

## Report Supplementary Material 1: Community First Responder Study Human & Financial Resources Questionnaire for Ambulance Trusts

<b>Name:</b> <full name of ambulance trust> (<acronym of ambulance trust>)	<b>Date:</b> <enter date sent to ambulance trust>
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### Participant Information Sheet

This questionnaire asks you to provide information on the human and financial resources used by <acronym of ambulance trust> to support the operations of its workforce of volunteer Community First Responders (CFRs).

Your responses will be used to inform the research project "[Community First Responders' role in the current and future rural health and care workforce](#)" currently being conducted by members of the Community and Health Research Unit (CaHRU) which is the research centre for the School of Health and Social Care in the College of Social Science at the University of Lincoln. CaHRU is allied with the Lincoln International Institute for Rural Health. This research is funded by the Health Services and Delivery Research programme of the National Institute for Health Research (reference number NIHR127920) – Chief Investigator: Professor AN Siriwardena. Ethical approval of the research project has been confirmed (NHS REC reference: 20/LO/0317; IRAS reference number: 277205) <reference numbers of updates to be added>

In the first instance, this questionnaire will be passed onto the Research lead in <acronym of ambulance trust> to either complete in person or delegate to someone else within the Trust to answer. Names or other personal information of respondents will not be recorded or stored in any way and all information collected will be treated in line with University of Lincoln Ethics, Governance and Regulatory Compliance Procedures available at <https://ethics.lincoln.ac.uk/research-privacy-notice/>

If you have any questions or require clarification about this questionnaire, please contact the Chief Investigator:

Professor A N Siriwardena

Director, Community and Health Research Unit, University of Lincoln LINCOLN LN7 6TS t: 01522 886939 m: 07843 658949

e: [nsiriwardena@lincoln.ac.uk](mailto:nsiriwardena@lincoln.ac.uk)

Please return the completed questionnaire in electronic or hard copy format to: Murray Smith e-mail: [MDSmith@lincoln.ac.uk](mailto:MDSmith@lincoln.ac.uk) **Postal Address:**

Community and Health Research Unit, University of Lincoln, Campus Way, Brayford Pool, LINCOLN, LN7 6TS.

In case we need clarification about the responses, would you be willing to allow us to contact you? Yes  No

If yes, can you please provide us with details of your preferred method of contact:

**PART A HUMAN RESOURCES: COMMUNITY FIRST RESPONDERS IN YOUR AMBULANCE TRUST**

1) Volunteer workforce:

	<b>Financial Year 2017-18 Number of CFRs</b>	<b>Financial Year 2018-19 Number of CFRs</b>	<b>Financial Year 2019-20 Number of CFRs</b>
<b>Total number of volunteer CFRs</b>			
<b>Active number of volunteer CFRs (went on-call at least once during year)</b>			
<b>Inactive number of volunteer CFRs (never went on-call during year)</b>			
<b>Number of new volunteer CFRs recruited during the year</b>			
<b>Number of volunteer CFRs leaving the service during the year</b>			

\* Enter N/A if the information requested in a box is unknown or not available

2) Demographics:

	<b>Financial Year 2017-18</b>	<b>Financial Year 2018-19</b>	<b>Financial Year 2019-20</b>

<b>Sex of CFRs (percentages sum to 100)</b>		<b>M %</b>	<b>F %</b>	<b>M %</b>	<b>F %</b>	<b>M %</b>	<b>F %</b>
<b>Age of CFRs</b>	<b>Number aged 18-35 years</b>						
	<b>Number aged 36-50 years</b>						
	<b>Number aged 51-65 years</b>						
	<b>Number aged over 65 years</b>						

\* Enter N/A if the information requested in a box is unknown or not available

3) Working pattern:

	<b>Financial Year 2017-18</b>	<b>Financial Year 2018-19</b>	<b>Financial Year 2019-20</b>
<b>Average number of hours in a single on-call period for one CFR</b>	hours	hours	hours
<b>Average number of on-call periods per week for one CFR</b>	on-calls/week	on-calls/week	on-calls/week
<b>Percentage (out of 100) of CFRs operate on their own when on-call</b>	%	%	%

