



By Email Only:

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East of England Ambulance Service NHS Trust
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Date: 13th July 2023

Our Ref: CWWTP/ZM/RIN 20041042

Dear Madam

CAMBRIDGE WASTE WATER TREATMENT PLANT RELOCATION PROJECT DCO APPLICATION REFERENCE WW010003

Application by Anglian Water Services Limited for an Order Granting Development Consent for the Cambridge Waste Water Treatment Plant Relocation Project – Relevant Representation by the East of England Ambulance Service NHS Trust (EEAST) Pursuant to Section 56 of the Planning Act 2008

We write in response to the Planning Inspectorates decision to Accept this application for an Order granting Development Consent on 24 May 2023, and note the timeline for registering as an ‘interested party’ and the making of relevant representations by 23:59 on 19 July 2023.

EEAST is an **INTERESTED PARTY** in this planning process, operating in close association with the Cambridgeshire & Peterborough Integrated Care System (ICS), along with blue light partner organisations such as Cambridgeshire Constabulary and Cambridgeshire Fire & Rescue Service.

EEAST has reviewed the DCO Application documentation and raises a non-statutory **HOLDING OBJECTION** on the following basis:

- Insufficient scoping work has been undertaken to date - to determine a suitable study area, baseline assessment & approach to identify the likely environmental, social & cumulative effects of the development on EEAST’s operations

- Insufficient measures are proposed to avoid, reduce, mitigate & compensate for the likely Project impact on EEAST's operations (summarised below) during the construction phase of the development
- Omission to include suitable DCO Requirements &/or Heads of Terms of Agreement, either via a Section 106 planning obligation or Deed of Obligation - to provide funding, new facilities provision &/ or other measures, as required, to increase the capacity, response capability & Project Preparedness for EEAST's staff, vehicle fleet and estate assets to mitigate & manage the impacts arising
- Omission to include suitable Terms of Reference, Membership or a Communications Strategy for a Transport, Community Safety, Health & Wellbeing Working Group - to be set up to inform & assist the management of relevant aspects of the construction, operational and decommissioning phases of the Project requiring a coordinated response from health & blue light partners, including EEAST, Cambridgeshire & Peterborough Integrated Care System (ICS) Cambridgeshire Constabulary and Cambridgeshire Fire & Rescue Service.

EEAST, together with the ICS, Police and Fire & Rescue Services is therefore keen to work with Anglian Water Services Ltd (AW) to address these omissions, secure and have implemented suitable mitigation and management measures either as DCO Requirements and/ or via a Section 106 planning obligation (or Deed of Obligation).

EEAST is pleased to confirm it is continuing to liaise with AW in order that the matters outlined above are addressed through a **Statement of Common Ground** – and as a forerunner to appropriate mitigation and management measures being secured through DCO Requirements and/ or a Section 106 planning obligation (or Deed of Obligation), in the event that a DCO is issued.

The intention is to reach this point by commencement of (or at an early stage during) the forthcoming Examination.

East of England Ambulance Service NHS Trust

EEAST is commissioned by Suffolk and North East Essex Integrated Care Board on behalf of all ICS's to provide emergency and urgent care services throughout Bedfordshire, Cambridgeshire, Essex, Hertfordshire, Norfolk and Suffolk, and transports patients to 17 acute hospitals amongst other healthcare settings, including within the Cambridge area covering the location of the WWTP Project.

EEAST covers an area of approximately 7,500 sq miles with a resident population of over six million people and employs approximately 4,000 staff operating from 130 sites who are supported by dedicated volunteers.

The 999 service is free for the public to call and is available 24 hours a day, 7 days a week, 365 days a year, to respond to the population with a personalised contact service when patients:

- Require rapid transportation with life threatening illness/injury or emergencies - category 1 and 2

- Present with lower acuity urgent and less urgent conditions - category 3 and 4 requiring clinical interventions
- Patients may be passed to 999 via other NHS health care systems, including NHS 111
- EEAST receives over 1 million emergency (999) calls per year and 800,000 calls for patients booking non-emergency transport.

