



## LIVES STRATEGY 2020 - 2025

# INTRODUCTION

The geography and infrastructure of the greater Lincolnshire area creates challenges for delivering a timely and skilled response to medical emergencies that reduces suffering and saves lives. LIVES exists to help address these challenges.

We bring people, skills, equipment and knowledge to people suffering a medical emergency in Lincolnshire, be they ill or suffering traumatic injuries.

LIVES exists because our county is rural, our infrastructure is sparse, and yet our people suffer the same medical and traumatic emergencies every day as those living in cities or urban areas. We believe that no one in our county should suffer poorer outcomes from a medical emergency just because they live or work far from the healthcare facilities they need.

We are not an ambulance service. We bring together people in our communities right across Lincolnshire – in our villages and towns, our schools and universities, our businesses and industry – to give them the confidence and the competence to be able to respond quickly and skilfully when someone in their vicinity suffers a medical emergency.

That could be the local community first responder called to a neighbour with breathing difficulties, or the specialist pre-hospital doctor travelling 30 miles across the county on blue lights to medically induce a coma in a patient with a traumatic brain injury. Or it could be a trained member of the public who notices a patient in need, calls 999 and manages those first few minutes of the emergency until help arrives in a calm and confident manner.

More recently, it could be a doctor or practitioner

from our community emergency medicine team visiting a seriously unwell patient in their home to both diagnose and treat their illness so they don't have to go to hospital. In all of these cases, and many, many more, LIVES is responding to the needs of the people of Lincolnshire.

We are committed to excellence in all that we do. There is no organisation in the United Kingdom that delivers an emergency response that has the broad scope of practice that we do, or delivers at the scale at which we do it. We are recognised as being a leader in pre-hospital emergency medicine, and in the emerging world of community emergency medicine. We want to use our reputation and commitment to excellence to advance the cause of pre-hospital emergency medicine nationally, and to ultimately improve the skills of our people and the outcomes for patients.

Quality is central to our charity – training and equipping people with both the skills to make a difference and the confidence to use them. We want to be known as the people who do the right thing and do it well. Our governance systems are robust and allow us to evaluate and demonstrate that we're living up to the high standards that we set for ourselves, and to put things right quickly where change is needed.

Financial sustainability is important. We are a charity and we are dependent on the goodwill of our donors, supporters, commissioners and funders. We aim to diversify and strengthen our income streams to allow us to grow our impact and weather any future storms.

Community is central to all that we do... it takes a team to save a life.



# WHAT WE DO

It takes a team to save a life. And every member of that team is vital to delivering the best outcome for patients. That could be the bystander that witnesses a member of the public collapse in the street and calls for help, or an ambulance crew who back up a LIVES community first responder and take over the patient's care, or a fire crew who work alongside colleagues from LIVES and the ambulance service to extricate a seriously injured patient from a road traffic collision.

No one person, service or organisation has all of the skills to meet the needs of our most unwell or injured patients. Teamwork and collaboration are vital.

We work in partnership with the public, ambulance services, fire & rescue services, health providers, local councils, schools, education providers and businesses in our goal of ensuring the best emergency medical response for patients.



# OUR HISTORY

LIVES is 50 in 2020.

In 1970 two Lincolnshire doctors, Dr Michael Cooper from Nettleham and Dr Richard Harper-Smith of Tetford, separately were considering setting up a volunteer doctors group in Lincolnshire to respond to road traffic accidents and other traumatic injuries.

They recognised that there were people dying and suffering pain and trauma unnecessarily for a lack of skill and equipment to deliver life-saving care before they got to hospital.

The two doctors joined forces and an open meeting was convened, attended by over one hundred local doctors enthused by the idea of the service. As a result of this meeting, Lincolnshire Integrated Voluntary Emergency Service was born, or LIVES.

Originally LIVES had no funds and joining doctors bought their own equipment.

