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Email: director.nas@hse.ie

Ref: SD/PQ/211109

9 November 2021

Deputy Peadar Tóibín Dáil Éireann Leinster House Dublin 2

PQ49283/21

To ask the Minister for Health if he will provide statistics relating to the average length of time persons spent waiting for an ambulance in each county in Ireland in each of the past five years. - Peadar Tóibín

PQ49284/21

To ask the Minister for Health the number of ambulances based in each county; and the number of times an ambulance was dispatched in each of the past five years in each county.

- Peadar Tóibín

Dear Deputy Tóibín,

The Health Service Executive has been requested to reply directly to you in the context of the above Parliamentary Questions, which you submitted to the Minister for Health for response.

The National Ambulance Service (NAS) is divided into 3 Operational Areas, North Leinster, West and South. Not all 112/999 calls for ambulances are emergencies and response times targets which are set out in the HSE's National Service Plan apply to ECHO (Life threatening cardiac or respiratory arrest) or DELTA (life threatening illness or injury, other than cardiac arrest) calls only. For example, a patient experiencing a heart attack is a DELTA call and encompassed by response time targets while a sports injury to the wrist or ankle is clinical triaged as not being a life threatening illness or injury. While the latter calls are distressing for patients or their families, these calls are not encompassed by response time targets and this delineation is often lost in public discourse.

Since 2015, demand for NAS is increasing annually at least 3.4% which represents an overall increase of 20% with the most critical ECHO (Life threatening cardiac or respiratory arrest) calls increasing by 6.4% annually, an overall increase of 38.7% since 2015 and a similar increase in DELTA (life threatening illness or injury, other than cardiac arrest). In the context of rising demand which regularly exceeds capacity, losing at least 5% of emergency ambulance capacity to arrival to handover delays at Emergency Departments (ED) impacts on the NAS ability to respond to 112/999 calls in a timely manner.





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On average, 25% of all ED attendances originate from a 112/999 emergency call hence a key improvement focus for NAS is demand management, ED avoidance and improved patient experience. In this regard, the NAS National Emergency Operations Centre (NEOC) also contains the NAS Clinical Hub which is staffed by Doctors and Nurses providing triage and referral to alternative care pathways for lower acuity 112/999 calls. While this hub is at an embryonic stage of development in terms of capacity and potential throughput, at least 50% of the low acuity calls referred to the hub (calls not previously triaged by a clinician) were resolved by the hub without the need for an emergency ambulance or referral to ED.

The capacity of the NAS was last reviewed in 2014 and since then, over 500 staff have been recruited. However, NAS believe a further capacity analysis is required to inform future workforce planning and in this regard, NAS has commissioned an independent analysis of demand and capacity to develop the evidence base to support workforce planning requirements. At this time, NAS estimate a requirement for an additional 90 emergency ambulances on duty every day which reflects a requirement for approx. 1000 extra staff.

There is no ready supply of Paramedics in Ireland and NAS for the most part must educate their own workforce in their own college. The Paramedic Programme is degree level and takes four academic years which NAS delivers in partnership with University College Cork over three calendar years.

There are currently over 200 Student Paramedics are different stages of the programme right now.

As of 1 October 2021, NAS have redeployed up to 45 Paramedics from COVID related work to emergency ambulance duty and a further 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 reintroduce inherent patient safety risk.





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<u>Average Response times 2019. 2020 & Jan to Sep 21 by Region</u> *Please note due to a change on the Managed Information System (MIS) we are only able to report from 2019 onwards*

	Category 1 Calls - Average Response Times (hh:mm)
2019	
NORTH LEINSTER	00:17
SOUTHERN	00:20
WESTERN	00:18
2020	
NORTH LEINSTER	00:18
SOUTHERN	00:21
WESTERN	00:18
2021 Jan - Sep	
NORTH LEINSTER	00:21
SOUTHERN	00:25
WESTERN	00:22

<u>Vehicle Profile</u>
Emergency Ambulance and Intermediate Care Vehicles only

	Leinster	West	North	Mid West	South	South East
			West			
2016	94	43	36	33	52	41
2017	102	46	37	36	55	42
2018	116	48	39	34	55	44
2019	115	50	36	36	61	40
2020	105	49	35	35	55	44

Please note that this is not a list of vehicles on duty on a daily basis as the NAS has rosters in place for resourcing in line with its operational procedures.

It should also be noted that all NAS resources are dynamically deployed to calls across the country on a nearest available (to the incident) basis and not on a county boundary basis to respond to incidents as they arise to ensure the nearest available resource responds to emergencies.





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Number of emergency calls

Year	2016	2017	2018	2019	2020
Total calls	313,735	321,379	337,754	348,053	362,954

I hope this information is helpful.

Yours Sincerely

Robert Morton

Robert Mont

Director

National Ambulance Service

