

LHB Area	Description of Incident	Date Passed to HB
ABUHB	The Trust received a call for a 60 year old male patient reported to be struggling to breathe, with a tight chest and gasping. The patient was conveyed by EMS resource to The Grange University Hospital where the patient experienced a delay in patient handover exceeding nationally agreed timeframes. During this time the patient suffered a sudden Ventricular Fibrillation (VF) cardiac arrest with a bi-phasic shock delivered resulting in ROSC being achieved. The patient was then transferred to The University Hospital of Wales for PPCI.	01/12/2020
CTMUHB	The Trust received a call on 19th November at 19:45hrs for a 55 year old female patient reported as Covid-19 positive and experiencing difficulty in breathing. A further call at 20:02hrs reporting the patient as being in cardiac arrest with the first Trust resource arriving with the patient 11 minutes later. Despite the efforts of the crew the patient did not survive the event.	01/12/2020
ABUHB	The Trust received a call on 21st November at 08:25hrs for an 82 year old female who was reported to have fallen with a cut to her leg, and pain and swelling in her wrist. The call was correctly prioritised Green2. The call upgraded to Amber2 at 09:48hrs following CSD triage. Five subsequent calls were received throughout the day, all correctly prioritised, but due to demand there were no available resources to allocate. A final call was received at 21:44hrs correctly prioritised Red. The allocated crew arrived on scene at 21:50hrs and conveyed the patient to hospital.	14/12/2020
ABUHB	The Trust received a call on 21st November at 21:35hrs for a 48 year old male who was reported as being unable to speak and having slurred speech. The call was correctly prioritised as Amber1 but there were no available resources to send at the time. A technician crew was allocated to the incident at 22:00hrs and arrived on scene at 22:17hrs. The crew requested P1 backup at 22:29hrs, noting that the patient was in cardiac arrest. A ROSC was achieved and the patient was conveyed to GUHC.	14/12/2020
ABUHB	The Trust received a HCP call on 20th November at 15:15hrs for an 84 year old female who was vomiting and suffering abdominal pains. The call was deemed suitable for NEPTS with a 2 hour response. At the time there were no available resources to allocate to the incident. A second call was received at 17:39hrs prioritised Amber1 but there were still no available resources. A third call was received at 18:24hrs, patient deceased.	14/12/2020
HDUHB	The Trust received a call at 16:57hrs on 25th November for a 96 year old female who had experienced a seizure episode and was now recovering. A further call was received at 17:50hrs reporting that the patient had passed away and was an expected death.	14/12/2020
ABUHB	The Trust received a call on 30th November at 17:13hrs for a 70 year old female who was reported to be experiencing chest pains. There were no available resources available to allocate to this incident at that time and two further calls were received at 18:08hrs and 19:21hrs. The third call was correctly prioritised as Red and the first Trust resource arrived on scene at 19:24hrs. ROLE was implemented at scene.	16/12/2020
SBUHB	The Trust received a call at 20:35hrs on 6th December for a 44 year old male patient reported as having COPD and struggling to breathe. The call was correctly prioritised Amber1. A second call was received at 21:00hrs correctly prioritised Amber1 but there were no available resources available to allocate. A third call was received at 22:16hrs prioritised Red with the first Trust resource arriving on scene at 22:27hrs. ROLE was implemented at scene.	17/12/2020
SBUHB	The Trust received a call on 9th December at 13:41hrs for a 73 year old male patient reported as shaking, pale, not responding properly, on antibiotics for a recent cough and has had contact with a Covid-19+ patient. The call was correctly prioritised Green3. A second call was received 14:34hrs correctly prioritised Amber1 but there were no available resources to allocate to the incident. The first Trust resource arrived on scene at 17:31hrs and ROLE was implemented at scene.	17/12/2020