EEAST also provides urgent and emergency responses to Healthcare Professionals requiring ambulance assistance, and inter-facility transfers between hospitals and other healthcare settings, where patients require treatment at alternative sites to their current setting.

Non-Emergency Patient Transport Services (NEPTS) is a commissioned service providing an essential lifeline for people unable to use public or other transport due to their medical condition. Currently this service is provided by EEAST for the Cambridgeshire & Peterborough ICS administrative area. These much-needed journeys support patients who are:

- Attending hospital outpatient clinics
- Being admitted to or discharged from hospital wards
- Needing life-saving treatments such as radiotherapy, chemotherapy, renal dialysis or DVT treatment.

Details of EEAST's service remit, priorities, staff, vehicle fleet and estate assets, service targets, and co-working relationship with other healthcare and blue light partners, along with its EEAST National Quality Requirements 2023-24, are set out for information at [Annex 1 & Annex 2](#).

Cambridge Waste Water Treatment Plant Relocation Proposals – Location & Project Overview

Location

The main development site for the proposed Waste Water Treatment Plant (WWTP) is located north east of Cambridge, and 2 km to the east of the existing Cambridge WWTP, sited on farmland north of the A14 and east of the B1047 Horningsea Road.

A new waste water tunnel is proposed to transfer flows from the existing Cambridge WWTP to the proposed WWTP, along with a new final effluent and storm pipeline installed on the western side of the proposed WWTP, crossing under the B1047 Horningsea Road and farmland before discharging via the outfall into the River Cam upstream of Baits Bite Lock.

A twin rising main is proposed to transfer waste water to the proposed WWTP from Waterbeach (the Waterbeach pipeline) located to the north, either via the existing works, or direct, subject to the rate of new housing construction at Waterbeach.

The twin rising main would be routed to the proposed WWTP via farmland, crossing under the existing railway and River Cam east of Waterbeach, and under the river and A14 at a further point to the south.

Project Overview – Scheme Components Summary

It is noted following review of AW's Environmental Statement (ES) that the proposed WWTP would comprise of the following key elements:

- An integrated waste water & sludge treatment plant
- A shaft to intercept waste water at the existing Cambridge WWTP on Cowley Road, & a tunnel/ pipeline to transfer it to the proposed WWTP & terminal pumping station – temporary intermediate shafts included to launch & recover the micro-tunnel boring machine
- A gravity pipeline transferring treated waste water from the proposed WWTP to a discharge point on the River Cam & a pipeline for storm water overflows
- A twin pipeline transferring waste water from Waterbeach to the existing Cambridge WWTP, with the option of a connection direct into the proposed WWTP when the existing works are decommissioned
- On site buildings, incorporating a Gateway Building with incorporated Discovery Centre, substation building, workshop, vehicle parking, electrical vehicle charging points, fencing & lighting
- Environmental mitigation, wildlife habitats, landscaping & landscaped earth bank enclosing the proposed WWTP
- Renewable energy generation via anaerobic digestion (part of the sludge treatment process to produce biogas) along with solar photovoltaic & associated battery energy storage system
- Ancillary development, including internal site access, utilities & connection to the drainage system
- New vehicle access to Horningsea Road (B1047) – to be utilised by HGV's transporting sludge into the site for treatment, along with other site generated traffic
- Horningsea Road access to incorporate the reconfiguration of the existing junction between the A14 eastbound exit slip road & Horningsea Road into a 4-arm signalised junction, also connecting to a new road to the facility
- Further construction phase works/ plant/equipment, including highway controls, accesses, signage, use of cranes, major road/rail/ river/ watercourse tunnelling works, piling works, pipelines, fencing, gates, security & safety measures, lighting, works compounds, welfare facilities, communication control & telemetry infrastructure

- Forecasted construction phase of 4 years over the period 2024 – 2028
- Decommissioning works to the existing Cambridge WWTP to cease its existing operational function, including the removal of pumps, isolation of plant, electrical connections & pipework, filling & capping of pipework, cleaning of tanks, pipes, screens & other structures, plant & machinery, works to decommission the potable water supply & works to restrict access to walkways, plant & machinery.

