



# Your service, your say

We are seeking your views on our plans to become an NHS Foundation Trust.



## **Consultation document**

Help us make a difference to the lives of people in the east of England

Consultation: 4th October – 31st December 2010

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## Welcome and introduction

Thank you for taking the time to read our plans for becoming an NHS Foundation Trust. This booklet explains in further detail what a foundation trust is, how it will work and why it is the right move for us.

In order to build our vision for the future, we intend to create opportunities for more patient and public involvement by becoming an NHS Foundation Trust, ultimately helping to improve patient care. Becoming a foundation trust will be the best way to ensure our exciting plans to improve our services for people in the east of England become a reality.

Last year, we provided services for nearly two million patients across the eastern region and we place high quality patient care at the heart of everything that we do. We are moving towards a more tailored service for patients and away from a 'one size fits all' service, and as a foundation trust we will have the independence to implement these planned improvements more quickly, so that our patients can reap greater benefit sooner.

It also means we will have closer links with those who are most important to us – our patients, staff, volunteers and the communities we serve. And you can have a greater influence on services in your area by becoming a member, so please sign up and support your ambulance service.

From 4th October until the 31st December 2010 we will be consulting with patients, staff, volunteers, partners and members of the public about our plans and ideas. Throughout this document there are a number of questions we would like you to answer and give us feedback on.

Please give us your opinions and sign up as a member by completing the forms at the back of this document and returning them by 31st December 2010 or submitting it online at www.foundationtrust.eastamb.nhs.uk

We look forward to hearing your views and to welcoming you as a member of the new East of England Ambulance Service NHS Foundation Trust.



n Newton

Maria Ball Chair

## **About us**

Last year, the East of England Ambulance Service provided high quality care to nearly two million patients across the eastern region. Our vision is to be the recognised leader in emergency, urgent and out-of-hospital care in the east of England.

Established in 2006, we are the only NHS organisation providing direct health care across the entire eastern region and our patient satisfaction is one of the highest in the NHS at round 97%. While we are best known for our 999 emergency response we also provide a range of other services including:

- Primary care operations such as GP, district nursing and a range of out of hours services
- Scheduled transport services providing pre planned transport including patient transport, courier transport and acute neonatal transport services
- Special and partnership operations including resilience and emergency planning, working with charities and air ambulance services, community volunteers and the Hazardous Area Response Team (specially trained teams who provide the ambulance response to major incidents in hazardous environments to provide aid to casualties in situ).

The Trust currently serves a population of 5.8

million people covering Bedfordshire, Cambridgeshire, Essex, Hertfordshire, Norfolk and Suffolk. We employ 4,000 staff and more than 2,000 volunteers who all work towards ensuring that patients get the right treatment in the right place at the right time.

Our annual in turnover was £223m in 2009/10. Although we provide a range of services to non-NHS organisations, the majority of our income comes from within the NHS.



# What is an NHS Foundation Trust and why do we want to become one?

NHS Foundation Trusts were introduced in 2004, and there are now 130 in England. Being a foundation trust has significant advantages as they are free from central government control and more accountable to the communities that they serve.

NHS Foundation Trusts are organised in such a way that people from local communities, members of staff, volunteers, patients and partner organisations (such as local authorities), can have a much bigger say in influencing health services. Foundation trusts are established as public benefit corporations, modelled on co-operative and mutual traditions and are accountable to their members. More information on how this works in practice is detailed later in this consultation document.

We believe that as a foundation trust we will be able to work more closely with members of the public in our area, reflecting their needs better in the development of our services; ensuring that health care is timely and effective; making a major contribution to the wellbeing of people in our community; and having much greater local participation in addressing the difficult financial challenges ahead for the Trust and public sector generally.

We will have more freedom to look for better ways of meeting our own patients' particular needs and priorities - but we will still be closely inspected to make sure we achieve all NHS standards. An independent regulator called Monitor, along with the Care Quality Commission, makes sure that NHS Foundation Trusts meet the required standards.

We will have new powers to enter into legal and financial agreements that will strengthen relations with existing partners to improve patient care, helping us to forge new partnerships and enable us to develop services more effectively to meet the needs of our patients. We will also have more freedom to borrow and to invest to help develop these new services.