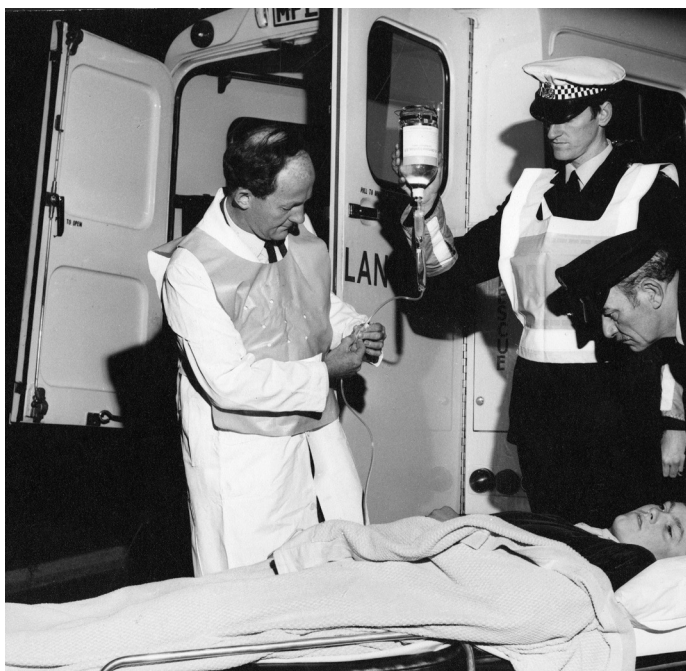
# 50

**LIVES.**

In the following years several companies and generous individuals raised funds which were spent on establishing a radio-communication system to improve the efficiency of calling out doctors. A mixture of telephones and two way radios were introduced with transmitters at Nettleham and Fulletby.



*Dr Cooper pictured early 1970s*



In 1972 the charity was registered for the first time and there was much publicity and public support in those early days, including many news articles and a multi-page feature in the Nursing Times and AA Magazines. In 1974 Dr Cooper became ill and resigned from the Chair whilst Dr Harper-Smith took over, the position confirmed at the 1975 AGM. Dr Cooper died in 1976.

In the early years doctors were dispatched via a radio system based in a side room at Lincoln County Hospital. However during the 1990s this became untenable and the radio system was becoming obsolete and expensive to run. An invitation from the Lincolnshire Ambulance Service to base LIVES Control within the ambulance control centre was accepted and LIVES control was moved to the ambulance headquarters at Bracebridge Heath.

In 1999 the Chief Executive of the Ambulance Trust invited LIVES to establish a First Responder service for patients suffering a suspected cardiac arrest. It was recognised that in these time critical emergencies it would benefit patients to be able to get a skilled and trained first responder more quickly than an ambulance might arrive. This was particularly important across the vast rural areas of the county. LIVES saw this as an extension of their existing service and readily agreed to participate which led to the LIVES "First Responder Scheme". The first responder scheme was evaluated the University of Sheffield School of Health Research (SchARR), which was published in 2004 and found

that "LIVES provide a response to 18% of Cat A calls ..... at a cost of only 1% of the emergency budget received by the Ambulance Trust." LIVES also joined forces with Lincolnshire Fire and Rescue to launch one of the first co-responding schemes in the country in which retained firefighters respond to medical emergencies. This is a model that is still leading today.

During the last 20 years LIVES has continued to grow. Our first responders attend a wide range of emergencies and our doctors have been joined by paramedics and nurses in responding to emergencies and delivering critical care interventions when called for.

LIVES now delivered education programmes to schools, communities and professionals, and attends a wide range of events providing medical support. In 2012 the charity moved to its own headquarters in Horncastle and in 2013 gained CQC registration. During 2019 the charity took another step forward when it was commissioned to deliver one of the first community emergency medicine services in the country.

However LIVES remains true to the same principles that were held by Drs Cooper and Harper-Smith back in 1970. We bring skills to the scene that save LIVES in our rural county.



## OUR ENVIRONMENT

LIVES is a Lincolnshire charity. We operate over the historical area of Greater Lincolnshire, an area that extends from the Humber to the Wash and covers an area of 7,000 square kilometres or 2,700 sq. miles.

The area is largely rural and is sparsely populated, with an average of 150 people per sq. km compared with 411 per sq. km across England. In the most sparsely populated district of East Lindsey there are only 80 people per sq. km. Rural areas make up 95% of the land area of Lincolnshire.

We have one city, Lincoln, and around 30 market towns and coastal resorts with a fairly even distribution of villages across the area. Our largest centres of population are Lincoln (115,000), Grimsby (134,000), Scunthorpe (80,000), Grantham (44,000), and Boston (41,000).

In total the area covered by LIVES has just over 1 million residents. Approximately 90,000 people live in areas in the top 10 per cent most deprived in the country. Almost 25 per cent of our population are aged over 65 and this is predicted to grow further in coming years.

The transport infrastructure in Lincolnshire is notably sparse, with the only motorway connection being the M180 into the north of the area. The A1 runs along the western edge of the county and

facilitates access to the north and south. In total there are 850 miles of A roads that connect the main service centres of the greater Lincolnshire area.

