## Being the Best Worksop Public Consultation Worksop Town Hall

Tuesday 9th October 2012:

80+ attendees

Q = Question

A = Answer

R= Response

O = Opinion

Q. Question on the Process of this consultation. Why has there been no prior communication regarding this meeting, has this been the same for the other meetings?

A. all events have been advertised since the 25<sup>th</sup> of September, we have roughly 65 Meetings booked in and about 31 of those are Public meetings. We have received a varied response to date to all meetings, however we take on your feedback of allowing more notice and alongside the Retford meeting can set up a further public meeting to discuss in more detail.

Q. How will residents of Bassetlaw be notified of this, excluding the use of Facebook and twitter?

A. I will feed all your comments on the promotion of the events to our coms team and ensure more efforts are made to alert the public and local stakeholders prior to the event.

O. John Mann – 'disgusting how poorly this consultation has been ran to date' the process feels underhand and sneaky, almost as if EMAS had no intention of discussing the points with the public and already a done deal.

R. It was never our intention to exclude anyone, we've had a good turn out to both the Derbyshire and Chesterfield meetings so far. We also notified all FT members and have promoted the date through several media channels prior to todays meeting

Q. Have you thought about local news stations?

A. Its definitely something we can consider and I will feed back to the Comms team

O. If completely frank this is clearly a done deal!

A. Assure you this is not the case, we very much value your input into this, this is a public consultation, we are here to discuss all aspects of thie and listen to what you feel Worksop need, this is not a money saving exercise and is certainly not set in stone, we need to take on all aspects including Staff, hitting targets and doing what's best for you the public.

No time was allowed to answer the following questions

- Q. We need a Hub at Bassetlaw! Are you going to give us one!
- O. EMAS would do better to work with the authorities to get a better solution through partnerships with other primary care trusts
- Q. Has there been any sort of risk assessment done on the model, for instance issues with Tidal water, we have the River Trent within 20 miles, Motorway for roughly 20miles, same with Rail lines and not forgetting Gamston Air station all of these are major risk factors for this area and just confirm without any question of a doubt that a hub in Bassetlaw is needed to ensure sufficient or dare I say an improvement on current response time.
- A. There has been no risk assessment but other assessments have been made
- Q. you are skirting round an answer! exactly what type of Risk assessment has been done on this model
- A. QIA Quality impact assessment
- Q. Why has this taken priority over a Risk assessment, EMAS have big plans and clearly haven't taken the time to run an essential risk assessment, this makes me very nervous.
- A. You will find a lot of your questions will be answered along the way.

David Farrelly presented: Being the best slides

Local GP: 1) do you have support from EMAS staff on this? 2) Will this affect any of the Major incident response teams? 3) You claim this change will also save money, where will this so called money go?

- \*GP noted later on in the meeting that he was in discussion with James Gray at present and was aware of the meeting and proposal\*
- A. This change will not affect in anyway any of the Major incident response teams. We are working with all staff at present giving all a chance to share any thoughts or concerns on the proposal and as we will with all your comments today.
- O. 'I agree with the Concept and to a degree understand the reason for the proposal, however, the fact of the matter is that we want one here'
- Q. Are EMAS currently hitting targets?
- A. No, not for Bassetlaw
- O. EMAS need to go away and make distinct improvements to the proposal and show us you have taken what we want into consideration; this service is about improving not cost! Show us exactly what these improvements will be!
- Q. Can EMAS guarantee more ambulances will be available through this change?
- A. You will not lose any of your ambulance service, if anything we are looking to improve on what you already have.