Another advantage of becoming a foundation trust is that we can give a greater say to our staff as we intend that they should all become members. Our staff are absolutely critical to the Trust's success - they are each an expert in their own field. As members of a foundation trust they will not only continue to provide services, but will have a greater input into service development and how the organisation is run. This will build on our existing partnerships with staff.

We have already been through a preliminary process which has shown us how we can become even better as we work towards foundation trust status. We are already very proud of our achievements, which resulted in us being one of the best performing ambulance service in the country last year. We know that becoming an NHS Foundation Trust will help us to continue to improve our performance for the benefit of patients and the public in the east of England.

## Recent achievements

- Despite an increase in the number of 999 calls during 2009/10 we met all our category A (potentially life threatening) call performance targets and improved on our performance from the previous year. An improvement was also seen in our category B (non-life threatening) call performance against a demand increase.
- We gained ISO accreditation for our patient transport services, courier transport services and Medicom (a call handling service for a range of service providers).
- We achieved a four year accreditation for our out of hours GP registrar training from the NHS East of England Multi-Professional Deanery.
- Our driving school was the first nationally to achieve Institute of Advanced Motorists accreditation for their advanced driver award.
- The roll out of the Hazardous Area
  Response Team (HART) means that
  specially trained paramedics can now
  work safely in difficult environments, such
  as a collapsed building and work
  alongside firefighters to provide aid to
  casualties in situ something never
  possible before.
- New stroke specialists have been appointed to make sure all of our staff can recognise a stroke and know what to do, ensuring diagnosis is prompt and that specialist centres are pre-alerted before patients are taken to hospital.

- We have invested in 136 new frontline vehicles and purchased £2.4m worth of medical devices, including eighty 12-lead defibrillators and 296 automated external defibrillators (portable devices that automatically analyse the heart's rhythm and treat potentially life threatening cardiac conditions such as a cardiac arrest).
- The Call Vision system, which was already in place in our Chelmsford control room, has been installed in Bedford and Norwich. This uses mobile phone masts or residential details to tell a dispatcher where the call is coming from before it has been answered, allowing us to allocate a vehicle as early as possible.
- We have introduced a single digital radio system across the region giving a more resilient radio network using the latest technology.



# Our plans for the future

## The challenges ahead

The Trust, like every NHS organisation, faces some challenging times ahead. There has been significant investment in the NHS in recent years, but the service now faces the need to balance the ongoing increase in demand for its services against future budgetary pressures. At the same time the need to focus on quality as well as performance is recognised in order to further improve the care patients receive.

We believe that the current system does not always provide the most appropriate response for patients. Not all patients need to, or want to, go to accident and emergency (A&E) when they call 999. There is a need, where possible and appropriate, to have more patients being treated at home or in community settings. This is often more clinically effective, more cost effective and provides a better overall experience and outcome for patients. While this means that patients will receive a higher quality of care, it will be different from what they currently get and expect.

The traditional response to 999 calls is to send an ambulance or rapid response vehicle, with a significant number being transferred to hospital for further care. Evidence from both A&E departments and the ambulance service suggest that it is only the minority of calls or attendances that genuinely warrant an emergency response and that there are real opportunities to care for patients differently and provide more effective services.

This 'one size fits all' approach needs to change so that the individual needs of patients can be met more effectively. This may include more advanced assessment and care over the phone, the ability to send a range of different responses to assess and provide care (through GPs, district nurses, social services and advanced paramedics) and the ability of ambulance staff to access and refer patients to other health and community services as an alternative to hospital.

So, the Trust needs to care for many more patients, significantly develop its staff and services, and provide higher quality care. And this needs to be done within the current challenging financial climate.

The Trust believes it is the best placed organisation in the eastern region to coordinate urgent and emergency care. The service is highly trusted and respected by patients and is a high performing and reliable 24/7 NHS emergency service. The Trust can ensure that patients who have urgent or emergency medical needs have immediate access to the NHS, get assessed quickly and competently, and through an integrated service, be provided with or directed to the appropriate care services.



## **Shaping the future**

Many people call 999 because they are not sure if it is an emergency and they do not know where to go for help. They often default to the two trusted and most accessible services, A&E departments and the 999 service.

The Trust should be able to direct them and help them receive the care they really need. Getting this right will mean patients receive the precise care they require more quickly and maximise the organisation's capacity to reach patients whose condition requires an emergency response even faster.