SBUHB	The Trust received a call from Careline on 10th December at 07:06hrs for a 92 year old female who was reported as suffering with COPD and struggling to breathe. The call was correctly prioritised as Amber1 but there were no available resources to allocate. Further calls were received at 08:00hrs and 08:04hrs with the third call correctly prioritised Red. The first Trust resource arrived on scene at 08:13hrs and ROLE was implemented at scene.	17/12/2020
BCUHB	The Trust received a call on 3rd December at 18:35hrs for a 71 year old male patient who was reported as not responding with shallow breathing. A number of unsuccessful welfare calls were attempted. Two further calls were received at 19:58hrs and 21:09hrs both correctly prioritised as Green2 with the caller advising that the patient had passed away. The first Trust resource arrived on scene 21:14hrs and implemented ROLE.	21/12/2020
CVUHB	The Trust received a call on 28th November at 12:59hrs for an 85 year old female reported as being confused, pale and incontinent. The call was correctly prioritised Amber2 but due to demand there were no available resources to allocate at that time. A second call was received at 14:12hrs correctly prioritised Red. The first Trust resource arrived on scene at 14:27hrs and implemented ROLE.	22/12/2020
ABUHB	The Trust received a call on 9th December at 16:21hrs for a 76 year old female reported as Covid-19 + and complaining of chest pain and nausea. The call was correctly prioritised as a Green3 but was not suitable for a CTA and so was to be managed as a Green2. The call was passed to the CSD at 17:29hrs and upgraded to Amber2. A second call was received at 18:02hrs but there were no suitable resources available to allocate. A third call was received on 10th December at 03:49hrs correctly prioritised Red. The first Trust resource arrived on scene at 04:18hrs and ROLE was implemented.	23/12/2020
ABUHB	The Trust received a call on 12th December at 19:49hrs for a 59 year old male with dementia found on the floor with a head injury. The call was correctly prioritised Amber1 but there were no available resources to allocate at that time. A second call was received 21:33hrs prioritised Amber1. The first Trust resource (CFR) arrived on scene at 22:22hrs. The patient did not survive the event.	23/12/2020
ABUHB	The Trust received a call on 11th December at 10:19hrs for an 86 year old male reported as suffering chest pain. The call was prioritised Amber1 but there were no suitable resources available to allocate at the time. A second call was received at 13:08hrs prioritised Red with the first Trust resource arriving on scene at 13:09hrs. ROLE was implemented at scene.	23/12/2020
CTMUHB	The Trust received a call on the 11th December at 14:29hrs originating from 111, for a 78 year old male who was reported as having central chest pain and short of breath. A second call was received at 18:30hrs, prioritised Red. The first Trust resource arrived on scene at 18:52hrs and conveyed the patient to hospital.	23/12/2020
CVUHB	The Trust received a call on 5th December at 20:06hrs for an 86 year old female reported as suffering a head injury from a fall and vomiting. The call was correctly prioritised Amber2 but due to the demand across the region there were no available resources to allocate. Further calls were received at 20:35hrs (Amber2) and 00:24hrs (Amber1) with a fourth and final call received at 00:45hrs correctly prioritised Red. The first Trust resource arrived on scene at 00:57hrs and implemented ROLE.	23/12/2020
ABUHB	The Trust received a call on 10th December at 13:24hrs from a GP for a 68 year old female who was reported as having dyspnoea, pain when breathing and vomiting (Amber1). It was noted at 13:28hrs there were 1 x P2 and 5 x Amber1 ahead of this call. 2 further calls were received at 13:46hrs and 14:17hrs, both amber1 with a 4th call received 14:50hrs (Red). Numerous resources were allocated to this call with the 1st Trust resources arriving 15:15hrs, 15:16hrs and 15:22hrs with a final call at 15:06hrs which was correctly categorised as Red. ROLE was implemented.	30/12/2020
CTMUHB	The Trust received a call on 1st December at 01:23hrs for a 75 year old male reported as Covid+, ankle oedema and dyspnoeic. The following was noted at 01:30hrs, SE region in DMP 5, call reviewed and due to age and presentation 'send'. A CSD review was undertaken at 01:46hrs – Amber2 appropriate. Further calls were received at 07:14hrs and 08:32hrs, with the last call categorised as Red. WAST resources arriving at scene at 08:44hrs and 08:51hrs respectively with a ROSC gained and initially accepted at UHWC for PPCI. Patient re-arrested en-route and diverted to nearest DHH (RGHP)	30/12/2020

