

Friday 12th October 2012

Sleaford Public Consultation

Q. No communication about the meeting being held, stunned on the size of Lincolnshire and the area we have to cover, however nobody knew about this meeting.

A. We will discuss with our communication team.

Q. How do you judge on demand on how often areas change?

A. We update every year on rotas and check demand levels. As time changes we will put more CAP's in the needed areas when needed.

Q. How do the CAP's vary from the hubs?

A. Eco friendly, smaller, cheaper, can be shared with other services if suitable. They are placed where a computer accurately chooses where they need to be; we also need the human element and make a sensible decision. We will only share with other services if it is in the correct place we won't do it just to save money.

Q. Can you confirm that the hub for Sleaford will contain only ambulance or other services?

A. We are in discussion however we aim to be individually; if they do share then it will only be if everyone agrees to share.

Q. By the end of the year fuel prices will go up, moving your station from one area to the hub, is it really worth it?

A. Before any of this can happen the proposals need to meet standards, heating lighting, vehicle movement, staff movement has to be fed into the programme and they have to get together and approve that it meets the standard and it saves on what we are doing now, our current problem is going to cost us 13 million pounds, not to improve them, just to keep them how they are.

Q. Will the stations be highly insulated? With drugs on how secure will they be?

A. They will be secure, the hubs will have the drugs, not the CAP's we are looking to have top up drugs held at hospitals. It has been considered.

Q. How many ambulances will be at each post?

A. It will be more likely that one will be there at a time, and as it goes another will replace it

Q. The staff that was showed in the hubs, will they be contractors or EMAS staff?

A. EMAS staff, we have make ready now but they are all over the area, no thoughts at all the get contractors.

Q. Do you use air support?

A. Yes, one air ambulance, funded by charity they provide the helicopter, we provide the helicopter. Do have limitations, we can't use them at night, weather conditions, we cannot use the RAF although we have had RAF responders.

Q. Will we still be using St Johns; will they be based at the hubs?

A. If we ask for their assistance, yes they will be treated the same as every ambulance of ours.

O. Mention of appreciation of the ambulance service.

Q. Have you considered that Lincolnshire is a large county, the old cost NHS a large amount, are you thinking that at all about increasing the numbers of staff?

A. Simply yes.

Q. Will the training be the same or will they do it at Lincoln Uni?

A. Unknown.

Q. How much is saved by doing this and why haven't we don't it already?

A. We haven't done it already is a good question, we are looking to follow an existing model, we won't save money, this programme isn't about saving money, any money we make from selling stations will be re-invested, we are slimming down managers to save money and any of that money saved will go into more front line staff.

Q. Why are you selling your property and not renting?

A. We could, that might be an option, we need to manage our business in an effective way, we could borrow money to make the hubs, and it is cheaper for us to sell. Some will sell, some won't, so we may end up sharing facilities. We don't want to borrow money, and end up with a lot of interest to pay back, we are the NHS not property developers. If we can take the cash now, own what we want to own, and move forward we believe that would be the best option. We have a lot of interest in our properties, we have a number of properties that people won't sell, for example divisional HQ which sit next to a factory. We will size up what we want to keep and what we don't, but I think we should be thinking about safe services, not property developing.

Q. I believe there are too many CAPS and not enough hubs, far too many miles on the clocks of the ambulances, more of a carbon foot print and it's not fair on the staff as they have to travel further to get to work.

A. That is a comment we are hearing a lot. We will take it back and consider it. The mileage on the ambulances will equal out as throughout the day they won't be travelling as much, we will revisit this point. Local knowledge is important.

Q. They are too widely spaced (HUBS).

A. the CAPS are based around population; the HUBS are based around staff post codes.

Q. Talk of economy of scale, I do wonder if you've got the right number hubs, fuel prices, needs to be future proofed, all extra houses, the amount of congestion is likely to slow down your vehicles, needs to be reconsidered how many hubs we do have

A. That is the whole point of this. Already understood and will be taken back, staff have made good suggestions with public knowledge. This is the first step, just computer based at the moment, but the computer doesn't live in Lincolnshire.