

Rutland County Council

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Minutes of the **MEETING of the RUTLAND HEALTH AND WELLBEING BOARD**
held via Zoom on Tuesday, 11th January, 2022 at 2.00 pm

PRESENT

1.	Councillor S Harvey (Chair)	Portfolio Holder for Health, Wellbeing and Adult Care
2.	Fay Bayliss	Deputy Director of Integration and Transformation LLR CCG
3.	Fiona Myers	Interim Director of Mental Health Services, Leicestershire Partnership NHS Trust
4.	Hilary Fox (Dr)	Clinical Director, Rutland Health Primary Care Network
5.	Janet Underwood (Dr)	Chair of Healthwatch Rutland
6.	Louise Platt	Executive Director of Care and Business Partnerships, Longhurst Group
7.	Mel Thwaites	Associate Director: Children and Families, LLR CCG
8.	Mike Sandys	Director of Public Health for Leicestershire & Rutland, LCC
9.	Sandra Taylor	Health and Wellbeing Integration Lead
10.	Vivienne Robbins	Consultant in Public Health, RCC

APOLOGIES:

11.	Mark Powell	Deputy Chief Executive, Leicestershire Partnership NHS Trust
12.	Simon Down	Acting Chief Executive/Monitoring Officer, Office of Police and Crime Commissioner
13.	Karen Kibblewhite	Head of Commissioning

ABSENT:

14.	Audrey Danvers (Insp)	NPA Commander Melton & Rutland, Leicestershire Police
15.	Rachel Dewar	Head of Community Health Services, Leicestershire NHS Partnership
16.	Sheila Fletcher	Chief Operating Officer, Citizens Advice Rutland

PORTFOLIO HOLDER PRESENT:

17.	Councillor D Wilby	Portfolio Holder for Education and Children's Services
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OFFICERS PRESENT:

18.	John Morley	Strategic Director for Adults and Health (DASS)
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19.	Dawn Godfrey	Strategic Director of Children and Families (DCS)
20.	Michelle Woolman-Lane	Armed Forces Officer

IN ATTENDANCE:

21.	Councillor G Waller	
22.	Councillor L Toseland	
23.	John Edwards	Associate Director for Transformation for Mental Health, Leicestershire Partnership NHS Trust
24.	Richard Morris	Deputy Director of People and Innovation, LLR CCG's

1 WELCOME AND APOLOGIES RECEIVED

Councillor Harvey welcomed everyone to the meeting. Apologies were received from Simon Down and Karen Kibblewhite.

2 RECORD OF MEETING

The minutes of the meeting held on the 5th October 2021 were approved as a true and accurate record.

Jane Narey confirmed that the subject matter 'Changes to transport for accessing health care inc. the new Bus Service Improvement Plan' was on the Committee's workplan for discussion at the committee meeting on the 5th April 2022.

3 DECLARATIONS OF INTEREST

There were no declarations of interest

4 PETITIONS, DEPUTATIONS AND QUESTIONS

There were no petitions, deputations or questions

5 QUESTIONS SUBMITTED AT SHORT NOTICE

There were no questions submitted at short notice

6 QUESTIONS WITH NOTICE FROM MEMBERS

There were no questions with notice from members

7 NOTICES OF MOTION FROM MEMBERS

There were no notices of motion from members

8 STEP UP TO GREAT MENTAL HEALTH

An update and a presentation (copy attached) were received from John Edwards and Richard Morris. During the discussion, the following points were noted:

- Issues regarding the lack of workforce continued to be a challenge.
- John Morley queried how the use of the triage car would be expanded and what the referral route was for this service. John reported that the number of triage cars had been increased to two, the number of hours the cars operated had been increased and that both the police and the ambulance service were now supported. The referral route was the police and ambulance service as well as the central access point.
- An update would be given at the Special Health and Wellbeing Board meeting on the 22nd February 2022 so that it would link in with the Health and Wellbeing Strategy (Place Led Plan). It was agreed that John Morley, Councillor Harvey and John Edwards would meet to identify what information was required for the meeting on the 22nd February.