Construction Phase Impact Summary

The implementation of the WWTP would involve major construction processes, incorporating complex and specialised activities and equipment working in challenging locations and at depth, including under floodlights during the hours of darkness and during periods of low lighting levels within a range of weather conditions.

The EIA and associated DCO documentation makes the following project design and construction assumptions in relation to the construction programme, construction workforce, construction access/ traffic/ routeing, off site highway works locations and major accident and disaster considerations:

- A construction phase of up to 4 years over the period 2024 – 2028 for EIA purposes
- Up to 375 workers to be deployed - with % of workers to be sourced from the local labour market (living within a 60-minute drive time of the construction sites) to be determined
- Core construction working hours of 07:00 - 18:00 Mondays to Fridays & 08:00 – 16:00 on Saturdays, with no working on Sundays & Bank Holidays – 24-hour/ 7 day a week working for the following processes:
 - Tunnelling
 - Concrete pours, as required
 - Major infrastructure crossings including the railway & A14
 - 24 hour call out associated with the over pumping for the connection shaft
 - Deliveries, including Articulated Indivisible Loads (AIL's) to take place outside normal working hours
- An unspecified number of AIL based deliveries to transport access platforms, process tanks & pipe bridges
- 174 x HGV's forecasted to transport 1,312 m3 of hazardous waste
- Daily peak of 628 x HGV's, LGV's & cars, principally utilising the Horningsea Road (B1047) & A14, undertaking a range of haulage/ movements including

- Materials & construction equipment transportation to/ from the development sites
- Workforce transportation to/from the development sites
- Excavated material from the site of the WW transfer tunnel, Waterbeach Pipeline & final effluent pipeline to the WWTP Site
- Waste from the WWTP Site to licensed deposition sites in the locality
- Requirement for temporary road closures, diversions & traffic management systems, as necessary
- Major accident & disaster considerations noted – e.g. associated with potential tunnel collapse, landslip, use/ storage of chemicals, fuels & gas
- Anaerobic digester gases & flammable atmospheric operational contexts.

The ES at Chapter 19 (Traffic & Transport) and Chapter 21 (Major Accidents & Disasters) references proposed mitigation measures set out in the Code of Construction Practice (Appendix 2.1 & 2.2) which signposts to a range of 'Management Plans' to be prepared/ implemented as part of any DCO approval, such as a Construction Environmental Management Plan and Construction Traffic Management Plan, and concludes as follows:

- There are no likely significant residual effects in relation to traffic & transport receptors during the construction phase - neutral to slight impact predicted
- There are no expected significant effects arising in relation to major accidents & disasters.

These matters are considered further in the light of EEAST's specific operational requirements below.

Potential Impacts on EEAST Service Areas

Project Environmental & Social Effects

Review of the WWTP (Applicant's) Environmental Statement and related DCO documentation, indicate that the Scheme's potential impacts (effects) on EEAST's operational capacity, efficiency and resources (staff, vehicle fleet and estate assets) have not been baselined or sufficiently assessed or mitigated to date.

EEAST is therefore liaising with AW to ensure this omission is addressed by further information being prepared to respond to EEAST's concerns, as necessary, and to inform a Statement of Common Ground - to provide a robust basis for assessment of the DCO Application, and to assist the Examination.

In particular, EEAST wish to agree and secure suitable mitigation and management measures as part of the DCO Requirements and/ or via a Section 106 planning obligation

(or Deed of Obligation) and reflect this position within a Statement of Common Ground by commencement (or at an early stage) of the forthcoming Examination.

EEAST's principal areas of interest and concern are summarised below.

EEAST Principal Areas of Interest & Concern

Information for Inclusion Within Scope of the DCO Application Documents & Related Mitigation & Management Measures

The principal areas of Project interest which are likely to significantly impact on EEAST's operational capacity, efficiency and resources requiring necessary and appropriate mitigation and management measures are outlined below - in light of the information and assumptions presented in the DCO Application and associated DCO documentation.