Central to achieving this is a three-yearprogramme of service re-design to develop and test different ways of working. To bring such change is going to require:

- Enhanced capabilities to assess 999
   callers via the phone and provide them
   with access to the right service for them
- Considering alternative access arrangements for urgent but non emergency calls, such as a 111 number
- Placing an emphasis on providing a clinical assessment and treatment rather than defaulting to stabilising the patient and transporting them to hospital
- A paramedic response only if face-to-face emergency response is required
- Building the skills of the workforce to be able to address patients needs in the community
- Providing and signposting to alternatives to accident and emergency, such as community services, other treatment facilities and other health professionals

Providing non emergency transport where necessary.

The aims of the change are to: deliver high quality patient-centred services; ensure more people calling 999 are treated without the need to go to hospital; improving patients' experience and quality of care; improving productivity and cutting costs; and developing different ways of accessing care and treatment.

The Trust is at an early stage of this programme and is currently reviewing how it delivers its services, and identifying areas which can be improved. As part of our public consultation we will be holding a series of meetings to discuss our plans and ideas with staff, volunteers, patients and the public, partner organisations and other stakeholders.



## **Question:**

Do you support our vision and our future plans?

# How we will be run

Becoming an NHS Foundation Trust means the way we operate will change. The population served by the Trust and its staff and partners will be directly involved in monitoring what we do and how services are developed.

We will achieve this by establishing a membership that is made up of local people, staff, volunteers and partner organisations and which reflects the diversity of the six counties we cover. By becoming a member you will be able to have a greater influence on how we are run.

The Board of Directors will be responsible for the day to day management of the Trust, monitor its performance and plan its strategic direction. The board will, in turn, be accountable to the Members' Council.

The members, whether public or staff, will also elect most of the Members' Council to represent them. These representatives will be called governors. A number of partner organisations like local authorities, healthcare and voluntary agencies will be invited to appoint the remainder. The Trust chairman will chair the Members' Council.

# Members and Members' Council

Membership to the East of England Ambulance Service NHS Foundation Trust is free. Being in a position to help local people and health services can bring much satisfaction. Join us as a member and you will be able to do some or all of the following:

- Elect governors to the Members' Council to represent you
- Stand for election as a governor of the Members' Council yourself
- Become actively involved in our work and help shape our future plans
- Advise on the needs and views of the local community
- Get a better understanding about what we do and help promote our work.

The Trust will provide support for the membership and governors which includes the role of a dedicated membership office which will be responsible for:

- Providing administrative support to ensure effective flow of information between the Trust, members and governors
- Co-ordinating the administrative process associated with the elections to the Members' Council
- Maintaining the membership database and providing high level reports on membership.

We are proposing to have two categories of membership – public and staff. We are aiming to have 3,000 public members and 3,000 staff members by the time we are authorised by independent regulator Monitor to become an NHS Foundation Trust in 2012. Following foundation trust approval, we would be looking to increase our membership so as to involve, and engage with, more members of the public, staff and volunteers.

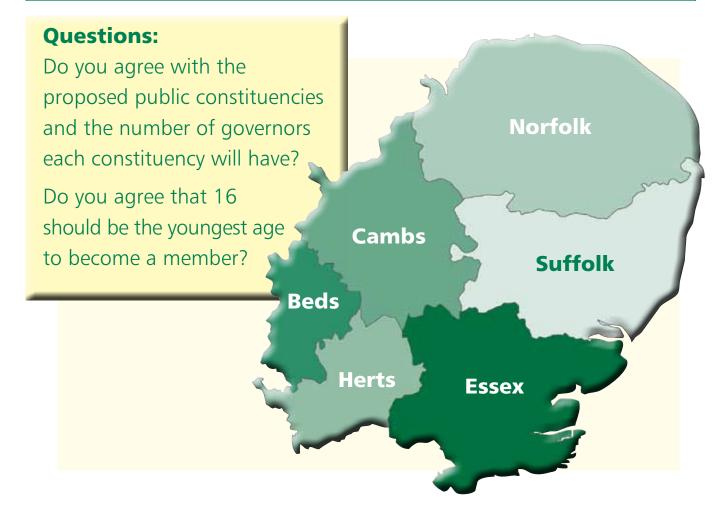
### **Members of the public**

We propose that you will be eligible to join if you are over 16 years old and live in one of the six counties covered by the Trust. We are proposing a minimum age of 16 to become a member as this is in line with Monitor's recommendations. As a member of the public you will be part of what is known as the 'public

constituency' of the overall membership.