CVUHB	The Trust received a call on 6th December at 14:11hrs for a 95 year old male reported as dyspnoeic, chest infection and deteriorating. SE region in DMP5, polling 84 calls, with C&V division polling 28. 2nd and 3rd calls received at 15:41hrs and 16:52hrs with the latter call Green2, caller thinks patient has passed away. Resource arrival at 17:17hrs, ROLE implemented.	30/12/2020
CTMUHB	The Trust received a call on 29th December at 10:18hrs for an 87 year old female reported as suffering COPD, having a chest infection and currently being treated with antibiotics and steroids. The call was correctly prioritised Amber1 but there were no available resources to allocate to the incident. A second call was received at 13:53hrs correctly prioritised Red. The first Trust resource arrived on scene at 14:08hrs and ROLE was implemented.	05/01/2021
CTMUHB	The Trust received a call on 30th November at 16:05hrs for a 64 year old female who had fallen. The call was initially categorised as Red, but changed at 16:12hrs to Amber1. Following initial resource allocation, when Red, but stood down when Amber1, a further call was received at 17:11hrs which was categorised as Red. WAST resources arrived at 17:21hrs, 17:22hrs and 17:52hrs. ROLE implemented at scene.	06/01/2021
CTMUHB	The Trust received a call on 17th December at 05:19hrs for a 55 year old male reported as being unable to speak or turn over on his side. The call was correctly prioritised Amber1 but there were no available resources to allocate to the incident. A second call was received at 05:34hrs but still there were no available resources. A third call was received at 06:39hrs correctly prioritised Red. The first Trust resource arrived on scene at 06:54hrs and conveyed the patient to PCHM.	06/01/2021
CTMUHB	The Trust received a 999 call on 3 January 2021 at 09:44hrs, correctly categorised Amber1. A 91 year old female who was reported as in and out of consciousness, not speaking and staring. The patient has a benign brain tumour, been recently unwell, medication had been changed, today is opening eyes and moving legs, catheterised last night not responding as normal, been deteriorating for some time. 1st RES performed at 10:07hrs with no suitable resources displayed as available at that time, with WAST resources arriving at 10:41hrs, leaving scene at 11:51hrs and arrival at hospital at 12:13hrs. The patient suffered a cardiac arrest at 13:56hrs on the rear of the WAST resources whilst awaiting handover. This incident was escalated to the on team (WAST) and the Medical Director (CTMUHB) informing Dr Goodall of the incident.	08/01/2021
ABUHB	The Trust received nine 999 calls for a 77 year old male patient who had fallen at his home address, initially prioritised as Green 2 Subsequent calls increased the call priority to Amber 1. The first call was received at 21:08hrs on 16th December 2020, with the first resource arriving at scene at 07:36hrs of the 17th December 2020. On arrival the patient complained of a numerical pain score of 8/10 affecting right hip, conveyed to GUH.	11/01/2021
ABUHB	The Trust received a call on 19th December at 08:58hrs for a 52 year old female reported as being Covid+ suffering a tingling sensation in her chest and back. The call was correctly prioritised Amber1 but there were no available resources to allocate to the incident at the time. A second call was received at 09:35hrs correctly prioritised Red. The first Trust resource arrived on scene at 09:43hrs and ROLE was implemented.	11/01/2021
ABUHB	The Trust received an initial call on 15 December 2020 at 20:25hrs, correctly categorised Amber1. The call was for a 67 year old male who was reported as having left arm pain. No resources available at this time and it was noted at 20:30hrs, REAP 4 & DMP 5. A welfare check was undertaken at 21:20hrs with no change in patient's condition, with further calls received at 21:29hrs, 22:31hrs and 23:03hrs, which was categorised Red. An EA was allocated arriving at 23:25hrs, with ROLE implemented at scene.	11/01/2021
ABUHB	The Trust received an initial call on 21 December 2020 at 14:47hrs correctly categorised Amber1. The call was for a 76 year old female, reported to have fallen the previous night, confused and vomiting. No resources available at 14:51hrs, with a 2nd call registered at 15:43hrs (Amber1). It was noted at 15:57hrs that there was 9 Amber1 calls prior to this for allocation. A 3rd call was registered at 16:07hrs, the call was categorised Green2 (initially Red). WAST resources arrived at 16:12hrs, with ROLE implemented on scene.	11/01/2021