Traffic & Transport Impacts & Highway Network Delay

It is evident that a major level of demolition and construction phase work involving large scale plant, equipment and machinery deployment/ use, engineering operations, waste material arisings/ deposition, import of construction material, HGV traffic generation along with road closure and route diversion/ management measures are envisaged - leading to significant highway network impact and delay from EEAST's perspective.

Information to determine the effect of increased HGV traffic, road closure, route diversion measures and transport/ road network management and its impact on EEAST's operational capacity, efficiency and resources is currently absent from the EIA and associated DCO documentation.

These impacts on EEAST's operational capacity, efficiency and resources therefore need to be presented and assessed, and reflected in an agreed Statement of Common Ground setting out appropriate mitigation and management measures to be secured/ implemented through DCO Requirements, and/ or within a Section 106 planning obligation or Deed of Obligation, as part of any Development Consent Order approval.

Articulated Indivisible Loads (AIL)

It is evident that a significant level of AIL movements (including police escort) and hazardous waste transit, are required to deliver construction phase components to access points linked to the WWTP operations.

Information to assess the nature, frequency, route management, reliance on police escort and expected time delays associated with AILs (and hazardous waste as appropriate) which are likely to directly impact on EEAST's operational capacity, efficiency and resources therefore needs to be clarified within the EIA and/ or associated DCO documentation.

This information should be presented and assessed, and reflected in a Statement of Common Ground setting out appropriate mitigation, management and monitoring measures to be secured/ implemented through DCO Requirements, and/ or within a

Section 106 planning obligation or Deed of Obligation, as part of any Development Consent Order approval.

Major Accidents & Disasters

A significant level and duration of demolition and construction phase work is envisaged, involving large scale plant, equipment and machinery deployment/use, hazardous and non - hazardous waste material handling, import of construction material, specialist construction/ engineering operations and processes, and product storage across the 4 - year construction period.

Information to determine the effect of the demolition and construction phase and its impact on EEAST's operational capacity, efficiency and resources is currently absent from the EIA and associated DCO documentation.

HSE's construction statistics and publications (for Great Britain) indicate that work related incidents, involving serious injury and fatalities, are statistically significantly higher for the construction industry as compared to the 'all industry' rate.

In the event of a construction phase accident or incident, appropriate procedures would therefore need to be put in place for emergency access, on-site triage, medical assessment and patient identification, stabilisation and transfer to an appropriate healthcare setting.

In addition, plans and contingencies for emergency access, on-site triage, medical assessment, patient identification, stabilisation, clinical information, safe and efficient handover to EEAST responders within operationally optimal attendance times (noting the delay risks above) which in urgent cases may require Helicopter Emergency Medical Services (HEMS) access, are considered necessary.

The incidence and impact of any potential significant or major accident (and any disaster) on EEAST and its HEMS partner operational capacity, efficiency and resources (including EEAST hazardous area response teams - HART) needs to be presented and assessed, and reflected in a Statement of Common Ground, with appropriate mitigation and management measures secured/ implemented through DCO Requirements and/ or within a Section 106 planning obligation or Deed of Obligation, as part of any Development Consent Order approval.

Population Increase, Health & Wellbeing

It is evident that during the construction phase a significant number of construction workers are required to implement the demolition and construction stages of the Project.

Information to determine the nature of the construction workforce, their home origin, health status, clinical dependencies, location of any temporary accommodation, which are factors likely to impact on EEAST's operational capacity, efficiency and resources, including its logistical response with healthcare partners, is currently incomplete and insufficiently assessed within the EIA and associated DCO documentation.

This impact information therefore needs to be presented and assessed, and reflected in a Statement of Common Ground, with appropriate mitigation and management measures

secured/ implemented through DCO Requirements and/ or within a Section 106 planning obligation or Deed of Obligation, as part of any Development Consent Order approval.

Joint Working With EEAST, Health & Blue Light Partners

Transport, Community Safety, Health & Wellbeing Working Group

In the light of the above, EEAST recommend that appropriate Terms of Reference, Membership and a Communications Strategy for a Transport, Community Safety Health and Wellbeing Working Group is established, potentially in advance of the Examination.