We plan to have six constituencies based on the counties we cover. The total number of governors representing members of the public will be 13 and the number representing each constituency will be proportionate to the population in each (as detailed in the table below).

| Public constituencies          |                 |           |
|--------------------------------|-----------------|-----------|
| Constituency                   | Population 000s | Governors |
| Constituency 1: Bedfordshire   | 605             | 1         |
| Constituency 2: Cambridgeshire | 778             | 1         |
| Constituency 3: Essex          | 1,720           | 4         |
| Constituency 4: Hertfordshire  | 1,095           | 3         |
| Constituency 5: Norfolk        | 853             | 2         |
| Constituency 6: Suffolk        | 714             | 2         |



## Members of staff and volunteers

We are proposing an 'opt out' scheme so that all eligible staff and volunteers become members automatically unless they specify they do not wish to be. The alternative model is to have staff and volunteers 'opt in' to become member, but we are not proposing this as staff and volunteers are so vital in delivering services to patients and users and need to be involved in how the Trust develops and is run.

We propose that staff will be eligible if:

They are employed by the Trust under a contract of employment which has no fixed term, or has a fixed term of at least 12 months

or:

They have been continuously employed by the Trust under a contract of employment for at least 12 months

or:

A volunteer who has been working with the Trust for at least 12 months.

There will be four staff groups and the number of elected Members' Council representatives will be:

- Emergency operations 2
- Primary care operations and scheduled transport services 1
- Support services 1
- ▼ Volunteers 1



Do you agree that our staff and volunteers should be made members with the option to opt out?

## **Appointed governors – stakeholders and partners**

It is mandatory for every NHS Foundation Trust to have a number of governors from relevant public or voluntary organisations. It is proposed that appointed governors will be sought on the basis of their ability to assist the Trust in the delivery of its strategic objectives. Appointed governors will be sought from the organisations outlined below:

- One governor will be nominated from the lead commissioning primary care trust
- One governor will be nominated from the East of England Local Government Association representing the 52 local authorities across the six counties served by the Trust
- One governor will be nominated from Age UK
- One governor will be nominated from British Heart Foundation
- One governor will be nominated from a seldom heard group based on the outcome of the consultation. Examples of seldom heard groups are people with learning or sensory disabilities, those whose first language is not English, young people and traveller communities.

We are proposing to have an appointed governor from Age UK and the British Heart Foundation as our biggest service users are elderly and cardiac patients. As part of our public consultation we want to know if you agree with these proposals or if you think we should have appointed governors from other partner organisations such as the emergency services, other NHS organisations, universities and so on.



### **Questions:**

Do you agree with the proposed organisations to sit on the Members' Council as governors?

Have you got any alternative suggestions on which organisations should be represented on our Members' council?

Is there a particular seldom heard group you think should be represented?

# Members' Council and its responsibilities

We propose that the body that will represent members will be called the Members' Council and that it will be made up of governors who are elected by members or nominated by partner organisations.

The council will be expected to:

- ▼ Work closely with the Board of Directors
- Contribute ideas and advice on future planning
- Provide a link between the ambulance service and its communities, and represent the views of members
- Be responsible for reviewing the Trust's membership strategy, as well as recruiting members and encouraging them to stand as potential governors
- Be actively involved in advisory groups, sub-committees and other forums set up by the Trust

The council's legal responsibility will be to:

- Appoint the Trust's chair and non-executive directors
- Agree pay for non-executive directors including the chair
- Approve the appointment of the Trust's chief executive
- Appoint the auditor of the foundation trust
- Receive the annual report and accounts
- Be consulted on proposed changes to how services are delivered

We plan to have a total of 23 governors on our Members' Council, not including the chair.