- O. EMAS need to hold a second meeting and share the minutes from today's
- O. This meeting and the consultation is a shambles! If this was advertised properly we'd have people spilling out the car park. The consultation document is filled with inaccuracies, James Gray has not been around the country because there is only one other station, Staffordshire that has a similar infrastructure to ours. A recent report done on Staffordshire showed that the response time was not being based on when the call was being logged to when a trained paramedic was available on the scene but was actually when a CFR arrived with a defibrillator!
- A. *from general public*: Regarding the last comment: this is misleading as there is actually no Staffordshire ambulance service
- Q. what about the staff! Where are they supposed to go what are they supposed to do?
- A. Staff will actually have better facilities then at present
- O. what we need to see happen is EMAS go away and come back with an actual proposal that's in a state that the public can understand! Including PCT! You need to have more detail and facts in here, we are unique and one size will not fit all! Finally when you are ready to do this give us more time to digest, don't just throw this at us 2 days before and expect our buy in!
- The following questions and opinions were not given chance for an EMAS response
- Q EMAS admit this change is not right for Bassetlaw therefore do you agree Bassetlaw should have its own hub?
- Q. is it true that all drugs will need to be collected from Kingsmill? If so can you explain how this will work for Bassetlaw
- O. There is a quick and simple solution to this problem, we have 2 buildings at present, Worksop and Retford, Close 1 of them, build on the second and therefore no need to go all the way to Kingsmill to restock on drugs
- O. we need Working groups to discuss all these aspects more, not just this public meeting
- Q. I would like reassurance as you haven't answered the question yet, will we lose our current 4 Ambulances
- A. You will not lose any of your current ambulance service
- Q. To go back to the staff, what type of response are you getting from them?
- A. all of the Staff comments are being collated and fed back into the consultation for the same deadline as the public consultation on the  $19^{\text{th}}$
- O. for proper input you need insure you are speaking with the right people, i.e. Libraries, hospitals
- A. we have a dedicated Comms team that have done and will continue to promote through the relevant channels

Q. Why are we losing out to Northants?

A. you can't compare the 2; our aim is to provide a model that meets the service. Our current proposal is a suggestion that is based on facts, experience and data. Based on your feedback tonight it is clear that this won't suit your needs. This model at present provides best fit, however it is agreed it needs some work.

- R. The Management of this meeting is appalling, not only are people not given the right opportunities to discuss but you don't even have the courtesy to stand up when responding to our questions and to top it all off your microphones don't work!
- Q. Your not telling us how a hub can improve on our current cover and staff wellbeing, Why do the ambulance services not run like the police and fire. To sum up we need to know what is available now, what you are actually suggesting and how it will change!
- A. All Ambulances are kitted out with stock and supplies. Fire has to go back to base to clean and restock, all our staff in the proposal will be greeted with a clean and restocked ambulance
- Q. Will the cleaning of these vehicles be in house or will this be more money wasted by hiring an external company to do?
- A. Nothing has been confirmed yet.
- Q. you mentioned earlier that this process is done demographically, but Bassetlaw is clearly at a loss, you are shirking your answers, Lives are at risk due to response times and I don't feel this is being taken seriously enough!

No time for response

- Q. Shifts are 8hrs long, with the added 2 hrs. for picking up and dropping off the vehicle, will staff be compensated for this?
- O. Crucial thing is the location of the Hub
- Q. How robust is the model & where is the evidence
- O. we want assurance that EMAS we look into all issues raised today and come back to discuss before the end of the consultation Process. Its also worth noting t hat Worksop do not just rely on EMAS but other Ambulance services.
- Q. can EMAS confirm or deny that a policy is place for frontline worker to put them self forward for early/requested redundancy, assuming all people leave how can we cover the service?
- A. EMAS would not release them, resources will be put back into he paramedic structure or they wold be asked to stay until there was sufficient cover. EMAS will always maintain the number of paramedics
- Q. what is EMAS's target for this change?

- A. hitting standards and improving on targets from previous years, alongside staff well being and saving money long term.
- Q. Have there been any trials from Bassetlaw to Mansfield
- A. we have not held any trials as yet as this is still very much in debate.
- O. Why have EMAS put together a consultation document and share with the public until a trial run had even been done?

Will there be a cost analysis of all vehicles?

A. Yes, the aim is to get to a point where all vehicles will be no older then 4yrs old.