This would help to inform and assist the management of relevant aspects of the Project requiring a coordinated response from 'health and blue light partners', incorporating representatives from EEAST, Cambridgeshire & Peterborough Integrated Care System (ICS) Cambridgeshire Constabulary and Cambridgeshire Fire & Rescue Service.

Concluding Remarks

EEAST is an **INTERESTED PARTY** in this planning process, operating in close association with the Cambridgeshire & Peterborough Integrated Care System (ICS), along with blue light partner organisations such as Cambridgeshire Constabulary and Cambridgeshire Fire & Rescue Service.

EEAST is pleased to respond to the Cambridge Waste Water Treatment Plant Relocation Project which has been Accepted for Examination, and following review of the DCO documentation raises a non-statutory **HOLDING OBJECTION**, due to its omission to address EEAST's principal areas of interest and concern outlined above.

EEAST considers that the Project is likely to give rise to significant impacts (effects) on its operational capacity, efficiency and resources (incorporating staff, vehicle fleet and estate assets) which have not been baselined or sufficiently assessed or mitigated and managed by the Project to date.

The Project is therefore considered to adversely affect EEAST's ability to meet and deliver its targets and priorities (statutory duties) as a key healthcare and emergency services provider.

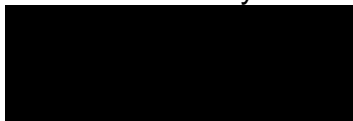
Identified impacts arising from the Project should therefore be addressed by employing appropriate mitigation and management measures - to be secured and implemented through DCO Requirements, and/ or via a Section 106 planning obligation or Deed of Obligation, as part of any Development Consent Order approval.

This approach ought to be reflected in a **Statement of Common Ground** to clarify the position reached and inform the forthcoming Examination process.

The measures ought to include a process to assist EEAST and its health and blue light partners to plan for and implement co-ordinated responses to construction phase (and any operational/decommissioning phase) Project impacts and incidents, to optimise patient outcomes.

We trust this is of assistance, and look forward to working with Anglian Water to satisfactorily address the points raised above, which would enable EEAST to lift its holding objection.

Yours sincerely



Zoë May
Head of Business Relationships

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ANNEX 1

EEAST KEY FACTS and SERVICE INFORMATION

This section summarises EEAST's service remit, priorities, staff, fleet and estate assets, and co-working relationship with other healthcare and blue light partners and service targets

Service Remit & Priorities

The East of England Ambulance Service NHS Trust provide accident and emergency services and non-emergency patient transport services across the East of England.

The Trust Headquarters is in Melbourn, Cambridgeshire and there are Ambulance Operations Centres (AOC) at each of the three locality offices in Bedford, Chelmsford and Norwich who receive over 1 million emergency calls from across the region each year, as well as 800,000+ calls for patients booking non-emergency transport.

The 999 service is part of the wider NHS system providing integrated patient care. Provision of 999 services is aligned closely with national and regional initiatives driven by:

- Sustainability and Transformational Partnerships
- Integrated Care System
- Integrated Urgent Care systems, ie NHS 111, Clinical Assessment Services, Urgent Treatment Centres, GP Out of Hours Services.

Additionally, regional Ambulance Trusts may collaborate closely with other ambulance services, the wider emergency services or wider system providers to deliver appropriate patient care.

To support the service transformation agenda, the key requirements are:

- To deliver the core response and clinical outcome standards as defined by the Ambulance Response Programme
- To fulfil statutory duties relating to emergency preparedness, resilience and response (EPRR)
- Optimisation of call handling and appropriate responses through virtual alignment of NHS 111/999 and call/CAD transfer between ambulance services
- Increase the percentage of lower acuity calls managed through “hear and treat” and “see and treat” options
- Utilise a virtual delivery model to support wider workforce integration for paramedics, call handlers and specialist staff with local urgent care delivery models

- Facilitate cross boundary working and the flexible use of ambulance service resources to support the development of regional Sustainability and Transformational Plans and Integrated Care Systems.