ACTION: John Morley, Councillor Harvey and John Edwards

- No place identified for the location of a mental health hub in Rutland.
- Councillor Harvey queried perinatal support to those mothers who give birth outside of the LLR region. John confirmed support would be provided but that it would be a challenge to ensure that all the services provided were sufficiently connected to each other.
- Richard Morris confirmed that 3% of the consultation results came from Rutland residents. Rutland comprised 3.5% of the demographic information so the response was just 0.5% below target.
- 7 engagement events were held for Rutland – some online, some face-to-face – some were specifically aimed at certain group e.g. veterans, farming community, carers etc
- Councillor Waller reminded attendees that not all services within Rutland were accessible to Rutland residents due to the limitations of the county's public transport.

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John Edwards and Richard Morris left the meeting at 14:43

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9 PHARMACEUTICAL NEEDS ASSESSMENT

Report No. 15/2022 was received from Mike Sandys, Director of Public Health. Mike Sandys gave apologies from Kajal Lad, Public Health Business Partner who had been due to present the report but was unable to attend due to a family bereavement. During the discussion, the following points were noted:

- The purpose of the Pharmaceutical Needs Assessment (PNA) was to:
 - Identify the pharmaceutical services currently available and assess the need for pharmaceutical services in the future,
 - Inform the planning and commissioning of pharmacy services by identifying which services should be commissioned for local people, within available resources, and where these services should be,
 - Inform decision making in response to applications made to NHS England by pharmacists and dispensing doctors to provide a new pharmacy. The organisation that will make these decisions is NHS England.
- It was a statutory document to agree changes to the commissioning of local pharmaceutical services.

- Two surveys will run in Spring 2022. One for service users and one for pharmaceutical professionals.
- A statutory 60-day consultation will run after these two surveys and will start in June 2022.
- Draft PNA will be published on the Rutland County Council's website for public consultation.
- The final PNA will be presented to the Rutland Health and Wellbeing Board for approval towards the beginning of October 2022.
- Dr Janet Underwood reported that Healthwatch Rutland had not been invited to be part of the Steering Group and that the person who attended the Steering Group as the representative for Healthwatch Leicester and Leicestershire no longer worked for the organisation. Mike Sandys confirmed that he would feedback this information and would ask for an invite to the Steering Group to be sent to Healthwatch Rutland.
- Dr Fox requested that the GP practices be included as part of the PNA as they do dispense medication to approximately 30% of their registered patients.
- Mike Sandys confirmed that the PNA noted the current dispensing services provided and not the prescribing services. These would come under the primary care services so would not be within the remit of the PNA but this could be reviewed.

RESOLVED

That the Board:

- a) **NOTED** the report
- b) **AGREED** to receive further reports on progress and the final PNA report for approval later in 2022 (in preparation for publication by 1st October 2022).

10 CHAIR'S STATEMENT

Councillor Harvey read out a statement/update to all attendees – copy attached.

The statement referred to an email received from EMAS – copy attached.

Councillor Harvey informed attendees that the Chair's Statement would be circulated to all Rutland Councillors for their information and asked Board members to notify her of any information they wished to be included in future editions of the Chair's Statement.

11 ENHANCED PUBLIC HEALTH OFFER AT RUTLAND COUNTY COUNCIL

Report No. 17/2022 was received from Vivienne Robbins, Public Health Consultant. During the discussion, the following points were noted:

- The revised Public Health Team for Rutland would be as follows:
 1. Director of Public Health (0.2 whole time equivalent (WTE))
 2. Consultant in Public Health (0.4WTE)
 3. Strategic Leads for Rutland and Rutland Commissioning (1.8WTE)
 4. Public Health analyst (0.2WTE)
 5. Additional support from within RCC including Health and Wellbeing Integration Lead.

- A clear strategic direction and future objectives were being worked on and these would link in with the development of the Rutland Joint Health and Wellbeing Strategy.
- Dr Janet Underwood asked if the public could be included in the new public health offer. Vivienne Robbins confirmed that the public would be involved via the consultation of the Health and Wellbeing Strategy and through engagement with the Rutland Health and Wellbeing Board. Future communication and engagement with the public was also being investigated.
- Dr Hilary Fox requested that the small numbers linked with Rutland should be investigated and not overshadowed by the large numbers linked with Leicester and Leicestershire so that Rutland's specific needs were focused on.
- Dawn Godfrey confirmed that the Public Health Team was already having a positive impact on Children's Services within Rutland.
- Councillor Harvey stated that Rutland had a 40% rate of dental decay in the under 5's and asked that the issue of dental health checks be included as a priority for public health to focus on.
- Councillor Harvey noted that the armed forces were mentioned within the Public Health Team's remit but not veterans. She informed attendees that 20% of the Rutland population had a connection with the armed forces.
- Councillor Harvey requested that the wording under Domain 1 be changed to read '*Consideration **must** be needed for climate change, air quality, road safety etc.*'

