LONDON’S cardiac arrest survival rate has doubled in the last four years, figures for 2009/10 show.

More than one in five Londoners (21.5 per cent) now survive a cardiac arrest – when the heart stops – out of hospital, compared to one in 10 (around 10.9 per cent) four years ago.

The increase is down to more effective patient care from the London Ambulance Service, as well as significant numbers of bystanders performing cardio-pulmonary resuscitation (CPR) before ambulance staff arrive.

Medical Director Fiona Moore said: “These latest figures show that through our staff getting to patients quickly and delivering effective life-saving care, Londoners whose hearts have stopped beating have more chance of survival than ever before.

“If someone collapses and stops breathing it means their heart has stopped and you should call 999 for an ambulance immediately.

“Last year in just over a third of cases bystanders gave CPR to patients in cardiac arrest while an ambulance was on the way, but it’s a simple fact that if more people learnt this life-saving technique and used it, more patients would survive. Effective CPR doubles chances of survival.

“Getting a defibrillator, a machine that can shock the heart to restart it again, to the patient quickly, also greatly improves someone’s chances of survival.”

The Service is responsible for 519 public-access defibrillators in places such as train stations, airports, leisure centres and tourist attractions around the capital, and for training staff who work in those locations to use them.

PATIENTS suffering strokes started to be taken directly to specialist centres by ambulance in February.

There are now eight hyper-acute stroke units in London which offer patients rapid access to life-saving treatment. Taking patients here increases their chances of survival and cuts the risk of long-term disability caused by a stroke – a brain attack which occurs when the blood supply to part of the brain is cut off.

In the first two months of operation over 1,000 patients benefited from being taken directly to a specialist stroke centre, rather than to the nearest accident and emergency department.

Assistant Medical Director Neil Thomson said: “Strokes can have devastating effects, but we are giving patients the best possible chance of surviving and recovering well by taking them straight to specialist centres.”

In April this year, patients suffering life-threatening injuries, including amputations and gunshot wounds, started to be taken to one of three specialist major trauma centres in the capital.
EMERGENCY calls to drunk patients were received at the rate of one every eight-and-a-half minutes last year.

Alcohol-related calls totalled 60,686, a one per cent increase on the year before. But last year’s total is a 25 per cent increase on the 48,311 alcohol calls received in 2005, when more relaxed laws allowing bars and pubs to stay open past 11pm were introduced.

Paramedic Brian Hayes said: “Every shift we treat patients who are simply drunk, or who have hurt themselves through drinking.

“Before the licensing laws there would be a peak in these calls on Friday and Saturday nights around 11pm when the pubs were closing.

“Now that they stay open for longer, we are seeing calls coming through long after 11pm, through to around 4am or 5am most weekends. “The reality is that lives are being put at risk because every person we go to who is drunk means a longer wait for someone with a life-threatening injury or illness.”

Dedicated vehicles – known as ‘booze buses’ – have been introduced to central London to deal with the increasing number of alcohol-related calls. Treatment centres have also been set up at busy points during the year such as Christmas and New Year.

Views from the top

After one of the most challenging years, the Chairman and Chief Executive give their views on the year, and what the future holds

Chairman Richard Hunt

What were the highlights of your first year as Chairman?

It’s been a privilege to take on the role. My visits to our control centres which handle the 999 calls and the various ride-outs with ambulance crews stand out for me. What we do is a team effort, and being part of that team is the real highlight.

What are the biggest challenges facing the Service in the years ahead?

Firstly, the changing external environment and in particular new financial circumstances which will affect us all and to which we will have to respond. Secondly, finding new ways of dealing with increasing demand for our services whilst always maintaining the quality of care we provide to patients.

What do you want to achieve for patients in London?

A world-class ambulance service, available when needed, which also offers the right type of care, stemming from a well-trained, well-informed and motivated team of professionals.

What are the priorities for this year?

Firstly, progress in delivering clinical excellence. Secondly, improved performance and efficiency. Finally, improvements in how colleagues relate being part of the Service, which translates into an improvement in ‘corporate morale’ despite external difficulties and challenges.

Chief Executive Peter Bradley

What improvements have patients seen in the care they receive over the last year?

Our stroke, trauma and cardiac patients have all received better care. We have more staff than ever before meaning shorter waiting times for anyone needing our help, whether this is face-to-face or clinical advice over the phone.

How did you cope with the unique challenges of swine flu and snow last year?

We coped very well with what was an excellent test of our planning. The most important lesson was the need for ongoing flu planning to ensure there is absolutely no complacency given the prospect of it returning in coming years.

How will you deal with the year-on-year rise in demand on the ambulance service?

Along with increasing use of our own clinical telephone advice service and NHS Direct, we’ll continue to manage our frequent callers and keep trying to educate the public not to ring 999 when there are more suitable alternatives.