The 999 service is free for the public to call and is available 24 hours a day, 7 days a week, 365 days a year, to respond to the population with a personalised contact service when patients:

- Require rapid transportation with life threatening illness/injury or emergencies - category 1 and 2
- Present with lower acuity urgent and less urgent conditions - category 3 and 4 requiring clinical interventions
- Patients may be passed to 999 via other NHS health care systems, including NHS 111
- EEAST receives over 1 million emergency (999) calls per year and 800,000 calls for patients booking non-emergency transport.

EEAST also provides urgent and emergency responses to Healthcare Professionals requiring ambulance assistance, and inter-facility transfers between hospitals and other healthcare settings, where patients require treatment at alternative sites to their current setting.

Non-Emergency Patient Transport Services (NEPTS) provide an essential lifeline for people unable to use public or other transport due to their medical condition. These much-needed journeys support patients who are:

- Attending hospital outpatient clinics or other healthcare location
- Being admitted to or discharged from hospital wards
- Needing life-saving treatments such as radiotherapy, chemotherapy, renal dialysis or DVT treatment.

Service Assets

EEAST clinicians:

- Emergency Care Support Workers
- Emergency Medical Technicians
- Paramedics
- Specialist Paramedics
- Critical Care Paramedics.

Types and models of response:

- Community First Responder (CFR)
- Patient Transport Service (PTS)
- Clinical See and Treat
- Clinical Hear and Treat (telephone triage)
- Early Intervention Team (EIT)

- Rapid Response Vehicle (RRV)
- Double Staff Ambulance (DSA)
- Hazardous Area Response Team (HART)
- Specialist Operations Response Team (SORT)
- Helicopter Emergency Medical Service (HEMS), EEAST utilise 5 aircraft across 3 charities within the region
 - Magpas – 1 x aircraft from RAF Wyton
 - East Anglian Air Ambulance – 2 x aircraft form Cambridge and Norwich Airport
 - Essex and Herts Air Ambulance – 2 x aircraft form North Weald and Earls Colne

Ambulance Operations Centre (AOC) staff:

- 999 Call Handlers
- Emergency Medical Dispatchers
- Tactical Operations Staff.

EEAST support services staff cover all other corporate and administrative functions across the region.

Estates

The Trust is rolling out a Hub and Spoke network with up to 18 hubs to provide regional premises for delivery of operational responses to calls, flow of ambulance preparation via the Make Ready function (cleaning and restocking of ambulances) and despatch of ambulances to local spokes (reporting posts/response posts/standby locations). Support services such as workshop facilities, clinical engineering (medical equipment store and workshop), consumable product stores and support office accommodation are also provided from Hubs.

- Ambulance Station Central Reporting Post - A 24/7 - Permanent reporting base for staff and primary response location for one or more vehicles. Provision of staff facilities
- Ambulance Station Response Post - A primary response location, which includes staff facilities but is not a reporting base for staff.
- Standby Location - Strategic locations where crews are placed to reach patients quickly. Facilities used by staff are provided on an informal basis only by agreement with the relevant landowner.

Ambulance Stations in Cambridgeshire and Peterborough are currently located at:

Cambridge x 3	Huntingdon	Peterborough (Hub)	St Neots
Chatteris	March	Peterborough (ASRP x 4)	Whittlesey
Ely	Melbourn	St Ives	Wisbech

Vehicle Fleet

Workforce and Equipment

Approximately 4,000 staff and 800+ volunteers across 120 sites. Each resource has equipment specific to the operational function of the vehicle and skill level of the staff.

Specialisms

EEAST works collaboratively across our blue light partners and have joint working groups with Police and Fire Services across the region, working in partnership managing responses to incidents and undertaking joint exercises with our dedicated resources to prepare for specialist rescue, major incidents and mass casualty incidents.

EEAST is a Category 1 Responder under the Civil Contingencies Act, 2004, playing a key role in developing multi-agency plans against the county and national risk registers. EEAST also works closely with the Military, US Air Force, Royal Protection Service and the Stansted Airport, port authorities, Police, Fire and Ambulance services.

