

UNIVERSITY OF WALES, TRINITY SAINT DAVID

COMPONENT 1 COURSEWORK PORTFOLIO

MODULE CODE: LCHS4003

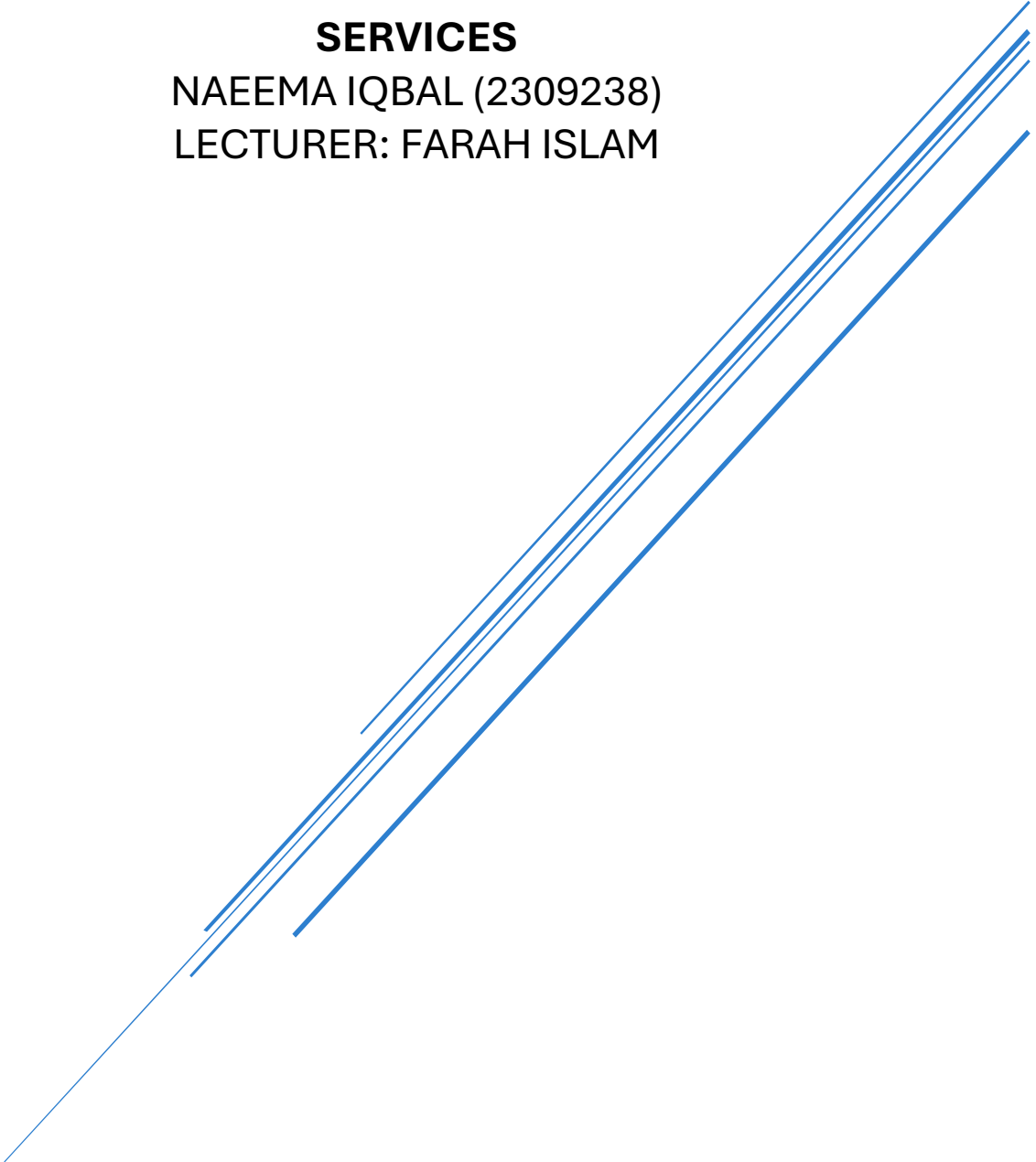
MODULE TITLE: INTRODUCTION TO HEALTH AND SOCIAL CARE

TASK 1: POSTER – AMBULANCE SERVICES

**TASK 2: 600 WORD ESSAY – COMMUNITY MENTAL HEALTH
SERVICES**

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AMBULANCE SERVICES

HERE WHEN YOU NEED US MOST



A BRIEF HISTORY

LATE 19TH AND EARLY 20TH CENTURY

"Early on, the ambulance fleet was horse-drawn. The first petrol driven ambulance appeared in 1904 and could carry a single stretcher at up to 15mph." (London Ambulance Service, n.d.). These services were often run by volunteers, local authorities, the police, fire brigades and organisations such as the St John Ambulance Brigade.

1948

"Post-war reorganisation led to the National Health Service Act of 1948. As part of this, for the first time, there was a requirement for ambulances to be available for all those who needed them." (London Ambulance Service, n.d.)