RESOLVED

That the Board:

- a) **NOTED** the content of the paper and revised public health offer for Rutland
- b) **PROVIDED** any recommendations for priority public health areas to focus on over the next year

12 BETTER CARE FUND: UPDATE

Report No. 18/2022 was received from Sandra Taylor, Health and Wellbeing Integration Lead. During the discussion, the following points were noted:

- No consultation took place regarding the new Better Care Programme due to the pandemic restrictions but it was approved for submission by the then Chair of the Rutland Health and Wellbeing Board.
- The Rutland Better Care Programme was regionally approved on the 9 December 2021 with one minor amendment.
- It was approved nationally in January 2022 and a confirmation letter was expected presently.
- Dr Janet Underwood queried the level of domiciliary care staff in Rutland. Sandra Taylor confirmed that staffing levels in Rutland were good compared to nationally following good partnership working with care homes and service providers.
- John Morley informed the Board how proud he was of his staff and how hard they had all worked during the pandemic crisis, going above and beyond their normal duties. He emphasised that the staff continued to assist those working on the front line, which left the service unable to fully open Brightways.

RESOLVED

That the Board:

- a) Retrospectively **APPROVED** the Rutland 2021-22 Better Care Fund Programme.

b) **NOTED** the new targets against which BCF performance will be tracked.

13 NEW ARMED FORCES LEGISLATION

Report No. 16/2022 was received from Michelle Woolman-Lane, as Karen Kibblewhite was unable to attend the meeting. During the discussion, the following points were noted:

- The report outlined the new Armed Forces Covenant legislation which was being implemented as part of the updated Armed Forces Bill.
- One fifth of the residents in Rutland comprised of the Armed Forces Community.
- The 'Armed Forces Community' included:
 1. Members of the Regular and Reserve Forces,
 2. Members of British Overseas Territory Forces who are subject to Service Law,
 3. Former members of any of Her Majesty's forces who are ordinarily resident in the UK,
 4. Relevant family members; and
 5. Bereaved immediate family of Service Personnel and veterans who have died.
- The main issues are that the Council pays 'due regard' and gives 'special consideration' to the Armed Forces Community in all services but especially in education, housing and health.
- The Council's implementation plan identifies the key actions to be undertaken, timescales and the officer lead responsible in each business area.
- John Morley proposed that the Armed Forces send a representative to be a member of the Rutland Health and Wellbeing Board. Councillor Harvey and Councillor Wilby both agreed John's proposal.
- Councillor Waller queried if the Armed Forces representative should attend a more 'operational' group.

RESOLVED

That the Board:

- a) **NOTED** the implications of the forthcoming amendment to the Armed Forces Bill for Rutland County Council, the CCG, and health providers.
- b) **AGREED** that Sandra Taylor and Michelle Woolman-Lane would discuss with the Armed Forces suitable future representation and identify which groups, boards and committees the representative should attend.

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Michelle Woolman-Lane left the meeting at 15:57

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14 REVIEW OF FORWARD PLAN AND ANNUAL WORK PLAN

The Forward Plan was reviewed and no changes were made to the annual work plan.

15 ANY URGENT BUSINESS

There was no urgent business

16 DATE OF NEXT MEETING

A 'Special Meeting' of the Rutland Health and Wellbeing Board would be held on Tuesday, 22nd February 2022 at 2 p.m.

The agenda for this special meeting would consist of two items:

1. Rutland Health and Wellbeing Strategy (Place Led Plan) including a draft delivery plan [John Morley/Sarah Prema/Rachna Vyas]
2. Primary Care Task and Finish Group: initial report [Councillor Paul Ainsley]

SUMMARY OF ACTIONS

No.	Ref.	ACTION	BY:
1.	8	It was agreed that John Morley, Councillor Harvey and John Edwards would meet to identify what information was required for the meeting on the 22 nd February. Meeting arranged for the 27th January	John Morley, Councillor Harvey & John Edwards
2.	13	Sandra Taylor and Michelle Woolman-Lane to discuss with the Armed Forces suitable future representation and identify which groups, boards and committees the representative should attend.	Sandra Taylor & Michelle Woolman- Lane

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Chair closed the meeting at 3.59 pm.

