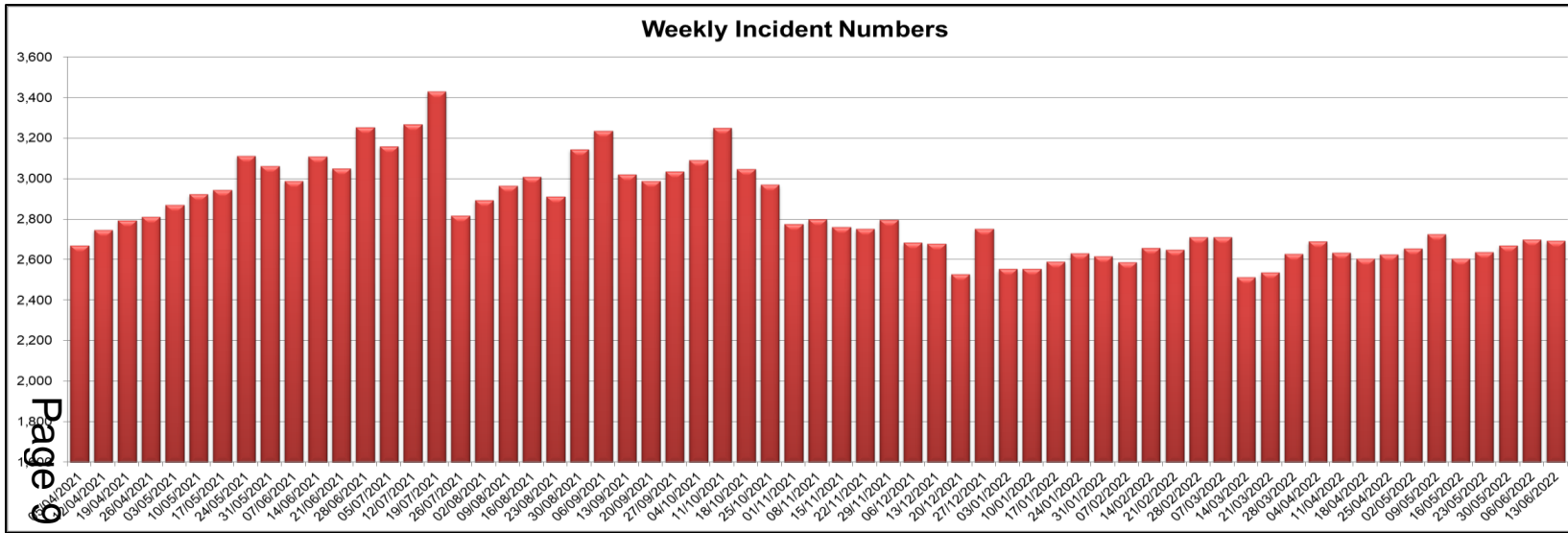
In April 2022, the average number of incidents per day was 379 compared to 372 incidents per day in April 2019 (the last year prior to the COVID-19 outbreak).

In May 2022, this reduced to 376 incidents per day compared to 369 incidents per day in May 2019 and 424 incidents per day in May 2021 (which represented the start of the increased activity period last summer).

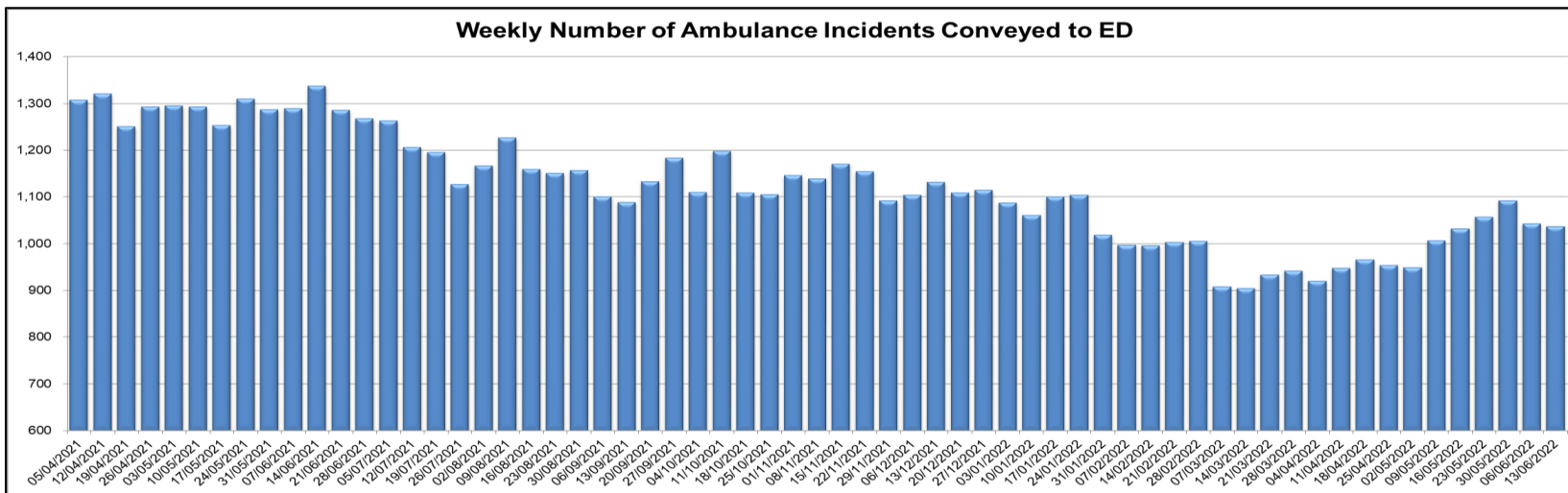




**Weekly Incident Numbers in Wiltshire**



**Weekly Number of Incidents Conveyed to ED in Wiltshire**



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**Weekly Incident Numbers in Wiltshire & Weekly Number of Incidents Conveyed to ED in Wiltshire –  
Supporting Narrative**

Looking at recent activity levels, the weekly incident numbers in Wiltshire are noticeably lower, and therefore are not seen as a major factor driving the increased response times across the county at this time.

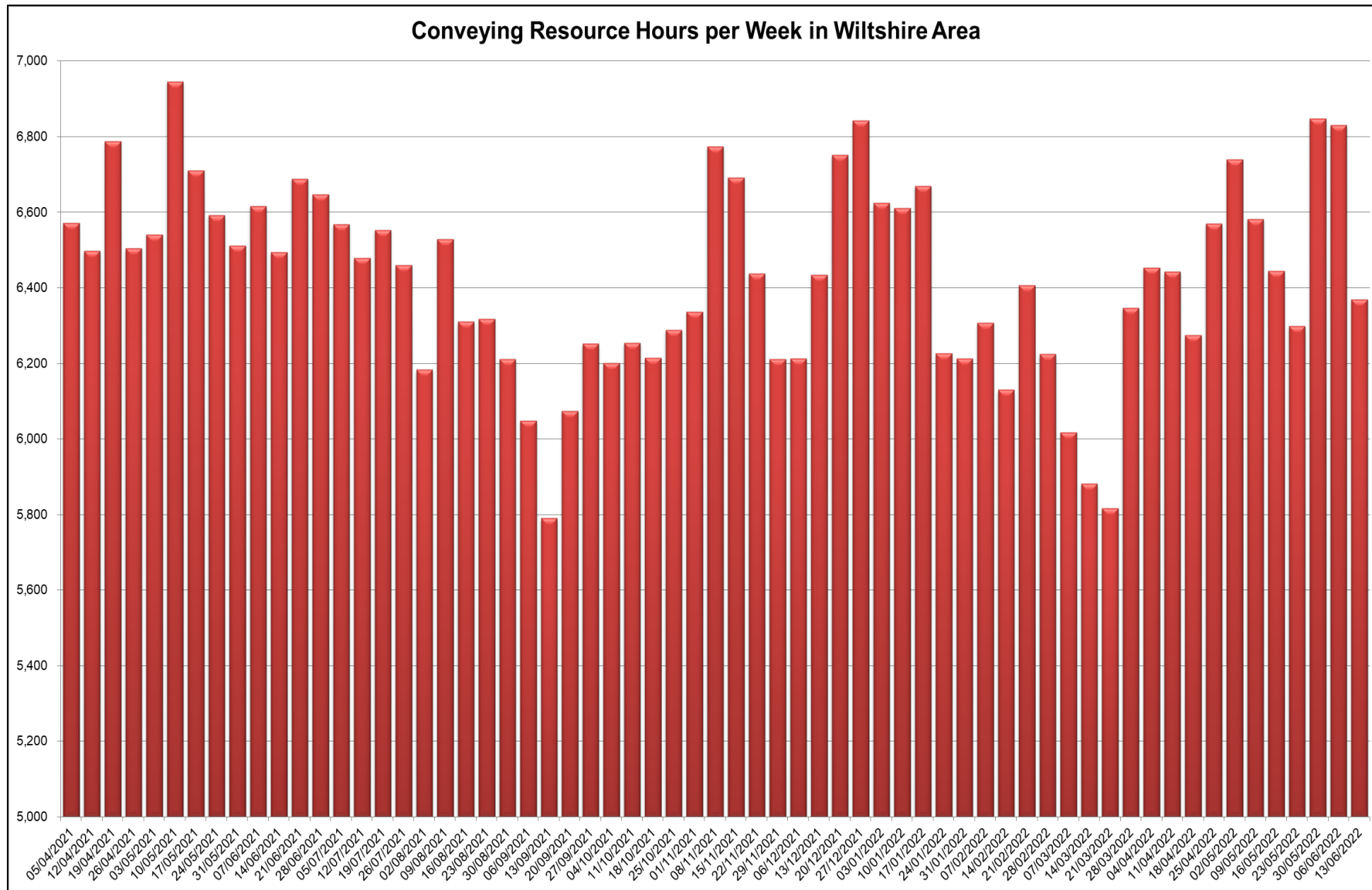
The Trust continues to manage a large proportion of incidents without conveyance to an Emergency Department. Over recent weeks the Trust has on average managed around 60% of incidents without conveying to an Emergency Department. This compares to the levels seen prior to COVID-19 which was closer to 50% of incidents being managed without a conveyance to an Emergency department.