\* Enter N/A if the information requested in a box is unknown or not available

4) Geography:

	<b>Financial Year 2017-18</b>	<b>Financial Year 2018-19</b>	<b>Financial Year 2019-20</b>
<b>Percentage (out of 100) of volunteer CFRs operating in urban areas</b>	%	%	%
<b>Percentage (out of 100) of volunteer CFRs operating in rural areas</b>	%	%	%
<b>Percentage (out of 100) of volunteer CFRs operating in both urban and rural areas</b>	%	%	%
<b>TOTAL</b>	100 %	100 %	100 %

\* Enter N/A if the information requested in a box is unknown or not available

5) Training. Please break down the total workforce of volunteer CFRs by highest level of qualification or level of training achieved during the financial year:

	<b>Write in CFR level or qualification</b>	<b>Financial Year 2017-18 Number of CFRs</b>	<b>Financial Year 2018-19 Number of CFRs</b>	<b>Financial Year 2019-20 Number of CFRs</b>
<b>Level or qualification</b>				
<b>Level or qualification</b>				
<b>Level or qualification</b>				
<b>Level or qualification</b>				
<b>Level or qualification</b>				
Other (please specify below; if further space is needed, please use page 11)				
<b>Level or qualification</b>				
<b>Level or qualification</b>				

\* Enter N/A if the information requested in a box is unknown or not available

6) Participation in training:

	<b>Financial Year 2017-18</b>	<b>Financial Year 2018-19</b>	<b>Financial Year 2019-20</b>

<b>Percentage (out of 100) of volunteer CFRs that participated in at least one training course during year</b>	%	%	%
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\* Enter N/A if the information requested in a box is unknown or not available

**Please continue to Part B**

## PART B FINANCIAL RESOURCES

### BUDGET PROVISION FOR COMMUNITY FIRST RESPONDERS

7) Does the <insert trust acronym> Finance Department determine an annual budget for CFRs? **Yes / No** [delete as appropriate]

**If the answer to (7) is yes, please proceed to question (8)**

**If the answer to (7) is no, please proceed to question (11) on the next page**

8) Please give the annual budget provision made for CFRs for the financial years given in the table below:

	<b>Financial year 2017-18 budget</b>	<b>Financial year 2018-19 budget</b>	<b>Financial year 2019-20 budget</b>
<b>Annual provision for CFRs</b>	£	£	£

9) Does the <insert trust acronym> Finance Department break down the annual budget for CFRs into components or headings? **Yes / No** [delete as appropriate]

10) If the answer to (9) is yes please give those breakdowns by heading where possible in the table below, if no please go to (11) on the next page:

<b>Heading / Component</b>	<b>Financial year 2017-18 budget</b>	<b>Financial year 2018-19 budget</b>	<b>Financial year 2019-20 budget</b>
<b>Training</b>	£	£	£
<b>Vehicle</b>	£	£	£



<b>Equipment</b>	£	£	£
<b>Maintenance</b>	£	£	£
<b>Support Staff</b>	£	£	£
Other headings (please specify below; if further space is needed please use page 11)			
	£	£	£
	£	£	£

## INCURRED EXPENDITURE FOR COMMUNITY FIRST RESPONDERS

11) Matched to the budget entries made above (if possible), please give actual expenditure for CFRs by financial year in the tables below:

	<b>Financial Year 2017-18 expenditure</b>	<b>Financial Year 2018-19 expenditure</b>	<b>Financial Year 2019-20 expenditure</b>
<b>Actual spend for CFRs</b>	£	£	£

<b>Heading / Component</b>	<b>Financial Year 2017-18 expenditure</b>	<b>Financial Year 2018-19 expenditure</b>	<b>Financial Year 2019-20 expenditure</b>
<b>Training</b>	£	£	£
<b>Vehicle</b>	£	£	£
<b>Equipment</b>	£	£	£
<b>Maintenance</b>	£	£	£
<b>Support Staff</b>	£	£	£
<b>Other headings (please specify below; if further space is needed, please use page 11)</b>			
	£	£	£
	£	£	£

