



### IMPACT REPORT

From 1st April 2022 to 31st March 2023



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#### WELCOME

Our patients are at the heart of everything we do. Protecting, saving and reviving lives goes to the very centre of our mission and purpose. It's what we do.

But we couldn't do any of that without investment. Investing in our people, our kit, our future. At the beginning of 2022 we set out the next steps of our journey together in a comprehensive strategy, our vision for how our charity will serve its community for years to come.

The first year of that plan has seen us invest in the service we deliver to our patients and in our fundraising team, to deliver future income to ensure the charity can continue to operate. Bringing our air operations in-house is a milestone moment for us as an organisation, allowing us to operate with greater flexibility and respond more readily to patient needs.

Patient numbers are increasing and last year was no different as we were called out to more than 3,000 critically ill people for the first time. Our service is needed now more than ever which is why we are working hard to provide a service which saves lives today and will continue to save lives in the future.



**Amanda McLean, Chief Executive Officer** 

Amondo Malan

We know that none of this would be possible without the support of our community. It fuels us, each and every day. Thank you for being one of the most important members of our team.



#### **OUR PURPOSE**

To give everybody within our community the best chance of surviving and recovering from an emergency.



#### **OUR MISSION**

Together, we'll do everything in our power to protect, save and revive lives, with the best critical care at the scene and beyond.

# WE ARE THAMES VALLEY AIR AMBULANCE

Protecting, saving and reviving lives, together.

Put simply, if you were to suffer a critical injury or lifethreatening medical emergency, you would want to know help was nearby. That's why we exist.

We are here, bringing hospital-level care to anyone in our community who needs us. We are by your side on possibly the worst day of your life, and beyond, as you begin to rebuild your life.

We have been making this lifesaving difference since 1999 and our promise to you – our dedicated supporters – is that we will continue to be here for as long as we are needed. But we are ambitious. We want to do more.

In 2022, we launched a new strategy in which we set ourselves eight goals. These lay out the key steps we will take towards achieving our mission and how they will power our work on this journey.





We reach the patients who need us.



Our future is sustainable and financially secure.



We deliver consistent and outstanding critical care.



Our community are connected and engaged.



We care beyond the scene.



Our people are skilled, supported, motivated and proud of the difference we make.



We collaborate for greater impact.



Our governance, systems and processes are robust and transparent.

FIND OUT MORE ABOUT OUR STRATEGY





#### **OUR VALUES**

It's not just what we do that matters, it's the way that we do it. Having a set of values to underpin our everyday actions means we can keep ourselves on track to protect, save and revive lives in our community.

These values and behaviours act as our compass, guiding us as we steer towards our goals. They are more than words on paper, but something we seek to embody in our actions, interactions and decisions.

**READ MORE ABOUT OUR VALUES** 











"From fundraisers, like me, to our pilots and crew on the frontline of saving lives: we are all working towards the same goal. When I meet our fantastic supporters at community events, I am proud to say: together we are Thames Valley Air Ambulance."

Ruth Dunkin, Head of Community & Events



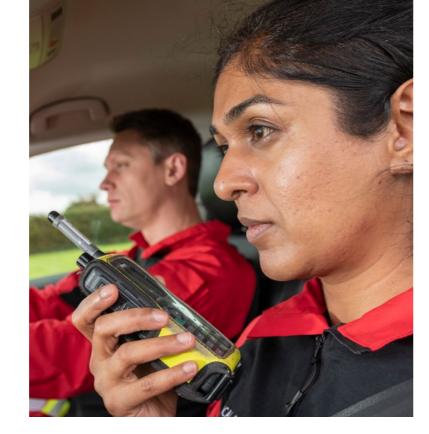


# OUR IMPACT IN NUMBERS

#### FROM 1<sup>ST</sup> APRIL 2022 TO 31<sup>ST</sup> MARCH 2023

We were called out a record 3,230 times, reaching 2,030 patients – more than ever before. Our busiest month was December with call outs topping 300 for the first time, 305 in total.

We record every call out as a separate figure to patient numbers. Not every call out results in treatment, but our crew are ready for every eventuality.



#### **WE RESPONDED TO:**



1,148 cardiac arrests

145

intentional

self-harm



675 medical emergencies

108



**521** accidental injuries



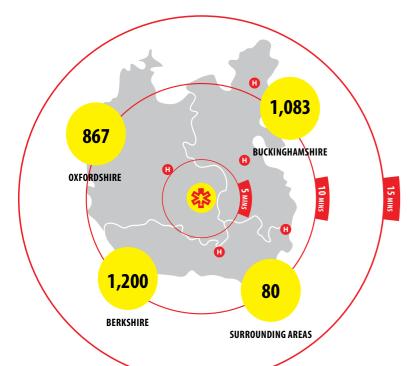
**404** road traffic collisions



**74** sports injuries



155 others



#### **CALL OUTS BY REGION**

We can be called out to respond to critically ill and injured patients in surrounding areas, during peak periods or in times of need. This is reciprocated between all air ambulance services.