The Trust therefore continues to work with system partners to manage patients away from ED where clinically appropriate.



### Conveying Resource Hours per Week in Wiltshire

#### Conveying Resource Hours per Week in Wiltshire Area





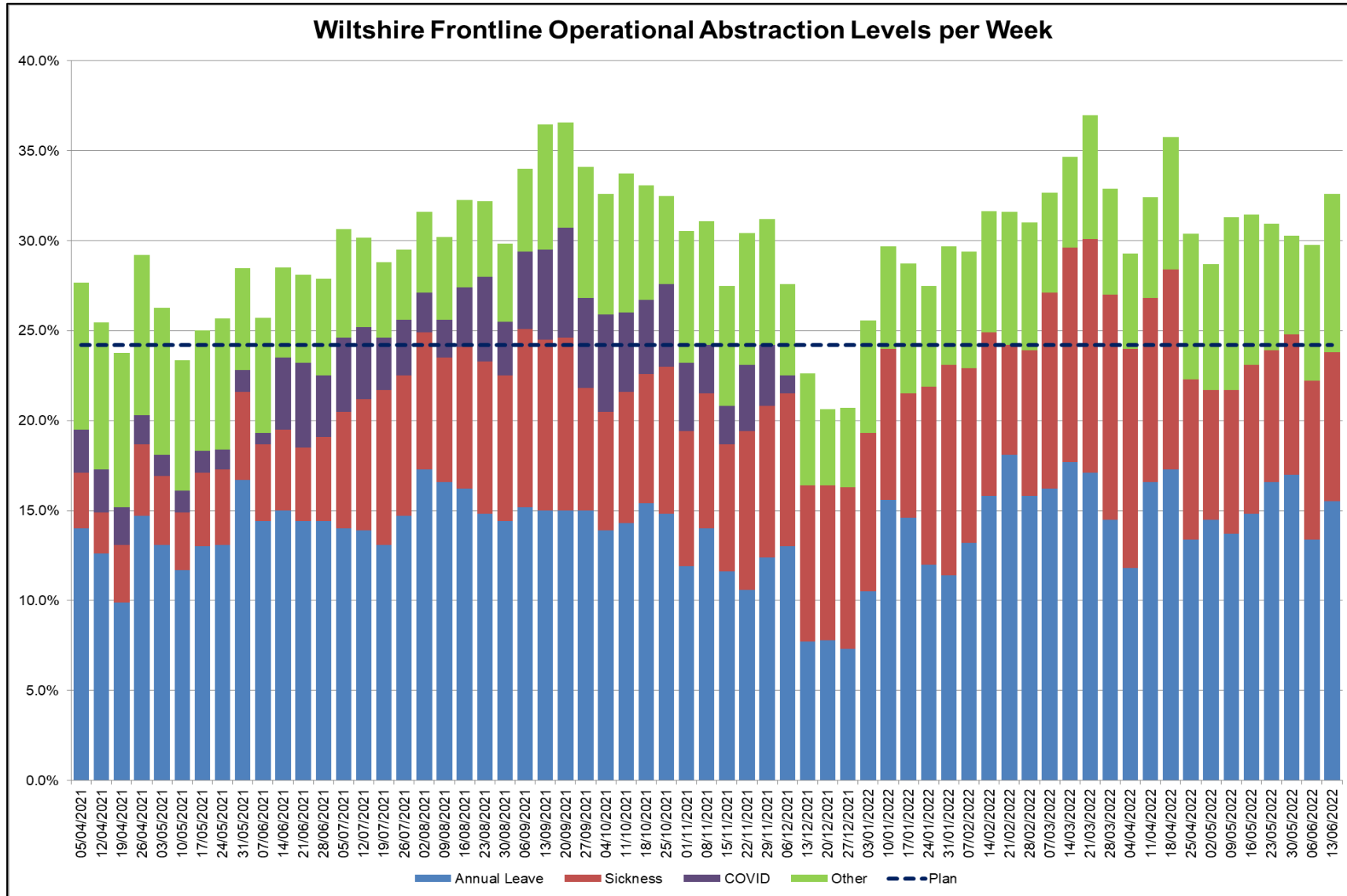
## **Conveying Resource Hours per Week in Wiltshire – Supporting Narrative**

Operational resourcing levels in Wiltshire have also improved over recent weeks.

There were significant pressures through March 2022 when the latest wave of COVID-19 impacted all resources across the Trust, but recent improvements have seen the Trust delivering resourcing above current funded plan levels consistently over the last few weeks.



