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Mr P S Cooper
Assistant Coroner
Lincolnshire County Council
Coroner's Service
Unit 1, Endeavour Park
Boston, Lincs
PE21 7TQ

21 March 2019

Dear Mr Cooper

Re: Report to Prevent Future Deaths: Olive Johnson

Thank you for your Regulation 28 Report to Prevent Future Deaths, dated 23 January 2019, bringing to my attention HM Coroner's concerns arising from the Inquest into the death of Ms Olive Johnson.

I would like to assure you that the Trust takes all matters relating to patient safety extremely seriously. In particular, matters arising from Coroners' Inquests from which lessons can be learnt, including Prevention of Future Death Reports, are discussed by the Incident Review Group and Lessons Learned Group.

## **Matters of Concern:**

## a) Why were no First Responders called out in relation to the deceased?

On the day in question, there were three voluntary Community First Responders logged on duty. The role of a Community First Responder is to provide pre-ambulance arrival assistance to patients within their community.

One responder was committed on another call; one responder was responding to cardiac and respiratory arrests only and the third responder was located over 20 miles away.

The Community First Responder role is not designed for the responder to travel excessive distances out of their community. As the third responder was over 30 minutes away at normal road speed, this would be considered too far away to travel to attend Ms Johnson.

## b) How many occasions have EMAS exceeded their response times since 01 January 2018 to date?

During the period 1 January 2018 to 31 January 2019, we have exceeded our response times as follows:



c) Is it fair that if a patient is regraded whilst awaiting an initial response, the total time from the initial call to the regrading is cancelled out?

It has been decided from a national perspective that when a call is re-categorised to a higher priority, the time frame for the resource to be conveyed commences from the time of the re-grading.

d) Does EMAS believe they have enough conveying resources to meet their response targets?

A jointly commissioned, independent "demand and capacity review" identified a gap between the resources presently available, and what was needed to deliver national performance standards for ambulance services.

In 2018, new contract terms were agreed by the Trust with Hardwick Clinical Commissioning Group (CCG), providing extra investment during 2018-2019 and 2019-2020. Hardwick CCG which manages the EMAS contract on behalf of 22 CCGs across the region, signed off the terms for up to £9m extra funding for clinical staff, ambulances and other resources being provided in the first year. This could potentially rise to approximately £19m next year, dependent on performance targets being met and other financial agreements made as part of the contract terms.

The funding will directly address the gap identified in the demand and capacity review, and is expected to result in a stepped improvement in the Trust's ambulance response times and consistency of response across all areas of the East Midlands region. The additional money will be invested in the right level of resources to enable the Trust to respond more quickly and consistently to 999 calls and urgent GP requests and to achieve national standards at a county level, which came into force for all ambulance trusts in autumn 2017.

I hope that the measures set out in this letter provide you with the appropriate level of assurance in relation to our commitment to continuous improvement of services.

Please do not hesitate to contact me should you require any additional information, or any clarification, in connection with the above.

Yours sincerely

Richard Henderson Chief Executive