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You can save lives, help people that are hurt or ill. Everyday is different and every call brings new situations that includes and demands quick decision making and flexibility as it is all unexpected. Although, I believe that I can work well under pressure and reassure people who are frightened and in pain that everything will be ok. Furthermore, this role you get the chance to be more advance with other technologies that you may be working with. However, working in an ambulance it's not all repetitive and there's new challenges you will face every day. Also, with this service as well its all unpredictable so you would never know what to expect when a call comes in so then you can improve working skills and develops a better understanding in the work you are doing.

In the 1890s it was left to the police, firefighters, or taxi drivers to staff a fleet of wheeled stretchers called litters to deliver patients to the nearest hospital to be treated. A few years later the ambulance fleet was horse-drawn vehicles being the primary means of transport these were used till September 14th, 1912. However, the first ambulance appeared in 1904, and it could carry one stretcher up to 15mph. Years later the local city council took over the ambulance duties as the second WW2 approached. The 21st century approached where colour coded yellow cycles units

For category 1 calls which are most life threatening incident, that target is an average response time of less than 7 minutes. In December 2024, the average response time was 8 minutes and 40 seconds going way over the average response time. Therefore, category 2 calls that had a target of 30 minutes rose to 47 minutes and 26 seconds going way past the targeted time. According to the 2023 NHS staff survey 39% of the ambulance worker respondents stated they often or always felt burnt out from work staff members were over working themselves and they would experience high rates of emotional exhaustion – one of the key components of burnout. In 2024 only

The current function of this service is to provide urgent medical care and transportation in emergencies and non-emergencies situations and provide the best care as possible. As of now the primary function of this service today is for a more rapid response dial 999 for critical conditions like heart attacks and breathing problems. Secondly is prehospital care which is CPR, defibrillation and wound care and stabilising the patient before hospital arrival. Also, there is as well as London's air ambulance trauma team, this bring the hospital to the most injured patients when time is critical. For The ambulance service is currently 10 NHS trusts in England some of which are now foundations.

Task two:

Community mental health services date back to the middle of the 20th century and were a response to the severe critique of psychiatric institutions and the inhumane conditions of the institutional care that they represented. In the past, mental health treatment relied on the asylum-based models where patients were isolated from society, stigma was heightened and the opportunities for recovery and social integration were scarce. With the help of psychiatric drugs, a change in social attitudes and the acknowledgment of patients' rights, the authorities started supporting deinstitutionalisation and services in communities. At that time in many countries, (particularly in the 1950s and 1960s) changes were driven by social welfare movements, public health methods and community-based support research. Community mental health services were created to offer care that was not only clinically oriented but also considered the social, psychological and environmental aspects of mental health. They now comprise teams made up of various professionals, crisis intervention, outpatient housing support and rehabilitation programmes that are geared to independence and recovery. Several elements in community mental health services mirror broader healthcare changes, transitioning from merely custodial care to the empowerment, inclusion and prevention of people. The result of this evolution has been the substantial setting of the present-day mental health standards - mainly stressing the importance of continuous care, social engagement and providing support.

Community mental health services are tailored to offer care that is accessible, personalised and delivered within their local area, allowing people to get the help they need whilst still living their normal lives. These programmes are run by healthcare professionals, including psychiatrists, psychologists, nurses and support workers, who work together to provide assessment treatment crisis intervention and rehabilitation. One of the biggest advantages of this service is their whole-person approach, which acknowledges that the state of one's mental health is not only a function of clinical factors but also of social, economic and environmental conditions. This system encourages recovery, independence, and social engagement and takes a lesser number of hospital admissions. Despite these advantages, there are issues that hamper the ability of these services to deliver results. A great deal of services are struggling with growing demand, lack of sufficient funds, staff shortage and long waiting times which can result in not getting the care in time, affecting the health of the patients. Additionally, differences in service availability according to the area could bring very uneven access to support. On one hand, it is rightly pointed out that community-based care is a less confining and more recovery-oriented alternative to institutional care, but neglect of provision can push towards unaddressed needs. This way, continuous funding and better cooperation are key to enhancing the efficacies of these services.

Community mental health services impact service user's lives positively by providing them with accessible, person-centred support in local communities. Getting treated through these channels helps others avoid the have connections with family friends, education, employment and social networks. This fosters a feeling of independence, belonging, and social inclusion, key elements of mental health positivity. When dealing with clinical symptoms, community-based services address social, psychological and environmental aspects, which are the major factors affecting recovery. They provide people with necessary interventions such as therapeutic sessions, drug administration, support during

emergencies, and customised rehabilitation programs. Prompt and regular care could not only keep one's mental health in check, but it will also limit the number of hospitalisations and improve one's overall condition. Supporting recovery, community mental health services contribute to enhancing well-being, improving social functioning and facilitating service users to lead more fulfilling and meaningful lives within the society. They operate with multidisciplinary teams, so a service user can get a bundle of different interventions. Community mental health services give control to individuals to take part in making decisions about their care, boosting their sense of independence and confidence.

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