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Step up to Great Mental Health

6

Rutland Health and Wellbeing Board

Step up to
**Great
Mental
Health**



The opportunity to have your say

www.greatmentalhealthLLR.nhs.uk

Introduction

- Many years of co-design and development
- Proposal formed and widely consulted upon
- 14th December 2021 CCG governing body approved a decision making business case

improving mental health care when the need is urgent

- Building self-help guidance and support
- Introducing a Central Access Point
- Strengthening the role of Crisis Cafes
- Improving the Crisis Service
- Expanding use of the Triage Car
- Introducing a Mental Health Urgent Care Hub
- Introducing an Acute Mental Health Liaison Service
- Joining up support for vulnerable groups

working with the community to provide more mental health services locally

New Community Treatment and Recovery Teams

These teams will help improve the experience and care including:

- Reducing waiting times for treatment and support
- Improved support for individuals with a personality disorder
- Improving services for people of work age and older people
- Expanding Perinatal Services (for the time immediately before and after birth)
- Developing a new maternal outreach service
- Improving experience of individuals with potential psychosis
- Reducing the wait for diagnosis of dementia
- Providing community rehabilitation support to help people recover from complex psychosis

Step up to
**Great
Mental
Health**



A reminder of what we consulted on

The opportunity to have your say

www.greatmentalhealthLLR.nhs.uk

Response figures



We reached 3.5 million* people
in Leicester, Leicestershire and
Rutland



6,650

Total response to the consultation

12



4,093

Survey responses (main and
easy-read, post and online)



41

Correspondence
(email and letter)




2,516

Event participants - 74 run by
V&C and 85 by LPT/CCGs –
totally 169 events (workshops &
1.2.1 interviews and focus
groups)



When we asked people if they agreed or disagreed with our 16 proposals

- Over 90% of people agreed or strongly agreed with 7 proposals
- Over 80% of people agreed or strongly agreed with 7 proposals
- Over 70% of people agreed or strongly agreed with 2 proposals



It is quite unusual to see this level of support

Different way of working

- We worked with 40 VCS partners and other stakeholders.
- We learnt a lot about our communities - what they want and how they want to stay involved
- Co-design - this is the way we will work: with our community partners, our staff, our service users.
- The community - all of this has to be done with the community
- Carers - need to be more involved and part of the co-design

14



Further learning

- **Keep going** – a high level of agreement through consultation
- **Digital** – make more available online: information and services
- **Language** - are we inclusive? Easy to understand? Need to be better
- **Choice** – make sure people have a choice in how we provide, eg memory service: consultations should be a choice
- **Cultural** – be more aware of sensitivities and differences, eg maternal mental health
- **Carers** – need to be more involved and have better support
- **Promote and increase awareness** – Many people did not know what services there were

15



Next steps

- Developing a network of partners including VCS partners to support ongoing co-design through implementation planning and putting into practice
- Refreshing governance to support the delivery of outputs of consultation in neighbourhood, place and across system
- Including wider aspects of MH transformation including neighbourhood development, inpatient, housing and prevention
- Launch of implementation phase moved to Feb due to management of covid



Rutland Health and Wellbeing Board: Chair's Update

11 January 2021, v2

Councillor Sam Harvey, Rutland County Council (RCC) Portfolio Holder for Health, Wellbeing and Adult Care

Introduction

The Health and Wellbeing Board is a key meeting point and driver for health and wellbeing in Rutland, and I am pleased to take up the Chair of this Board as part of my new role as Rutland County Council's Portfolio Holder for Health, Wellbeing and Adult Care. I take over from Councillor Walters, who I am sure we would all like to thank for his long-standing commitment and services to the Board.

As the new Chair of the HWB, I would like to introduce an element to our Board meetings which is a Chair's update, bringing together regular, current information on a number of key themes relevant to the business of the Board. Updates will initially be focused on the pandemic as a critical aspect of our work together. The update will evolve over time and I would welcome feedback on what updates would be most valued by HWB members and wider.

Coronavirus update

In line with the national picture resulting from the high transmissibility of the Omicron variant, rates of Covid infection have continued to rise rapidly in Rutland since before the New Year. The seven day rate of Covid-19 cases in Rutland up to 4 January 2022 was **1571 per 100,000 population, a rise of 30% over the previous week¹**. This figure marks the **highest incidence to date in Rutland**, although both the rate, and the rate of increase were **lower than the England average** of 1924 and 38% and the Leicestershire average of 2139 and 50% respectively. Incidence in the over 60s is rising steeply, but remains proportionally lower than the national and Leicestershire averages at this stage (891 per 100,000 60+ population, relative to 1114 and 1230). If similar to the trajectory in the London area, and by continuing the measures in place, the local wave may hopefully peak and start to level off around the end of January.