Wiltshire Frontline Operational Levels per Week



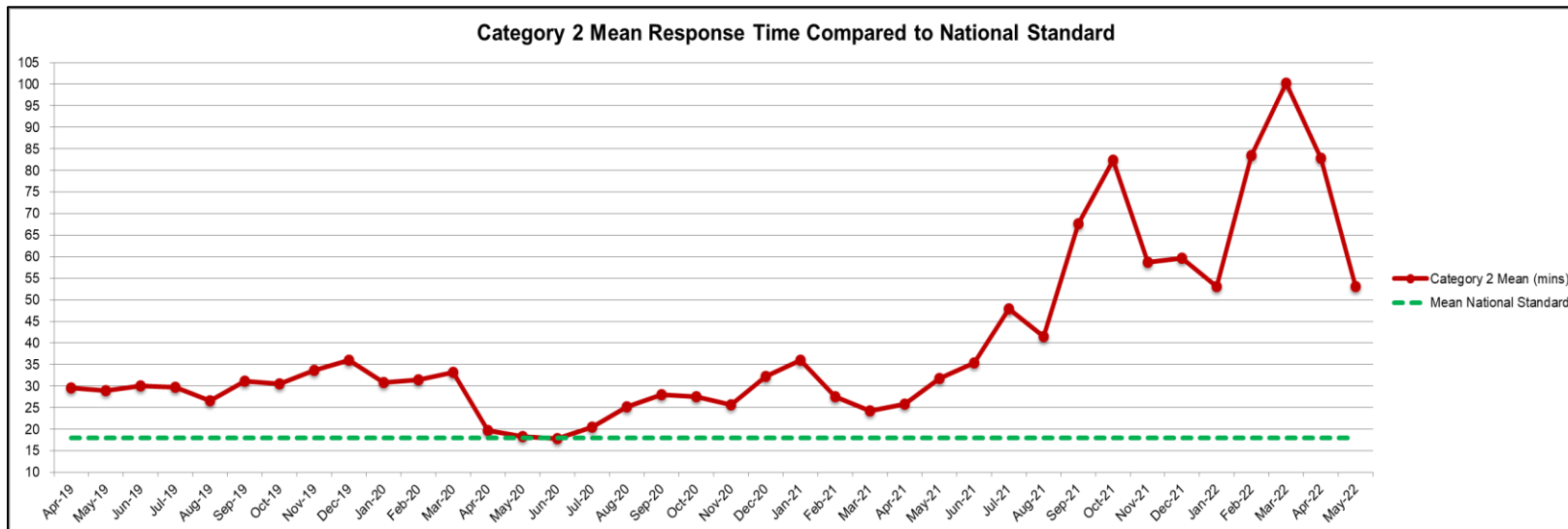
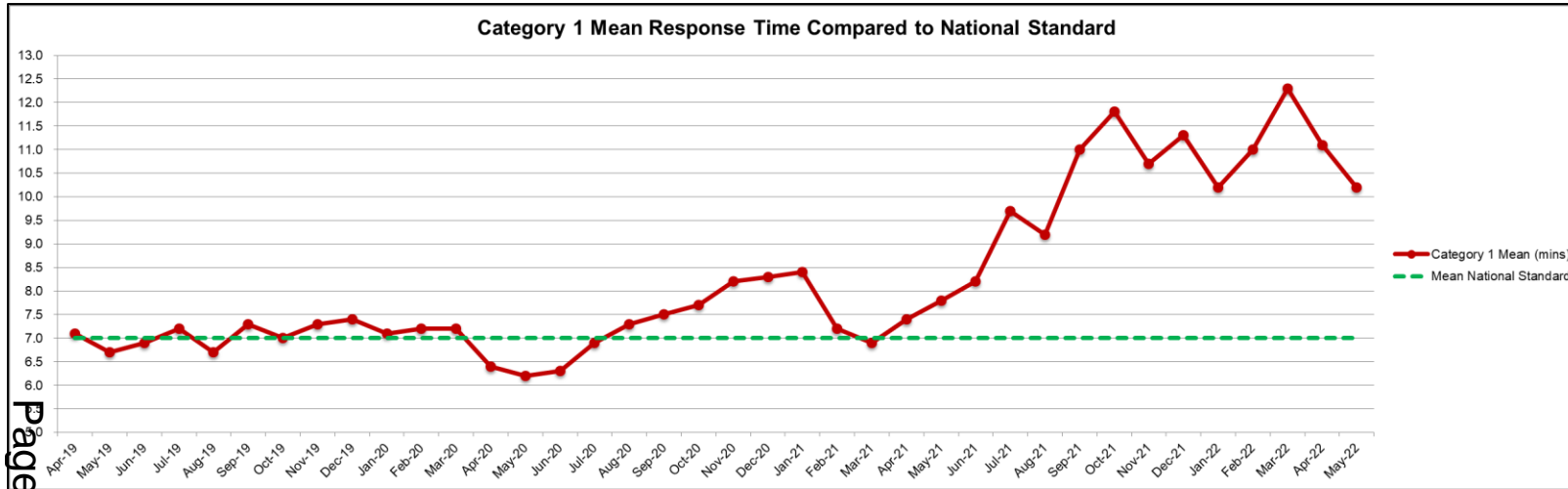


### **Wiltshire Frontline Operational Levels per Week – Supporting Narrative**

This slide outlines the abstraction pressures created by COVID-19 restrictions and increased sickness levels (linked to COVID-19) over recent months. The Trust has provision within current plans for abstractions of just over 24% but during March 2022 these abstractions reached close to 37% at their peak. Improvements are now being seen and this is enabling the Trust to again deliver consistent resourcing above plan levels on a daily basis.



**Response Times in Wiltshire**





## **Response Times in Wiltshire – Supporting Narrative**

With improved resourcing and lower activity levels, the response times within the BSW CCG area improved in May 2022.

Cat 1 mean time of 10 minutes 12 seconds in May 2022 (against the 7 minute national standard)

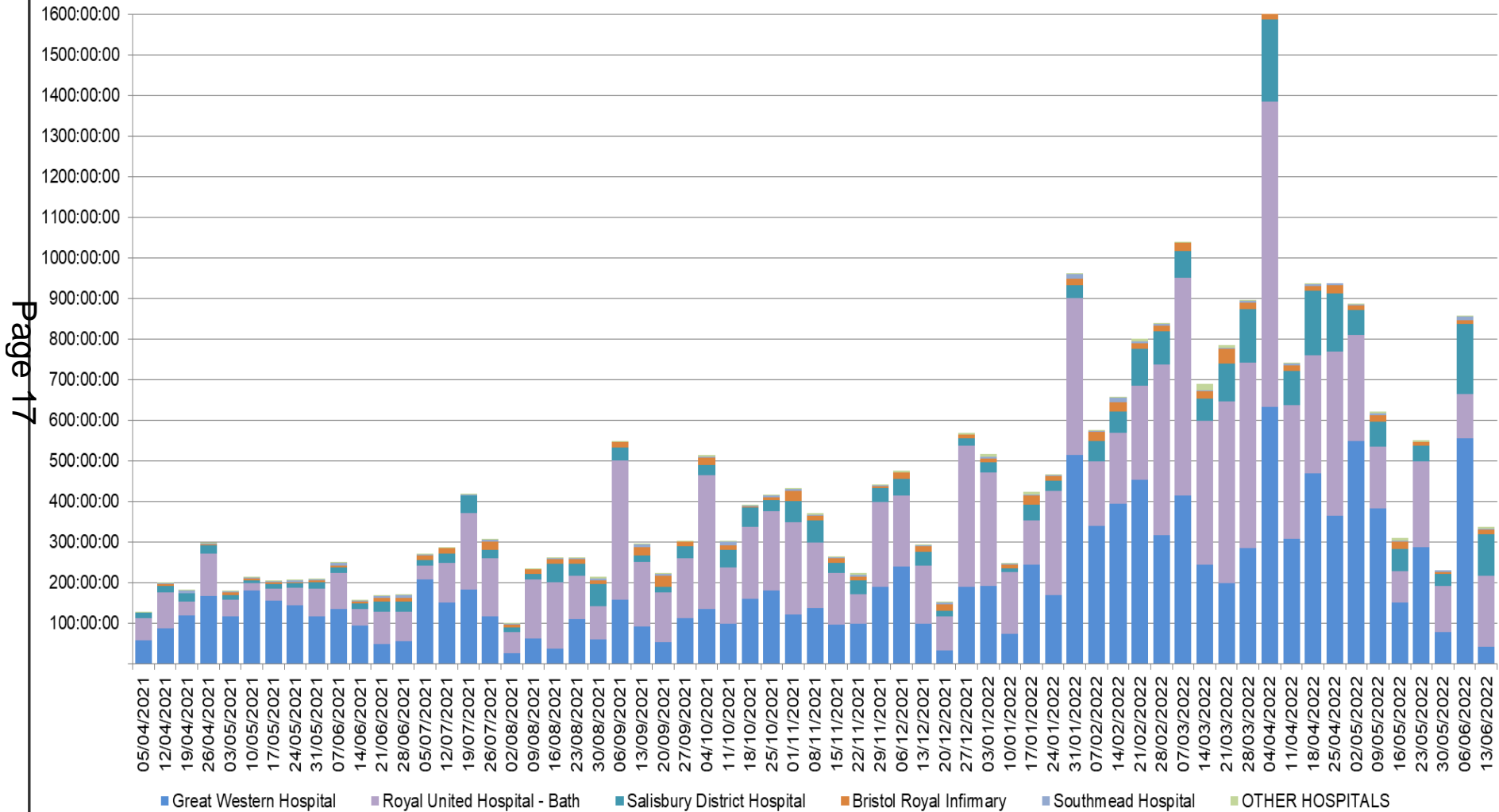
Cat 2 mean times at 53 minutes (against the 18 minute standard)

Cat 3 mean times at 2 hours 11 minutes (against the 1 hour standard).