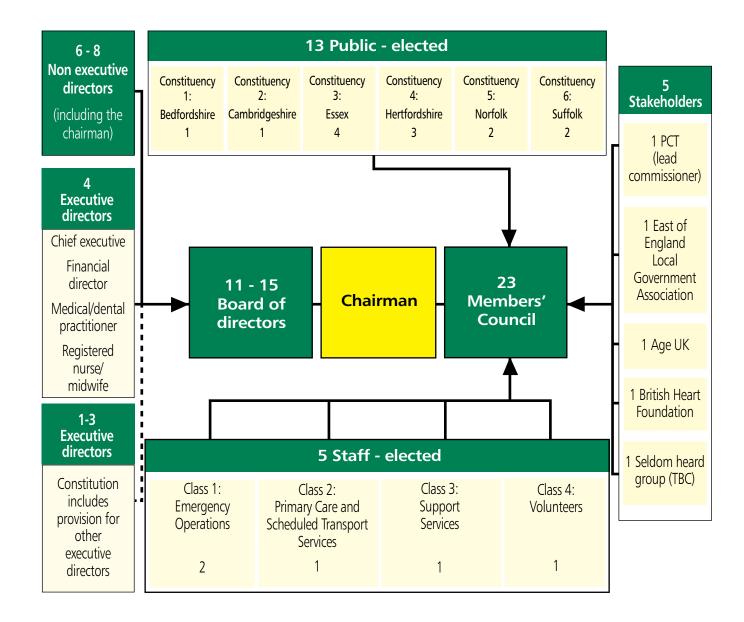
They will be made up of:

- Thirteen members of the public
- Five members of staff
- Five stakeholder representatives

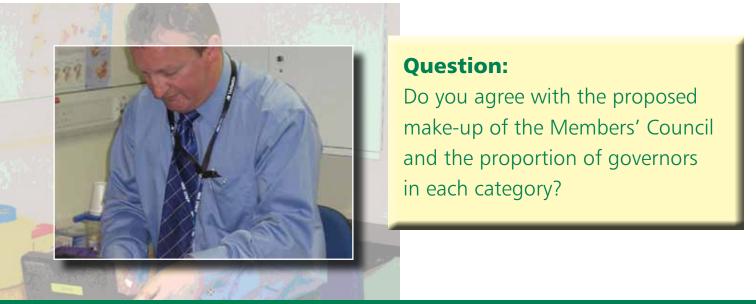
Elected governors may hold office for up to three years following their successful election and are eligible for re-election for a second term. An elected governor will not be able to hold office for more than six consecutive years.



## **Planned governance structure**



Governance arrangements will evolve to reflect the changes in how services are commissioned as we know primary care trusts will cease to exist from 2013.



# **Board of Directors**

The Board of Directors will be responsible for the day to day management and strategic development of the foundation trust.

We propose it should consist of:

- A non-executive chair
- Between five and seven non-executive directors
- Between five and seven executive directors including the chief executive, a finance director, a registered nurse or midwife and a registered dental or medical practitioner.

The chair and non-executive directors will be appointed by the Members' Council. To be eligible for appointment the individual must be a member of the public constituency. We are proposing that any non-executive director in post at the time of authorisation will remain in post for a minimum of 12 months or for the remainder of their term of service.

The chair of the Board of Directors will also chair the Members' Council. The chair will have the casting vote at the Board of Directors and at the Members' Council meetings, if required. A deputy chair and senior independent director will be appointed by the Board of Directors from amongst the non-executive directors in consultation with the Members' Council. A lead governor will be appointed by the Members' Council.



# What happens next?

### Tell us what you think

We would like your views on our proposals to become an NHS Foundation Trust. You have until Friday 31st December, 2010 to let us know what you think and you can do so by either completing the feedback form at the back of this document or by filling in the form online at www.foundationtrust.eastamb. nhs.uk

#### Become a member

Have a voice in how your local ambulance service is run. Simply complete the membership form at the back of this document or online at www.foundationtrust.eastamb.nhs.uk