Health and care pressures

As a result of the pandemic, the Leicester, Leicestershire and Rutland health and care system remains under significant pressure. LLR and local committees and cells coordinating pandemic responses have been stood up once more. Acute services are facing a combination of increasing hospitalisations (because of Covid and/or with Covid), combined with reduced staffing levels due to Covid infection or self-isolation and recruitment challenges. Some key organisations are 15-20% down on usual staffing levels. A national reduction to the duration of self-isolation from 10 to 7 days is likely to be of some help in mitigating this. Meantime, some

¹ Covid-19 cases and deaths in Leicestershire and Rutland: <https://www.lsr-online.org/covid-19.html>

planned hospital appointments are being postponed, and swift discharge from hospital remains a key aspect of maximising bed capacity.

Social care providers are also under pressure locally as elsewhere, with staffing challenges in home care in particular having the potential to impact on the speed of some hospital discharge. Within RCC, Day Opportunities for adults with learning disabilities have not yet been fully reopened for the new year to allow staff to be redeployed into our in-house homecare team, Micare, to support the care at home needed by some for timely discharge.

Dashboards indicate currently that Rutland care homes have either no or very low incidence of Covid-19 and there are no current 'outbreaks' (2 or more linked cases), although they are facing some ongoing staffing challenges. Vaccination rates are very high: 98% of residents are double vaccinated, 95% of them boosted, and with 89% having had their flu vaccination. For staff in care homes, everyone eligible is double vaccinated, as required now by law, with a booster rate of 67%, and flu vaccination rates rather lower at 48%. Supplies of personal protective equipment (PPE) are also healthy.

Covid-19 Testing

The ability for people to test whether they are Covid positive and, if so, go into isolation, is important to slowing down disease transmission. This is especially vital as the Omicron variant is sharply more transmissible than previous Covid-19 variants. A reproduction (R) number of below 1 is required for the disease to start to reduce in the community. The [R number](#)² was estimated on 7 January to be 1.2 to 1.5 in the Midlands and in England as a whole (i.e. every 10 people infected will lead to a total 12 to 15 further people being infected).

The availability of lateral flow test kits (for people with no Covid symptoms to check they are Covid-free before attending a workplace, appointment or event) and of PCR kits or appointments (mainly to diagnose those who are symptomatic) has been a widespread issue nationally over the festive period, with some breaks in supply or appointment shortages owing to extreme demand. National adjustments to Covid regulations are hoped to have a stabilising impact on PCR test availability, by removing the need for asymptomatic people who have tested positive on a lateral flow test to confirm with a PCR test.

Some pharmacies are supplied directly to provide lateral flow kits – and some of those have experienced recent delays to replenishment. In addition, RCC's Community Care Services (CCS) are continuing to distribute high numbers of test kits locally, via two routes:

- A van operating 'popups' on a variable number of days per month, setting up at places such as Rutland Water, supermarkets, etc.
- Distribution via [over 60 Community Collect venues or groups across Rutland](#)³, including in many of the smaller villages. Channels include libraries, village and charity shops, village halls, sports centres, good neighbour schemes, churches and community groups. This is particularly targeting people who may be disproportionately impacted by Covid-19 (e.g. in

² Gov't data – R number: <https://www.gov.uk/guidance/the-r-value-and-growth-rate>

³ Community Collect venues: <https://www.rutland.gov.uk/my-services/health-and-family/health-and-nhs/health-and-support-services/coronavirus/covid-19-rapid-asymptomatic-tests/community-collect-scheme/>

public facing professions, on low incomes, males, people in ethnic minority groups, older people), or those who would find it more difficult to obtain test kits (e.g. due to disability, not being online or travel constraints).

The supply of kits to the Council was not smooth over the festive period, with a late delivery just before Christmas which was distributed at speed with the help of County Councillors, who got 61,520 kits out to the community in 24 hours. New stock was delayed in the new year, but venues are now being restocked. To sustain supplies for those who are unable to order their test kits online, information is now being given out with Council distributed kits which encourages the public to order their subsequent kits, if they are able to do so, directly from the [government's website](#)⁴.