Put yourself in the pilot seat and see the impact of your support in your local area with our Mission Map:

**EXPLORE OUR MISSION MAP** 

Hospital





We increased Aftercare support to patients, their loved ones and bystanders threefold.

#### **LAST YEAR WE:**



100%

Reached out to 100% of Thames Valley Air Ambulance patients treated at the major trauma centre, John Radcliffe Hospital



612

Treated 612 patients with enhanced pain relief



494

Used ultrasound on 494 patients



454

Carried out 454 intubations

### WHEN WE'RE NEEDED MOST: IAN'S STORY

lan could be any one of us. He was having a normal day, he'd gone shopping to a place he'd been countless times before. And then the worst happened.

He doesn't remember the day being any different, he doesn't remember feeling ill before he collapsed, he doesn't remember the commotion as shop workers rushed to use the community defibrillator which initially saved his life. But Ian will never forget the actions of the Thames Valley Air Ambulance crew who, supported by the land ambulance paramedics, worked to stabilise his heart rate enough to be taken to hospital.

lan had suffered an out-of-hospital cardiac arrest, a medical emergency when the heart stops pumping blood around the body effectively which just one in 10 patients survive. Ian survived despite the odds thanks to the bystanders who went to his aid, the skilled work of South Central Ambulance Service paramedics and a Thames Valley Air Ambulance crew who were called to assist him.

lan said: "The whole thing came out of the blue, I don't have coronary heart disease or anything like that."

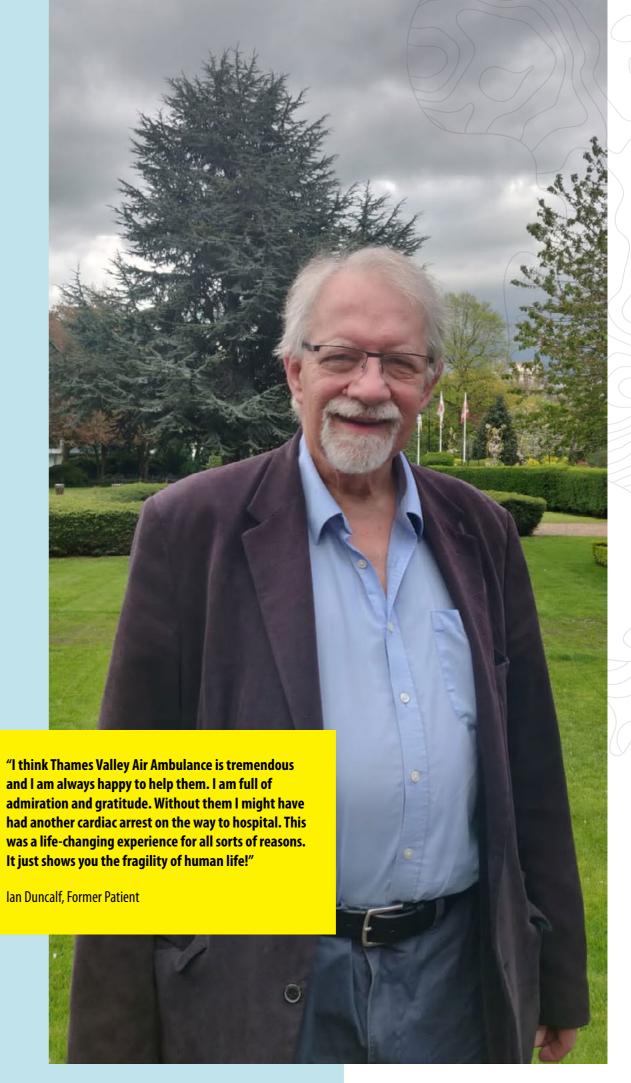
After the on-scene paramedics had treated lan and got his heart beating in a more regular rhythm, critical care paramedic James and doctor Henry were called to help. Despite the emergency treatment, lan still wasn't safe to move to hospital.

Doctor Henry decided a PHEA (pre-hospital emergency anaesthetic) was the best course of action. This is a skilled procedure which is carried out by a critical care team where drugs are given to the patient to stop them breathing independently and induce a coma, a tube is then inserted into the patient's lungs to ensure they are getting enough oxygen.