**BSW CCG - SWASFT Resource Hours Lost to Handover Delays in Excess of 15 Minutes at Acute Hospitals**





## Hours lost to Handover Delays – Supporting Narrative

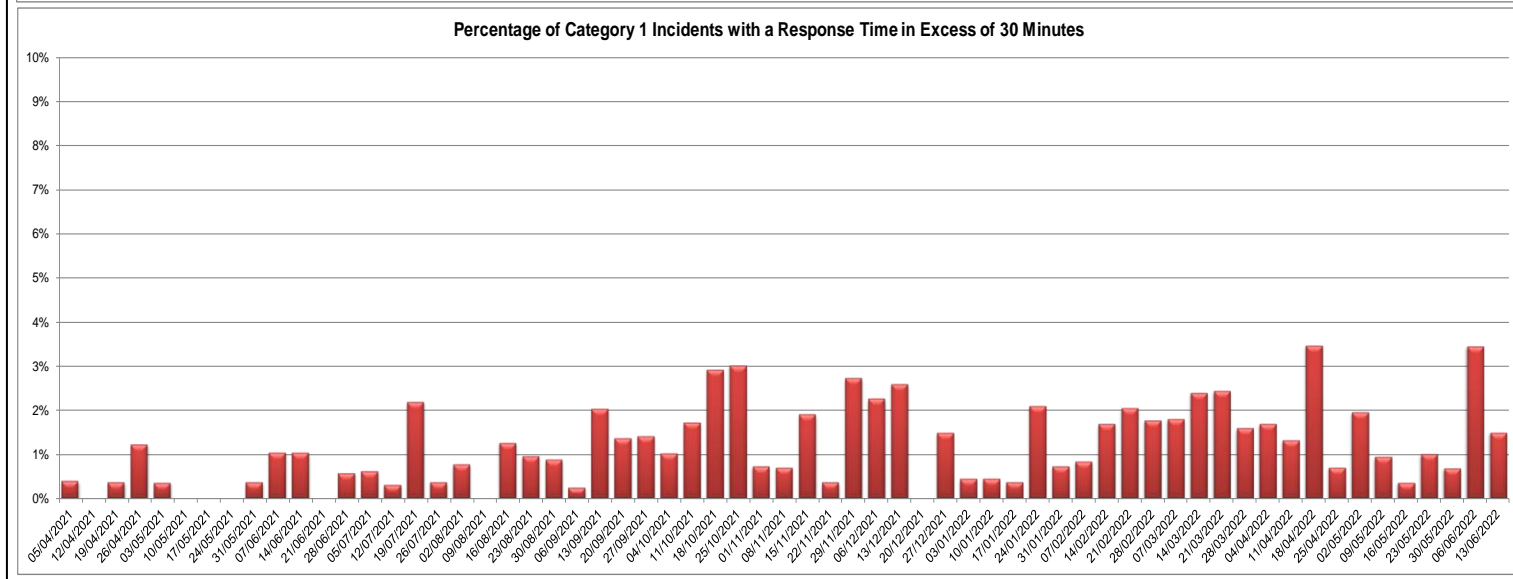
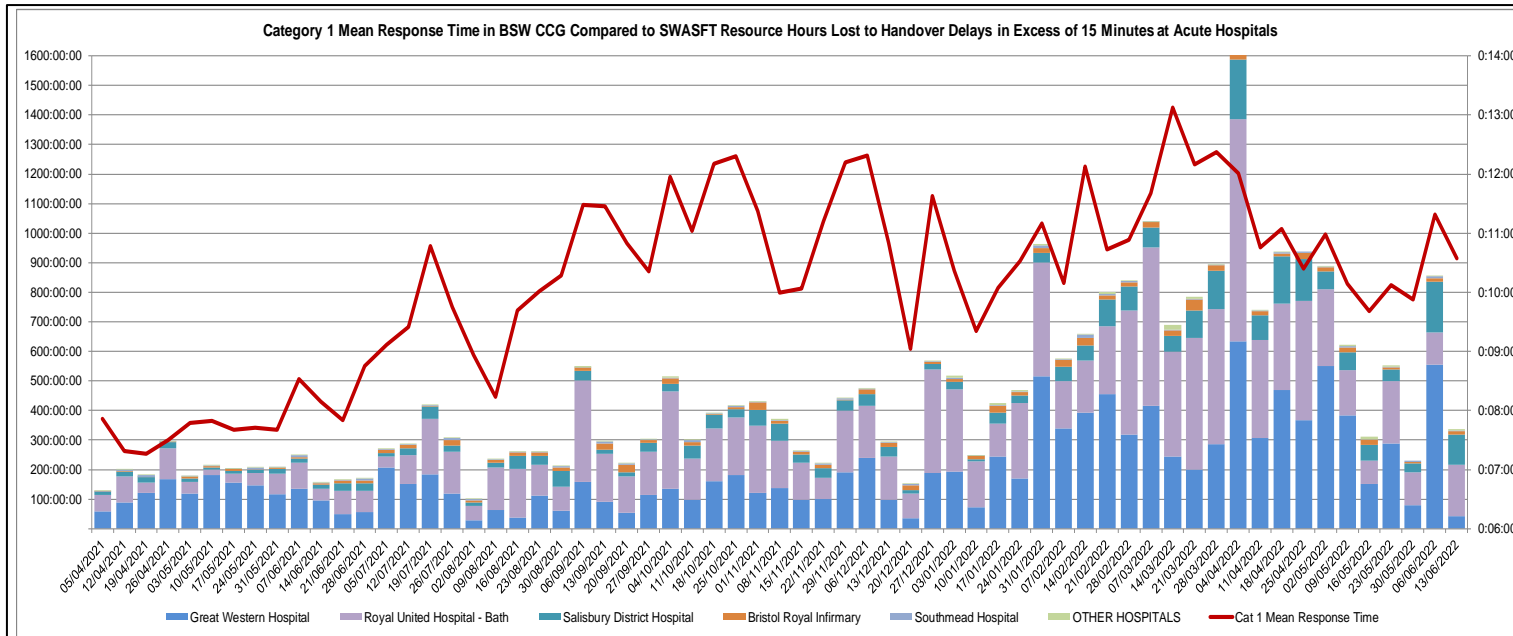
The major factor impacting on the Trust's ability to respond to patients in a timelier manner is the amount of time lost to handover delays at the acute hospitals.

In Wiltshire, the extensive delays experienced at times at the Great Western Hospital and the Royal United Hospital Bath reduces the number of the resources available to respond to over 999 calls.

The operational resource time lost to handover delays (in excess of the 15 minute handover target) has increased over the past 12 months, rising from around 150 to 200 hours lost per week back in April 2021 to over 1,600 hours lost per week at the beginning of April 2022. In recent weeks, it's still over 500 hours lost after some improvements.

These unprecedented levels of handover delays result in large numbers of the Trust's operational resources being held at hospitals for extended periods of time.

Handover delays are replicated and often even higher in other operational areas across the South West of England.