Our health system is complex, with multiple NHS trusts and commissioning groups and all subject to the challenges of funding. Lincolnshire is typical of many rural settings where 80% of rural residents live within 4km of a GP surgery, compared with 98% of the urban population and only 55% of rural households compared to 97% of urban households are within 8km of a hospital.

The north and north east are served by the hospital sites at Grimsby and Scunthorpe, with the remainder of the county accessing hospital facilities in Lincoln, Boston and Grantham. There is no major trauma centre in Lincolnshire and our most ill or injured patients will often need to travel out of county to receive emergency care and treatment.

The East Midlands Ambulance Service Lincolnshire division covers the same area as LIVES. The geography and infrastructure of the greater Lincolnshire area creates challenges for delivering a timely and skilled response to medical emergencies. LIVES exists to help address these challenges.



# WHAT WE BRING TO LINCOLNSHIRE

LIVES brings people with skills and the confidence to use them. We are experts in what we do and we share this knowledge willingly with others. It takes a team to save a life and that team is made up of many members.

We teach young people in schools lifesaving skills such as using a defibrillator, performing CPR, reacting to someone who is choking, or making an effective 999 call to summon help.

Our LIVES responders have acquired nationally recognised pre-hospital qualifications awarded by Quallsafe. We also award qualifications on behalf of Mental Health First Aid England and The ATACC Group.

Our LIVES medics are healthcare professionals that come to us with a grounding in healthcare be that as a doctor, nurse, paramedic or other allied group. However not all have the readymade skills and experience to immediately respond as a LIVES medic. We therefore invest in opportunities for them to expand their skills through both formal qualifications and in-house continuing professional development forums and scenario days.

It is important to us that our volunteers and employees hold formal qualifications. This not only allows us to evidence their skills and competencies in a nationally recognised framework, but also gives us the opportunity to reward our responders with qualifications that have value outside of our organisation. We are proud that for some of our people these skills and experiences are the beginning of a career in the health care professions.

Qualifications are important but confidence is too. Our responders train to ensure that they are confident to handle the difficult situations they may find themselves in and know how to summon help, both for the patient and for themselves.

Sometimes the greatest value we bring to a scene is our clinical leadership and experience, particularly when our experienced critical care or emergency medics arrive at a busy and complex situation.

## Competent – Confident – Current

We also bring equipment that allows our responders to provide high quality care wherever the patient may be.

For a community first responder this may be a defibrillator, monitoring equipment, oxygen and a small range of emergency drugs to manage, for example, a patient's pain in the initial minutes of an emergency. Or it might be the latest ultrasound device or point of care testing to allow a LIVES doctor to diagnose a patient at scene, potentially avoiding a trip to hospital.

We need to ensure that our responders always have access to the equipment that they need to do their job well. One of our priorities over the next five years is implementing a replacement programme for our defibrillators for community first responders and medics, and advanced life support monitors for our most advanced medic responders to ensure that they have access to the appropriate equipment for the work that they do.



## PARTNERSHIPS

It takes a team to save a life. That's why we value the partners that we work with across Lincolnshire.

LIVES works in partnership with the public, ambulance services, fire & rescue services, health providers, local councils, schools, education providers and businesses in our goal of ensuring the best emergency medical response for patients.

Our primary relationship is with East Midlands Ambulance Service. LIVES responders attend medical emergencies across the county on behalf of EMAS, most often beginning initial assessment and treatment before handing over to an EMAS crew. The teamwork between our people is based on mutual respect and trust.

We are very proud to have worked with Lincolnshire Fire & Rescue for more than 20 years of delivering co-responder services in the county. Co-responders are retained firefighters who are also trained as LIVES responders to attend medical emergencies and operate under our clinical governance. In many areas our LIVES responders and LFR co-responders train together and coordinate their activities for the benefit of the whole community.

More recently we have begun working closely with other parts of the NHS as we recognise that our emergency medicine skills have a wider application. Our Falls Response teams work in partnership with community health and wellbeing services to ensure that patients receive ongoing assessment and care with the aim of reducing their risks of falling in the future.

Our Community Emergency Medicine Service works with hospitals, GPs, hospices and community services to make sure that the patient accesses healthcare pathways that are appropriate for their needs.

By working with our NHS partners we can improve outcomes for patients and reduce demand for health services.

No two emergencies are the same and we're proud to work with a wide range of other organisations to respond to patients needs including Lincolnshire Police, County and District councils, military personnel, regional air ambulances, HM Coastguard, rescue services and members of the public.