Drunks calling 999 ‘put lives at risk’

Chairman Richard Hunt

Staff treating a patient suffering the effects of alcohol
More patients get faster response

PATIENTS received a quicker response from the Service last year – despite a rise in calls, one of the most severe winters for years, and a flu pandemic. The swine flu pandemic saw the Service put under enormous pressure for several months. Many of the flu calls received were passed to NHS Direct for their advisers to call patients back and provide them with clinical help over the phone. Last year more than 64,000 calls were handled in this way.

Director of Operations Richard Webber said: “Our staff worked exceptionally hard to deal with challenges including swine flu and the cold winter on top of a general rise in calls. “Despite this, we reached more patients more quickly than ever before. “We met our target to reach 75 per cent of life-threatening patients within eight minutes of receiving the call, but fell short on our target for reaching those patients who are in a serious but not life-threatening condition.”

Response time targets for 2009/10
To reach:
- 75 per cent of Category A (life-threatening) calls within eight minutes – 73.5 per cent achieved
- 95 per cent of Category A calls within 19 minutes – 96.7 per cent achieved
- 95 per cent of Category B (serious but not life-threatening) calls within 19 minutes – 86.4 per cent achieved

Taking steps to boost fitness
MORE than 600 staff walked the equivalent of twice the way around the world as part of a month-long challenge to improve fitness.

‘GoWalk’ saw staff from across the Service form teams of three aiming to clock up as many steps as possible, using a free pedometer to measure their progress.

A walking league recorded the steps taken with a daily target of 10,000 steps as recommended by the British Heart Foundation. Teams completed a total of 127 million steps – equal to 63,500 miles.

The challenge – made possible through an award of £5,000 from NHS London – was organised by the Service’s Olympic Games planning team.

Public urged to ‘choose well’
ADVERTS advising the public where to go to get health care most suited to their needs began appearing on ambulances last year. They aim to remind people of the need to ‘choose well’ and consider alternatives to dialling 999 in non-emergency situations.

Patients are advised to visit their GP or local pharmacist, call NHS Direct on 0845 464 7, or make their own way to hospital – as arriving at A&E by ambulance does not mean being seen quicker.

The work of the Service to reduce unnecessary 999 calls to homeless people who take shelter on buses was praised by the Mayor of London Boris Johnson.

The Service’s patient-centred action team discovered that between 200 and 300 ambulance 999 calls a year were being received from Ilford Bus Garage, which is at the end of one of London’s longest bus routes.

The team, along with homeless charity London Street Rescue, worked to tackle the problem on Route 25 by finding more appropriate ways to deal with rough sleepers.
Balancing the books

The Service balanced its budget last year, and was rated ‘excellent’ by the Audit Commission for the way it manages its finances.

Director of Finance Mike Dinan said: “We are constantly looking at ways of improving the productivity of all of our staff, given the fact that most of our funding is staff related. “We strive to save money by looking at the goods and services we purchase and reducing the amount we buy and the price we pay. “The NHS has been asked to make significant savings over the coming years, and it’s vital that we are able to do this whilst continuing to provide a first-class service to the people of London.”

Money facts – 2009/10:
- £242m – the funding the Service received from the capital’s 31 primary care trusts. Other funding came from the Department of Health, NHS London and other non-NHS organisations
- £1.6m – the money paid back for not meeting one of the Government’s performance targets. This represents 0.6 per cent of the budget
- £660,000 – the daily cost of providing an ambulance service in the capital

£280m
The Service’s total budget last year

£30
Annual cost per Londoner for their ambulance service

More frontline staff hit the road

An extra 450 ambulance staff are out on the road helping Londoners following a huge recruitment drive last year.

Student paramedic numbers more than doubled to 717 and A&E support staff – those who attend less serious 999 calls – rose from 137 to 286.

Ann Ball, Deputy Director of Human Resources, said: “This is great news for patients because there are now 17 per cent more frontline staff out on the road than last year. “All of the staff have been through intense training to ensure they have the right skills and experience to give the best care to Londoners.”

The massive investment was made possible thanks to extra funding of £26 million from the capital’s primary care trusts.

A total of 98 new staff were also taken on to work in the control room at Waterloo, which handles 999 calls from across London.

An extra 450 student paramedics are helping Londoners

Inset, a new member of staff in training

Londoners have their say

The public and staff had their say on the future of the capital’s ambulance service as it consulted on its plans to become an NHS foundation trust.

Over 1,800 people attended road shows during the 14-week consultation last year and the proposals were shared with staff and over 2,000 partner organisations.

Over 4,500 Londoners have signed up as public members giving them the chance to be more involved in how local 999 emergency healthcare services are developed and delivered.

How the Service will be run:
- London residents and people who work but don’t live in the capital can become members, as well as staff. Members must be at least 16 years old.
- There are six public membership constituencies in London, and one to represent people who live outside the capital.
- The Council of Governors – the body representing the public, staff and partner organisations – will have 13 elected public governors, three staff governors and seven partner governors. The trade unions have also been offered a seat as a partner governor.
- The Board of Directors will be responsible for the day-to-day running of the Service.

As a foundation trust, the Service will have:
- more freedom to develop its services for patients,
- greater involvement from patients, staff and local communities in how it is run, and
- more freedom in how it uses its money.