

**AMBULANCE PROCUREMENT SUB GROUP
MINUTES
12th FEBRUARY 2008
ILFORD AMBULANCE STATION**

Present :

Chris Vale	Head Of Operational Support
David Selwood	Corporate Logistics Manager
John Selby	Safety & Risk Manager
Jane Worthington	Clinical Adviser
Eddie Brand	Staffside Representative
Pete Hannell	North West Representative
Nick Pope	Acting Head of Fleet
Ian Lee	Staffside Representative
Andy Street	Safety and Risk

Apologies: Gary Ralph

Item		Action
1.	<p>Chair's opening comments:- Last (scoping) meeting November 07. Concentrated on vehicle specifications rather than equipment. Orders being placed for : 50 Mercedes Sprinters to replace LDVs Spec's need to be resolved asap to be ready for tender on conversion. Delivery late 2008/early 2009.</p>	
2.	<p>Minutes of last meeting Comments were as follows:-</p> <ul style="list-style-type: none"> • Mercedes demonstrator needs to go to each station. Need to do this as soon as possible. NP planning with Mercedes. • Visit to Berkshire cancelled as Iveco ambulance did not meet LAS specification. • Staffside to distribute and collect questionnaires and put in on The Pulse, requesting suggestions and comments on specification. 	NP IL
3.	<p>Specifications and Diagrams Concerns from IL that diagrams were out of date: *Crash helmets haven't been in doors for some time *LPL12 in wrong place CV reported that no-one he approached was able to provide an updated version. Suggested MacNeillies might be able to do so.</p>	CV
4.	<p>Vehicle Vehicle on-site for inspection to produce 1st draft List of Improvements. A number of items already tendered:</p> <ul style="list-style-type: none"> • Trolley bed (almost ready to go out) • Carry chair (including mechanised chair) <p>Mercedes Sprinter new version is longer and higher than previous.</p>	

	Width the same.	
5.	<p>Issues</p> <ul style="list-style-type: none"> • Vehicles have been on the road 2 years and IL hasn't heard any major complaints. Tweaking needed. • Rear step too high. Could have two doors with tail-lift loaded behind. Don't want to increase time to load and unload trolley bed. Side step too heavy and too high. Catches on cupboards unreliable – cupboards apt to opening. In larger slide-opening cupboards catches apt to stick. When slide-opening cupboards get warm plastic wrappings start to stick, which annoys crew and items get broken. • Wasted space in Bulkhead cupboards. DS suggested a “wine-rack”, but might cut into bag storage space. Need to build something to hold oxygen. • New oxygen regulator mechanism to be considered. • Escape hatch needed, possibly pop-out window in roof. • Lids on bins need an easy hand-opening mechanism and possibly a slow-closure mechanism. Bins currently left open, which defeats attempts at Infection Control. • All seams need to be welded or totally sealed on chairs. • Programme to replace all white straps – Infection Control. • Concern over vehicle height, but can't be any internal lowering. Floor has to accommodate wheel boxes. Could reduce height by removing a roof panel and sinking fan cowls into roof corrugations. • Which chair should Child Restraints be added to? • Sharps box came loose when a vehicle turned over. • Cuffs on handrail. People have slipped grabbing the rail and catching hold of a cuff. • Wheelchairs can't go on vehicle. Suggestion to explore fold-up chairs. Quick grab carry chair suggested, + mechanised chair. (Spec for mechanised chair ready for bid in for funding.) Mech. and manual carry chairs in same spec. • More equipment running off battery will create additional demand. Battery charging requires different electrical system. 240v output requested. • Radios need to be in locked cupboard. Crew need access and docking stations. 	
6.	<p>Storage needed for:</p> <ul style="list-style-type: none"> • Oxygen (emergency and non-emergency) • Entonox small cylinders – should be stored horizontally • Bags • Stabvests (crew will be wearing them much of the time) • Helmets • LP12 accessories • Charging unit 	

	<ul style="list-style-type: none"> • Infections pack • Disposable Blankets • Manual Handling kits • Crew's personal effects. 	
7.	<p>Other saloon issues</p> <ul style="list-style-type: none"> • Trolley beds tied into leasing arrangements. Must be replaced every 6 years. • Electronic PRFS a future consideration, want to future-proof vehicle. • Lighting –LEDs and halogen possibilities. Dirt builds up on cover of fluorescent lights - need cleaning. • LP12 cannot be moved to many other positions in the vehicle. New models are more compact and lighter. More lighting would be an advantage. • Alternative suction units to be considered. • Bay and floor fixings currently accommodate trolley beds. Mechanical chairs more complex. 	
8.	<p>Cab</p> <ul style="list-style-type: none"> • Slightly longer cab with more personal space (currently most important concern of Crew). • Different dash/console – will have a mechanism for over-riding sirens. • Built-in MDT speakers not currently possible due to 70s technology. 	
9.	<p>Outside</p> <ul style="list-style-type: none"> • Rear lights to be amended • Dirty linen storage could be in external cupboard • Metal body to be examined. Aluminium has to be cut out if it gets too badly scarred; composite build allows panels to slip out. (Met Police use composite vehicles). 	
10.	<p>Next steps</p> <ul style="list-style-type: none"> • Update current spec'. • Arrange demonstrator vehicles before April. • Continue to balance Station, Workshop and Repair requirements. 	
11.	<p>Other</p> <ul style="list-style-type: none"> • Technical and monetary considerations re remounting on existing chassis New vehicle and saloon to be considered. Two other potential chassis makes, but don't offer automatic transmission. • Mercedes can produce 30 vehicles/month. Conversion (MacNeillie's) runs at 3 or 4/week. 	

	<ul style="list-style-type: none"> • 130 LDVs. 50 will be replaced. 50 to be replaced by Urgent Care vehicles. Remaining vehicles to be scrapped over a period of time (some as training vehicles). • Vehicle utilisation to be improved by introduction of Distribution Units. • DS to consider trialling mechanised chairs on existing vehicles. 	DS
12.	<p>Equipment – bags</p> <ul style="list-style-type: none"> • Wasted space in bulkhead cupboard, could increase bag size • New bags need to consider weight issue. • FRU drivers use red oxygen bags, which are over-packed. • DS suggests square bags for oxygen cylinders. • DS setting up a group to look at bags. <p>Drugs</p> <ul style="list-style-type: none"> • Morphine audit just finished. • Make Ready routinely find opened drugs packs with broken seals. • Paramedic and technician drugs have to be stored separately as technicians can't use diazepam. • Vehicle based drugs can be left in sealed units and if seal not broken drugs don't need to be checked. • Morphine is the only drug to be locked away. PH suggests a lockable pouch to go in paramedic bag. • Separate places for locked cupboards in LDVs and Mercedes. <p>Chairs</p> <ul style="list-style-type: none"> • JS suggests need a chair transporter rather than a stairclimber. • Can trial chairs without tender but need an indication of funding possibilities. • DS will apply for funding again, turned down for past 3 years. • NP considered that a mechanical chair and trolley bed could both form a leasing agreement. 	DS
10.	<p>Date of Next Meeting 4th March 2008. Red Room at Ilford. 13.00-17.00</p>	