We are one life-saving team.



# **IT TAKES A TEAM TO SAVE A LIFE - OUR STRATEGIC OBJECTIVES**

Lincolnshire should be a safe place to suffer a medical emergency. No one in our county should suffer unnecessarily just because they live in a rural area where the geography makes it more difficult to access emergency health care.

Our contribution is to deliver excellent pre-hospital emergency medicine to our communities.

Over the next five years we will:

## **1. Understand our impact**

We know we make a difference but measuring that is sometimes difficult. We will improve our data collection and adopt new measures to demonstrate the difference that we make. We will work with research partners to build an evidence base for the effectiveness of our emergency response activity. We will use this information to continuously improve the quality of care that we deliver to people in our communities.

## **2. Grow our impact**

We want every community in Lincolnshire to have access to our response. We will increase the number of LIVES responders in operation across Lincolnshire with targeted recruitment in areas where there is less coverage. We will invest in the skills of these responders so they can meet the needs of their community. And we will identify opportunities to use our skills in different ways to support people in medical need.

## **3. Focus on quality**

We strive to be the very best at everything that we do. Our work is always based on evidence and we focus on delivering quality service and care – in our clinical activity, our training, and the knowledge that we provide. We inspire and encourage all of our people to be the very best that they can be at their chosen level.

## **4. Financial sustainability**

We will develop and consolidate income streams that support the charity to deliver our aims. We will ensure that we have adequate reserves to weather unpredictable circumstances. And we will be transparent with our supporters, customers and funders so they are clear on how we spend the funds that they trust us with.

## **5. Excellence in governance**

Doing the right thing is important to us, even when that is difficult. We will maintain robust and structured processes in both clinical and charity governance. We will ensure that we are compliant with all regulatory requirements and that we are a model of best practice in both leading volunteers and delivering pre-hospital emergency medicine.

## Our Values

**Integrity** - Our strength comes from working together and with a commitment to doing the right thing, even when it's difficult

**Community** – We are a community of people united around a common purpose to support the communities in which we live

**Excellence** – We strive to be the very best we can be in whatever we do and to give all of our people the opportunity to flourish

# DELIVERING OUR STRATEGY



### Why is this important?

Every year there are around 30,000 out of hospital cardiac arrests across the UK, but sadly less than 1 in 10 people survive. For every minute defibrillation is delayed, the chances of survival fall by approximately 10%. (Resuscitation Council UK, 2015) The rurality within Lincolnshire means that achieving early defibrillation needs public involvement, this is where minutes really do matter.

A population widely trained in CPR has the potential to double survival rates. Evidence from other countries suggests that providing training in CPR to members of the public makes a significant impact and improves patient outcomes for those who suffer a cardiac arrest. Training in CPR/AED has been included in the school curriculum in Scandinavian countries such as Norway and Denmark for over 10 years and there has been a steady improvement in patient outcomes (Global Resuscitation Alliance, 2018).

Therefore, knowing how to deliver safe and effective CPR is a basic skill that can save lives and one which is already taught to school-aged children in many parts of the world

### What will we do?

Every young person in Lincolnshire should have the opportunity to learn lifesaving skills before they leave school. Our schools partnership programme will be made available to every school in greater Lincolnshire every year.

Learning doesn't finish when you leave school. We will work with community groups, sports clubs, faith groups and other organisations, as well as at community events to give every person who lives in Lincolnshire the opportunity to learn lifesaving skills.

Some people will want or need more than the basic skills so we will provide formal first aid and pre-hospital training with nationally recognised qualifications to business, industry and education facilities.

Early defibrillation is an important part of the Chain of Survival in cardiac arrest. We will support communities to acquire community public access defibrillators (CPADs) including advising on the best location to ensure availability and access. We will also assist them to maintain these CPADs and ensure that they are available for use when they are needed.

### How will we measure success?

- We will train at least 20,000 people in bystander CPR every year.
- Over a five year period we will train 100,000 people in bystander CPR or basic life support skills.
- CPADs under our management will be available to their communities 24 x 7 within communities with a minimum of 98% availability

*Kragholm K, Wissenberg M, Mortensen RN, Hansen SM, Malta Hansen C, Thorsteinsson K, et al., (2017). Bystander efforts and 1-year outcomes in out-of-hospital cardiac arrest. N Engl J Med. 376:1737-47*

*Resuscitation Council UK (2015). Resuscitation Guidelines: Adult basic life support and automated external defibrillation. Accessed <https://www.resus.org.uk/resuscitation-guidelines/adult-basic-life-support-and-automated-external-defibrillation/>*

*Global Resuscitation Alliance (2018). Improving Survival from Out-of-Hospital Cardiac Arrest "Acting on the Call" <https://www.globalresuscitationalliance.org/resources/>*

### Why is this important?

LIVES exists because our county is rural, our infrastructure is sparse, and yet our people suffer the same medical and traumatic emergencies every day as those living in cities or urban areas. We believe that no one in our county should suffer poorer outcomes from a medical emergency just because they live or work far from the healthcare facilities they need.

