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STUDENT NUMBER 2413796

MODULE CODE : LCHS 4003

MODULE NAME :INTRODUCTION

TO HEALTH AND SOCIAL CARE

TITLE: AMBULANCE SERVICE

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INTRODUCTION*

"The NHS Ambulance Service is a vital part of the UK healthcare system, providing emergency and non-emergency care to millions of people every year. The service operates 24 hours a day, 7 days a week and responds to 999 calls across England. (NHS England, 2025)."

1 HOW THE NHS AMBULANCE SERVICE WORKS-NHS Ambulance Services are free at the point of use for all UK residents. The service operates 24 hours a day, 7 days a week, and covers all types of medical emergencies. When someone dials 999, they speak to a trained call handler who uses clinical protocols to assess the situation. The handler can give immediate medical advice, such as CPR instructions, while an ambulance is being sent. Ambulance crews include paramedics, emergency care assistants, and specialist practitioners. They are trained to deal with trauma, cardiac arrests, strokes, and mental health crises. The service also provides non-emergency patient transport for people who need to get to hospital appointments but cannot travel on their own. This wide range of services makes the ambulance service a critical part of the NHS (NHS England, 2025)

2 BRIEF HISTORY AND CHALLENGES- The service became part of the NHS in 1948. In 2017, the Ambulance Response Programme was introduced to prioritize calls. Today there are 10 NHS

Ambulance Trusts in England working to reduce response times (NHS England, 2025). The concept of ambulance services began with Baron Dominique Jean Larrey in Napoleon's army, who created coordinated services to collect the wounded from the battlefield (Durham et al., 2016). The NHS Ambulance Service was officially founded in 1948. The 8-minute response target for life-threatening calls was formally introduced in 1974 by the Department of Health (Durham et al., 2016). In 1997 the UK adopted the Advanced Medical Priority Dispatch

System (AMPDS) for telephone triage, and in 2011 NHS Pathways was introduced as a UK-specific triage system (Durham et al., 2016). The Ambulance Response Programme in 2017 changed targets to focus more on clinical outcomes than just time.

One major challenge is meeting response time targets. Demand for ambulance services increased by 13% between 2013-2014, putting pressure on services already struggling with 8-minute targets (Durham et al., 2016). In January 2016 only one ambulance service met the 75% target for Red1 and Red2 calls, with a national average of 66.5% (Durham et al., 2016). Another challenge is "hospital handover delays", where ambulances wait with patients for hours outside A&E. As Dr Adrian Boyle stated, patients were left "stacked in corridors" because hospitals had no space, which delays response times for new emergencies (Standard, 2025).



3 – HOW IT WORKS TODAY AND HOSPITAL HANDOVER DELAYS. Hospital Handover Delays and the "Drop and Go" System One of the biggest challenges for NHS Ambulance Services today is hospital handover delays. This is when ambulance crews have to wait at A&E departments to transfer patients to hospital staff.

According to Daniel Elkeles, chief executive of the London Ambulance Service, before new systems were introduced, London was "regularly losing up to 600 hours of time waiting to hand over patient care at hospitals every day". This meant approximately 15 per cent of ambulances were out of action for the whole day, unable to respond to new 999 calls (Standard, 2025). To solve this, London introduced a "drop and go" system. Under this scheme, patients are left in hospital after 45 minutes so ambulance crews can return to the frontline quickly. Health Minister Stephen Kinnock defended the system, saying it was "working very well" in London and that other trusts should learn from this best practice. The main principle is to "take the best of the NHS to the rest of the NHS". The goal is to get ambulances back on the road to deliver lifesaving care as quickly as possible (Standard, 2025). However, some doctors are concerned.

and so full". This shows the tension between freeing up ambulances and ensuring patient safety in hospitals.

THE FUTURE OF AMBULANCE SERVICES-Key Message: The Future of Ambulance Services The NHS Ambulance Service is under pressure but it remains essential to public health. To meet future demand, the service needs investment in staff, technology, and closer working with other parts of the NHS. The government's plan to move care into communities could help reduce 999 calls. New technology like patient data sharing and wearable devices may also help prevent emergencies before they happen. However, without fixing problems like hospital handover delays, response times will stay slow. As Health Minister Stephen Kinnock said, reform is needed alongside funding. (Standard, 2025; NHS England, 2025).

"In conclusion, the NHS Ambulance Service is essential for public health and safety in the UK. Over the years, the service has developed from early battlefield medicine to a modern, technology-driven emergency response system. However, challenges such as increasing demand, response time targets, and hospital handover delays continue to put pressure on ambulance crews. Initiatives like the 'drop and go' system and new technology offer solutions for the future.

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MODULE NAME :INTRODUCTION TO HEALTH AND SOCIAL CARE

TITLE: RESIDENTIAL CARE HOMES

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Introduction

"Residential care homes play a vital role in the UK healthcare system by providing long-term support for individuals with complex needs. In recent years, the ageing population has increased the demand for these services, as many older adults can no longer live independently at home due to health and social reasons (NHS, 2025). For future nursing professionals, understanding residential care is essential, as it directly impacts the safety, dignity and quality of life of vulnerable residents."

1- History

"To understand residential care today, it is important to look at its history. In the past, older people in the UK were often placed in large hospitals or institutions. However, after the Care Standards Act 2000, the government introduced new rules to improve the quality and safety of care. This led to a shift towards smaller, homelike residential settings that focus on the dignity and wellbeing of residents (Department of Health, 2000)."

2- How it works today ?

"Today, residential care homes in the UK are regulated by the Care Quality Commission, known as the CQC. This organisation inspects all care homes to make sure they provide safe and good quality care. Every home receives a rating of Outstanding, Good, Requires Improvement or Inadequate, and these reports are available to the public (CQC, 2025).

Quality of life

"Quality of life is a key focus in residential care homes. Research shows that older people living in care homes may experience a lower quality of life because of changes in health,

environment and daily routines (Kane, 2003). However, studies also highlight that promoting wellbeing and social activities can improve residents' quality of life and overall health (Ho et al., 2002)."

3- THE Benefits and best practices

"Research also shows the importance of good relationships in care homes. Programmes such as My Home Life in England have trained nearly 1,000 care managers and influenced the quality of life of over 21,000 residents. This research highlights that best practice, caring conversations and teamwork between staff can improve the wellbeing of older people living in residential care (City St George's, University of London, 2025)."

The Role of the nurse

"Despite the benefits, residential care also faces challenges. Some residents may experience a reduced quality of life due to changes in environment, rigid routines and less social interaction (Kane, 2003).

Conclusion

"In conclusion, residential care homes are an essential part of the UK healthcare system. They provide safe accommodation and personal care for older people who can no longer live independently. Over time, laws such as the Care Standards Act 2000 and organisations like the CQC have improved the quality and regulation of these services. Although challenges such as reduced quality of life and rigid routines still exist, research and programmes like My Home Life show that good practice and caring relationships can make a big difference. For nursing professionals, understanding residential care is key to promoting dignity, wellbeing and a better quality of life for residents."

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