**Please continue to Part C**

**PART C FINANCIAL DETAIL: COST BREAKDOWNS FOR COMMUNITY FIRST RESPONDERS**

**TRANSPORT (Purchase, Fuel and Maintenance)**

12) Please give a breakdown of expenditures by financial year to provide CFRs with transport. Expenditure categories are purchase cost, cost of fuel and cost of maintenance carried out:

	<b>Financial Year 2017-18 expenditure</b>	<b>Financial Year 2018-19 expenditure</b>	<b>Financial Year 2019-20 expenditure</b>
<b>Purchase cost of CFR transportation</b>	£	£	£
<b>Cost of fuel for CFR transportation</b>	£	£	£
<b>Maintenance cost of CFR transportation</b>	£	£	£

\* Enter N/A if the information requested in a box is unknown or not available

13) Please provide the total mileage travelled and the total of reimbursements paid to CFRs by financial year:

	<b>Financial Year 2017-18</b>	<b>Financial Year 2018-19</b>	<b>Financial Year 2019-20</b>
<b>Total mileage claimed by CFRs</b>	miles	miles	miles

<b>Total of mileage claims reimbursed to CFRs</b>	£	£	£
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\* Enter N/A if the information requested in a box is unknown or not available

14) Please give the number of <trust acronym> vehicles allocated to CFRs by financial year:

	<b>Financial Year 2017-18 Number of vehicles</b>	<b>Financial Year 2018-19 Number of vehicles</b>	<b>Financial Year 2019-20 Number of vehicles</b>
<b>Ambulances</b>			
<b>Responder cars</b>			
<b>Motorbikes/Scooters</b>			
<b>Pushbikes/e-bikes</b>			
<b>Pool cars</b>			
<b>Other (please specify)</b>			

\* Enter N/A if the information requested in a box is unknown or not available

15) Are there any other general details you can give about the number of vehicles allocated to CFRs in <trust acronym>? For example, are special arrangements made for CFRs in rural locations? Approximately what percentage of Transport resource costs are incurred for CFRs operating in rural locations?

If further space is needed, please use page 11

**EQUIPMENT (Purchase and Maintenance)**

16) Please give a breakdown of expenditure on equipment purchase and maintenance by financial year provided by <trust acronym> for the use of CFRs:

	Financial Year 2017-18		Financial Year 2018-19		Financial Year 2019-20	
Heading	Purchase Cost	Maintenance Cost	Purchase Cost	Maintenance Cost	Purchase Cost	Maintenance Cost
<i>(please specify)</i>	£	£	£	£	£	£
<i>(please specify)</i>	£	£	£	£	£	£
<i>(please specify)</i>	£	£	£	£	£	£
	£	£	£	£	£	£
	£	£	£	£	£	£
	£	£	£	£	£	£
	£	£	£	£	£	£

**SUPPORT STAFF NUMBERS (support given to CFRs)**

17) Please give a breakdown of <insert trust acronym> staff numbers and their total wages bill incurred for maintaining and training CFRs by financial year:

	Finance Year 2017-18		Finance Year 2018-19		Finance Year 2019-20	
	Number	Wage Bill for Year (£)	Number	Wage Bill for Year (£)	Number	Wage Bill for Year (£)
<b>CFR Trainers</b>		£		£		£
<b>CFR Coordinators</b>		£		£		£
<b>CFR Team Management / Executive Leadership</b>		£		£		£
<b>CFR-dedicated Call Takers in Ambulance Control</b>		£		£		£
<b>CFR-dedicated Dispatchers in Ambulance Control</b>		£		£		£
<b>CFR-dedicated advisors in Ambulance Control</b>		£		£		£
<b>Staff dedicated to helping CFRs in rural locations</b>		£		£		£



<b>External advisors / Management Consultants</b>		£		£		£
<b><i>Other (please specify)</i></b>		£		£		£

\* Enter N/A if the information requested in a box is unknown or not available

**Thank you for completing this questionnaire**