

Module Title: Introduction to Health and Social Care

Module Code: LCHS4003

Assignment Title: Component 1: Coursework Portfolio – Task 1 (Poster)

Chosen Service: Ambulance Services

Lecturer: Farah Islam

Student Name: Muskan Akhtar

Student ID: 2420915

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Ambulance Service

Ambulance Service

The Ambulance Service is a critical component of the National Health Service (NHS) responsible for responding to 999 emergency calls, providing immediate life support, and transporting patients to definitive care. Modern services have evolved from transporters into mobile clinical units. These are staffed by paramedics and technicians, they now operate under a "see, treat, and refer" model, meaning they have the clinical autonomy to treat patients at the scene or refer them to GPs or Mental Health Services without taking them to A&E (NHS England, 2025). The service aims to provide equitable access to urgent care 24/7.

The History of Ambulance Services

Ambulances were first introduced in the 1897 but medical services were provided since ancient times, when injured soldiers were transported on hammocks, chariots, or canvas sheets.

- Ancient Times, Injured soldiers moved on hammocks, chariots, or canvas sheets
- 11th Century- Knights of St. John used horse wagons in Jerusalem
- 1123- St Bartholomew's Hospital established in London
- 1897- First full-time service: Metropolitan Asylums Board, London – horse-drawn carriages
- 1904- First petrol-driven ambulances introduced in London
- 1946- NHS Act required councils to provide ambulances

- 1960s- Ambulances began providing treatment, not just transport
- 1970s- Control passed to the NHS
- 1987- First air ambulance launched in Cornwall
- 1990s- Solo-response cars introduced; paramedic profession established

Today ambulance services are delivered by 10 NHS ambulance trusts in England, with separate services in Wales, Scotland, and Northern Ireland.

Key Functions

The key factor for ambulance uses are these below that explain what the response are for ambulances:

999 Emergency Response time:

Category 1: Life-threatening (target: 7 minutes).

Category 2: Emergencies like stroke/heart attack (target: ~18-30 minutes).

Hear and Treat / See and Treat – Remote assessment and on-scene care without hospital transport.

Patient Transport – Non-emergency transfers for appointments.

Major Incident Response – Supporting emergencies and disasters.

System-Wide Pressures

Ambulance services are closely linked to A&E departments for every type of emergencies, when hospitals are full and patients cannot be admitted, ambulances queue outside which called "ambulance crowding".

The Impact:

- Handover delays mean crews cannot respond to new calls.
- One in 20 ambulance staff report patients dying during long delays.
- Response times remain below national targets in most regions.

Rising Demand vs. Capacity

- Demand for ambulance services has increased significantly due to:
- An ageing population with complex health needs.
- Shortages in primary care and community services.
- Limited social care capacity.

The Impact to this is approximately 1 in 5 999 calls that may not require an ambulance, but a record of 1,141 new ambulances delivered (2025/26) to improve reliability as well as call handlers that now triage more effectively to make sure that are able to prioritise the sickest patients.

This gives us a time frame of how ambulances were generated from the ancient times to today and what they are used for.

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