#### Want to know more?

We will be arranging events across the east of England during the consultation period where you can speak to us in person about our proposals. The dates of these events are:

| Date               | Area            | Location   | Time      |
|--------------------|-----------------|--|-----------|
| 26th October 2010  | Bury St Edmunds | Moreton Hall<br>Community Association<br>& Club, Symonds Road,<br>Bury St Edmunds,<br>IP32 7EW | 2pm – 4pm |
| 2nd November 2010  | King's Lynn     | Assembly Room,<br>the Town Hall,<br>Saturday Market Place,<br>King's Lynn, PE30 5DQ            | 2pm – 4pm |
| 9th November 2010  | Bedford         | St Marks Church Hall,<br>Calder Rise, Bedford,<br>MK41 7UY                                     | 5pm – 7pm |
| 11th November 2010 | Cambridge       | Cambridge<br>Professional<br>Development Centre,<br>Forster Road,<br>Trumpington, CB2 9NL      | 5pm – 7pm |

| 16th November 2010 | Luton              | High Town<br>Community Sports &<br>Arts Centre,<br>Concorde Street,<br>Luton, LU2 0DJ                               | 5pm – 7pm |
|--------------------|--------------------|---|-----------|
| 18th November 2010 | Colchester         | Hythe<br>Community Centre,<br>1 Ventura Drive,<br>Colchester, CO1 2FG   | 4pm – 6pm |
| 23rd November 2010 | Peterborough       | The Salvation Army Centre, New England Room, 1203 Bourges Boulevard, Peterborough, PE1 2AU                          | 4pm – 6pm |
| 26th November 2010 | lpswich            | Red Cross Centre,<br>15 Chevallier Street,<br>Ipswich, IP1 2PF  | 4pm – 6pm |
| 30th November 2010 | Southend on Sea    | Salvation Army,<br>239 London Road,<br>Hadleigh, SS7 2RF  | 2pm – 4pm |
| 3rd December 2010  | Chelmsford         | Shire Hall, Hall Keepers,<br>The County Hall,<br>Duke Street,<br>Chelmsford, CM1 1LX                                | 2pm – 4pm |
| 6th December 2010  | Norwich            | Forum Norwich, The Cube,<br>2 Millennium Plain,<br>Norwich, NR2 1TF   | 5pm – 7pm |
| 9th December 2010  | Welwyn Garden City | Vineyard Barn,<br>Welwyn Hatfield<br>Borough Council,<br>Campus West,<br>The Campus, Welwyn<br>Garden City, AL8 6BX | 5pm – 7pm |
| 14th December 2010 | Watford            | Hunts Hall,<br>St Marks Church,<br>Leggatts Way,<br>Watford, WD24 5NQ   | 5pm – 7pm |

Please visit our website at **www.foundationtrust.eastamb.nhs.uk** for latest details of events as these may change due to unforeseen circumstances.

Online copies of our consultation document can also be found there. In addition we will also be holding a number of events for staff and partner organisations.

#### Foundation trust timeline

The broad timeline for our foundation trust application process is as follows:

October – December 2010 Public consultation

November 2011 Seek formal approval from the Secretary of State for Health for our

foundation trust application

Late spring 2012 Anticipated time for becoming a foundation trust

Please complete and detach the following forms and return in the pre-paid envelope provided or to:

Freepost RRRA-UHTH-CZYR, Foundation Trust Office, East of England Ambulance Service, Broomfield, Chelmsford, CM1 7WS

## **Your views**

| 1. | Do you   | support our vision and our future plans? (pages 5-6)  |
|----|--|---|
|    | ☐ Yes☐ No  | Additional comments   |
| 2. | -  | agree with the proposed public constituencies and the number of ors each constituency will have? (page 8)   |
|    | ☐ Yes☐ No  | Additional comments   |
| 3. | Do you   | agree that 16 should be the youngest age to become a member? (page 8)                                       |
|    | ☐ Yes☐ No  | Additional comments   |
| 4. | Do you   | agree with the general proposals for staff membership? (page 9)   |
|    | ☐ Yes☐ No  | Additional comments   |
| 5. | Do you agree that our staff and volunteers should be made members with the option to opt out? (page 9) |   |
|    | ☐ Yes☐ No  | Additional comments   |
| 6. | -  | agree with the proposed organisations to sit on the Members' Council as ed governors? (page 10)             |
|    | ☐ Yes☐ No  | Additional comments   |
| 7. |  | ou got any alternative suggestions on which organisations should be nted on our Members' Council? (page 10) |
|    | ☐ Yes☐ No  | Additional comments   |
| 8. | Is there   | a particular seldom heard group you think should be represented? (page 10)                                  |
|    | ☐ Yes<br>☐ No  | Additional comments   |