The crew then accompanied Ian on his way to Wexham Park Hospital to be on hand should he need any further treatment. Ian spent just over two weeks in hospital and during that time was given an ICD (implantable cardioverter defibrillator), which will shock his heart should the same thing happen again.

**READ MORE LIFESAVING STORIES** 





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#### YEAR IN REVIEW



The new financial year marked the start of our ambitious new strategy – setting out our vision for the future and how we intend to make steps towards that.



A generous donation allowed us to expand our Aftercare service, by adding our first team member based in the major trauma centre hospital.



Critical Care **Paramedic Mark Hodkinson became** our first Consultant Paramedic.



#### **APRIL - JUNE**



Our critical care crews were welcomed by Marlow Fire Station to use their facilities as a southern standby point for our Critical **Care Response Vehicles.** 



Our skilled crews were featured in the latest series of Emergency Helicopter Medics, telling the stories behind the statistics.

#### JULY - SEPTEMBER



A new cohort of trainee paramedics and PHEM doctors were welcomed to the charity and put through their paces at our annual three-day intensive **Foundations of Critical Care course.** 



National Air Ambulance Week marked an exciting milestone as we unveiled our new helicopter – G-TVLY.

#### **OCTOBER – DECEMBER**



Restart a Heart Day marked an opportunity to share our knowledge and skills around CPR and its importance.

We took delivery of our first green vehicle in the shape of a fully electric blood van, thanks to LeasePlan's continued generous support.





We shared news of our busiest year yet, since we became an independent healthcare provider.







Our clinicians shared their experiences of working over the festive period and how being able to give the gift of life to the patients we are called to makes being away from family at this time of year a little more bearable.

#### JANUARY - MARCH



A partnership with Harefield Hospital saw the introduction of E-CPR for out-of-hospital cardiac arrest patients in the Thames Valley region.



External validators worked with us to review and update the content of our clinical competency assessment as well as assessing the members of our medical team, to provide independent assurance they are safe, competent and fair in their delivery of education and assessment.



# REACHING THE PATIENTS WHO NEED US

We are needed now more than ever before; this year we've reached a record number of patients and for the first time were called out more than 3,000 times.

Following the restrictions of the Covid-19 pandemic, our communities have gone back to their active lives and we have seen an increase in the average number of missions per day.

Thanks to the continued support of our community, one of the key milestones we achieved last year was bringing our air operations in house, giving us more control over the way we operate our entire fleet of emergency vehicles and therefore how we reach patients.

We must continuously evolve to meet the changing needs of our community. Using data to guide us, we routinely review our dispatch process to help us identify the right patients who would benefit from our care.

Through these tweaks and the use of data we continually review our processes, striving to ensure that as few patients as possible are missed because our team are already delivering lifesaving care elsewhere.

Our data has also led us to trial a new Critical Care Staff Responder scheme. This 18-month pilot, which will continue into next year, sees our critical care paramedics volunteer to be on call outside of our normal hours of operation, 2am-7am, when we know we receive far fewer calls. These medics can respond day or night, in their own vehicles, equipped with the advanced skills and core equipment they need to make a difference.

Patient care is at the heart of all the choices we make. None more so than the decision to relocate our ground operations to our headquarters in Stokenchurch. A fire at our Head Office last year, provided an unforeseen opportunity to expand our footprint and move our CCRV operations, operational support and training teams to Stokenchurch House.

This change, anticipated to take place in winter 2023/24, will see our CCRVs on the road more quickly when heading to their standby points and when responding to a call out, making a difference when every second counts.

Discover more about how we reach the patients who need us and our dispatch process:

**HOW WE WORK** 

"Operating our own Air Operator
Certificate gives us the freedom to
respond to our own data to implement
changes which have patient care at their
heart, as and when we require."

James Hamilton, Pilot



#### **BRINGING OUR AIR OPERATIONS UNDER OUR WING**

In November 2022, we took on our own air operator certificate (AOC), making us directly and legally responsible for all aspects of operating our helicopter, flight operations and the maintenance of the aircraft.

Our AOC gives us greater flexibility in how we respond to call outs, how we use data to inform our work and the timescales involved in making changes. This means we can make independent choices about the way we operate.

At the same time, our new helicopter G-TVLY came online. The Airbus H135 has a top speed of 135mph and, after take-off, will continue to enable our crews to fly anywhere in Berkshire, Buckinghamshire and Oxfordshire within 15 minutes. It has been modified to meet the needs of critical care including stripping out unnecessary weight, such as unused cabling, so the aircraft is lighter and more fuel efficient.

It also has state-of-the-art avionics, including flight management computers with digital mapping – much like you would find in a car sat nav. Once airborne it requires an area the size of two tennis courts to land safely.