ABUHB	The Trust received an initial call on 22 December 2020 at 09:14hrs, correctly categorised as HCP Green3, 4hrs at patient side. The call was for a 72 year old male, post Covid, coughing up black material and weak. A welfare call was undertaken at 10:19hrs, with no change reports. Further calls were received at 11:29hrs (Amber1) and 12:37hrs (Red) with a RES performed at 12:21hrs. WAST resources were allocated and arrived at 12:42hrs, with ROLE implemented on scene.	11/01/2021
BCUHB	The Trust received a call via NHS24 on 20th November at 20:34hrs for a 70 year old male who was reported as drowsy, dizzy, and nauseated with a query neurovascular event. The call was correctly prioritised Green3 but as the call was not suitable for CTA it was to be managed as a Green2. A second call was received at 00:19hrs on 21st November initially prioritised Amber1 and changing to Red at 01:15hrs. A resource was allocated, arriving on scene at 01:22hrs and conveyed the patient to hospital.	11/01/2021
CVUHB	The Trust received a call on 7th December 2020 at 11:21hrs, which was correctly categorised as Green2, 89 year old male, fallen on bathroom floor. Further interventions included, RESG at 12:15hrs, CSD escalation at 13:12hrs, welfare call at 16:09hrs Further calls were received at 21:44hrs, 22:10hrs and 23:18hrs (all Amber1). Resource allocation at 23:14hrs and arrived at scene 23:25hrs with further resources attached arriving at 00:04hrs and 00:31hrs respectively. ROLE implemented at 00:48hrs.	11/01/2021
CVUHB	The Trust received a 999 call on 21 December 2020 at 04:35hrs, correctly categorised Amber1. The call was for an 88 year old female, who was reported to have abdominal pain, thinks she is dying. The 1st RES was performed at 04:40hrs, with no suitable resources displayed as available at that time. A 2nd call was registered at 05:18hrs, the call was categorised Amber1. EA SA1031 was allocated to the incident at 06:25 and they arrived scene at 06:39. Sadly ROLE was implemented on scene.	11/01/2021
BCUHB	The Trust received a call on 15th December 2020 at 18:25hrs for a 95 year old female reported to have fallen and was currently still on the floor. The call was correctly prioritised Amber2, there were no resources available to allocate at that time. Welfare calls were carried out over the course of the evening and it was reported that there was no change in the patient's condition. The first Trust resource arrived on scene at 04:15hrs on the 16th December 2020 and conveyed the patient to hospital. The patient passed away a few days later.	13/01/2021
BCUHB	The Trust received a call on 4th January 2021 at 23:52hrs for an 89 year old female reported to have fallen down the stairs backwards, with injuries to her chest and having one eye closed. The call was prioritised Amber2 and passed to the CSD at 00:06hrs resulting in the prioritisation being upgraded to Amber1. There were no suitable resources available to respond at that time and NWAS were unable to assist. A welfare call was completed 00:29hrs and there was no change in the patient's condition noted. A second call was received at 01:49hrs prioritised Amber1 but there was still no available resources and NWAS were still unable to assist. A third call was received at 02:09hrs (Amber1) and a final call at 02:16hrs prioritised Red. The first Trust resource arrived on scene at 02:29hrs and conveyed that patient to the Countess of Chester Hospital.	22/01/2021
ABUHB	The Trust received a call on 26th December 2020 at 11:19hrs for a 90 year old male reported as floppy, vomiting and incoherent. The call was correctly prioritised Amber1, there were no suitable resources available to allocate at that time. A second call was received at 14:20hrs correctly prioritised Red. The first Trust resource arrived on scene at 14:39hrs and ROLE was implemented.	25/01/2021
CTMUHB	The Trust received a call on 1st December 2021 at 13:33hrs for an 82 year old male reported as Covid-19+ and struggling to breathe. The call was prioritised Amber1. There were no available resources to allocate at that time. Further calls were received at 14:27hrs, 14:54hrs, 15:57hrs all prioritised Amber1 regrettably there were still no available resources to allocate. The CSD completed a triage at 16:51hrs and remained Amber1 and a further call was received at 18:22hrs, also Amber1. At 19:15hrs a 6th call was received, prioritised Red. The first Trust resource arrived on scene 19:29hrs and ROLE was implemented on scene.	25/01/2021

