

For Publication

**Bedfordshire Fire and Rescue Authority meeting
14 December 2021**

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SUBJECT: DEVELOPING COLLABORATION WITH EAST OF ENGLAND AMBULANCE TRUST

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Background Papers: None

Implications (tick ✓):

LEGAL		✓	FINANCIAL	✓
HUMAN RESOURCES		✓	EQUALITY IMPACT	
ENVIRONMENTAL		✓	POLICY	✓
CORPORATE RISK	Known	✓	OTHER (please specify)	
	New	✓		

Any implications affecting this report are noted at the end of the report.

PURPOSE:

1. This paper should be read after our paper on Pilots and Trials to Improve Response.
2. To seek the Authorities view on developing collaboration with EEAST.

RECOMMENDATION:

That the Fire and Rescue Authority, in carrying out their monitoring of the CRMP:

- Consider the benefits, opportunities and risks of developing our support to EEAST and acting in accordance with our service value in Daring to be Different.
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1. Introduction

- 1.1 We constantly strive to ensure we maximise our resources and deliver value for money. In doing so we also consider the collaborative benefits of working towards common goals with our partners.
- 1.2 This includes supporting EEAST to reduce harm and improve our mutual response standards, thus protecting the safety of citizens and avoiding duplicating efforts where fire has primacy.

2. Background

- 2.1 Bedfordshire Fire and Rescue Service (BFRS) continues to work well in collaboration. Last year During January 2020 EEAST and BFRS agreed to explore how we would approach collaborative working in Bedfordshire. In the short term to develop a falls team using Prevention staff, In the medium term to set up a Bariatric Response from Dunstable station using the Technical Rope Rescue team and finally a longer-term ambition to create Co-responding teams using On-Call staff at some of the more remote locations.
- 2.2 Due to the rural nature of some areas, it is not always possible to get an Ambulance to the patient within the national timeframes, which means patients can be left waiting, sometimes for extended periods of time.
- 2.3 We have during an unprecedented time for the NHS and EEAST been able to achieve everything we set out to do during those first meetings during January 2020, we have been able to demonstrate the social value of the scheme and observe the real difference made to patients across Bedfordshire.
- 2.4 With all this activity BFRS have been able to gain access to otherwise unknown patients, allowing us to carry out our prevention activity more effectively.
- 2.5 We know we can do more with our fleet and estate and we are actively learning from best practice and other emergency services. We are also aware of the need to constantly improve response times and ensure we met our response standards. I in more rural inaccessible locations.

- 2.6 To do this we need to innovate, test new ideas and explore using our resources in ways we have not done before.
- 2.7 At the same time we need to ensure we are not overcommitting our resources and our income reflects the work we do.

3. Developing collaboration with the East of England Ambulance Trust (EEAST)

- 3.1 Members will recall the report on the evaluation of Return on Investment from Collaboration with the East of England Ambulance Service Trust. People in Bedfordshire receive significant social value including health and economic benefits from the collaboration between Bedfordshire Fire and Rescue Service (BFRS) and the East of England Ambulance Service Trust (EEAST). Bedfordshire received the following benefits in 2020-21:
- the return on investment and social value of the Service's support during the pandemic from firefighter secondments into EEAST is £0.448m.
 - the social value of the Service's Falls team in 2020-21 was £1.053 million.
 - bariatric complex patient rescue service has added social value to Bedfordshire of £0.384m.
 - co-responding has added social value to Bedfordshire of £2.244m.
 - effecting entry has added social value to Bedfordshire of £0.960m.
- 3.2 This adds up to a return on investment of £5.09 million in social value, or £7 for every £1 invested. Gross cost to the Service in supporting EEAST is £724,766.55. This was funded through UK government grants.
- 3.3 Our Bariatric rescue arrangements have worked well. We now have an opportunity to mainstream and upscale the response model for BFRS provided by operational staff from Dunstable Station. They use the Technical Rescue Unit (TRU) to respond to emergency incidents involving complex rescues and bariatric patients.
- 3.4 BFRS can now assist with heavy lifting using the TRU and can support our hard-pressed NHS colleagues in rescuing patients from a wider range of scenarios.
- 3.5 In the period between Jan 2019 and Sept 2021 Dunstable Community Fire Station have attended 139 Bariatric Rescues and 376 Ambulance Assists. Bariatric Rescue and Ambulance Assist calls doubled in 2020 compared to 2019. This increase continues and in September 2021 the Station attended 56 Bariatric Rescues and 154 Ambulance Assists.
- 3.6 Other examples of working in collaboration includes the falls partnership. This was developed and refined through the Covid-19 pandemic and delivers a wider community first responder role alongside the falls work, saving more lives and reducing risks to those vulnerable people in our community.
- 3.7 The falls team have responded to 157 calls since their inception. Over 70 patients were treated and left safely in their own homes, releasing an Ambulance which would otherwise have to of conveyed the patient to Hospital.
- 3.8 The knock on of this success is the Ambulance Control room has had more Ambulances available in the County of Bedfordshire available for incidents they might of otherwise not have been.

- 3.9 We have adopted the model of Co-responding based on the model successfully operating in South Coast Ambulance Service (SCAS). BFRS had previous experience of operating Co-responding out of Leighton Buzzard and Biggleswade and a lot was learnt from this experience.
- 3.10 We are now successfully delivering a Co-responding function at three On-Call stations, we have trained 46 Firefighter – Watch Managers with further courses planned and the potential to activate a further two stations. Between 1st May 2021 and 21st November 2021 we responded to 246 incidents. Crews average response time is 9 minutes and the teams normally spend 47 minutes with the patient. Responders have been provided Prevention equipment and where needed can carry out an immediate safe and well check.
- 3.11 Whilst all this good work is saving lives and helping people stay safe in their homes, we need to find a more sustainable funding model for this work.

4. Next Steps

4.1 Our timetable is as follows:

Action	By when	By
Consult with EEAST to consider what areas of operational deployment are reliant on collaboration	February 22	HOR
Consult with stakeholders to explore a more sustainable funding model for collaborative work with EEAST – to include options for all 6 regional services	April 22	DCFO
Consider the need to create a project team to deliver any tangible improvements to service delivery for both organisations	August 22	HOR

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