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30th November 2021

Email:

Dear,

I am writing in response to your enquiry under the Freedom of Information Act 2000 (FOIA) reference FOI 211024.

You requested the following information, please also see our response below:

In accordance with the Freedom of Information Act 2000, please could you provide the following information:

- 1) Your policy for Call Takers dealing with an abandoned 999 call presented to them by the operator.**
- 2) If no specific policy document, any training materials or information pages with this advice.**

For the purposes of clarity, an abandoned 999 call is when a caller phones 999, requests the ambulance service, but clears before the call is presented to your call taker. This is communicated by a BT Operator who relays information about the call, such as EISIC data and a playback of the recording.

Please see the below relating to abandoned calls taking from the current call handling procedure:

1.1. Abandoned Calls

- 1.1.1.** Where an EMA receives a call but the caller has disconnected, the EMA should make every attempt to call back the number provided by the Emergency Operator in an attempt to establish the need for an ambulance response. The EMA should attempt 3 call backs. If there is no answer on the third attempt, the EMA should leave the following voicemail message if possible:

“This is the ambulance service. We have received a 999 call from this number at (time and date) but no details were given. We have not been able to send an ambulance. If you do require ambulance assistance, please call 999.”

- 1.1.2. The NoC ‘Abandoned call’ should be selected in these circumstances.
- 1.1.3. If the abandoned call has an address populated then this call should be triaged appropriately through NHS Pathways, if no address has been generated then NHS Pathways does not need to be opened.
- 1.1.4. Abandoned call with no address:
- 1.1.5. The EMATL is responsible for ensuring that all reasonable attempts are made to find an address and establish if there is a need for an ambulance response to any abandoned calls.
- 1.1.6. After the EMA has made 3 failed attempts to call the caller back, the EMATL should consider the following options:
 - 1.1.6.1. If there is no indication that the caller/patient was unwell, injured or in distress; or the call was connected to the EMA and the caller had not spoken, despite being successfully connected to the ambulance service, the EMATL may close the incident with no further action.
 - 1.1.6.2. If there is concern that help is needed for the caller (e.g. caller was distressed before the call disconnected or declared an injury), the EMATL should consider the following options:
 - 1.1.6.3. Check if there has been any other call placed from the telephone number that day using the CAD system. This will determine whether the incident is a duplicate call or may help provide a location or useful information about the caller.
 - 1.1.6.4. If it is a call from a landline, the EMATL should consider searching for previous calls from the number over a larger timeframe, such as a year. Again, this may help provide a possible location.
 - 1.1.6.5. The EMATL can call the Police to request them to run a search on the telephone number that the 999 call was made from. Police may be able to provide pertinent information to help determine the patient’s location or likely need for an ambulance response.
 - 1.1.6.6. If the abandoned call is from a mobile telephone, call BT on 0141 248 5813 to determine the name of the caller’s network provider.
 - 1.1.6.7. Contact the caller’s network provider (details can be found in Appendix 3) to determine if the mobile telephone is pay-as-you-go or on

contract. Requests must be made within 30 minutes of the 999 call ending. If it is a contract mobile phone, the provider may be able to give the caller's home address. However, as there is only a chance that the patient will be at this location, the need to deploy an ambulance response should be authorised by a CS or Emergency Operations Centre Manager (EOCM).

- 1.1.7. If there is any doubt whether an ambulance response is required or the EMATL is unsure what further action to take, the incident should be referred to a CS or EOCM for review.
- 1.1.8. The incident should not be closed until all reasonable effort has been made to determine the patient's location.
- 1.1.9. Any action should be proportionate to the information gathered, in which the EOCM has the final decision.

I hope you find this information of some assistance.

If for any reason you are dissatisfied with our response, kindly in the first instance contact Caroline Smart, Head of Information Governance via the following email address:

FOI@secamb.nhs.uk

Yours sincerely

Freedom of Information Coordinator
South East Coast Ambulance Service NHS Foundation Trust