CVUHB	The Trust received a call on 21st December 2020 at 09:51hrs for a 74 year old female believed to be suffering a stroke. The call was correctly prioritised Amber2, there were no resources available to allocate at that time. Following a welfare call at 10:21hrs the call was passed to the CSD at 10:56hrs, and following triage the call was deemed suitable for UCS / SJA but there were still no suitable resources available to allocate. A second call was received at 12:40hrs prioritised Red. The first Trust resource arrived on scene at 12:53 hrs and ROLE was implemented.	25/01/2021
SBUHB	The Trust received a call on 28th December 2020 at 00:53hrs for a 78 year old male reported as collapsed and in and out of consciousness. The call was correctly prioritised Amber1, there were no resources available to allocate at that time. A welfare call was completed at 02:58hrs and correctly prioritised Red. The first Trust resource arrived on scene at 03:15hrs and implemented ROLE.	25/01/2021
SBUHB	The Trust received a call from NHSDW on 12th December 2020 at 11:49hrs for an 87 year old male reported as having pain in his lungs and chest, and coughing up blood. The call was prioritised Amber1, there were no resources available to allocate at that time. The first Trust resource arrived on scene at 15:54hrs and ROLE was implemented.	25/01/2021
SBUHB	The Trust received a HCP call on 18th December 2020 at 17:34hrs for a 74 year old male reported as being short of breath, query chest infection and query Covid-19. The caller, a GP, advised the patient had a reduction in SATS. The call was correctly prioritised Amber1. The patient was booked for Singleton Hospital but there were no suitable resources available at that time. It was noted that there were 11 Amber1 calls polling ahead of this call. A second call was received at 20:08hrs correctly prioritised Red. The first Trust resource arrived on scene at 20:13hrs and requested P1 backup. Further resources arrived on scene at 20:22hrs and conveyed the patient to hospital.	25/01/2021
CTMUHB	The Trust received a call on 15th December 2020 at 14:15hrs for a 53 year old male reported as being dizzy, passing out and has cancer. The call was prioritised Amber 1. There were no available resources to allocate at that time. Further calls were received at 15:33hrs and 16:15hrs both prioritised Amber1 with a final call at 16:48hrs prioritised Red. The first Trust resource arrived on scene at 17:02hrs and despite the efforts of the crew ROLE was implemented at scene.	27/01/2021

Cases which have been discussed at the Trusts Serious Case Incident Forum (SCIF) and resulted in the engagement of the Serious Case Investigation Framework (Appendix b)

The Welsh Ambulance Services NHS Trust (WAST) received a 999 call on 7 October 2020 at 20:39hrs, the call was categorised as Amber1. The call was for an 83 year old male who was reported as in and out of consciousness, not alert and struggling to breathe.

At 20:49hrs it was noted that there were 6 Amber1 calls ahead of this call.
The following was noted at 21:16hrs.

The call was passed to the Clinical Desk for triage and notes were added at 21:46hrs.

A welfare call was performed at 22:56hrs – no changed recorded – patient asleep.

