



Active Area Cover Arrangements for Accident & Emergency ambulance crew staff

1. Background

In July 2008, following the introduction of a number of service improvements in working practice and new technology, the London Ambulance Service (LAS) introduced arrangements where available resources would be strategically placed in geographical locations to reach more patients, more quickly.

By using software designed specifically to analyse historic LAS patient data to calculate where calls are likely to occur it is possible to predict the best location or area for a resource to be situated. The software presents a real-time pan London view of Operational resources including their status, direction of travel, speed and position. It incorporates the results of ORH analytical modelling techniques to provide the LAS with optimum static deployment positions.

The process of despatching vehicles to such positions is called Active Area Cover (AAC) and includes enhanced Tactical Area Cover (TAC)

Area cover is proven to have delivered benefits in terms of service delivery and patient care. It leads to: a more even distribution of workload; decreasing response times and enhancement of staff safety; a reduction of patient waiting times that consequently improves clinical outcomes. In addition it supports the Trust in achieving and maintaining the performance standard for Category A calls: Mobilising resources from an ambulance station takes approximately one minute more than mobilising a resource from off station.

For the purposes of this document Active Area Cover arrangements apply to all front line accident and emergency response vehicles, however current working practices for solo responders should largely be unaffected as their primary role is to be mobile within their target areas.

2. Principles of AAC/TAC Arrangements

With the introduction of AAC/TAC a framework for consideration was jointly agreed at the Operational Consultative Forum. This is based on the following:

- Evidence based data – e.g. historic LAS patient data relating to category A demand/performance by hour of day and resource availability.
- Reasonableness – e.g. – location, facilities etc.
- Staff Health and Safety.

In addition the overarching principle is that any new arrangement must improve our response to our patients, reduce overall patient waiting times and improve clinical outcomes.

3. AAC/TAC arrangements

Hours of Operation

Current evidence in regard to Category A call demand and performance against the national standard for Category A calls, indicates that the hours of operation for AAC should be 24 hours per day, 7 days per week. In order to move toward achieving this the current hours of operation 08:00 through to 22:00 will be extended with the following interim arrangements to apply.

AAC will operate between 06:00 and 00:01 (midnight)

TAC is between 00:01 (midnight) and 06:00.

These operating hours will be extended to cover the full 24 hours a day by 1st April 2014.

Active Area Cover (AAC)

- Between 06:00 and 00:01 hours Vehicle Crew Staff (VCS) will be deployed by EOC to undertake active area cover from one of a number of predetermined cover points.
- A deployment to a cover point will have equal status to that of being deployed to an emergency call, albeit without audible and visual warnings being used.
- The cover point will be a geographic area of a half a mile radius of a specific location identified by EOC. In practice VCS will be given a specific location for deployment purposes - a road junction for example - but are permitted to roam or park within a half mile radius of that location.
- VCS electing to remain at a static position should give consideration by way of dynamic risk assessment to safety, parking restrictions and the availability of local facilities.
- VCS may utilise local facilities at their discretion. If doing so means leaving their vehicle they must remain contactable at all times and be able to respond to an emergency call without delay.

Enhanced Temporary Area Cover (TAC)

- Between 00:01 and 06:00 hours TAC deployments will be to ambulance stations or to hospitals that have an Accident and Emergency department or a 24 hour Urgent Care Centre.
- Where the ambulance station is adjacent to a hospital the station will take precedence as the designated cover point. A list of the stations/hospitals affected is attached at Appendix A.
- Resources will remain on TAC until such time as normal cover for the particular area is re-established.
- VCS can elect to remain mobile patrolling the designated area if they wish.

3.1 Deployment

Within the hours of operation for AAC/TAC, VCS ambulance crew staff will be deployed to provide cover from a number of predetermined cover point areas within their own or neighbouring complexes.

Cover point locations will be passed by phone, MDT or radio message and staff will be expected to make their way toward these locations and park or remain mobile within 1/2 mile radius of said point.

AAC will be provided from a geographic area and will not necessarily be linked with previous sector, complex or station boundaries. Natural boundaries such as the River Thames for example, will be taken into account.

- Each cover point or node will be, “Essential, Desirable or Other,” and should be covered in that order of priority. I.e. Essential first, Desirable second, Other third.
- Resources should firstly be considered for deployment to **uncovered Essential** nodes in **their** complex. If these nodes are covered and further resources from that complex are available for AAC/TAC, they should be deployed to any uncovered Essential points in **neighbouring** complexes.
- If all Essential nodes are covered in a resources complex and its neighbouring complexes it should be deployed to **uncovered Desirable** nodes in its own complex. If they are all covered it should be deployed to uncovered Desirable nodes in its **neighbouring** complexes.
- When all Essential and desirable nodes are covered in both a resources complex and the neighbouring complexes, it should be sent to dynamically cover resource holes and **Other** nodes within its own complex.
- Vehicles should not be deployed to cover points more than one complex from their own
- Coordination of deployment of resources will be with consideration to vehicles that are in their rest break window.

Start and End of Shift arrangements

VCS will not be deployed to AAC/TAC in either the first or last 30 minutes of their shift.

Unless deployed to a call the first 30 minutes of the shift should be utilised for the statutory vehicle checks (protected time), vehicle daily inspection and other routine duties such as necessary administration.

Vehicles not engaged on a call at the end of their shift will whenever possible be returned to their own stations 30 minutes before shift end but, will remain available for emergency calls.

3.2 Staff Safety

Staff Safety and welfare is paramount. These arrangements have been subject to formal risk assessment undertaken jointly between representatives of operational management, staff side and the Safety and Risk Department.

VCS should apply the principles of dynamic risk assessment at all times, in particular if VCS elect to standby at a static cover position. Consideration should be given to safety, including (for example) safe parking areas, good lighting, CCTV coverage, radio and mobile telephone signals for example. This list is not intended to be exhaustive.

Staff are encouraged to report any health and safety issues that may arise through the normal service procedures.

4. Review

The arrangements for and the impact of Active Area Cover will be carefully monitored on behalf of the Directors of Service Delivery and Assistant Directors of Operations. Any review of these arrangements will be subject of consultation with the trade unions via the Operational Partnership Forum and with staff.