G-TVLY has already been put to good use, with our pilots clocking up 116 hours of flying time since we took on our own AOC.

**WATCH A 360° VIDEO OF G-TVLY** 





### DELIVERING OUTSTANDING AND CONSISTENT CRITICAL CARE

Continuing to provide outstanding patient care, and having that recognised as outstanding by the Care Quality Commission, influences all we do. But our strategy is not about standing still, we strive to achieve more.

We have introduced two new clinical roles, Assistant Director of Operations – Clinical Education, and Consultant Paramedic, to help us innovate in our inhouse training process as well as giving us a voice in pushing the boundaries of critical care nationally and internationally.

In March, we joined nine other air ambulances nationally in an 18-month trail, SWiFT (Study of Whole blood in Frontline Trauma), led by the NHS Blood and Transplant service, to add whole blood to the blood products we carry, to treat trauma patients who are suffering severe blood loss.

This was followed by the set up of a new partnership with Harefield Hospital, where eligible out-of-hospital cardiac arrest patients will now be able to receive a

pioneering E-CPR treatment, when a machine is used to take over the heart's function while the causes of the cardiac arrest are treated.

There is currently a doctor on the vast majority of our missions, but our goal is to improve this and have a doctor as part of the critical care crew on every core shift – cars and aircraft. By updating the contracts we have with our directly employed doctors, this will enable us to have a consistent set of critical care skills across all hours of operation.

Find out more about how we deliver outstanding and consistent critical care:

LEARN MORE ABOUT CRITICAL CARE



### COLLABORATING FOR GREATER IMPACT

Hundreds of critical care paramedics, doctors and nurses working in pre-hospital medicine, emergency medicine and critical care attended our Cardiac Arrest Symposium in September.

Cardiac arrest accounted for more than a third of the call outs we received last year so it was a natural choice for the theme of the conference.

We aim to continue to be an outstanding provider of clinical education and this symposium was another step towards that goal. Our vision is to push the boundaries of outstanding care for the patients of tomorrow.

The symposium was led jointly by Doctor James Raitt, Thames Valley Air Ambulance Research Lead and Hannah Hirst, Critical Care Paramedic. Highlights included talks from internationally renowned speakers on teamwork and non-technical skills, as well as techniques in cardiac arrest management beyond the existing guidelines.

Those who attended in person took part in workshops on ultrasound in cardiac arrest, airway management, high fidelity simulations and vascular access.

The free virtual conference engaged around 220 virtual delegates at its peak (plus a further 179 views of the recording) and was attended in person by 25 external delegates alongside many of our own crew.



"This was one of the best continuing professional development days I have ever attended. The expertise and willingness of the team to share their knowledge was really appreciated. Thank you!"

Symposium Attendee

#### CARING BEYOND THE SCENE

Our Aftercare service embodies the promise we make to all of our patients. We are here for you. Whether it's the day after someone is admitted to hospital, six weeks later or years after the event. The role of our Aftercare team is to be there, to listen, to be a helping hand for patients when all around them appears to be upside down.

When we first set up our Aftercare service this was focused on connecting with patients on their return into the community. But, thanks to a generous donation, we have been able to expand the team, supporting patients and their families from the hospital bedside and beyond.

Our team now has a dedicated manager based at the John Radcliffe Hospital in Oxford where more than 50% of our patients are treated. As the major trauma centre for our area, by definition, our most seriously injured and critically ill patients are admitted here.

This means we provide a seamless journey of care, from the moment help is called and the critical care we provide at the scene, to the hospital bedside, and as our patients go on to rebuild their lives back in the community.

These changes have also had a significant impact on the wellbeing of our crews who now receive feedback on all of our patients who are taken to the John Radcliffe Hospital, as well as data on patient outcomes to support clinical development. It has created a circle of learning where clinical feedback from today's patients influences the way we care for those of tomorrow.

And it's not just patients and crew who are benefitting from the expansion of this service. We are here to help everyone linked to an incident, including bystanders who may have given lifesaving first aid at the scene. We are here to listen, explain and signpost to extra resources.

FIND OUT MORE ABOUT AFTERCARE

739 patients were seen by the Aftercare team. This is a threefold increase on last year.





"They did not just save me, they saved my children.
If I had died I do not know what would have happened
to them. I know I've had life-changing injuries, for my
children to lose me would have been a life-changing
injury for them."

Helen Hide-Wright, Former Patient

#### THE RIPPLE EFFECT OF TRAUMA

Expanding the Aftercare team means we now reach all of our patients who are admitted to the John Radcliffe Hospital, providing a continuous circle of care from the incident to treatment and on to recovery. There is no limit to this, and for patient Helen, the community-based support has been invaluable.