On 8 October 2020 at 00:04hrs an Emergency Ambulance (EA) was allocated to the incident. The EA arrived scene 00:13hrs, left scene 00:48hrs, arrived PCHM and cleared at 11:46hrs.

The patient was held outside Prince Charles Hospital Merthyr for over 9 hours.

Having reviewed the hospital data it can be confirmed that there was not a suitable resource that could have been allocated sooner. All suitable available resources were managing other incidents of a higher categorisation or same but received prior to this call.

Having reviewed the hospital turnaround times during the timeframe that this patient waited for a resource it is evident that turnaround times per patient within the Health Board area were above agreed timeframe. These protracted handover times affected response times to all incidents waiting to be allocated within the Health Board area.

This is to inform WG that an Appendix B under the Joint Framework Agreement has been sent.

On 21 September 2020, the Trust received a 999 call that was categorised as Red. The call was for a 52 year old female who was reported to have collapsed and was making grunting noises.

An immediate release, to release an Emergency Ambulance was requested, however this was declined.

Following resuscitation attempts a Return of Spontaneous Circulation (RoSC) was achieved. The patient was taken to hospital and later transferred to a specialist unit.

The Health Board have been asked to given consideration to:

- Reviewing the incident and ascertain whether an Emergency Ambulance could have been released from hospital, which would have resulted in a timelier response to the patient.
- What impact this delay may have had on the patient outcome.

Initial call received at 20:46hrs on 28th September 2020, reporting an 81yrs male patient, conscious and breathing with difficulty in breathing. Whilst experiencing difficulty in breathing, the patient was completely alert, and no descriptors of ineffective breathing were given, the patient was described as pale, and had a past medical history (PMH) of pulmonary fibrosis, on oxygen. The call was placed by GP Out of Hours, and was correctly prioritised as Amber 1.

Further calls, also prioritised correctly as 'Amber 1' were received at 22:22hrs, 01:25hrs and 03:20hrs. The 5th call, received at 03:30hrs was prioritised as 'Red' due to a descriptor of ineffective breathing.

The first Trust resource arrived at scene at 03:38hrs, and despite full application of Advanced Life Support (ALS), the patient sadly passed away at scene, and Recognition of Life Extinct (ROLE) policy was implemented.

It was identified that the delay in responding to the initial call was due to hospital notification to handover delays significantly exceeding the agreed timeframe.

The Trust received the initial call on 30 August 2020 at 13:53hrs, reporting a 53yr male patient, PMH stage CA, difficulty in breathing. The call was processed through the MPDS system, and prioritised as an 'Amber 1' response.

Further calls were received at 14:23hrs, 15:21hrs and 15:26hrs, and prioritised as 'Amber 1'. 'Amber 1' and 'Red' respectively. All calls have been audited and deemed correct and compliant.

The first Trust resource arrived at scene at 15:31hrs, however it was identified that the patient had passed way and Recognition of Life Extinct (ROLE) policy was implemented at scene.

Hospital notification to handover delays exceeded the agreed national timeframe.

This is to inform the Welsh Government of a 999 call the Welsh Ambulance Services NHS Trust (WAST) received on 26 August 2020 at 17:55, the call was categorised Amber2. The call was for a 94 year old female who had fallen in a Nursing Home and sustained a cut to the back of her head which would not stop bleeding. The call has been subject to an MPDS audit which has deemed the call to be compliant.

A RES (search for available resources) was undertaken at 17:58, there were no suitable resources displayed as available at that time.

A welfare call is noted as being completed at 19:10. At 19:11 it is noted that there was no change in the patient's condition, the patient was on the flow and the bleeding had slowed, patient was talking. Recall advice was provided to staff.

A Falls Assistant was allocated to the incident at 20:52 and arrived scene at 21:30. The Falls assistant arranged transport for the patient via the clinical desk.

AN EA was allocated to the incident on 27 August 2020 at 00:23 and was stood down at 01:00. The EA was diverted to a P2 back up.

A Clinical Team Leader, was allocated to the incident at 03:39 and arrived on scene at 04:14. It was noted the patient's observations were stable. The patient had been discharged from hospital 2 days previously. The patient was made comfortable and further transport was arranged for the morning.