LIVES Responders have two key purposes.

Community First Responders get to patients quickly within their own communities and focus on doing the 'basics' well. Our responders are trained and equipped to respond to life-threatening emergencies that are time critical. Although doing the basics ensures the patient is alive by the time the rest of the wider team arrives, our responders go well beyond the simple basics.

Medic Responders have the same skills as carried by a typical ambulance paramedic but due to being embedded in their community can deliver these skills quicker such as providing advanced patient assessment, pain relief and even discharge on scene where appropriate.

A small cohort of highly trained and experienced Medic Responders can bring the skills of the Emergency Department or Intensive Care Unit to the patient's side. Delivering time-critical, life-saving interventions at scene and often supporting the patient during their journey to hospital. In a large rural county like Lincolnshire these interventions can save lives.

### What will we do?

Our aspiration is to ensure that every person in Lincolnshire who suffers a medical emergency has access to a LIVES response. This will require a significant growth in the number of LIVES responders in our communities and so it is unlikely that we will achieve this during this strategy period.

- Increase the number of community first responders by 100 per year and ensure they are spread strategically across the whole county
- Increase the skills of our medic responders to deliver a critical care or enhanced response across the county
- Work with educational establishments to deliver enhanced care development opportunities for healthcare professionals within the County
- Recruit an army of Level 1 responders in every community who attend local cardiac arrests within minutes and deliver basic life support
- Implement an equipment replacement programme to ensure that all responders have access to a defibrillator or advanced life support monitor that is suitable for their level of responding and allows us to extract rescue data to inform our quality improvement programme.

### How will we measure success?

- We will see year on year increases in responder availability and be able to map this across the county to target future recruitment
- We will recruit 100 new Level 1 responders across the county each year. Ultimately 80% of Lincolnshire residents should live within five minutes of a Level 1 responder
- We will replace 15% of our defibrillator estate each year

## Why is this important?

The needs of our community are changing. The average age of our population is increasing, has more complex health needs, and more patients are living safely in the community who might have been in hospital or nursing homes in the past.

Emergency medicine is evolving. Equipment and diagnostics that were only available in a hospital in the past are now portable and connected. We can safely diagnose and treat patients in the community that would have had to go to hospital previously.

LIVES responders have skills that can help patients. That may be a community first responder crew attending a patient who has fallen at home, or it may be a highly trained doctor or practitioner visiting an unwell patient and delivering advanced assessment, care and treatment that means they can remain safely in their own home. There are many opportunities for us to use our emergency response skills in a community setting to benefit patients.

If we can ensure safe outcomes for patients within their own homes; this will have a beneficial effect on the wider healthcare system by reducing demands on hospitals and other services. Where we refer a patient we aim to get them to the right point of care first time every time.

## What will we do?

LIVES Community Emergency Medicine Service will ensure that the patients it sees are able to access care that is appropriate and effective.

Our Falls Response Partnership will ensure that patients that fall are attended quickly, assessed effectively, and supported to access appropriate onward services.

We will work with providers of healthcare across the Lincolnshire system to develop innovative career pathways based that will attract and retain skilled clinicians to live and work in Lincolnshire, including fellowship and other education opportunities.

We will explore other opportunities to use our unique skillset in pre-hospital emergency medicine to deliver new models of clinical care in Lincolnshire.

We will always have a view on emerging practice and how it can be applied to our county, including working in partnership with others, both in Lincolnshire and beyond.

## How will we measure success?

- We will increase the number of patients that we see and treat via all of our CEMS services
- We will attain a minimum of 95% service availability
- We will recruit and retain qualified and skilled to maintain 100% staffing in services

## Why is this important?

LIVES operates in an environment that has inherent risk, for our responders, our patients and the charity itself. Our governance processes seek to understand this risk and mitigate it wherever we can.

We are subject to regulation from a number of bodies including the Charity Commission, Care Quality Commission, Information Commissioner and the Fundraising Regulator. We welcome the scrutiny and strive to demonstrate best practice in all areas.