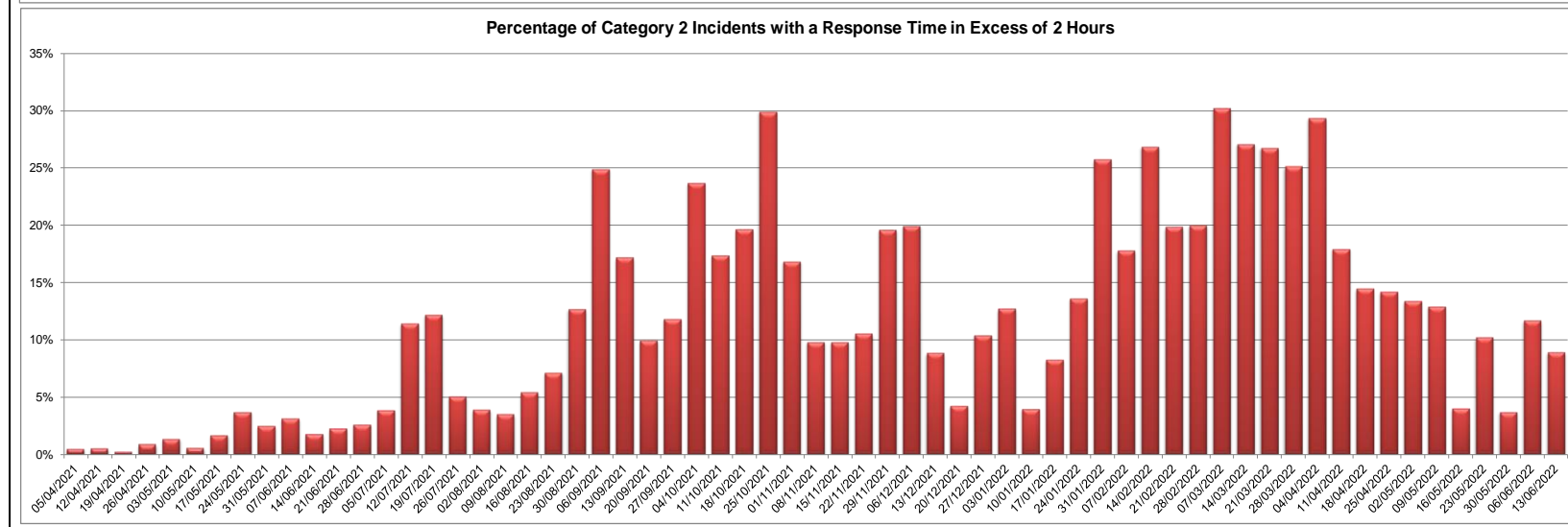
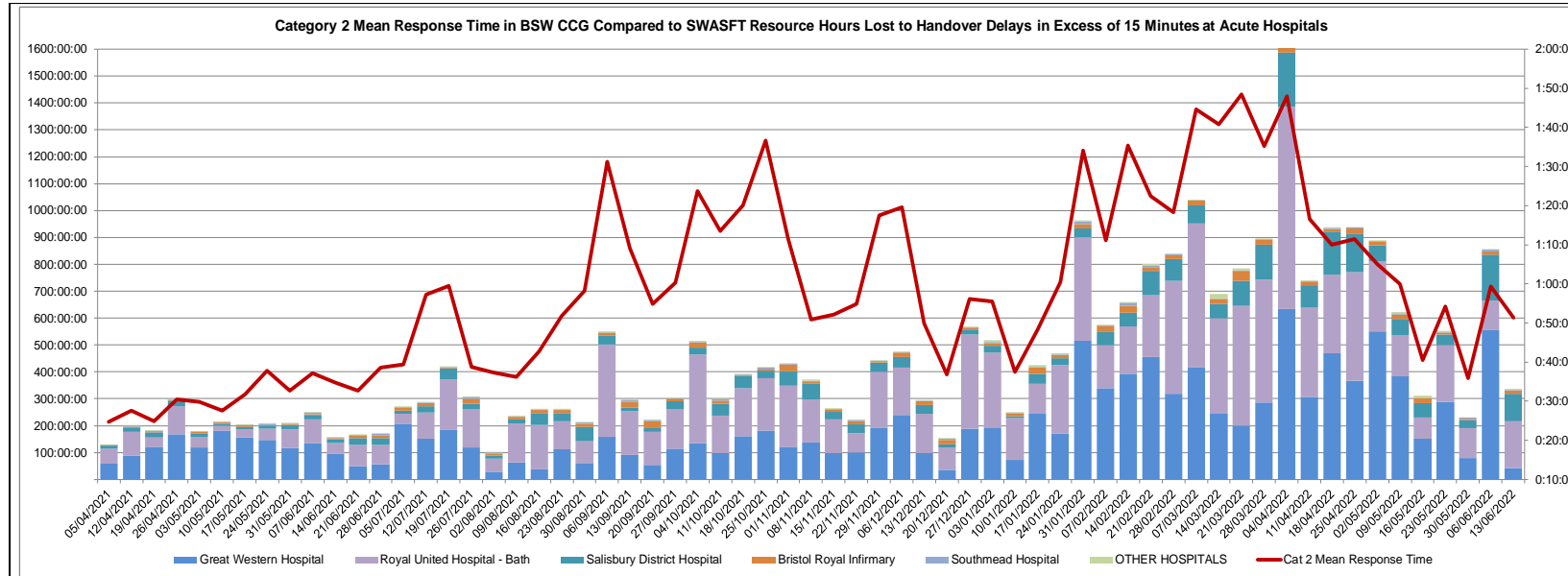


### **Category 1 Mean Response Times & Handover Delays – Supporting Narrative**

The top graph shows the correlation between the increasing Category 1 mean response times and the increase seen in the hours lost to handover delays.

The blue part of the column is relating to delays at the Great Western Hospital. The purple part of the column is relating to delays at Royal United Hospital Bath. The aqua part of the column is relating to delays at Salisbury District Hospital. The other colours relate to delays experienced by BSW CCG patients at other hospitals outside of the Wiltshire area (e.g. Southmead Hospital in Bristol).

As the delays increased the response times have increased. This is even more evident on the larger volume of Category 2 incidents on the following slide.





## **Category 2 Mean Response Times & Handover Delays – Supporting Narrative**

For Category 2 incidents, the longest response times clearly correlate with the increased handover times at the acute hospitals.

Some improvements have been delivered over recent weeks through the improved resourcing position on the road and the Trust re-introducing cohorting of patients at the acute hospitals. Whilst this is having some minimal benefits, this is at substantial financial and operational resource cost to the Trust and is not a sustainable position.

Back in April 2021 when the handover delays were much lower the Cat 2 mean times within the Wiltshire were close to 25 minutes, but in recent months peaked around two hours (compared to the 18 mins national target) when the handover delays were having their greatest impact.

With the average handover times rising to over two hours per patient on some days at some acute hospitals, this is limiting the number of incidents each resource can manage in an 11 hour shift. This takes the job cycle for a conveyed patient to over four hours. With our crews also due breaks within their shifts, this is limiting crews to at best two patients per shift, much lower than their historic productivity levels and therefore giving us much lower return on any additional resources the Trust are putting in place.

The number of patients with very long response times increases as the impact from these delays escalates, with around 30% of our Category 2 incidents currently receiving response times of more than two hours back in March, reducing back down below 15% in recent weeks even with the increased levels of operational resourcing.



**Handovers Waiting - GREAT WESTERN HOSPITAL, ROYAL UNITED HOSPITAL - BATH, SALISBURY DISTRICT HOSPITAL**

This report looks at the hours of the day and shows how many vehicles were waiting at that time. This report is a rolling 28 days.

Day of Date/Time	0	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	Avg Total
24/05/22	8	6	4	3	2		1		1	7	6	4	5	7	10	14	13	8	19	6	3	1	1	9	6.6
25/05/22	9	9	6	4	3	3	2	1	3	4	6	9	9	6	10	9	10	14	19	9	10	11	11	9	7.7
26/05/22	4	3	2	4	6	3	4	1	4	4	7	10	9	10	7	9	8	7	9	6	6	6	11	10	6.1
27/05/22	7	4	3	4	5	2	4			1	8	11	9	10	7	9	9	10	11	10	7	10	10	7	7.4
28/05/22	1		2	2	1		1		2	4	1	9	3	6	4	2	3	4		4	5	2	1	4	3.4
29/05/22	5	2	1	1	1	1	4	3		4	1		4	3	2	3	4	7	10	9	6	10	3	10	4.5
30/05/22	9	9	11	4	5	2	5		1	3	4	1	1	5	3	5	1	2	5	4	4	1	2	1	4.9
31/05/22	3	4	4		2		1	2		4	3	6	1	3	6	2	3	2	3	6	7	2	4	3	3.6
01/06/22	3	2	2	2	3			1	5	4	3	7	4	3	5	2	5	3	9	14	7	5	10	6	5.4
02/06/22	4	4	6	3	4	1	2		2	2		3	2	2	4	3	7	9	3	4	3	3	1	4	3.5
03/06/22	1	2	5	1	1	2	1		1	1	1	2	2	2	6	2	3	3	8	6	6	6	9	11	3.8
04/06/22	4	2		2	2	3	4	2	1	7			3	5	2	3	3	4	3	7	11	9	7	4	4.1
05/06/22	7	4	2	1	1	1	4	2	1	4	5	4	2	3	6	3	1	3	6	4	7	5	5	9	3.8
06/06/22	17	6	9	3	2	2	1		5	7	7	10	10	10	9	10	14	10	15	19	17	18	18	18	10.4
07/06/22	15	15	16	7	16	15	10	6	9	4	6	6	10	14	10	10	10	10	14	9	8	18	10	16	12.8
08/06/22	16	13	20	14	14	9	9	4	5	6	6	5	6	4	5	9	10	10	17	14	10	17	14	11	11.2
09/06/22	11	6	7	4	5	2	3	1	4	3	9	14	13	8	6	6	5	5	7	11	10	11	9	7	7.2
10/06/22	10	7	7	4	4	4	5	3	5	6	6	6	5	5	10	9	10	11	9	8	10	14	16	14	8.4
11/06/22	10	8	5	6	4	3	3	4	2	5	6	5	4	7	7	7	10	10	8	10	7	6	7	7	6.5
12/06/22	5	4	5	3	2	1			2	2	2	2		1	3	5	2	3	9	3	3	4	4	7	3.6
13/06/22	4	2	2	1		2	1	1		2	7	2	3	3	5	14	10	10	10	11	11	11	7	4	6.9
14/06/22	3	4	1	5	5	5	4	3	2	3	10	9	7	6	3	1	4	4	5	4		4	4	3	4.4
15/06/22	5	5	2	4	1	1	5	5	9	10	9	7	8	4	7	2	1	5	11	3	5	5	5	5	5.5
16/06/22	5	5	1	1	1	1	2	1	2	2	1	4	4	1	4	2	1	9	9	9	3	5	5	6	3.4
17/06/22	5	5	2	1	1	1	5	1		1	3	2	5	2	4	4	5	11	4	2	3	4	3	2	3.4
18/06/22		2	2	2	2		2	2	1	3	4	3	3	3	5	3	5	7	4	4	3	4	3	4	3.6
19/06/22	4	3	2	4		2	2	1	3	2	2		1	2	3	8	5	3	3	3	2	5	4	5	3.2
20/06/22	5	2	4	3	1	4	4	1	2	2	3	7	10	14	10	10	14	10	16	17	17	20	19	19	9.4
21/06/22	7	11	9	6	5	1																			8.8
Avg Total	7.2	5.8	5.1	4.0	3.8	3.0	3.8	2.6	3.0	3.9	5.0	6.4	5.9	5.5	6.1	6.3	6.8	7.8	9.0	7.7	7.4	8.1	8.0	8.1	5.9



## **Handover Delays – Supporting Narrative**

This slide provides a snapshot of the pressures the Trust is seeing at hospitals in the Wiltshire area over recent weeks. It represents the average number of resources at the Royal United Hospital Bath, Salisbury District Hospital and Great Western Hospitals (combined).