| 9.  |                   | agree with the proposed make-up of the Members' Council and the ion of governors in each category? (page 12) |
|-----|-------------------|--|
|     | ☐ Yes☐ No         | Additional comments  |
| 10. | What se           | ervice improvements would you like to see?   |
|     | Comme             | ents   |
| 11. |                   | anything else you would like to say about future plans around our tion to be an NHS Foundation Trust?        |
|     | Comme             | ents   |
| 12. | ☐ Bedf☐ Cam☐ Esse | fordshire<br>folk  |
| 13. | ☐ A m             | : (please tick box) ember of the public ember of staff artner organisation                                   |
|     | -                 | your feedback. As part of our public consultation we will be producing a                                     |

report which details the feedback we have given. As such we may use your comment in this consultation report, although anything we use will remain anonymous.

Please cut along the lines and return your feedback form in the pre-paid envelope provided or to: Freepost RRRA-UHTH-CZYR, Foundation Trust Office, East of England Ambulance Service, Broomfield, Chelmsford, CM1 7WS

## **Become a member**

You can either become a member online by following the foundation trust links at **www.foundationtrust.eastamb.nhs.uk** or filling out this form and posting it in the pre-paid envelope.

| Membership registration form  |   |
|---|---|
| Title: Dr  Mr  Mrs  Ms  Miss  | (please tick box)   |
| First name: Su  | ırname:   |
| Full address:   |   |
|   | Postcode:   |
| Telephone:  |   |
| Email:  |   |
| We would prefer to send you information about you would prefer to receive this by post, pleas | but the Trust and membership issues by email. If se tick this box. $\Box$ |
| The following few questions will help us ensu population we serve and will be treated in the  |   |
| Your gender is  M  F  (please tick box)   |   |
| Your date of birth is:  |   |
| Please state your ethnicity:  |   |
| ☐ White British   | Other Asian   |
| ☐ White Irish   | ☐ Black Caribbean Other Black   |
| ☐ Chinese   | ☐ Other White   |
| ☐ White & Asian   | ☐ Any other ethnic group  |
| ☐ White & Black Caribbean   | ☐ Prefer not to state   |
| ☐ Pakistani   |   |
| ☐ Other mixed background  |   |
| ☐ Indian  |   |
| ☐ Black African   |   |
| ☐ White and Black African   |   |
| ■ Bangladeshi   |   |

| Please indicate below how you might like to be involved as a member: (please tick box)   |
|--|
| ☐ Receiving regular information  |
| ☐ Attend meetings or events  |
| ☐ Consider standing for election to the Members' Council   |
| ☐ Become a volunteer   |
| ☐ Helping with surveys   |
| ☐ Taking part in discussion groups   |
| I would like to become a member of the East of England Ambulance Service NHS Trust which is becoming a foundation trust  |
| Signed:  |
| Date:  |
|  |
|  |
| Please cut along the lines and return your membership form in the pre-paid envelope provided or to: Freepost RRRA-UHTH-CZYR, Foundation Trust Office, East of England Ambulance Service, Broomfield, Chelmsford, CM1 7WS |
| In accordance with data protection legislation your membership details will be used solely for the purposes of your membership of the NHS Foundation Trust.  |
| However by law we are required to maintain a public register showing only members' names and constituencies. Please tick this box if you do <b>not</b> wish to be included in the public register.   (please tick box)   |



This document is also available on our website www.foundationtrust.eastamb.nhs.uk

Hard copy documents are available through the Chief Executive's office, East of England Ambulance Service NHS Trust, Hammond Road, Bedford, MK41 ORG

If you would like these documents in large print, Braille, easy read, alternative format, or a different language please contact 0800 028 3021.

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الى كى مطباررپ

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Se desejar obter este folheto impresso em letras maiores, em Braille, num formato diferente, ou noutra língua, por favor contacte 0800 028 3021.

Jeżeli chciałbyś otrzymać tę ulotkę w dużym druku, w Braille'u, w innym formacie lub w innym języku prosimy o kontakt pod numerem telefonu 0800 028 3021.

Если вы бы хотели получить эту брошюру в печати крупным шрифтом, шрифтом Брайля, в альтернативном формате или на другом языке, пожалуйста, обращайтесь в группу по телефону 0800 028 3021.