EEAST's Emergency Preparedness Resilience Response (EPRR) team lead on the Joint Emergency Services Interoperability Principles (JESIP) working in close partnership with all blue light agencies, the Coastguard and Local Authorities. Specialist resources work with the Police in counter terrorism and developing response plans in the event of a major incident.

EEAST are an integral part of the locality's resilience response sitting on a number of safety advisory groups, east coast flood working groups and hospital emergency planning groups.

Co-working Relationship with other Blue-Light & Healthcare Partners

EEAST is an integral part of the wider healthcare system working closely with the Cambridgeshire & Peterborough Integrated Care Board (ICS) to deliver emergency and urgent care and are key stakeholders in supporting wider healthcare initiatives.

Within Cambridgeshire & Peterborough, EEAST work with the ICS in delivering additional care pathways focussing on hospital admission avoidance, this is a partnership with the local acute providers and local authorities. EEAST operate Early Intervention Response vehicles and a Rapid Intervention Vehicle. These resources work collaboratively within the system to offer holistic care to patients whilst reducing pressure on Emergency Departments.

This is EEAST's response to the requirements of the NHS Long Term Plan, with the clear narrative that in order to bring the NHS into financial balance all NHS providers must find mechanisms to treat patients in the community and out of the most expensive care setting, which are acute hospitals. This not only saves the NHS critical funding, but it also improves patient outcomes.

EPRR and Specialist Operations teams routinely train with other blue light agencies in preparedness for major incidents such as terrorist attacks and major incidents with statutory training obligations to respond to local and national incidents.

In continuing to respond to the COVID-19 Pandemic, EEAST is working collaboratively with Private Ambulance providers, the Military, volunteer Ambulance Services (such as St John Ambulance and British Red Cross) and local Fire and Rescue Services, to increase its capacity and maintain service delivery to meet the additional demand.

EEAST Service Targets

All NHS organisations are required to report against a set of Core Quality Indicators (CQIs) relevant to their type of organisation. For ambulance trusts, both performance and clinical indicators are set as well as indicators relating to patient safety and experience.

NHS organisations are also required to demonstrate their performance against these indicators to both their commissioners and Regulators (NHS England).

It is important to note that EEAST is also measured on how quickly a patient is transported to an appropriate location for definitive care, often in time critical circumstances.

Failure to deliver against these indicators will result in a Contract Performance Notice and could result in payment being withheld, as prescribed in NHS Standard Contract 20/21 General Conditions (Full Length) GC9 9.15 (see next page for summary details).

Annex 2

EEAST National Quality Requirements 2023-24 Ambulance Service Response and Handover Times

Ambulance Service Response Times

National Quality Requirement	Threshold
Category 1 (life-threatening) calls – proportion of calls resulting in a response arriving within 15 minutes	Operating standard that 90th centile is no greater than 15 minutes
Category 1 (life-threatening) calls – mean time taken for a response to arrive	Mean is no greater than 7 minutes
Category 2 (emergency) calls – proportion of calls resulting in an appropriate response arriving within 40 minutes	Operating standard that 90th centile is no greater than 40 minutes
Category 2 (emergency) calls – mean time taken for an appropriate response to arrive	Mean is no greater than 30 minutes
Category 3 (urgent) calls – proportion of calls resulting in an appropriate response arriving within 120 minutes	Operating standard that 90th centile is no greater than 120 minutes
Category 4 (less non-urgent “assess, treat, transport” calls only) – proportion of calls resulting in an appropriate response arriving within 180 minutes	Operating standard that 90th centile is no greater than 180 minutes

For All Ambulance Service Response Times Indicators:

Method of Measurement:	See AQI System Indicator Specification at: [REDACTED] [REDACTED]
Timing of Application of Consequence	Quarterly for all indicators

Ambulance Service Handover Times

National Quality Requirement	Threshold
Following handover between ambulance and A+E, ambulance crew should be ready to accept new calls within 15 minutes and no longer than 30 minutes	>0

Guidance Dn definition:	See Contract Technical Guidance Appendix 2 at [REDACTED]
Timing of Application of Consequence	Ongoing