

**Consultation on the key issues related to the establishment of a HEMS for Northern Ireland**

**CONSULTATION RESPONSE FORM**

I am responding:

As an individual \_\_\_\_\_

As a health and social care professional \_\_\_\_\_

On behalf of an organisation \_\_\_\_\_ ✓

As a potential HEMS charity partner  
(NB. Please complete additional sections on  
final page of questionnaire) \_\_\_\_\_

(please tick one option)

About you or your organisation:

Name:	
Job Title:	
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**Consultation Questions related to options described in Section 3 above**

## Management and Funding models

### Management of the Service

Views are sought on Proposals 1 & 2 regarding the management of the HEMS:

***Proposal 1: It is proposed that, irrespective of the funding model adopted, the Northern Ireland HEMS should seek to join AAA and be guided by its Framework Document in relation to key management issues, with the advisory role in clinical matters to be undertaken by a Clinical Advisory Group.***

Question 1. Do you agree with Proposal 1?

Yes

No

If 'no' please feel free to comment below, providing evidence to support any alternative proposal:

If 'yes' please feel free to comment further below:

The AAA has 29 full members and 18 associate members with experience of providing/working with air ambulance services; joining the AAA would provide key learning for the Northern Ireland HEMS and an opportunity to learn from developing best practice.

Creating a CAG to advise on clinical matters is recommended but as the CAG advises on, and the HSC services has responsibility for, decisions on the treatment and care of patients, there should be clear guidelines on the role of the CAG so there can be no overlap or discrepancies between the 2 bodies.

***Proposal 2: It is proposed that, irrespective of the funding model adopted, the Northern Ireland HEMS should be commissioned through the Northern Ireland Ambulance Service (NIAS).***

Question 2. Do you agree with Proposal 2?

Yes

No

If 'no' please feel free to comment below, providing evidence to support any alternative commissioning and management model:

If 'yes' please feel free to comment further below:

Several of the already established AAA full members are Ambulance Service Trusts. It would be beneficial to have a group leading/delivering the service that already has a vast knowledge of the service required.

## Funding and Operational Model for the Service

Views are sought on Options 1a and 1b regarding the funding of the HEMS:

***Option 1a – The annual operating costs of the Northern Ireland HEMS, estimated at £1.8m, should be fully publicly funded from existing Departmental resources.***

***Option 1b – The Northern Ireland HEMS should be funded and operated on the basis of a formal partnership with a voluntary organisation, in line with defined criteria, in order to secure community involvement, provide a recurrent source of charitable funding, and minimise impact on other health and social care services***

Question 3. Which funding option would you prefer to see implemented?

\*Option 1a \_\_\_\_\_

\*Option 1b \_\_\_\_\_ ✓

\* Please tick your preferred option

Please use the space below to provide any comments in support of your preference:

The industry is almost entirely funded through charitable donations (in England and Wales, not Scotland) indicating the strength of public support for HEMS. In the UK, in 2008, there were 20 air ambulance charities operating 22 services. The services rely on public donations to fund operating costs and fundraising methods include public lotteries, events, donations and social enterprise activities. At a time when health budgets are already stretched, the Council feels that the Northern Ireland HEMS should also be charity funded in order that the project is not jeopardised by public sector funding cuts. Not only would this not create an additional burden to the already stretched budget and divert resources from elsewhere, but would also give a sense of community ownership and involvement to the people of Northern Ireland, who will contribute in whatever way they can. The Council also suggests that the possibility of business involvement/sponsorship is further investigated. However, NHS Trust infrastructure funding must be made available to allow the development and improvement of sites. This will result in easier access by HEMS flights to specialist treatment centres and for the impact of darkness and low light to be reduced by the introduction of approved lit landing sites.

## **HEMS Service Configuration / Models of Care**

The Department has identified the following service configuration options for the Northern Ireland HEMS:

***Option 2a: The Northern Ireland HEMS should adopt a paramedic-led service model which will deliver primary trauma care and undertake acute retrievals and critical transfers.***

***Option 2b: The Northern Ireland HEMS should adopt a physician-led service model, comprising a doctor and paramedic, which will deliver primary trauma care and undertake acute retrievals and critical transfers.***

Question 4. Which service configuration option would you prefer to see implemented?

\*Option 2a   

\*Option 2b   

\* Please tick your preferred option

Please use the space below to provide any comments in support of your preference:

According to the 2012 Feasibility Study, although a demand was found for a HEMS/AA service in Northern Ireland, there were concerns over the level of need for the service. If there are still concerns the service could be introduced as a paramedic-led service and if the need was established for a physician-led service this could be considered as part of a future review.

Paramedics have a comprehensive knowledge of ICU equipment and procedures and can administer treatment and drugs; the paramedic-led service could be more appropriate in current circumstances.

A benefit of the paramedic-led service is that costs are slightly lower, estimation that 2 paramedics (paramedic-led service) is approximately £50,000 less per annum than 1 doctor and 1 paramedic (physician-led service).

## **Target Patient Groups**

Views are sought on Proposals 1& 2 which relate to the deployment of the HEMS for various patient groups.

