



NOTTINGHAMSHIRE
Fire & Rescue Service
Creating Safer Communities

Nottinghamshire and City of Nottingham
Fire and Rescue Authority
Community Safety Committee

EMERGENCY FIRST RESPONDER TRIAL

Report of the Chief Fire Officer

Date: 13 January 2017

Purpose of Report:

To update Members on the trial collaboration with East Midlands Ambulance Service on the implementation of an Emergency First Responder Scheme at Carlton, Edwinstowe and Worksop fire stations

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1. BACKGROUND

- 1.1 Emergency first responding (EFR) is the attendance of fire service personnel at medical incidents in support of emergency calls to the ambulance service. The close proximity of fire crews to some incidents allows them to attend the emergency prior to the arrival of the ambulance service – allowing life-saving intervention, or stabilisation of a patient, to occur as soon as possible.
- 1.2 In April 2015, Nottinghamshire Fire and Rescue Service (NFRS) joined the National Joint Council (NJC) trial for EFR, initially with Retained Duty System (RDS) personnel at Harworth and Newark. This national trial incorporates 37 fire and rescue services across England who are undertaking roles to support local ambulance services.
- 1.3 In November 2016, NFRS agreed with East Midlands Ambulance Service (EMAS) to trial three wholetime duty system (WDS) stations to undertake EFR duties until the end of the NJC trial period. The stations selected, due to the potential contribution to EMAS performance and to provide robust trial evidence for NFRS, were Carlton, Worksop and Edwinstowe.
- 1.4 NFRS was the first service in the East Midlands to undertake the EFR trial with WDS Crews; Derbyshire and Leicestershire fire and rescue services have since joined the trial with WDS personnel, using the model developed in NFRS.
- 1.5 The EFR trial sees crews attend 'Red 1' and 'Red 2' incidents. These are incidents which are categorised as critical to life such as cardiac arrest, difficulty breathing, chest pains or serious bleeding.

2. REPORT

- 2.1 Since the start of the trial, the Service has attended 168 EFR incidents, of which 17 were classified as the more serious 'Red 1' category; a category that includes patients in cardiac arrest (11 of the 17 calls) where every second counts towards the patients chances of survival.
- 2.2 Of these calls, Carlton has attended 85 in the month, Edwinstowe have attended 70 and Worksop (where only one Watch are taking part in the trial) have attended 10.
- 2.3 Crews attend incidents following the same mobilisation protocols as any other emergency call, with the call from EMAS going to Fire Control and them mobilising crews to the incident. Crews, once alerted by Control, have taken an average of approximately 90 seconds to mobilise to the incident and have taken an average of just over five and a half minutes to attend the incident address.
- 2.4 NFRS were first on scene at 112 of the incidents attended in November and were detained at the scene of these incidents for an average of just under 40 minutes.

- 2.5 EMAS have a target of attending 75% of 'Red 1' and 'Red 2' calls within eight minutes and NFRS have met this target at 71 of the incidents. Without this trial, EMAS would have achieved the target to the same incidents on eight occasions.
- 2.6 There was one occasion reported in November when crews were committed to an EFR call when a further fire call was received. This was a call to a road traffic collision, however it transpired that no persons were trapped and there was no action taken by the attending appliance.
- 2.7 Crews have attended seven incidents involving fatalities during the trial and there have been two incidents reported where crews were denied access by members of the public. There have also been a number of compliments received by stations from grateful members of the public.
- 2.8 Within the clinical environment a 'return of spontaneous circulation' (a casualty who is not breathing and has no pulse when medical intervention arrives and has regained both following medical attention) is considered high level success. NFRS personnel have contributed to this success on three occasions since the start of the trial.

3. FINANCIAL IMPLICATIONS

- 3.1 The use of Wholetime personnel does not attract and direct costs in terms of wages due to all responses being undertaken during their normal periods of work.
- 3.2 The agreed Memorandum of Understanding with EMAS outlines a single contribution of £5,000 towards the cost of the three month trial. EMAS have also provided all associated equipment for the trial.
- 3.3 Monthly review meetings are scheduled with EMAS to review the payment agreement in terms of activity.

4. HUMAN RESOURCES AND LEARNING AND DEVELOPMENT IMPLICATIONS

- 4.1 Engagement and consultation with the representative bodies has been central to the development and continuation of the trial to date.
- 4.2 A voluntary approach to engagement with the trial was taken with personnel. This led to three of the four watches at Worksop declining to take part in the EFR trial at this time pending Hepatitis B vaccinations.
- 4.3 The training required to undertake the EFR role has been provided by the Service's trainers and has been adopted as part of an 'up-skill' in medical training that all operational personnel will receive in 2017.

- 4.4 Additional monitoring and support has been put in place for crews in relation to the increased number of incidents involving fatalities that are being attended.

5. EQUALITIES IMPLICATIONS

An equality impact assessment has been undertaken and the assessment highlighted the beneficial impact to particularly vulnerable and rural communities, communities who may benefit from the earlier attendance of emergency care.

6. CRIME AND DISORDER IMPLICATIONS

There are no crime and disorder implications arising from this report.

7. LEGAL IMPLICATIONS

- 7.1 Part 2 of the Fire and Rescue Service Act (2004) enables fire authorities to use its resources to respond to medical emergencies.
- 7.2 EMAS provides the clinical governance that is required to participate in the First Responder Scheme.
- 7.3 The collaboration with EMAS may assist in satisfying the potential requirement for collaboration from the Police and Crime Bill.

8. RISK MANAGEMENT IMPLICATIONS

- 8.1 The future of EFR will be considered once the trial concludes on 17 February 2017.
- 8.2 Close liaison with media outlets is being maintained in order to mitigate any risk to corporate reputation from adverse media.
- 8.3 The participation in the scheme and the ability to provide medical interventions has the potential to reduce risk in the community.

9. RECOMMENDATIONS

To note the contents of this report and agree to receive further reports at the conclusion of the trial period.

10. BACKGROUND PAPERS FOR INSPECTION (OTHER THAN PUBLISHED DOCUMENTS)

None.

John Buckley
CHIEF FIRE OFFICER