



Chief Ambulance Services Commissioner's Report

Emergency Medical and Retrieval Service - Service Review

Frequently Asked Questions (FAQs)

October 2023



GIG
CYMRU
NHS
WALES

Pwyllgor Gwasanaethau
Ambiwlans Brys

Emergency Ambulance
Services Committee

Summary Introduction

The Emergency Ambulance Services Committee (EASC) has updated the following FAQs as part of the second phase of the formal engagement process seeking views on the future configuration of the air ambulance service that is provided in partnership between the Wales Air Ambulance (Charity) and the Emergency Medical Retrieval and Transfer Service (NHS Wales).

Initial FAQs from Phase 1 are still available for reference on the EASC website.

If you have queries that this FAQ document does not currently answer, please contact EASC through the website: [Home - Emergency Ambulance Services Committee \(nhs.wales\)](#).

The Purpose of the Review

What is your main aim when looking to improve the service?

The service is commissioned for the whole population of Wales and to provide a service to as many people as possible. It is a national service and not individual assets that respond to their local communities. The aim of improving the service is to build on the current level of service by making it available to the 'unmet patient need' without reducing any levels of service anywhere in Wales.

Where is the 'unmet patient need'?

The data shows that there is a level of unmet patient need in every part of Wales.

Is the air ambulance service being cut/reduced?

No. The purpose of the Review is to look at options about how this important service can be further improved helping more patients, not to reduce the service or the number of patients currently treated.

In doing this, the EMRTS Service Review has been asked to explore and maximise the additional activity that could be achieved from existing bases and to explore how options to reconfigure the service could increase the number of patients receiving a service from EMRTS for the population of Wales.

Why is it important that EMRTS treat more people?

We know from the EMRTS Service Evaluation that patient outcomes improve for those treated at scene by the EMRTS Service. The aim is to provide this service to as many people as possible for more people to benefit from better clinical outcomes.

Should any changes take place with the air ambulance service, does that mean I will get a response from EMRTS in the future?

The purpose of the Review is to look at options about how this important service can be further improved helping more patients, not to reduce the service or the number of patients currently treated.

If the bases change from Caernarfon and/or Welshpool, does that mean that people living in these areas will no longer receive an EMRTS response or that it will take longer to get to me?

No. This is an all Wales service. The crew that is nearest to you will be sent, this may be a crew from the nearest base or any other crew that is available at the time.

Depending on your clinical needs or the number of patients involved more than one available crew may also be sent.

Which base's crew will respond to me?

The crew that is nearest to you will be sent, this may be a crew from the nearest base or any other crew that is available at the time.

Depending on your clinical needs or the number of patients involved, more than one available crew may also be sent.

About Phase 2 Engagement

What is the formal public engagement process and what will it do?

Llais (formerly Community Health Councils [CHCs]) in Wales are required to reflect the views and represent the interests of people in their NHS. NHS organisations are required to work with the Llais, and it is for Llais to decide on whether an engagement or consultation process is required when there is a proposal to develop or change the way NHS services are provided.

The (then) CHCs confirmed that an eight-week formal public engagement process should be undertaken in relation to this work, this will include a review after six weeks for two weeks (that is two phases). The process will ensure that the views of stakeholders are considered in the decision-making process and to ensure that the key issues are understood.

In Phase 1 there were 33 public engagement sessions, comprising:

- 8 in-person drop-ins
- 11 virtual/online public meetings
- 14 in-person public meetings.

Phase 1 took place from March until June 2023 (totaling 14 weeks of engagement with public and stakeholders). Phase 2 is taking place from 9 October until 5 November 2023 (for four weeks).

Why is the EMRTS Service Review being done in a phased approach through two stages?

It was always the intention to do this in a phased approach based on the advice from the (then) CHCs (now Llais). This would ensure that the views, concerns and questions of the public and stakeholders were heard to inform how the modelling was approached.

Phase 2 gives the opportunity for the CASC to listen to comments on the options developed before the Committee considers a preferred option and decides.

Phase 2 continues in listening to the public and stakeholders of the public engagement by sharing the options that have been developed as a consequence of what was heard in Phase 1.

Phase 2 takes place from Monday 09 October until Sunday 05 November 2023 inclusive through a combination of informal drop-in sessions, in-person public meetings and virtual/on-line sessions.

Comments gathered in Phase 2 about the options developed will be considered by the CASC in coming to a preferred and recommended option for the Committee to decide on.

Why isn't the Phase 2 public engagement process as long as Phase 1?

