Great North Air Ambulance Service
Great North Air Ambulance Service

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<th>Region:</th>
<th>North East</th>
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| Location address:           | The Imperial Centre  
Grange Road  
Darlington  
Co Durham  
DL1 5NQ |
| Type of service:            | Ambulance service |
| Date of Publication:        | February 2012 |

Overview of the service: The Great North Air Ambulance Service (GNAAS) is a charity operating a fleet of helicopters across an area of 8,000 square miles, from the Scottish Borders to North Yorkshire, from East Coast to West. GNASS offers a 10 hour day, 7 days per week Helicopter Emergency Medical Service (HEMS) providing a consultant led trauma team and a team of highly trained paramedics who are
employed by the service. The helicopter fleet and staff teams are based at a purpose built centre at Durham Tees Valley airp
Our current overall judgement

Great North Air Ambulance Service was meeting all the essential standards of quality and safety.

The summary below describes why we carried out this review, what we found and any action required.

Why we carried out this review

We carried out this review as part of our routine schedule of planned reviews.

How we carried out this review

We reviewed all the information we hold about this provider, carried out a visit on 6 December 2011 and talked to staff.

What people told us

Due to the nature of the service provided by the air ambulance of transporting time-critically injured or ill patients to specialist trauma hospitals, Great North Air Ambulance Service (GNAAS) cannot seek the views of patients using the service at the time. The service does follow up on patient progress with the hospitals concerned and receives many thank-you cards and messages from people and their families who have used the air ambulance. The website for the Great North Air Ambulance Service also shows how this service which is entirely funded from public donations, has helped many people receive high quality pre-hospital critical care.

What we found about the standards we reviewed and how well Great North Air Ambulance Service was meeting them

Outcome 04: People should get safe and appropriate care that meets their needs and supports their rights

Overall Great North Air Ambulance (GNAAS) met this essential standard. This was because GNAAS had introduced and implemented measures to reduce the risk of patients receiving unsafe or inappropriate care, treatment or support, by making sure that their needs were assessed, and plans put in place to deliver the support they needed.

Outcome 07: People should be protected from abuse and staff should respect their human rights

Overall Great North Air Ambulance (GNAAS) met this essential standard. Patients were protected and safeguarded from abuse, or the risk of abuse.
Outcome 08: People should be cared for in a clean environment and protected from the risk of infection

Overall Great North Air Ambulance Service (GNAAS) met this essential standard as patients who used the service were protected by effective arrangements for the prevention and control of risks from infection.

Outcome 09: People should be given the medicines they need when they need them, and in a safe way

Overall Great North Air Ambulance Service (GNAAS) met this essential standard. There were appropriate arrangements in place for obtaining, recording, handling, using, safe keeping, dispensing, safe administration and disposal of medicines.

Outcome 11: People should be safe from harm from unsafe or unsuitable equipment

Overall Great North Air Ambulance Service (GNAAS) met this essential standard. Patients using the service and staff working for GNAAS were not at risk of harm from unsafe or unsuitable equipment. This was because GNAAS had systems and processes which made sure that equipment was properly maintained and used correctly and safely.

Outcome 14: Staff should be properly trained and supervised, and have the chance to develop and improve their skills

Overall Great North Air Ambulance (GNAAS) met this essential standard. Staff were supported and trained regularly and were competent to carry out their roles.

Outcome 16: The service should have quality checking systems to manage risks and assure the health, welfare and safety of people who receive care

Overall Great North Air Ambulance (GNAAS) Services met this essential standard. This was because the quality of the service was monitored and reviewed and the management of risks to patients and staff was thoroughly paid attention to.

Other information

Please see previous reports for more information about previous reviews.
What we found for each essential standard of quality and safety we reviewed
The following pages detail our findings and our regulatory judgement for each essential standard and outcome that we reviewed, linked to specific regulated activities where appropriate.

We will have reached one of the following judgements for each essential standard.

**Compliant** means that people who use services are experiencing the outcomes relating to the essential standard.

A **minor concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard.

A **moderate concern** means that people who use services are safe but are not always experiencing the outcomes relating to this essential standard and there is an impact on their health and wellbeing because of this.

A **major concern** means that people who use services are not experiencing the outcomes relating to this essential standard and are not protected from unsafe or inappropriate care, treatment and support.

Where we identify compliance, no further action is taken. Where we have concerns, the most appropriate action is taken to ensure that the necessary improvements are made. Where there are a number of concerns, we may look at them together to decide the level of action to take.

More information about each of the outcomes can be found in the *Guidance about compliance: Essential standards of quality and safety*. 
What the outcome says
This is what people who use services should expect.

People who use services:
* Experience effective, safe and appropriate care, treatment and support that meets their needs and protects their rights.