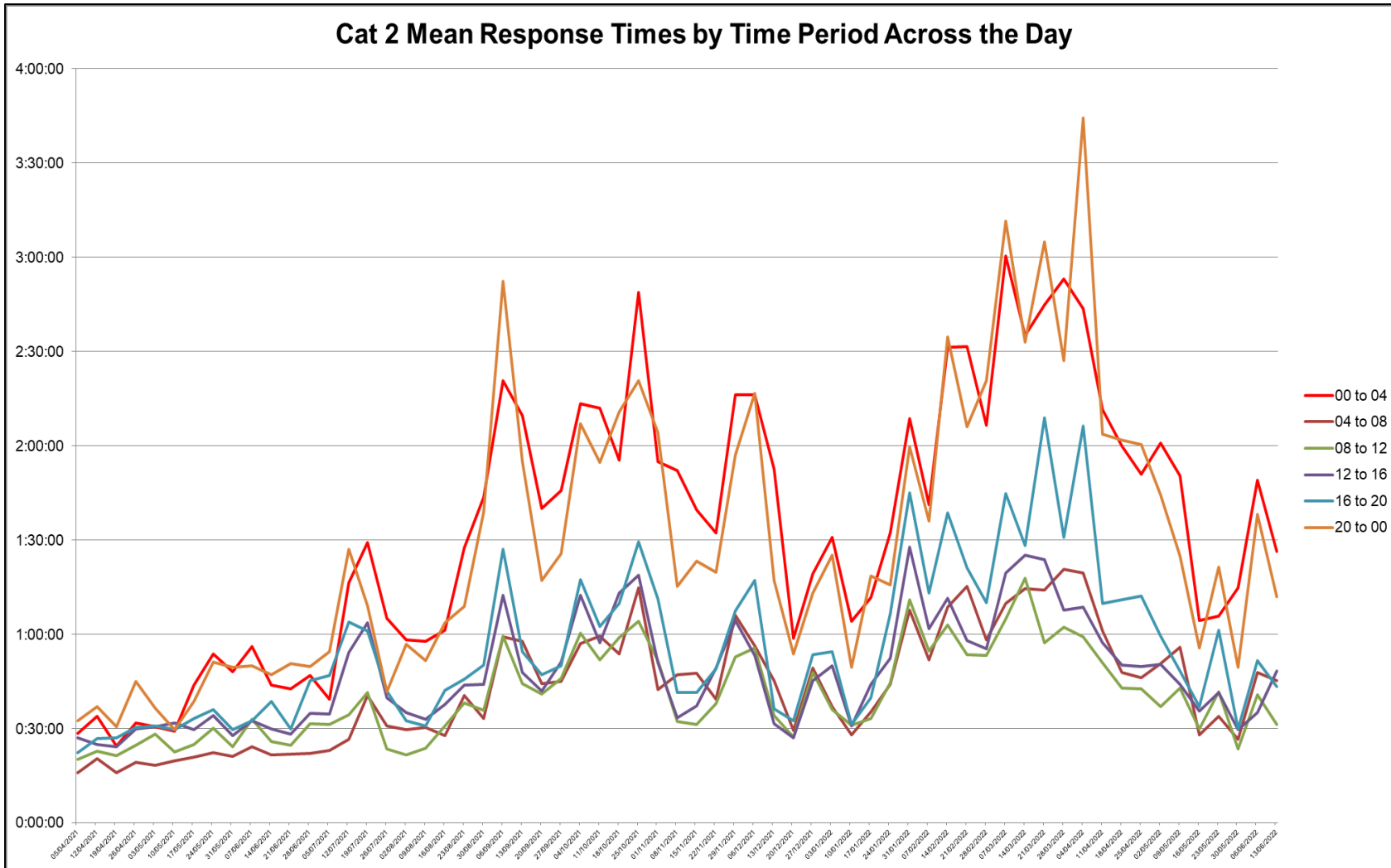
This gives an idea of the number of Trust resources at the hospitals on average during each hour of the day. This does not represent the peak numbers within any hour, but it does highlight the regular challenge of 15 or more operational resources being held at the hospital at the worst times. The peak times being within the latter part of the day, which increases the pressures on the Trust's ability to respond going into the evening and overnight.

These figures would have been even higher during the period when handover delays were greater back in March 2022.





**Cat 2 Mean Response Times by Time Period Across the Day**



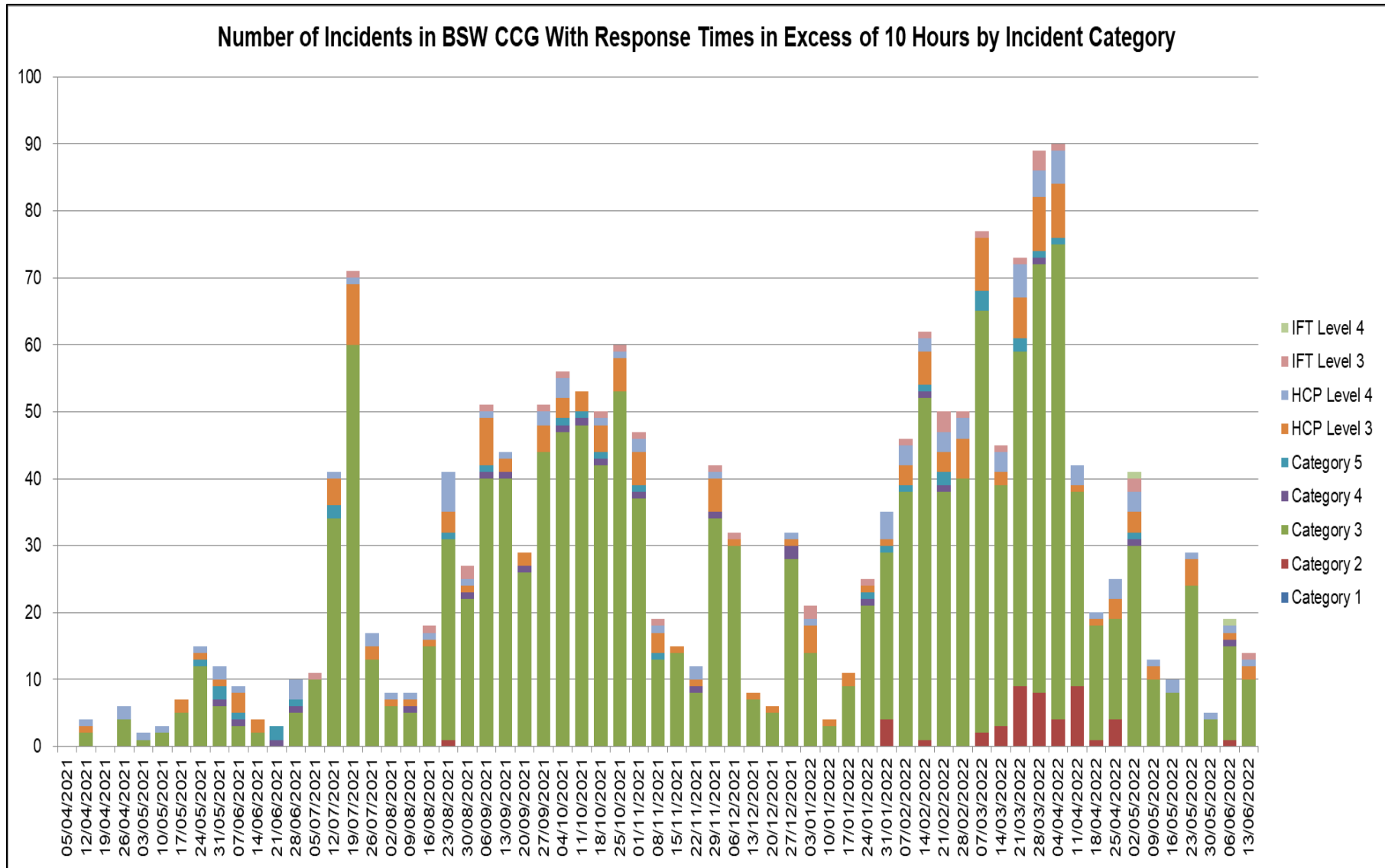


## **Category 2 Response Times Across the Day – Supporting Narrative**

If we look at the Trust's response times during different periods of the day, we can see that the response times generally increase as the day progresses, with the worst of the response times seen between 20:00 and 04:00.