20TH CENTURY

Many local ambulance services were reorganised under the NHS framework and merged into larger regional ambulance services. "A London-wide service was created in 1965 when one ambulance service was formed in London from parts of nine existing services. It comprised of nearly 1,000 vehicles and 2,500 staff." (London Ambulance Service, 2018). According to GloveMan Supplies LTD in 2025, the unique 999 emergency number was introduced in 1937, allowing people to summon emergency services in one unified system, and by 1986 mobile phones could dial 999 directly.

TODAY

"Although regulated training took years to formalise, the seeds of the role appeared in the 1960s and 1970s, when some ambulance staff began to take on expanded responsibilities beyond conveyance, carrying breathing apparatus and oxygen. In contrast, modern paramedics have defibrillators, ECG machines, advanced airway tools, pulse monitors and a cabinet of drugs." (GloveMan, 2025) Additionally in comparison to the original horse-drawn carriages, modern ambulances are standardly fitted with radios, lighting, loud emergency sirens and much more and control rooms have evolved into digital systems linking 999 calls to the closest paramedics in the field.

CURRENT FUNCTIONING

EMERGENCY CALL

"999 is called for life-threatening emergencies" (NHS, 2023). According to the NHS, the call handler will ask questions such as the location of the emergency, what has happened, and contact information should they need to call back.

RESPONSE

Paramedics respond quickly using emergency lights and sirens. They may arrive in an ambulance, a rapid response vehicle, motorbike or their own car. "The call handler will give you an idea of how long you will need to wait. You might also be given instructions about what to do while you wait, including how to give basic first aid." (NHS, 2023).

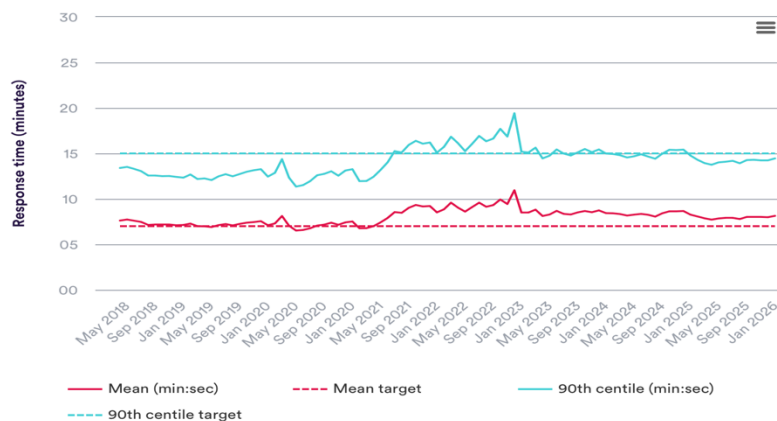
CARE ON SCENE AND TRANSPORTATION TO HOSPITAL

Paramedics assess and treat the patient at the scene. "An ambulance is equipped with a variety of emergency care equipment, such as a defibrillator, oxygen, intravenous drips, spinal and traction splints, and a range of drugs." (Yorkshire Ambulance Service, n.d.). According to the YAS, it is at this point where paramedics may carry out diagnostic tests and do basic procedures; they also have the authority to refer patients to other services such as mental health teams, diabetes teams and substance misuse teams. Ambulance crews may also directly admit patients to specialist units and administer a wide range of drugs to deal with conditions, including but not limited to: asthma, allergic reactions or overdoses.

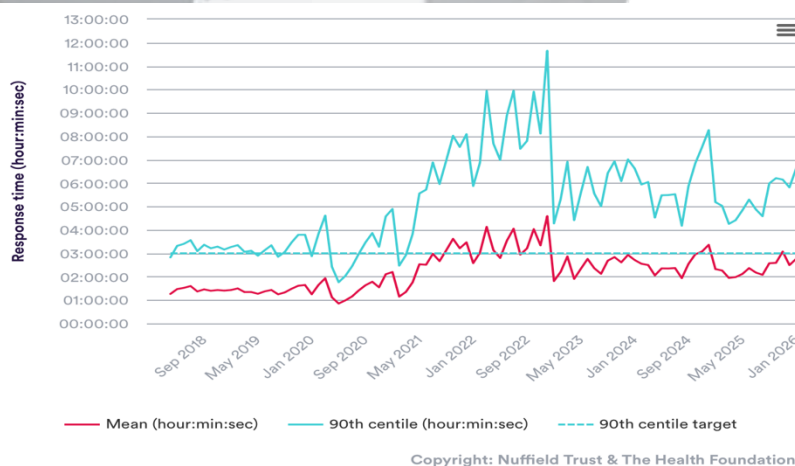
CONTINUOUS CARE

According to the NHS website "A&E departments are open 24 hours a day, every day". The ambulance crew will transfer gathered information to the reception staff before the patient is then assessed by a doctor or nurse, this is called a "triage" and determines the urgency of the patient's condition and whether or not they will need to be seen immediately, helping doctors to tend to the more seriously unwell people beforehand. "If [patients] are seriously unwell [they] will be seen by an A&E doctor and referred to a specialist unit or admitted to a ward if necessary. If [they] do not need to be in A&E [they] might be sent to a nearby urgent treatment centre or referred to a GP on-site. [...] Some people will be given a prescription and sent home, with instructions on what to do next." (NHS, 2023)

