

An tSeirbhís Náisiúnta Otharcharrranna, Áras na hAbhann, Crosbhóthar Thamhlachta, Tamhlacht, Baile Áth Cliath D24 XNP2 Fón 01 4631624/6. Riomhphost: director.nas@hse.ie

> National Ambulance Service, Rivers Building, Tallaght Cross, Tallaght, Dublin D24 XNP2 Telephone: 01 4631624/6. Email: director.nas@hse.ie

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3rd December 2021

Deputy Donnchadh Ó'Laoghaire Dáil Éireann Leinster House Dublin 2

## PQ54001/21

To ask the Minister for Health the steps he is taking to ensure the ambulance services in Cork city and county are properly resourced; and if he will make a statement on the matter. -Donnchadh Ó Laoghaire

Dear Deputy Ó'Laoghaire,

The Health Service Executive (HSE) National Ambulance Service (NAS) has been requested to reply directly to you in the context of the above Parliamentary Question, which you submitted to the Minister for Health for response.

NAS is the statutory Pre-Hospital emergency and intermediate care provider for the state. In the Dublin metropolitan area, ambulance services are provided by the NAS and Dublin Fire Brigade (DFB). The NAS operates from over 100 locations across the country, responds to over 360,000 (2020) ambulance calls each year, employs over 2000 staff and has a fleet of circa 600 vehicles, including rapid response vehicles and motorbike response units.

The NAS transports approximately 40,000 patients via an Intermediate Care Service, coordinates and dispatches more than 800 aeromedical / air ambulance calls and completes 600 paediatric and neonatal transfers. The call taking and dispatch function is operated by the NAS National Emergency Operations Centre (NEOC) which operates across two sites, Dublin and Ballyshannon. All NAS resources are dispatched to calls across the country from the NEOC on a nearest available (to the incident) basis and not on a county boundary basis.

NEOC utilises an Advanced Medical Priority Dispatch System (AMPDS) which utilises international standards in triaging and prioritising emergency calls. This system ensures that life threatening calls receive an immediate and appropriate response, while lower acuity calls may have to wait until an emergency resource becomes available. The NAS has established a clinical hub to implement the 'Hear and Treat' alternative care pathway for low acuity calls that don't require the dispatch of an emergency ambulance.



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NEOC dynamically deploys resources to areas where cover is required or to respond to incidents as they arise to ensure the nearest available resource responds to emergencies. Care begins immediately the emergency call is received, where life-saving pre-arrival assistance is given by the emergency call takers directly to the patient or any third party that is available to assist. This pre-arrival care includes the delivery of medications, CPR, use of defibrillator, haemorrhage control, childbirth and many other emergencies that present.

At a local level, NAS is also supported by community first responder schemes, responding to particular types of medical emergencies (i.e. cardiac arrest, respiratory arrest, chest pain, choking and stroke) where it is essential for the patient to receive immediate life-saving care whilst an emergency response vehicle is en-route to the patient. These schemes are supported by dedicated NAS staff, Community Engagement Officers located in the west, south and east of the country.

Every day, the NAS deploys approximately 160-180 emergency ambulances, an average of 22 rapid response vehicles and in excess of 50 officer response vehicles operating from over 100 locations around the country.

All 112/999 calls around the country are responded to by the NAS. In Dublin, Dublin Fire Brigade operates a number of ambulances in addition to NAS. Where there are more calls than emergency ambulances, then emergency calls are prioritised while those calls which are clinically triaged as not being an emergency will wait until a resource becomes available.

A 2015 Baseline Capacity Review of the NAS found that a significant number of additional staff would be required over the coming years to support the service. Since 2015 the NAS has increased its staff numbers each year. However, each year the level of demand for NAS services is also growing.

The surge in demand has come at a time when staff are also working hard to support COVID related swabbing and vaccinations. At this time, the level of demand now exceeds the levels experienced in 2019, i.e. pre pandemic.

80 Paramedics are due to graduate from the college at year end. NAS are also working with trade union partners to develop temporary alterations to the current deployment model to minimise the impact of the capacity challenges on staff. There is no intention to return to a geographically limited model which would re-introduce inherent patient safety risk.

In 2021, a further capacity analysis is now underway to inform future workforce planning.



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I hope this information is helpful.

Yours sincerely

CA IN

William Merriman Deputy Director National Ambulance Service