***Proposal 3: It is proposed that a local deployment strategy should be developed for the Northern Ireland HEMS that takes account of the specific needs of the region, in line with the principles recommended by the Association of Air Ambulances. This strategy will provide guidance on, for example, incident response and HEMS tasking.***

Question 5. Do you agree with this proposal?

Yes

No

If 'no' please feel free to comment below, providing evidence to support any alternative proposal:

If 'yes' please comment on how you think this might work best:

A local strategy should be developed using the AAA principles. Each HEMS area will have different requirements (location/mileage, costs, etc) and so although the same questions need to be asked as to how/when to use HEMS, the answers will differ according to local needs.

***Proposal 4: It is proposed that the Northern Ireland HEMS would facilitate two main response groups i.e. primary and secondary. It is likely that the service would start with responding to the primary group, particularly major trauma patients, and over time evolve to include the secondary group.***

Question 6. Do you agree with this proposal?

Yes

No

If 'no' please feel free to comment below, providing evidence to support any alternative proposal:

If 'yes' please comment on how you think this might work best:

It is reasonable to have a service that responds to major trauma patients first. If there is a planned transfer of a patient to another hospital and an incident occurs where there is major trauma involved and the HEMS is required, the agreement with other helicopter transport providers could be called upon and another provider could be asked to cover the transfer, provided that medical personnel are available to cover both the incident and the transfer.

## **Home Base Locations**

Views are sought on Proposal 3 regarding the HEMS home base location:

***Proposal 5: Consultees are invited to provide their views on the most suitable home base location for the HEMS, explaining how their preference meets practical requirements such as the availability of a hangar and associated services, the proximity to medical personnel who will staff it, and the ability to reach target destinations within an acceptable timeframe.***

Question 7. Please provide your response in the space provided below:

The Fermanagh and Omagh District Council area would be suitable as a base for the Northern Ireland HEMS as Sloane Helicopters already has a base in Fermanagh meaning there is already a hangar and associated services available. Whilst some alterations may be required, initial start-up costs would be reduced through having the basic infrastructure in place.

Sloane Helicopters are already an associate member of the AAA, and, as well as helicopter sales and services, offer fixed wing services and services such as helicopter maintenance, design, modification, installation, customised avionics, training and operations.

Enniskillen Airport which accommodates Sloane Helicopters is approximately 4 miles from Enniskillen (the largest town in County Fermanagh) town centre and approximately 2.3 miles from the South West Acute Hospital. There is an approximate travel time of 5 minutes between the hospital and the hangar meaning medical personnel are extremely close at all times.

The road infrastructure requires significant investment, particularly in the West where there is no motorway. Establishing this service in Enniskillen Airport means patients could be transferred from the West more rapidly to the RVH in Belfast to which major trauma patients in Northern Ireland are taken, either straight from the scene of an incident or transferred from another hospital.



## **Collaboration with other services**

***Proposal 6: It is proposed that the Northern Ireland HEMS should establish and maintain collaborative partnerships with other helicopter transport providers, such as the PSNI, Coastguard and EAS (ROI), in order to maximise coverage and continuity of service.***

Question 8. Do you agree with the proposal?

Yes

No

If 'no' please feel free to comment below, providing evidence to support any alternative proposal:

If 'yes' please feel free to comment further below:

In the 2012 Feasibility Study, consultation indicated that the Maritime Coastguard Agency and Police Service of Northern Ireland were unlikely to have capacity to operate a regular HEMS service. As this was the case the option was not considered at all but entering into an agreement with other helicopter transport providers where they are not expected to provide a regular service but are available for back-up/extra aid, would be beneficial.

Please use the text box below to provide any additional comments you wish to provide regarding the introduction of a HEMS for Northern Ireland:

Fermanagh and Omagh District Council (Council) welcomes the opportunity to respond to the consultation on Establishing a Helicopter Emergency Medical Services (HEMS) for Northern Ireland and supports the proposal of having a HEMS in Northern Ireland.

The Council feels very strongly that Enniskillen Airport is a suitable location for the HEMS to be based.

**NB. This section should only be completed by prospective charity partners.**

The Department is using this consultation as an opportunity to invite prospective charity organisations to express their interest in fulfilling a partnership role, as described in section 3.1. Voluntary organisations are asked to use the space below to set out their proposed delivery model, including their proposed partnership with the HSC, and to provide the following information:

- Confirmation of registered charity status.
- Details of charity leadership comprising individuals with a track record of successful charitable fundraising, or the potential to deliver this, and experience of working or participating in public/voluntary partnerships.
- A business plan which demonstrates:
  - the ability to raise at least £1m funds annually and recurrently;
  - an understanding of successful public/voluntary HEMS operational models, and the associated financing and procurement required to deliver the service;
  - evidence of the ability to secure a community-based network of volunteers to support fundraising efforts.

N/A
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Submissions containing the above will be considered and followed up with a formal selection process to select a voluntary partner. This process will comply with all necessary statutory and regulatory requirements and will be subject to business case approval.