What we found

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<th>Our judgement</th>
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<tr>
<td>The provider is compliant with Outcome 04: Care and welfare of people who use services</td>
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<td>The staff team usually work during the house of 8am-4pm during winter months and there is a different shift system that operates in the summer months when the service works longer hours. We saw the staff based in the control room where the duty doctor, pilot and two paramedics were monitoring the system that brings in potential calls to the air ambulance. Staff explained that each paramedic rotates for about an hour at a time as they monitor all calls on screen that come into the North East Ambulance Service (NEAS) where they can potentially pick out possible air ambulance calls for example, at a remote location or a vehicle accident. Staff also had an emergency red telephone that brought in any calls directly to the air ambulance from NEAS. Staff explained that the Rapid Response team, fire service or police may also call the air ambulance via NEAS as they know they have a swift response time with a doctor present. When a call comes in that the controller deems is applicable for the air ambulance, the pilot leaves to ready the helicopter whilst paramedics get their personal safety equipment and treatment bag before boarding. The Airways Point to Point radio system ensured paramedics maintained constant contact with control so messages can...</td>
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be relayed ahead to the trauma centre on the patients condition.

The service had an electronic system across the two locations for recording patient information. Whenever the helicopter or rapid response vehicle was used a paper form was completed that detailed incoming patient details from the ambulance service, and then specific details about patient observations and treatment given by the air ambulance crew before a signature of handover was obtained from the receiving hospital. These details were then transferred to a secure electronic system by the paramedics on return to the base. All patient records were seen to be securely stored in a locked cabinet in an office that was also locked. A system called "Call Connect" recorded the times that initial calls came into the service, the arrival and departure times at the scene and also hospital arrival time. The service also liaised closely with the North East Ambulance Service (NEAS) on a daily basis to inform them of staff on duty as well as other ambulance controls, the RAF and hyperbaric centre.

**Our judgement**

Overall Great North Air Ambulance (GNAAS) met this essential standard. This was because GNAAS had introduced and implemented measures to reduce the risk of patients receiving unsafe or inappropriate care, treatment or support, by making sure that their needs were assessed, and plans put in place to deliver the support they needed.
Outcome 07: Safeguarding people who use services from abuse

What the outcome says
This is what people who use services should expect.

People who use services:
* Are protected from abuse, or the risk of abuse, and their human rights are respected and upheld.

What we found

Our judgement
The provider is compliant with Outcome 07: Safeguarding people who use services from abuse

Our findings

What people who use the service experienced and told us
We spoke with three members of staff who confirmed they had been trained in the safeguarding of adults and children and knew how to report any concerns to the right authorities.

Other evidence
There was a safeguarding policy in place and staff we spoke with confirmed they knew the procedure for reporting any concerns. The online training was accessed through James Cook hospital at Middlesbrough. All the doctors working with the service had regular safeguarding training through their primary NHS post.

There was a clear system in place for the ordering, storage, usage and disposal of medication used by the service and a designated staff member was responsible for all medication monitoring.

Our judgement
Overall Great North Air Ambulance (GNAAS) met this essential standard. Patients were protected and safeguarded from abuse, or the risk of abuse.
Outcome 08: Cleanliness and infection control

What the outcome says
Providers of services comply with the requirements of regulation 12, with regard to the Code of Practice for health and adult social care on the prevention and control of infections and related guidance.

What we found

Our judgement
The provider is compliant with Outcome 08: Cleanliness and infection control

Our findings

What people who use the service experienced and told us
We saw a report from a recent infection control audit from the Royal Army Nursing Corps which had been undertaken at the service by a trained Infection Prevention and Control Nurse. The report used the Infection Protection Society environmental audit tool. Feedback in this report included "the helicopters were impeccably clean and well organised". There were no issues of concern in their report.

Other evidence
The service had a nominated infection control lead. This meant there was an accountable person to take responsibility for infection prevention and control.

The helicopter was cleaned after each job and we were told that when the aircraft was washed on the outside it was also deep cleaned inside and this occurred about once a week. Checklists were held for monitoring cleaning processes. Staff also had clear responsibilities for duties such as maintaining equipment and monitoring of medication which again were clearly recorded.

All medical supplies for use where stored in a clean area and checked to ensure items were in date. We saw that all surfaces were clean and that the stock room was tidy with no clutter.

We saw that medical device alerts were placed on the service’s Sharepoint electronic system which required staff to acknowledge and record any problem. This meant there was a clear record of any action taken of alerts and recalls.

We saw evidence that the practice had policies and procedures about cleanliness,
decontamination and infection control and staff were trained in infection control management.

During the visit we saw that staff wore personal protective clothing that included helmets and safety footwear.

