

GMB LONDON AMBULANCE SERVICE BRANCH

Introduction

My name is Charlotte Faulkner, I am currently the acting Branch Secretary for the GMB LAS. I have been in the LAS for 12 years and been an active rep for the union for several years.

Our aim

Welcome to our newsletter, our aim is to keep you as updated as we are with the ever changing world that we are all experiencing.

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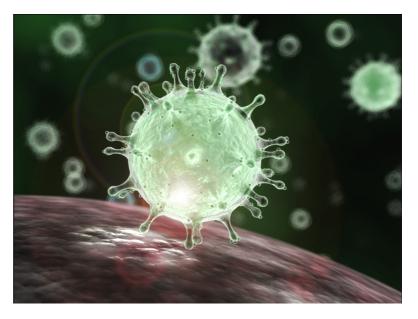
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UPDATE

As some of you may be aware, we were having extreme difficulties initially engaging with management in relation to any issues, particularly COVID 19. We sent a letter to Khadir Meer on behalf of you, the GMB members, expressing our disappointment, and their failure to consult or engage with us. We did not receive a response from Khadir to our queries, nor were our initial set of questions answered. We did receive a reply from Athar Khan, Director of Intergrated Patient Care and Elizabeth Dighton, Head of Employee Relations. Myself and Brian met with them on the 19th March 2020 and discussed issues that are being raised by you, our members, and were not being addressed.









DOORSTEP CHALLENGE

We were inundated with members concerned that some patients were not being identified as ?COVID through the triage system. Myself and the branch officers met on Tuesday and thought hard as to how this could be combated. We came up with the idea that crews across the service could incorporate a DOORSTEP CHALLENGE. This is where on arrival to a call, and the situation allows, the crew ask the person who answers the door if the person in need of an ambulance has a new cough, a cough they did not have last week. They can also hand the person their tympanic, and with a brief explanation, be asked to check the patients temperature and then return the tympanic so they crew can what the patients temperature is. This allows staff to make an better informed decision as to whether PPE is needed.

This was put to Fenella Wrigley and received a real positive response and is published in the latest Medical Bulletin issued 19th March 2020 version 1.0.



We asked the question as to why a major incident has not been declared, as everyone is being pushed to work harder and harder every day. The answer was that a major incident is declared for short term (days) incidents, what has been engaged now is the Pandemic plan which supersedes a major incident. This also applies to REAP levels, in that altering REAP levels at this point has no real effect on the way we are currently working.

With all the constant updates, we asked how are crews supposed to be fully informed about what level of protection they should be donning, and what the current procedures are for conveying or non conveying of patients. The updates are going to be condensed, so we will not have multiple updates that may contradict others. Also, it is being looked into for 15 minutes of "Reading Time", whether this is O/T, stand down, or TIL, pre/post shift it has to be decided. When we have feedback on this we will update you all.

There has been many questions about staff who have been exposed to ?COVID patients, and whether they self isolate. The advice is, in this circumstance you self isolate if symptomatic, not just due to exposure.

Regarding crews going to ?COVID calls without PPE, this should not be happening. HUBs have PPE as well as some stations. It should be made available to you if not on your station, then at the HUB.

Don't forget to join our Facebook page GMB LAS to keep updated with GMB union news!

We, at the GMB, are working tirelessly to ensure that your safety, the safety of your families and of your patients is at the forefront of how we are combatting COVID 19. If you have any concerns, please contact us and we will do our very best to get the answers. Keep safe everyone.



Head to <u>https://www.gmb.org.uk/coronavirus-covid-19-what-</u> <u>members-need-know</u> for helpful advice from GMB.