An Urgent Care Service ambulance was allocated to the incident at 07:27 and arrived on scene at 08:00.

It is noted at 08:04 that the lady had passed away and that a DNAR was in place. Launchpad, one of the Trust information systems, shows significant notification to handover times which impacted on our response to this patient.

The Trust received a call on 14 September 2020 at 22:29, the call was correctly categorised Amber1. The call from received from a HCP who advised that the patient, an 85 YoM, had retention, not passing urine he also had mottled legs and chest. The patient was reported to have a chesty cough and looked very unwell.

The call was stopped at 23:32 – cancelled pre-arrival as sadly the patient had passed away.

Serious Case Incident Forum identified that;

- Severe handover delays impacted on this incident

Initial 999 call received at 17:18hrs on 20th September 2020, reporting one male patient, 68yrs, soiled himself and unable to do anything for himself, this was correctly prioritised as an 'Amber 1' response. Further calls were received at 17:44hrs, 18:52hrs and 19:26hrs, prioritised as Amber 2, Amber 1 and Amber 1 respectively, and correctly closed as duplicate calls of the original.

The first Trust resource arrived with the patient at 20:34hrs, where Recognition of Life Extinct process was implemented at scene, sadly the patient had passed away.

Serious Case Incident Forum identified that;

- Hospital notification to handover delays in excess of agree timeframe, with the longest delays exceeding 300mins.

This is to inform the Welsh Government of a 999 call the Welsh Ambulance Services NHS Trust (WAST) received on 22 August 2020 at 07:51, the call was correctly categorised Amber1. The call was for a 55 year old male who was reported as being drunk outside a petrol station.

A Rapid Response Vehicle was allocated to the incident at 07:55 and arrived on scene at 08:13.

Following the clinical assessment backup was requested to transport the patient to hospital. An Emergency Ambulance arrived on scene at 08:31.

Following assessment the crew left the scene at 09:18 arriving at hospital at 09:29.

The Trust encountered challenges in getting the patient admitted to the Emergency Department despite escalation.

The patient was eventually admitted to resus at 13:40. It is believed he was subsequently transferred to ITU.

WAST have passed the case to the HB on Appendix B. A joint meeting is being arranged to discuss the issues identified.

The Welsh Ambulance Services NHS Trust (WAST) received a 999 emergency call on 29 July 2020 at 20:07, the call was correctly categorised Red.

The call was for an 18 year old female who was reported as being in labour, had been into Hospital twice that day.

A Rapid Response Vehicle was allocated to the incident at 20:10.

It was noted at 20:13 that there were no available ambulances to send to the patient and an Immediate Release was requested from the Hospital.

At 20:14 ambulance control were advised that a nurse would be on the phone shortly.

The Rapid Response Vehicle (a car not suitable to convey the patient to hospital) arrived with the patient at 20:16.

At 20:17 the Immediate Release was declined as the Department were "waiting for 3 moves".

At 20:18 it was noted that there was still no conveying resource available. The paramedic with the patient required urgent back up to transport the patient to hospital.

An Emergency Ambulance was allocated at 20:30 and arrived scene 20:36.

The ambulance left scene with the patient at 20:46, arrived at the Hospital at 20:56 and cleared at 21:23.

Delays at the Hospital prevented an earlier response to this Red call.

Launchpad, one of the Trust information systems, shows significant notification to handover times at DGHs within the Health Board area during the time of the incident.

The Trust received the initial call on 23 October 2020 at 13:55, the call was correctly categorised Amber1. The call was for a 66 year old female who was reported as short of breath and feverish.

At 16:14 Emergency Ambulance (EA), a technician crew, were allocated to the incident.

A 2nd call was received at 16:24, the call was correctly categorised Amber1.

EA arrived scene 16:44.

EA was allocated to the incident at 17:22.

EA arrived on scene at 17:34.

Sadly despite full application of Advanced Life Support (ALS), the patient sadly passed away at scene.