For Helen, what happened after her devastating road traffic collision had just as much as impact on her life as what happened during it. Not only did Thames Valley Air Ambulance critical care crews save her life, our Aftercare service was instrumental in helping her rebuild it too.

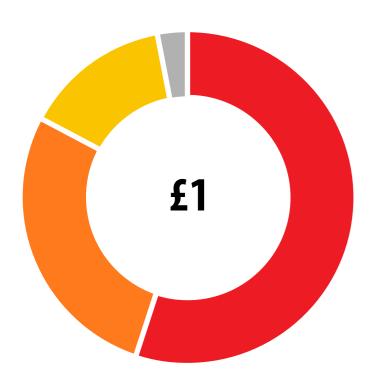
When her car collided head-on with an oncoming lorry, Helen was left with extensive, life-threatening injuries. The impact had shattered the right-hand side of her body. Thames Valley Air Ambulance crews worked with the land ambulance at the scene to give her the best chance of survival.

She said: "The air ambulance did not just save me, they saved my children. If I had died I do not know what would have happened to them. I know I've had life-changing injuries, for my children to lose me would have been life-changing for them. It horrifies me, the thought of what would have happened next to them, without a mum."

Aftercare have been by Helen's side ever since, listening, supporting and answering any questions she has, helping her to come to terms with what has happened. From lifesaving treatment to life-changing Aftercare.

#### WHERE YOUR MONEY GOES

#### FOR EACH £1 OF INCOME RAISED, WE SPENT:



**4** 55p

Giving patients the best possible chance when the worst happens

**▲ 28p** 

Generating funds

**4** 14p

Support costs

**4** 3p

Governance





### THE WAYS YOU SUPPORTED US:

34.8%

£3,850,431- Lottery

21.8%

£2,415,771 – Individuals

21.6%

£2,388,534 – Legacies

**8.9**%

£981,099 – Community Income

6.1%

£674,087 – Trusts and Foundations

3.2%

£352,795 - Corporate Partners

2.5%

£280,489 - Raffle

1.1%

£118,337 – Other Income

The figures presented here for the 2022-23 financial year are subject to external audit. Until the annual report and accounts are published later in the year, the figures presented in this report remain provisional.



#### **LOOKING FORWARD**

Standing still is not an option, we must evolve to be sure we can continue to protect, save and revive lives, with the best critical care at the scene and beyond for years to come.

The year ahead will see some key changes to our operations. Among our priorities will be the transition to housing our ground operations and Head Office departments together in Stokenchurch. Alongside this, our CCRV fleet of five cars will be updated in line with our fleet replacement schedule. Our air operations will remain based at RAF Benson.

We will continue to trial and develop our pilot of the Critical Care Staff Responder scheme, as enough data becomes available to understand its success, reaching more critically ill and injured patients in their moment of greatest need.

Sharing our skills for the benefit of the wider community is a core element of our strategy. The expanded training space available at our newlook Head Office following the fire, will give us the opportunity to trial offering our comprehensive training courses to those outside of Thames Valley Air Ambulance. We also collaborate with our partner emergency services and will put in place training for their responders so they better understand how we can help in critical care scenarios.

Following the expansion of our Aftercare team and the increase in learning and development of our clinical practices that this brings, we will continue to build on this work further, by establishing a new formal process for clinical feedback with another hospital in Thames Valley Trauma Network.

Our critical care paramedic competencies set our standards for the care we provide. This framework has been validated by external professionals, underlining our commitment to outstanding practice. We will advocate for the introduction of a national competencies standard for all critical care paramedics within the sector, pushing the boundaries of care for patients across the country.

To be kept up to date with our upcoming plans and to hear more from Thames Valley Air Ambulance:

**SIGN UP TO OUR E-NEWSLETTER** 







Your support makes all of this possible. We could not make the lifesaving difference we make without the generous backing of the community we serve, and people like you.

But we want to do more. We must do more as the number of people who need our help increases every year. We've mapped out the path we know we need to take to evolve our care, embrace innovation and provide our patients with the best chance of surviving when the worst happens. The next step is to take you with us, so we can continue to be there for you and your loved ones.

We could not plan for these exciting times without our community by our side. In some ways we hope we'll never meet you, which will mean you've never had a need for the critical care and equipment our skilled crews deliver. But if you do need to make that call, we'll be here to respond.

Together, we'll do everything in our power to protect, save and revive lives.

**GET INVOLVED** 













#### WWW.TVAIRAMBULANCE.ORG.UK