**Our judgement**

Overall Great North Air Ambulance Service (GNAAS) met this essential standard as patients who used the service were protected by effective arrangements for the prevention and control of risks from infection.
Outcome 09:
Management of medicines

What the outcome says
This is what people who use services should expect.

People who use services:
* Will have their medicines at the times they need them, and in a safe way.
* Wherever possible will have information about the medicine being prescribed made available to them or others acting on their behalf.

What we found

Our judgement
The provider is compliant with Outcome 09: Management of medicines

Our findings

What people who use the service experienced and told us
One of the paramedics told us he was responsible for the management of medication at the location.

Other evidence
We saw that medicines were appropriately stored in locked facilities with controlled drugs also stored and monitored correctly.

The staff member told us that they regularly monitored the stock of drugs every month with a clear record of what had been used, what had been returned and destroyed. All drugs were obtained through James Cook hospital in Middlesbrough.

Staff told us of a new drug that was discussed during a recent Clinical Governance day for use in paediatric trauma. The team discussed this, decided it would be beneficial to the service and developed a clear training strategy to implement its use so that all staff would be aware of its introduction and usage.

Our judgement
Overall Great North Air Ambulance Service (GNAAS) met this essential standard. There were appropriate arrangements in place for obtaining, recording, handling, using, safe keeping, dispensing, safe administration and disposal of medicines.
Outcome 11: Safety, availability and suitability of equipment

What the outcome says
This is what people should expect.

People who use services and people who work in or visit the premises:
* Are not at risk of harm from unsafe or unsuitable equipment (medical and non-medical equipment, furnishings or fittings).
* Benefit from equipment that is comfortable and meets their needs.

What we found

Our judgement
The provider is compliant with Outcome 11: Safety, availability and suitability of equipment

Our findings

What people who use the service experienced and told us
We saw one of the aircraft on the ground. We were shown the layout of the working area in the aircraft by one of the paramedics and could see that equipment was safely and securely stored, was as easy to access as possible and all areas were clean.

Other evidence
The three helicopters used by the Great North Air Ambulance Service were managed and maintained by Multiflight, a company that manages the licensing, insurance, legal and accounting documents, flight planning, pilot allocation, aircraft cleaning, maintenance and engineering schedules. The helicopters and pilots were also regulated by the Civil Aviation Authority who audit the service once a year as well as Multiflight carrying out their own internal quality and safety audit processes. The pilot carried out daily safety checks and would be examined in this once a year. The pilot told us that they were responsible for ensuring the weather conditions were appropriate to fly and they maintained a constant link with meteorological information throughout their shift.

All the equipment within the aircraft such as defibrillators must also be tested by the Civil Aviation Authority to ensure it can operate safely in flight.

We saw a service schedule for the stretcher in use in the aircraft and there was a lease and servicing agreement in place for the defibrillator.
**Our judgement**

Overall Great North Air Ambulance Service (GNAAS) met this essential standard. Patients using the service and staff working for GNAAS were not at risk of harm from unsafe or unsuitable equipment. This was because GNAAS had systems and processes which made sure that equipment was properly maintained and used correctly and safely.
Outcome 14: Supporting staff

What the outcome says
This is what people who use services should expect.

People who use services:
* Are safe and their health and welfare needs are met by competent staff.

What we found

Our judgement
The provider is compliant with Outcome 14: Supporting staff

Our findings

What people who use the service experienced and told us
We spoke to four staff from the service and one of the pilots employed by Multiflight who operated the helicopter. Staff told us the doctors were very proactive in sharing their knowledge with the paramedics. “You are working with doctors and that’s a really beneficial thing”. Staff told us they really enjoyed working for the service and felt valued by the support and training opportunities they were given.

Other evidence
The service had nine full-time paramedics and a team of 18 doctors who worked in trauma centre hospitals within the region and who worked for GNAAS on a roster system. The pilots of the helicopters were separately employed by a company called Multiflight who provided the management and maintenance of the helicopters and pilots. There was a registered manager who was the Director of Operations based at Durham Tees Valley and a unit manager based at each location. The service also had a Operations Governance Manager based at the Langwathby site. There were three relief paramedics who could cover shortfalls due to sickness.

All paramedics undertook a Helicopter Emergency Medical Service (HEMS) course that had a medical module component as well as aviation training that included procedures to follow on the aircraft as well as navigation that staff must undertake to assist the pilot in landing procedures. The HEMS course also included training in understanding the roles of other emergency services and was renewed every three years. Staff also received training in pre-hospital anaesthesia which was a two day course based at the location. All paramedic staff were undertaking a 2 year degree course at the University of Teesside in paramedical science.
Staff told us they had a thorough induction into the service that included a six month stint as "3rd man" on calls until the staff and the service were happy for the paramedic to "fly solo".

