



Oifig anStiúrthóir
An tSeirbhís Náisiúnta,

Foirgneamh Aibhneacha, Crosbhóthar
Thamhlachta, Tamhlacht,
Baile Átha Cliath D24 XNP2

Office of the Director
National Ambulance Service

Rivers Building, Tallaght Cross
Tallaght, Dublin, D24 XNP2

www.hse.ie
[@hselive](https://twitter.com/hselive)

Ref: RM/PQ24-27508/24/07/02

2 July 2024

Deputy Robert Troy TD
Dáil Éireann
Leinster House
Dublin 2

PQ 27508/24

To ask the Minister for Health to provide an update on the operation of the regional ambulance response system within the midlands region; if this system is still under review; and if his attention has been drawn to the number of “out of region” responses undertaken by the ambulance service, effectively leaving the region without cover for a period of time.

Dear Deputy Troy,

The Health Service Executive (HSE) National Ambulance Service (NAS) has been requested to reply directly to you in the context of the above Parliamentary Question, which you submitted to the Minister for Health for response.

Demand via the 999 service has increased by 14% since 2019 and it is now a matter of public record https://data.oireachtas.ie/ie/oireachtas/committee/dail/33/joint_committee_on_health/submissions/2023/2023-02-22_opening-statement-robert-morton-director-national-ambulance-service-nas_en.pdf that the NAS Workforce Plan has identified the need for considerable growth in the workforce across the country both now and into the future.

Approximately 48% of all 999 calls are classified as PURPLE/RED, i.e. life threatening or potentially life threatening while approximately 32% of all patients conveyed to ED are still admitted to a hospital, even after assessment, diagnosis and treatment in the ED.

Approximately 17% of all 999 calls are classified as GREEN, meaning that they are non-life-threatening and are not time-sensitive and referred to the Clinical Hub for review.

Both the HSE and the NAS regularly run campaigns to ask people to consider all available care options before calling for an ambulance or attending an emergency department. These include highlighting self-care options for issues like colds, pharmacies, GP surgeries, out-of-hours GP services, emergency services and injury units.

The NAS ask that people consider these care options and only call 112 or 999 in cases of real emergency but stress that they do call if they need an ambulance.

Primary Triage System

The initial triage of 999 calls by NAS is undertaken by Emergency Medical Controllers (EMC) using the internationally accredited Advanced Medical Priority Dispatch System (ProQA). NAS is one of approximately 10% of Ambulance Control Centres using this system worldwide (more than 7,000 centres) which holds an International Accreditation as a Centre of Excellence.





Oifig anStiúrthóir
An tSeirbhís Náisiúnta,

Foirgneamh Aibhneacha, Crosbhóthar
Thamhlachta, Tamhlacht,
Baile Átha Cliath D24 XNP2

Office of the Director
National Ambulance Service

Rivers Building, Tallaght Cross
Tallaght, Dublin, D24 XNP2

www.hse.ie
[@hselive](https://twitter.com/hselive)

The purpose of ProQA is to quickly identify those calls where the patient is experiencing a life-threatening illness or injury find (PURPLE/RED) and prioritise those calls for immediate response. Where the level of demand exceeds available resources, then ProQA allows the EMC to prioritise high acuity calls and ensure that only low acuity calls receive a slower response or referral to the Clinical Hub.

Secondary Triage and Navigation System (Clinical Hub)

The role of the Clinical Hub includes undertaking secondary clinical triage of 112/999 calls, referred as potentially lower acuity calls from the primary triage process, using sound clinical judgement, supported by decision support software tools to determine clinical suitability for alternative care options which may or may not require a physical response (Hear, Treat or Refer).

The Clinical Hub uses the Manchester Telephonic Triage System which is aligned to Manchester Triage System used in Emergency Departments.

Outcomes for patients may include self-care at home, medication advice and health information, referral to other services or dispatch of an alternative resource such as Pathfinder, Community Paramedic or APP Car.

The Clinical Hub is staffed by Doctors, Nurses and Specialist Paramedics and may still identify the need to refer the patient to an Emergency Department.

Dispatch System

The deployment model used by NAS is based on the Emergency Medical Service (EMS) Dispatch Standard published by the Pre-Hospital Emergency Care Council (PHECC) as the competent regulator in this area.

Most patients attended to by NAS are transported to the Emergency Department (ED), Medical Assessment Unit, or Injury Unit (location dependent) unless an alternate care pathway is more appropriate, or the patient explicitly refuses transport.

In 2022, a number of procedures were developed in consultation with the trade unions to ameliorate some of the impacts of the gap between demand and available capacity on staff working arrangements.

These measures including arrangements for meal breaks, late finishes, handing over patients and the range of a reasonable response. Feedback from the trade unions on the impact of these arrangements has been positive.

To ensure those patients with life threatening or potentially life-threatening illness or injury receive the fastest response, all 999 calls are clinically triaged. To ensure the nearest available resource is dispatched to such calls, NAS operates on a national basis and mobilises responses to calls for assistance based on patient needs.

In this regard, ambulances may travel to and be dispatched from various locations irrespective of their base as they are not confined to work in geographical areas or former Health Board boundaries. The current deployment model is designed around international best practice, is internationally accredited, supported by the Health Information and Quality Authority (HIQA) and has eliminated previous practices where the nearest ambulance was not always dispatched due to former legacy boundaries.





Oifig anStiúrthóir
An tSeirbhís Náisiúnta,

Foirgneamh Aibhneacha, Crosbhóthar
Thamhlachta, Tamhlacht,
Baile Átha Cliath D24 XNP2

Office of the Director
National Ambulance Service

Rivers Building, Tallaght Cross
Tallaght, Dublin, D24 XNP2

www.hse.ie
[@hselive](https://twitter.com/hselive)

Some examples of where patients in the Midlands benefit from this model include Carlow ambulances responding to Graiguecullen, Athy ambulances responding to Ballylinan, Roscrea ambulances responding to Borris in Ossory, Ballinasloe ambulances responding to Shannonbridge or Roscommon ambulances responding to Lanesborough.

National Service Plan (KPIs)

The HSE National Service Plan (NSP) for 2024 sets out the Key Performance Indicators (KPI) for each HSE service. In relation to NAS, there are two national aggregate KPI targets for emergency calls which apply to the following call categories only:

- PURPLE (life-threatening cardiac or respiratory arrest) – Target: Respond to 75% of such calls within 18 minutes and 59 seconds
- RED (life-threatening illness or injury, other than cardiac or respiratory arrest) - Target: Respond to 45% of such calls within 18 minutes and 59 seconds

These targets are national aggregate targets only and are not measured or reported on a county basis. 999 calls which are not categorised as PURPLE or RED are not deemed to be emergency calls and therefore, there are no response times targets for such calls.

At the end of Month 5, 2024, NAS are currently achieving both targets as set out in the NSP 2024. While demand through 999 continues to grow sharply each year, the NSP 2024 does not make provision for improved performance in the current year.

NAS is seen across the ambulance sector as an exemplar of best practice and is increasingly the subject of study visits by other ambulance services. In this context, the NAS deployment model is not the subject of any current review, and no such review is planned.

I hope you find this information helpful

Yours sincerely

Robert Morton
Director
National Ambulance Service