It was agreed with Llais for a minimum eight-week public engagement process (with Phase 1 to last six weeks and Phase 2 to last two weeks).

However, Phase 1 lasted 14 weeks, Phase 2 will last four weeks so more time has been given to the engagement process for thorough discussion than was recommended. The Commissioner is not constrained to arbitrary timescales and is committed to ensuring meaningful discussion on this complex matter.

There aren't as many public sessions in Phase 2 compared to Phase 1. Why is that?

Phase 2 was always going to be shorter than Phase 1, even though they are both 'listening' phases. This was clearly explained by the CASC during Phase 1 engagement, setting out what Phase 2 would be. Attendance and levels of interest from Phase 1 engagement sessions have informed the in-person engagement sessions locations and timings, with a focus on the areas where much of the interest and attendance came from.

How can I comment, provide my feedback in Phase 2?

Feedback can be provided by:

- Face to Face Public Meetings and Drop-In sessions: [Click to view timetable](#)
- Virtual/Online Public Meeting: [Click to view timetable](#)
- Post: 'EMRTS Feedback', EASC/NCCU, Unit 1, Charnwood Court, Heol Billingsley, Nantgarw, CF15 7QZ
- E-mail: eascservicereviewqueries@wales.nhs.uk
- Online Query Form: <https://easc.nhs.wales/engagement/sdp/>
- Phone answer line: 01443 471520

Please see the Timetable page on our website for more information: <https://easc.nhs.wales/engagement/sdp/engagement-sessions-timetable-phase-2/>

Options Developed and Work Done from Phase 1

What did Phase 1 of the engagement conclude/show?

This is set out in the Chief Ambulance Services Commissioner's Report and supporting documents but in summary:

- There was a great appreciation of the air ambulance service teams, as well as the NHS Wales system more broadly although a misunderstanding of the service that is provided (i.e. not understood as critical care but perceived as fast ambulance);
- There were stakeholder concerns about:
 - Potential impact on service response if any bases were changed;
 - Perception that if bases change then those areas would not receive an EMRTS service at all;
 - The data used in the initial Service Development proposal;
 - Impact of weather on service response;
 - Differences between the needs of rural areas compared to urban areas;
 - The Charity potentially losing money from donations;
 - The Review being a 'cost-reduction' exercise;
 - Adjustments to some of the proposed weightings of the factors to help with the options evaluation process;
 - The need for open and honest engagement process.
- Suggestions for options to be developed.

Throughout Phase 1, feedback also surfaced about the wider health system in rural areas including road ambulances, primary and secondary care, social care.

These emerging themes were presented to the Committee on July 18, 2023.

Feedback was also gathered by an external supplier to undertake the data collation, analysis and reporting of representative sample feedback recruitment and collation. Details of this can be seen in the EMRTS Committee paper presented to Committee on September 19th, 2023 and in the Supporting Documents section on the EASC website.

What data timeframe/reference period has been used in the data modelling to develop the options?

The modelling has used historical incident and response data from the Welsh Ambulance Services NHS Trust, covering all incidents between 1 June 2022 to 31 May 2023. This has ensured that the most recent data available has been used, reflecting the current service configuration including Critical Care Practitioner response by day from Cardiff Heliport. See Document 7: Optima Modelling.

Has weather been accounted for in modelled options?

Yes. Weather was another theme raised during Phase 1 of the engagement. Weather data has been sourced ensuring that weather conditions likely to impact on the delivery of the service at each base are reflected in the modelling.

What data have you made available in Phase 2?

The Commissioner's Report summarises the data and references the following supporting documents that includes the technical detail:

- History of EMRTS
- Engagement - What We Did and What We Heard
- Picker Institute Report
- EMRTS Historical Data Information Pack
- Drive Time and Population Coverage
- Weather Analysis
- Optima Report (Data Modelling)

Why has Rhuddlan been chosen as a possible base in the new modelling instead of any other location?

The modelling provider ran coverage algorithms in various settings across 1,718 generated potential locations across mid and north Wales. After testing these solutions in simulations, the area south of Rhyl/Rhuddlan (close to the A55) was found to be the best-performing location. See Supporting Document 7 on the Supporting Documents section on the EASC website.

Will a change of base from Caernarfon and Welshpool affect the cross-border arrangements? Will the service be pulled into England more?

Mutual cross-border arrangements are a common feature of emergency services. These are a small part of what the service does. The current cross-border arrangements will continue, it is not anticipated that this activity will change.

Where can I read about the options developed?