The increased number of waiting patients overnight is more difficult to reduce, as the Trust traditionally has fewer resources scheduled/rota overnight as there is less demand being received in this period of the day.

Losing large number of resources in the night time period therefore represents a larger proportion of all resources on duty at that time and therefore longer response times are often seen as a result.





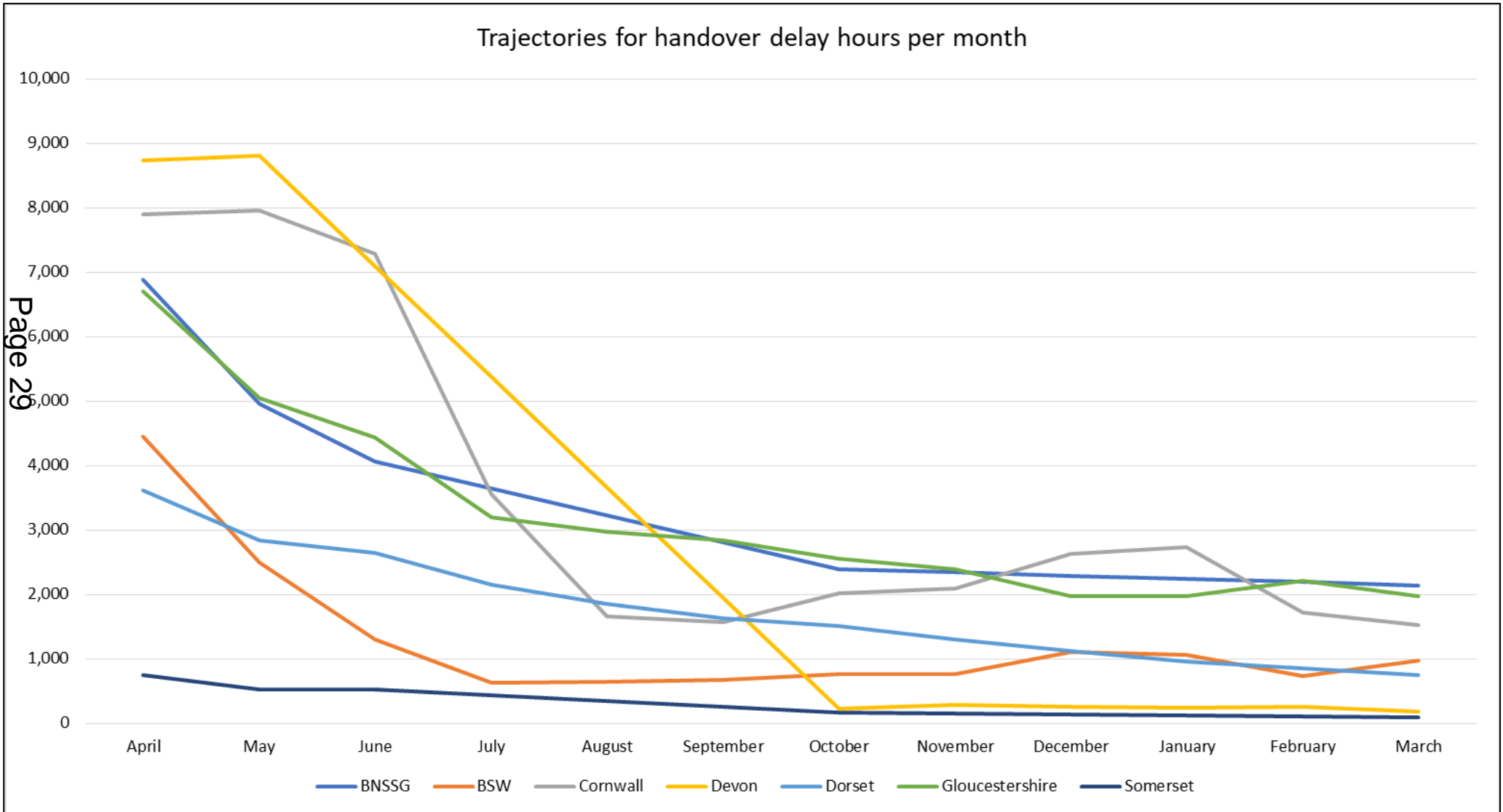
### **Number of Incidents with a Response Time in Excess of 10 Hours – Supporting Narrative**

The number of incidents with response times in excess of 10 hours has increased as the handover pressures increased.

Prior to the increased delays the occurrence was rare and limited to lower acuity incidents, but at these high pressure points the Trust is seeing patients with Category 2 conditions having to wait more than 10 hours for a response due to the lack of resources on the road (with so many resources being held at hospitals).



Trajectories for handover delay hours per month





## **Trajectories for Handover Delay Hours per Month – Supporting Narrative**

In response to the escalation of handover pressures, the Trust has been working closely with NHSE, NHS Commissioners and the acute hospitals to identify any opportunities to reduce the time lost to these delays.

Whilst every effort has been taken to identify best practices and implement local solutions, the success to date has been very limited and the time lost to delays remains unacceptable and the major barrier to the Trust delivering improved response times to patients.

As part of the contract negotiation process for 2022/23 all of our Commissioners have been asked to identify actions to improve handover performance at the acute hospitals to assist the Trust in delivering improved response times.

In June we were provided with improvement trajectories by each of the Commissioners to outline their anticipated improvements through the current financial year. The actions behind these improvements have not yet been provided to us - they are the responsibility of each Commissioning area. But based on these trajectories the Trust is expecting to see significant improvements in the handover times over the next few months reducing back to below 2,500 hours lost per week at a Trust level by October 2022 (compared to over 8,500 hours lost per week during June 2022).

If these trajectories are delivered the Trust would expect to be in a much better position to respond to patients in a timely manner. However, the actions required to deliver such rapid improvement should not be under-estimated and are predominantly outside of the control of SWASFT, the Trust is therefore reliant on outside stakeholders to deliver to help remove the most significant barrier to performance during 2022/23.



## 4. Wiltshire Updates in Brief

### Hospital Ambulance Liaison Officer

We have recurrent funding for a team of Hospital Ambulance Liaison Officers (HALO) at Great Western Hospital and Royal United Hospital.

We have also secured funding for a team of HALOs at Salisbury District Hospital and we are currently recruiting for the roles.

HALOs assist with prioritising and handover of patients waiting to be transferred into hospital care.

### Freedom to Act

Wiltshire was one of two counties chosen to pilot an initiative called, 'Freedom to Act'. The pilot began in September 2022 by:

- Analysing the Trust Cultural Review results from 2018
- Analysing the Wiltshire results of the Staff Survey from 2019
- Making our own assessment of the Wiltshire operating environment
- To create a SWOT assessment of Wiltshire as at September 2020
- Based on the SWOT findings we identified the following priority areas for action:

Priority 1 - Refresh Our Leadership Model

Priority 2 - Re-provision of Support Functions

Priority 3 - Financial and Operational Autonomy

New initiatives that were introduced included:

- Lead ECAs in Wiltshire
- Introduction of Mid-Point Review for all staff
- Introduction of Connect Shift for all staff



### **Tea and Medals Celebration**

On the 12, 17 and 19 May, the Wiltshire operations team held special 'tea and medals' events to present local colleagues with their Queen Platinum Jubilee medals – and celebrate some special achievements within the team.

Each month, Deputy County Commander Jane Whichello receives 'Wiltshire Operational Wonder' nominations – colleague-to-colleague recognition – and a few of these were picked for a special presentation at the events.

### **Wedding Guest of Honours**

Wiltshire crew members, who helped save a man's life on Salisbury Plain last year, were the guests of honour at his recent wedding celebrations.

Student Paramedic, Fred Fox and Emergency Care Assistant, Matt Bone, joined Mick Culley and his bride, Kerry, at their wedding blessing in Lincolnshire.

Mick (69) from Hogsthorpe, near Skegness had a brain haemorrhage while on holiday in Wiltshire with his then girlfriend, Kerry, last May.

