

CHESHIRE FIRE AUTHORITY

MEETING OF: PERFORMANCE AND OVERVIEW COMMITTEE
DATE: 6TH SEPTEMBER 2017
REPORT OF: HEAD OF SERVICE DELIVERY
AUTHOR: ALEX WALLER

SUBJECT: CHESHIRE CARDIAC RESPONSE PILOT –
EVALUATION REPORT

Purpose of Report

1. To provide an update on the Service's cardiac response pilot.

Recommended that:

[1] the content of the report attached as Appendix 1 be noted.

Background

2. In 2015 the National Joint Council (NJC) for local authority fire and rescue services began considering the expansion of the role of firefighters. Co-responding provided a potential area for the utilisation of skills possessed by firefighters through attendance to cardiac arrests in partnership with the ambulance service.
3. An NJC cardiac response pilot was initiated during 2016. This provided Cheshire Fire and Rescue Service (the Service) with an opportunity to align with the NJC pilot through the expansion of its existing co-responding capability which involved the Nantwich co-responder agreement between the Service and North West Ambulance Service (NWAS) that had been in place since 2009.
4. The Service, therefore, introduced a cardiac response trial to simultaneously respond with NWAS to cardiac arrests within four identified station areas: Warrington, Crewe, Holmes Chapel and Frodsham. The duration of the trial was six months.

Information

5. The evaluation report (Appendix 1) contains a detailed summary with recommendations concerning the cardiac response pilot and has been broken down into the following sections:
 - i. Results
 - ii. Response

- iii. Project Governance
 - iv. Health, Safety and Wellbeing
 - v. Training
 - vi. Conclusion
 - vii. Recommendations
6. During the six month cardiac response trial period – 1st July 2016 to 31st December 2016 – the Service was requested to simultaneously respond with NWAS to cardiac arrests on 48 occasions. In total 119 calls were received by NWAS for cardiac arrests during the trial period, meaning that the Service received 42% of the calls that came in to NWAS. Further details concerning this are contained within Appendix 1. Note – the trial continued beyond December 2016 and an updated position will be presented at the meeting
 7. Mobilisation had been problematic throughout the duration of the trial. The manual transfer of calls between NWAS and North West Fire Control (NWFC) appeared to be the main contributory factor to this. However, work has been undertaken to provide a technical solution for this issue and the option of digital electronic information transfer will be investigated further.
 8. Two projects have been developed from the trial:
 - Restart a Heart Day campaign – an international event which aims to provide basic CPR skills to as many people as possible.
 - A collaborative high performance CPR training day
 9. The Service's response to cardiac incidents has continued after the initial six month period.
 10. Public and staff support has been high throughout the trial. 2016-17 IRMP feedback indicated that 89% of members of the public and 82% of staff supported the project. Engagement and enthusiasm from NWAS operational staff and witnessing the higher standard of clinical care afforded to patients due to a dual service response helped staff to recognise the value of the trial.
 11. Support has also been provided by the Fire Brigades Union through their involvement with the trial.

Financial Implications

12. The financial impact assessment for the 6 month trial period estimated an expenditure of £36,654, which included a 10% contingency. The actual expenditure for the period was £35,439.

Legal Implications

13. A memorandum of understanding (MOU) between the Service and NWAS was agreed by both organisations prior to the commencement of the pilot in June 2016. The Joint Oversight and Scrutiny Group scrutinise all updates/ amendments to the MOU.

Equality and Diversity Implications

14. There are no known equality and diversity implications.

Environmental Implications

15. There are no known environmental implications.

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BACKGROUND PAPERS: NONE