Vaccination

An extensive vaccination programme continues, with a focus at this stage on boosters for those double vaccinated and vaccinating the younger population who have become eligible more recently. The [latest government data](#)⁵ to 8 January 2022 indicates that, in Rutland, 88.6% of the population has had one dose of vaccine, 83.3% two doses and 67.5% also the booster or third dose, with higher booster rates indicated in the east of the county.

Inaccurate public information was identified before Christmas relating to local booster appointment availability, and this has now been resolved, making it clearer that booster appointments are straightforwardly available within Rutland.

Responding to wider pressures

Further grant funding is coming into place, administered by the Council, including to support the hospitality and leisure sector in light of the Omicron wave. The Council will issue communications about how this can be applied for as soon as arrangements are in place.

Meantime, various voluntary sector partners are highlighting the increasing likelihood of financial hardship and dependency on support services in our communities as a result of a range of factors including rising fuel prices, inflation, and the impacts of the pandemic, for example on household incomes.

Support remains available via the Council for individuals who may be facing practical or financial challenges in self-isolating (contact enquiries@rutland.gov.uk or call 01572 722 577), and from the [Council and Citizens Advice Rutland](#)⁶ for those who require advice and assistance around financial hardship more generally.

We have just received an email from our colleagues at EMAS to advice that Arrangements have been made with the Ministry of Defence for 60 military personnel to work alongside our Urgent Care colleagues, responding to patients requiring inter-facility transfers or who have already been seen by a healthcare professional. At this stage we are not planning to use military colleagues as part of our 999-ambulance call response.

⁴ Gov.uk portal to order lateral flow kits: <https://www.gov.uk/order-coronavirus-rapid-lateral-flow-tests>

⁵ Gov.uk interactive map of vaccinations: <https://coronavirus.data.gov.uk/details/interactive-map/vaccinations>

⁶ Financial support in Rutland: <https://www.rutland.gov.uk/my-services/health-and-family/health-and-nhs/health-and-support-services/coronavirus/information-and-advice-for-residents/i-need-help/financial-support-including-help-to-pay-your-council-tax/>

Thank you

As a final note, I would like to commend the continuing hard work and dedication of front line workers in Rutland and wider, in health, care and other key sectors, during a very challenging festive period and beyond. I would also like to thank the population of Rutland for their continuing commitment to following pandemic advice to help to stem the spread of Covid-19 and to reduce the threat of vital services being overwhelmed. As we move into 2022, I hope that we will all soon be able to resume fuller and safer lives.



Due to the continued demand on our services, the number of colleagues who are unwell or self-isolating due to COVID-19, and immense pressure on our region's healthcare systems, we are taking a further proactive step now to safeguard the provision of a safe 999 service for our patients.

Arrangements have been made with the Ministry of Defence for 60 military personnel to work alongside our Urgent Care colleagues, responding to patients requiring inter-facility transfers or who have already been seen by a healthcare professional.

At this stage we are not planning to use military colleagues as part of our 999-ambulance call response.

The aim of this proactive step is to:

- reduce long delays currently being experienced by lower-acuity patients (those who are non-emergency but do need further assessment and treatment), and reduce the anxiety experienced by staff due to the delays,
- to enable our emergency crews to focus on responding to emergency 999 calls, and
- to help relieve some pressure in the wider NHS system.

The 60 military personnel are due to begin training later this week and will complete three-day EMAS familiarisation training course led by our Clinical Education team. They will be available to support our Urgent Care crews 16 hours a day, seven days a week.

They will follow the EMAS values and EMAS protocols, policies and procedures, including infection prevention and control (IPC) and the wearing of appropriate personal protective equipment, and will carry out support tasks such as:

- driving the vehicles,
- the safe moving and handling of adult patients and essential equipment,
- support in Adult Basic Life support including the use of automated external defibrillation, and
- raising any safeguarding concerns as appropriate.

The implementation of military support has always been part of NHS plans in case of increased pressure. You will have seen in the news that military personnel are already supporting, amongst others, colleagues in North West Ambulance Service, and so we are being proactive in having robust plans in place to ensure our EMAS clinicians can continue to provide care to our patients who need us. We look forward to making our new military colleagues feel welcome at EMAS.

Thank you for your ongoing support in helping us to provide the best possible care for each of our patients in very challenging circumstances.

Ben Holdaway
EMAS Director of Operations

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