However we know that sometimes things don't always go well and mistakes are made. Where we have made mistakes or fallen short of the standards that others set for us or we set for ourselves we will always be transparent and honest about this and make all reasonable endeavours to put things right. We always seek to operate with integrity, doing the right thing even when that is difficult.

## What will we do?

Embed our values – we don't need to talk about them, they're just the way we do things around here and underpin all of our decisions and actions. We will encourage an environment where excellence can flourish and where people are given every opportunity to succeed.

Ensure that our underpinning standards around safeguarding, information governance, charity governance and fundraising standards meet or exceed all of the statutory requirements.

Continue to develop and review our risk management strategy to mitigate existing risks and anticipate and plan for emerging risks.

Develop a comprehensive audit programme so we learn, improve and develop our people and skills. Work with academic partners to develop an evidence base for the effectiveness of emergency response and community emergency medicine services.

## How will we measure success?

- Maintain an outstanding CQC rating
- We will demonstrate that our clinical audit programme improves the effectiveness of our services and identifies opportunities for learning
- 100% of our responders and employees will comply with all mandatory training requirements

### Why is this important?

LIVES is all about people. Our LIVES responders are very special individuals who choose to give up their time to help others, even when that is difficult. It's hard to describe a single quality that makes a good responder but we often say they just "get it".

We give our people skills and confidence so that when faced with an emergency they can respond. The quality of this training is paramount. Volunteer does not mean amateur. Our responders demonstrate their commitment to excellence every day, and we support them in their desire to succeed at their chosen level.

We mark our 50th birthday with the introduction of the Responder 50 agreement for our LIVES members. This sets out what we expect of our people as 'professional volunteers' and what they can expect from LIVES in return. The agreement establishes a new and structured relationship between the charity and our volunteers and underpins our planned future developments.

### What will we do?

- We will introduce role pathways that give a clear career pathway to our volunteers and employees
- We will ensure that LIVES responders access nationally recognised qualifications delivered by professional trainers
- We will support these national qualifications with an in-house CPD programme that provides unique learning opportunities to all responders at all levels
- We will focus on the development of wider skills including leadership, mentorship and skills to support mental health and wellbeing
- We will seek to recruit volunteers and employees who are representative of all of the communities we serve

### How will we measure success?

- 90% of our responders will maintain the required qualification to be online and able to respond at any time
- 75% of our responders and employees will access CPD beyond the minimum required training to maintain their role
- We will measure the satisfaction and confidence ratings of our responders in our survey of LIVES members and seek to improve these year on year

### Why is this important?

Like any organisation we need to pay our bills and invest back into our organisation. We also need to give confidence to all who rely on our services or support us that we will be here into the future.

Volunteer does not mean free, or even cheap. Our volunteers are professional and we invest in their skills. We also need to provide them with equipment and all the underpinning governance to ensure they're safe. To do this a predictable and sustainable way requires predictable and sustainable income streams.

### What will we do?

Develop diverse income streams so we are not reliant on a single source of funding to sustain the charity's activities.

Ensure we retain a strong financial position and that we increase our reserves in line with charity policy.

Look after our donors, supporters and customers. Building long term relationships in which they understand how we use their money for the benefit of our communities.

Increase our supporter database ensuring we have a range of supporters across different demographics and that we understand the ways in which they give and why.

Develop and deliver training to our business partners that meet their business needs and responds to the risks in their areas of operation.

Tell our story and the story of our people so that those who benefit from or support our services know the difference that we make to the people of Lincolnshire.

### How will we measure success?

- Increase the public profile of LIVES, both with the people of Lincolnshire and with key stakeholders including MPs and councillors.
- We will increase our social media following by 5% across all platforms and increase traffic to our website by 3% annually.
- Increase our supporter database by 10% annually, capturing both opportunities and donors
- Increase our repeat donors, across all income streams by 5% each year
- Increase our income from training by 7% and from clinical governance services by 10% each year.

“

I can safely say that becoming a responder is one of best things I've done. Helping people in their hour of need is such a special feeling.

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“

Your work gives us all strength in the spirit of human goodness. A million thanks, once again.

”

*Family member of LIVES patient*



“

The Community First Responders provided fantastic care for my daughter until the ambulance could arrive. They were amazing in every way. They cared for her and relaxed her. I was astounded to find out they were volunteers.

”

*Mother of LIVES patient*



“

We're doing this because we want to, not because we have to.

”

*- LIVES Responder*



**LIVES**

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