The engagement materials and supporting documents detailing the options developed are available on the EASC website (from Monday 09 October when the engagement window opens).

Does Phase 2 engagement show a preferred option or proposal for the future configuration of the air ambulance service?

No. Phase 2 of the public engagement process will outline what feedback was received in Phase 1 and what work has been done since based on the feedback. The options that have been modelled are presented in Phase 2 providing the opportunity for stakeholders to comment on and ask questions. As well using the 'factors' for the evaluation process Phase 2 feedback received will help the CASC arrive at a recommendation and preferred option.

After this, the recommended option will be taken to the Emergency Ambulance Services Committee for consideration and final decision, it is hoped by the end of the year.

Does the modelling show an obvious 'best' option?

Modelling presents six scenarios with multiple variations, the best performing in terms of scene arrivals in each scenario has been highlighted.

How will you arrive at a recommendation from the options taken forward?

The options that have been modelled are presented in Phase 2 providing the opportunity for stakeholders to comment on and ask questions. As well using the 'factors' for the evaluation process Phase 2 feedback received will help the CASC arrive at a recommendation and preferred option.

After this, the recommended option will be taken to the Emergency Ambulance Services Committee for consideration and final decision, it is hoped by the end of the year.

How do you know if the options developed can be implemented?

Following Phase 2, further work will be undertaken that will include discussions with the EMRTS Service and Charity to understand the feasibility of operationally delivering the options.

Has a decision already been made about the future configuration of the air ambulance service in Wales?

No. The CASC has confirmed that no decision has been made on many occasions. Feedback from Phase 2, along with the evaluation process using the 'factors', will help the CASC arrive at a recommendation and preferred option, that will go to the Committee for decision.

Have you met with EMRTS staff during the engagement?

Yes. The CASC met online with EMRTS staff both in-person and online during Phase 1 of the engagement process and staff also sent in any comments and queries that they had. The CASC and his team also met with the EMRTS management team during Phase 1. The same approach will happen again in Phase 2.

Have you met with Pilots as part of the engagement?

Yes. The CASC and his team met online with the current provider (Babcock MCS) and the new provider (Gama International) as part of Phase 1. Gama International and pilots will be met with during Phase 2 engagement.

Have you met with politicians as part of the engagement?

Yes. The CASC and his team offered to meet with all Members of the Senedd and Members of Parliament in Phase 1 and other elected representatives. As well as this online session the CASC met with individual elected members upon their request throughout the process and continues to do so.

What is the decision-making process and what are the next steps?

The options that have been modelled are presented in Phase 2 providing the opportunity for stakeholders to comment on and ask questions. The feedback received during Phase 2 will be considered. As well using the 'factors' for the evaluation process Phase 2 feedback received will help the CASC arrive at a recommendation and preferred option.

After this, the recommended option will be taken to the Emergency Ambulance Services Committee for consideration and final decision, it is hoped by the end of the year.

What are the agreed 'factors' and weightings for the evaluation process?

In Phase 1, the CASC proposed to use 'factors' and weightings for the evaluation criteria.

Phase 1 feedback agreed with all the proposed factors; however the weightings were adjusted, based on the feedback from Phase 1.

These factors will be used alongside public feedback to help arrive at a preferred option for the Committee to decide on.

The factors and weightings are shown in the following table (please see next page):

Factor	Description	Proposed Weighting in Phase 1	Agreed Weighting after Phase 1
Health Gain	To improve the quality of care and outcomes for patients in Wales	25	25
Equity	To ensure that the whole population of Wales receive adequate and timely access to specialised pre-hospital critical care	25	25
Clinical Skills and Sustainability	To retain and retrain our staff and enable them to utilise their skills to the top of their skill set and to attract and recruit the best people for our service	15	20
Value for Money	To maximise efficiency.... Enabling the population to attain the highest possible level of health gain for the given level of expenditure	20	15
Affordability	To ensure the service delivered is able to operate effectively within the financial constraints of NHS Wales and Wales Air Ambulance Charity Trust	15	15
	TOTAL	100	100

Who will make the final decision?

The Emergency Ambulance Services Committee will make a final decision informed by the information presented to them by the CASC, which will be informed by the engagement and evaluation process.

Where can I see the details about the recommended and preferred option that will be going to EASC for decision?

All Committee meeting papers and updates related to the EMRTS Service Review are published on the EASC website: <https://easc.nhs.wales/the-committee/archived-papers/>



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**GWASANAETHAU DIGIDOL
DIGITAL SERVICES**

National Collaborative Commissioning Unit