

## Item 6: SECAMB: Update

By: Peter Sass, Head of Democratic Services

To: Health Overview and Scrutiny Committee, 29 January 2016

Subject: SECAMB: Update

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Summary: This report invites the Health Overview and Scrutiny Committee to consider the information provided by SECAMB.

It provides additional background information which may prove useful to Members.

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### 1. Introduction

- (a) The South East Coast NHS Ambulance Service NHS Foundation Trust (SECAMB) was formed on 1 July 2006 through the merger of Trusts in Kent, Surrey and Sussex. SECAMB achieved Foundation Trust status on 1 March 2011 - one of the first ambulance service NHS foundation trusts (SECAMB 2015).
- (b) SECAMB responds to 999 calls and NHS 111 calls to a population of over 4.6 million across 3,600 square miles in Kent, Surrey, Sussex and parts of North East Hampshire and Berkshire. It also provides non-emergency patient transport services in Surrey and Sussex. In 2014/15 the Trust attended 690,277 emergency calls and answered 1,137,390 NHS 111 calls (SECAMB 2015).
- (c) Response times are set nationally and apply to all ambulance services in England and Wales (SECAMB 2014):

Red 1 - life-threatening conditions where speed of response may be critical in saving life or improving the outcome for the patient: heart attack, trauma, serious bleeding

- 75 % of all Red 1 patients must be reached in 8 minutes
- 95 % of all Red1 patients must be reached within 19 minutes

Red 2 - serious but not the most life threatening

- 75 % of all Red 2 patients must be reached in 8 minutes
- 95 % of all Red 2 patients must be reached within 19 minutes

Category C - conditions where the patient has been assessed as not have immediately life threatening condition but does require an assessment by an ambulance clinician or transport to hospital.

- Target agreed locally - the patient should receive an emergency response in 30 or 60 minutes depending on the clinical need.

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Hear & Treat – conditions assessed as not requiring an ambulance service response, but could more appropriately be assessed or treated by an alternative healthcare provider

- Target agreed locally - where an ambulance service clinician provides advice, a call back should be made within two hours of the original 999 call depending on clinical requirement.
- (d) Following briefings provided by the Trust about the Red Three project and the use of defibrillators in reporting ambulance response time performance and the Committee's consideration of winter resilience in Kent on 27 November 2015, the Chairman requested the Trust attend on 29 January 2016 to give an update on winter resilience, the Red Three project and the use of defibrillators in reporting ambulance response time performance.

### **2. Recommendation**

RECOMMENDED that the report be noted and SECamb be requested to share the findings of the Forensic, Patient Impact and Governance Reviews, commissioned by Monitor, to the Committee at the appropriate time.

### **Background Documents**

SECamb (2014) '*Response time targets (28/10/2014)*',  
[http://www.secamb.nhs.uk/about\\_us/our\\_performance/response\\_time\\_targets.aspx](http://www.secamb.nhs.uk/about_us/our_performance/response_time_targets.aspx)

SECamb (2015) '*Annual Report and Accounts: 1 April 2014 - 31 March 2015 (19/10/2015)*',  
[http://www.secamb.nhs.uk/about\\_us/idoc.ashx?docid=becd2ec4-f5ba-4ac7-b134-f29c5cc0c667&version=-1](http://www.secamb.nhs.uk/about_us/idoc.ashx?docid=becd2ec4-f5ba-4ac7-b134-f29c5cc0c667&version=-1)

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