Mick said: "I can't thank everybody enough – we don't have enough praise for what Fred and Matt did. Their quick actions saved my life."

Kerry said: "If it weren't for Fred and Matt, our life together could not have happened. We are just so grateful to them"





## 5. Volunteering and Community Services

### Operation Braidwood

As SWASFT begins to scale back its response and resourcing levels introduced to manage the COVID 19 pandemic, the Trust, in partnership with the five Fire and Rescue Services in the region, has worked on a legacy paper to explore the advantages and positive impacts that Operation Braidwood has brought to all services as well as to colleagues and patients.

As the Trust steps away from its mutual aid requests, Operation Braidwood will come to its natural conclusion, however, due to its success, the SWASFT's Chief Executive, Will Warrander and the five Fire and Rescue Chief Fire Officers have been presented with a number of options for consideration for a future sustainable model.

In the meantime Operation Braidwood is continuing in its current format, but on a slightly reduced scale from its original implementation to continue supporting SWASFT in its mission to deliver care as quickly and effectively as possible.

### Community First Responders

78 Volunteer Community First Responders (including 13 CFR Staff Responders (ECA/EOC) and eight St John Ambulance CFRs)

- 10 Clinical Staff Responders (Paramedics)
- 43 of Wiltshire's Community First Responders have also received extended training to support patients who fall. They are equipped with the Raizer Chair device, which enables a single operator to lift someone who has fallen but is uninjured into a sitting or standing position. The CFRs provide good coverage to all areas of Wiltshire, and often – with appropriate safety netting and clinical telephone support – are able to leave a patient at home with no further ambulance resources having to attend the location.

### Crew Welfare Car at Royal United Hospital Bath and Great Western Hospital, Swindon

SWASFT asked our local Community Responder teams to support with staffing welfare cars. The welfare cars are providing much needed support for the ambulance crews waiting to handover patients outside Emergency Departments. They are providing both refreshments and an element of emotional support for our frontline colleagues.

This initiative has been received well by crews who have gone out of their way to pass on their thanks to the volunteers and the SWASFT Charity.

We have recently been able to recruit two new volunteers directly to this role as a SWASFT Ambulance Service Volunteer.

### Community First Responder Awards

We are pleased to report that the work of Wiltshire Responders has once again been recognised by SWASFT and our Chief Executive. The following were awarded at the 2020/2021 Trust Awards ceremonies:

- Chief Executive Commendation 2021
- Chief Executive Commendation 2020
- CFR Group Award 2020
- Long Service Certificates for 10 and 15 Years volunteering



Additionally, nearly 40 of Wiltshire's CFRs were eligible for the Queen's Platinum Jubilee Medal (QPJM) and all were invited to attend a ceremony alongside operational staff, hosted by Wiltshire's County Commander, to receive the QPJM. A number did so, and at the same ceremony two CFRs were presented with Operational Wonder Awards in recognition of their outstanding support to Wiltshire Operations and the CFR scheme.

### **Recruitment: Patient Facing Community First Responder**

To improve the coverage of the responders, during the next 12 months the Volunteering and Community Services department will be continuing to targeted the recruitment of new Community First Responders.

In February this year, 11 new Wiltshire CFRs were recruited and trained and are now in the final stages of completing their development, hopefully going 'live' in June.

### **Dorset and Wiltshire Fire and Rescue Service**

Working in partnership with Dorset and Wiltshire Fire and Rescue Service, we continue to have 13 co-responding stations across the two counties providing a response for our most time critical patients.

### **Defibrillators**

SWASFT offers a supportive defibrillator package to businesses, organisations and communities, and across Wiltshire we currently support:

- 105 Community Public Access Defibrillators (CPAD)
- 59 Establishment Based Defibrillators

Across Wiltshire we also have 11 new CPAD Defibrillators and five new Establishment Based Defibrillators coming online in the next few weeks.

### **Public Awareness**

As part of the supportive defibrillator package, SWASFT delivers awareness training to the businesses and communities we work with, although most of this face-to-face interaction was put on hold for a period of time due to the pandemic, we have restarted training in a risk assessed manner and training is delivered when we are assured that COVID-19 control measures are in place.



## 6. South Western Ambulance Charity

### NHS Charities Together Grant Funding

The charity continues to work closely with SWASFT colleagues to ensure grant funding from NHS Charities Together has a positive impact across the South West region.

- Enhanced observation equipment for use by Community First Responders (CFRs) has been received into stores and it is being readied for distribution to allocated CFR groups. Equipment includes enhanced observation equipment and 37 Raizer lifting chairs to enable patients who have had a non-injury fall to be supported.
- We are in the process of purchasing dedicated vehicles to support the work of our CFRs. Orders are now being placed for the six vehicles which will be distributed across the region.
- Working with the Wellbeing Team we have seen some great work delivered by the Outreach Support Workers, particularly supporting colleagues with long Covid. We've been delivering a programme of small grants for Covid recovery activities, outdoor green space improvements and thermal hydration bottles. We continue to support a number of special interest forums, networks and events and were able to support some of the Staff Awards in 2021.
- Educational and promotional resources have been provided for the Patient Engagement team to support the Saving Lives Together (including Restart a Heart Day) campaign to improve out-of-hospital cardiac arrest survival rates. These include manikins that allow CPR to be demonstrated to members of the public.
- We have been able to continue our investment in the GoodSAM app that is used to dispatch available emergency volunteer responders to 'Out of Hospital' cardiac arrests.

### Fabulous Fundraisers

We do have some incredible fundraisers who raise many thousands of pounds to enable us to go the extra mile for our exceptional staff, volunteer heroes and the communities that SWASFT serves. Examples include a Christmas choir event, a Boxing Day dip, a charity football match and an epic climb up Snowdon carrying full CFR kit.

We are currently encouraging fundraisers to sign up to host a NHS Big Tea party to celebrate the 74th birthday of the NHS on 5 July, and to plan ahead for the 75th birthday in 2023.

### Outrun an Ambulance

In 2022 we have again run our Outrun an Ambulance fundraising campaign, but this time as a national collaboration with six other regional ambulance charities. This is a virtual event that challenges competitors to conquer the mileage an emergency ambulance covers in one shift – they can run, walk, scoot, swim, cycle or self-propel in any other way they choose. We have had a great range of participants (including a fire-fighting crew running in full kit) and nationally raised over £20,000 (£4000+ in the South West). We are keen to continue to recruit new participants to sign up.



### **Crew Welfare**

We have continued to support the SWASFT Crew Welfare Car initiative, providing our hard-working staff with tea, coffee and biscuits during their hospital handovers.

### **Company Contributions**

Companies have continued to show their support with generous donations of goods; everything from 500 vegan sweet treat advent calendars to 100,000 PPE face masks. We have coordinated their distribution and storage with SWASFT colleagues.

Cash donations have also been made by companies throughout the region, supporting our volunteer CFRs, our staff well-being and our work to improve cardiac survival rates.



## **7. SWASFT-Wide Update**

### **Recruitment of Emergency Medical Dispatchers (EMDs)**

Over the last six months the Trust has taken a number of actions to improve recruitment and retention of EMDs.

EMDs work from the Trust's Emergency Operations Centre (EOC).

The training for new EMDs is eight weeks in duration from start to being functional in the EOC; this includes a period of classroom learning followed by supervised practice in the EOC. In order to expedite the increase in recruitment and training required to achieve the additional establishment as early as possible the Trust created 18 seat training rooms in both Exeter and Bristol. This was an increase in capacity from 10 and 12 seat rooms in Exeter and Bristol respectively.

A revised EMD recruitment and training plan has been approved and, based on the current, anticipated outturn, this would deliver the 250 WTE EMD target establishment level by the end of November 2022.

### **Trust Chairman to Step Down**

Tony Fox stepped down from his role as chairman at the end of June after almost 10 years as a non-executive director and five years as chairman.

Gail Bragg has been appointed as Interim Chair until such time as a full recruitment process for the vacant position can be completed. Gail joined the trust as a non-executive director in September 2016.

### **Adrian South QAM**

Adrian South, our Deputy Director of Clinical Care, was presented with the Queen's Ambulance Service Medal by HRH The Duke of Cambridge at Buckingham Palace last month.

He has been instrumental in the move of the paramedic profession from conveying almost every patient to hospital, to managing more than half of patients on-scene.

During the COVID-19 pandemic, Adrian was asked to focus on infection prevention and control, providing senior leadership for a range of projects, including the introduction of improved PPE for staff and the launch of the staff vaccination programme.