We looked at two staff training records which showed HEMS course certificates, fire training and other statutory and clinical training records. Staff also told us they recorded their training to ensure they could show continuous professional development to maintain their state paramedic registration requirements.

One of the paramedics had a role in managing training which included ascertaining the suitability of training requests and planning sessions for the bi-monthly Clinical Governance Days. There was also a consultant anaesthetist who was the clinical director who led training sessions. Staff told us these events were a mixture of staff meeting, training sessions, guest speakers and records were seen of minutes. Staff told us that if they could not make a Clinical Governance day where training was held on a piece of equipment for example then they were shown this when they were next available so all staff were up-to-date.

Staff also told us they had a regular appraisal process with the unit manager where they could discuss any issues that included any training needs.

The service operated a thorough debriefing system and staff said this process was always "blame free" and that "listening to debriefs really make you think about the challenges in flight". The debrief process also involved the pilot so any issues around navigation or in flight could be discussed.

Our judgement
Overall Great North Air Ambulance (GNAAS) met this essential standard. Staff were supported and trained regularly and were competent to carry out their roles.
Outcome 16: Assessing and monitoring the quality of service provision

What the outcome says
This is what people who use services should expect.

People who use services:
* Benefit from safe quality care, treatment and support, due to effective decision making and the management of risks to their health, welfare and safety.

What we found

| Our judgement |
|---------------|--------------------------------------------------|
| The provider is compliant with Outcome 16: Assessing and monitoring the quality of service provision |

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<td><strong>Other evidence</strong></td>
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<td>The service had done some work on a patient survey and were exploring using their website as a method of obtaining direct patient feedback from people who had used the air ambulance service.</td>
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<td>The service had links with the Northern Trauma Network and other professional organisations such as Teesside University to let staff access continuous professional development.</td>
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<td>The debriefing process enabled the service to ensure that both patient care and aviation issues were discussed after each job to learn from experiences and to immediately address any issues of risk. Staff said &quot;Has everything been done that could have been done?&quot;. Staff also told us that anything that arose from debriefing was discussed in the regular Clinical Governance days.</td>
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<td>The service also had an adverse events management and exception reporting system</td>
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where the date an issue was raised, the action taken by the service and the progress on it were clearly reported. These were given a risk rating for priority action. The Operations Governance manager for the service told us it was his responsibility to check the progress of any incident.

**Our judgement**

Overall Great North Air Ambulance (GNAAS) Services met this essential standard. This was because the quality of the service was monitored and reviewed and the management of risks to patients and staff was thoroughly paid attention to.
What is a review of compliance?

By law, providers of certain adult social care and health care services have a legal responsibility to make sure they are meeting essential standards of quality and safety. These are the standards everyone should be able to expect when they receive care.

The Care Quality Commission (CQC) has written guidance about what people who use services should experience when providers are meeting essential standards, called Guidance about compliance: Essential standards of quality and safety.

CQC licenses services if they meet essential standards and will constantly monitor whether they continue to do so. We formally review services when we receive information that is of concern and as a result decide we need to check whether a service is still meeting one or more of the essential standards. We also formally review them at least every two years to check whether a service is meeting all of the essential standards in each of their locations. Our reviews include checking all available information and intelligence we hold about a provider. We may seek further information by contacting people who use services, public representative groups and organisations such as other regulators. We may also ask for further information from the provider and carry out a visit with direct observations of care.

When making our judgements about whether services are meeting essential standards, we decide whether we need to take further regulatory action. This might include discussions with the provider about how they could improve. We only use this approach where issues can be resolved quickly, easily and where there is no immediate risk of serious harm to people.

Where we have concerns that providers are not meeting essential standards, or where we judge that they are not going to keep meeting them, we may also set improvement actions or compliance actions, or take enforcement action:

**Improvement actions**: These are actions a provider should take so that they maintain continuous compliance with essential standards. Where a provider is complying with essential standards, but we are concerned that they will not be able to maintain this, we ask them to send us a report describing the improvements they will make to enable them to do so.

**Compliance actions**: These are actions a provider must take so that they achieve compliance with the essential standards. Where a provider is not meeting the essential standards but people are not at immediate risk of serious harm, we ask them to send us a report that says what they will do to make sure they comply. We monitor the implementation of action plans in these reports and, if necessary, take further action to make sure that essential standards are met.

**Enforcement action**: These are actions we take using the criminal and/or civil procedures in the Health and Social Care Act 2008 and relevant regulations. These enforcement powers are set out in the law and mean that we can take swift, targeted action where services are failing people.
## Information for the reader

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<td>Author</td>
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