CHALLENGES FACED BY THE AMBULANCE SERVICES



Source: NHS England, Ambulance Quality Indicators



Source: NHS England, Ambulance Quality Indicators

HIGH DEMAND AND RESPONSE TIMES

(Figure 1 shows how response times have changed for Category 1 (life-threatening) versus Category 4 (less urgent) calls to 999.) (Nuffield Trust, 2026)

Ambulance services receive millions of 999 calls each year; this increase in demand places immense pressure on crews and vehicles. Ambulance trusts have struggled to meet the national response targets due to the constantly rising number of emergency calls, hospital handover delays and limitations in resources.

WORKFORCE PRESSURE & WELLBEING

"A new survey of more than 760,000 NHS staff shows worsening workforce experiences across several areas, including staffing levels, wellbeing, and engagement. [...] The survey included all directly employed staff in secondary and tertiary care organisations, ranging from consultants to care assistants and from porters to paramedics." (HR Grapevine, 2026) Staff frequently must work under stressful conditions, dealing with immensely high workloads and the increasing demand, these pressures can contribute to burnout, sickness and difficulties retaining experienced staff members.

Ambulance services save lives every day, from road accidents and heart attacks to medical emergencies and much, much more, they are here for everyone, everywhere.

TASK 2: 600 WORD ESSAY

CHOSEN TOPIC: COMMUNITY MENTAL HEALTH SERVICES

Community mental health services provide assessment, treatment and ongoing support for individuals experiencing severe mental health conditions. Birmingham and Solihull Mental Health NHS Foundation Trust states that services seek to promote "recovery, inclusion and independence" for service users. These services are important because they allow people to receive support outside of a hospital setting without being separated from their everyday lives, meaning the patients are able to maintain relationships, education and employment.

Historically, people with mental illnesses were put into psychiatric institutions or asylums. These institutions were more often than not overcrowded and focused on the containment of the vulnerable patients rather than real, sincere treatment (The King's Fund, 2023). As many as 100,000 people were housed in mental health institutions in 1974 and "although people attended outpatient clinics to receive medication, there were few community services", according to the King's Fund in 2024, highlighting the need for change.

Community services were developed through deinstitutionalisation, meaning the policies gradually shifted support from mental hospitals into the community. This development of community mental health services was influenced by advances in and the development of psychiatric medication and the changing attitudes towards the rights and independence of people with severe mental illness. (Sage Journals, 2024)

"Today, advances in the understanding of mental illness, alongside the development of pharmacological and psychological treatments, mean that most people who access mental health care do so within a community setting." (The King's Fund, 2024). Moving care into the community changed the way the mental health support was delivered, rather than spending long periods in psychiatric hospitals many people were able to receive treatment whilst continuing to live in familiar surroundings.

Community Mental Health services are delivered by Community Mental Health Teams which bring together different healthcare professionals working together to help patients recover from mental illness by carrying out assessments and providing the appropriate care. These professionals include psychiatrists, psychologists, social workers, occupational therapists and support workers, these teams aim to provide personalised support, and as one NHS Trust

explains, they offer "assessment, monitoring, support and treatment" for people experiencing mental health difficulties (Northamptonshire Healthcare NHS Foundation Trust, 2026). Support may range from medication, therapy, crisis intervention, assistance with housing, education and employment according to the North London NHS Foundation.

Despite the wide range of support services available these community mental health services continue to face challenges including an increase in demand, shortages of staff and extremely long wait times for treatments. These pressures can result in delays to treatment which have the potential to worsen symptoms of mental illness. The Care Quality Commission reports "Demand for mental health care has continued to rise throughout 2024/25 with an average of 453,930 new referrals to secondary mental health services every month.", this places significant pressure on existing services.

Additionally, NHS England reports "Staff shortages also remain a key risk" Meaning there are not enough qualified mental health professionals available to meet the high demand and deliver the appropriate support and care for these individuals. As a result, service users may have to endure longer times on waiting lists, a reduced continuity of care and delays in accessing specialist support, which has the risk of negatively affect their recovery and overall wellbeing.

In conclusion, community mental health services have changed largely over time, from the old outdated institutional model to the current community-based model. Community Mental Health Teams provide a wide range of support through the adaptable and flexible work. Despite the many benefits of these services, community mental health services still face immense challenges which have to potential to negatively impact the mental health support which is given. Community mental health services will always remain an essential part of the healthcare system with easy access to mental health support and advice for members within a community without the need to be admitted to an institution for containment rather than treatment.

ESSAY WORD COUNT: 642

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TOTAL WORD COUNT: 1785