



# London Ambulance Service

NHS Trust

London Ambulance Service NHS Trust

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Mr Will Tuckley CEO  
Mulberry Place  
5 Clove Crescent  
London  
E14 2BG

5<sup>th</sup> July 2020

OFFICIAL

Dear Mr Will Tuckley

## **Traffic Management Act 2004: network management in response to COVID-19 statutory guidance**

On 23 May the Government updated the guidance for network management in response to COVID-19, with the Secretary of State for Transport setting out the expectation for 'local authorities to make significant changes to their road layouts to give more space to cyclists and pedestrians'.<sup>1</sup>

The London Ambulance Service (LAS) generally supports these proposals in order to assist the recovering from COVID-19 and to promote active travel, while helping to achieve the aim of providing a lasting legacy of greener, safer transport. However there is a level of concern around the types of proposed changes, speed of implementation and limited consultation with emergency services around these schemes.

The LAS is keen to work with Transport for London (TfL) and local authorities to support any proposed changes as required by the statutory guidance. The guidance specifies that TfL and local authorities should 'consult with the local chiefs of police and emergency services to ensure access is maintained where needed'. The LAS therefore kindly requests that TfL and local authorities seek input from stakeholders during the design phase and allow time for consideration of the impact of any changes to road systems and provide a response.

Our attendance targets are set nationally by the Department of Health and are based on the clinical need of the patient; with immediately life threatening calls requiring an ambulance response within 7 minutes of the 999 call. The LAS are concerned that some changes to road layouts, design features suggested and traffic management schemes proposed may impede our response to time critical patients and ability to convey patients to definitive hospital care without delay or hindrance.

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<sup>1</sup> [Department for Transport Statutory guidance :Traffic Management Act 2004: network management in response to COVID-19 Updated 23 May 2020](#)



The LAS therefore, kindly requests that you consult the LAS and work with our area management teams locally to ensure that proposals, or any temporary measures while works are ongoing, do not affect our ability to attend incidents and convey patients to hospital.

**We would be grateful if notifications of any proposals to introduce new measures could be sent to [REDACTED] and through your current ambulance service links from the list provided overleaf.**

To discuss these issues further, please contact Emergency Planning and Resilience Officer [REDACTED] from our Emergency Preparedness Resilience and Response Team. I have also attached a Preventing Future Deaths Notice (redacted) from HM Coroner around temporary traffic schemes and need to consult with emergency services and a list of key considerations for local authority highways departments to consider when designing schemes from an ambulance service perspective.

With best wishes,



**Khadir Meer**  
Chief Operating Officer



## Key Considerations – Ambulance Service Perspective

Things that need to be considered when planning projects;

- It is not acceptable to delay the ambulances reaching address or 999 calls within a restricted traffic area, as any delay could result in death or permanent injury to a patient. HM Coroner has issued prevent future death notices regarding these issues previously, so any scheme must easily allow emergency vehicle access at all times during operation. I have attached the PFD notice from the Leeds Head Coroner.
- An obstruction of emergency services could also be considered as obstruction under the Emergency Workers (Obstruction) Act 2006. So measures must be put in place to ensure equal access to all services.

<http://www.legislation.gov.uk/ukpga/2006/39/section/1>

Main issues considered in plans;

- Closure of roads without consultation – any closures must, at all times, have emergency vehicle access of 3.5 metres to allow ambulance easy unimpeded access.
- ANPR enforcement cameras are ideal ways of enforcing restrictions without physically closing or blocking roads.
- If a diversion is put in place these must be very small and careful consideration to other delays like width restrictions, parking bays, speed bumps, barriers and one way streets need to be taken into account to minimise further delays.
- Barriers requiring GERDA or FB keys. London Ambulance Services vehicles do not carry GERDA or FB keys so any bollards/gates would need to be able lowered/opened remotely by a control centre to allow ambulance access, this must be a 24/7 operation and a quick response from any control centre or traffic marshal.
- Immovable concrete or similar barriers/planters must allow emergency access gaps of 3.5 metres to allow access at all times.
- Clear signage must be visible to make it evident that emergency vehicle are allowed access. (Access permitted for emergency vehicles for example) both on street signage and road paintings.
- Where lanes are closed on roads – safe parking areas are needed for crews to park in if dealing with an incident on these roads for safety reasons, otherwise we will routinely have to block routes to attend incidents as we cannot delay reaching patients, this will than increase congestion further.
- LAS does not have emergency routes due to the fleet utilisation and nearest ambulance dispatched model, as we don't normally respond from stations.
- Local authority highways teams and TFL must contact local management teams to discuss any changes to roads or traffic order either temporary or experimental and allow sufficient consultation periods to address concerns and potential impacts.
- Local authorities need to speak to each other around schemes as some boroughs to avoid closures to create a coordinated approach to schemes.
- The considerations are also applicable to wider health and social care services including patient transport services and community based health and social care services, as patients will need to be picked up for appointments like dialysis, cancer care and also discharged home from hospital.



## London Ambulance Service Borough Contacts List

North West London		
Brent	[REDACTED]	Area Stakeholder Engagement Manager [REDACTED]
Ealing	[REDACTED]	
Hammersmith and Fulham	[REDACTED]	
Harrow	[REDACTED]	
Hillingdon	[REDACTED]	
Hounslow	[REDACTED]	
Kensington and Chelsea	[REDACTED]	
Westminster	[REDACTED]	
North Central London		
Barnet	[REDACTED]	Area Stakeholder Engagement Manager [REDACTED]
Camden	[REDACTED]	
Enfield	[REDACTED]	
Haringey	[REDACTED]	
Islington	[REDACTED]	
North East London		
Barking and Dagenham	[REDACTED]	Area Stakeholder Engagement Manager [REDACTED]
City of London	[REDACTED]	
Hackney	[REDACTED]	
Havering	[REDACTED]	
Newham	[REDACTED]	
Redbridge	[REDACTED]	
Tower Hamlets	[REDACTED]	
Waltham Forest	[REDACTED]	



<b>South East London</b>		
Bexley	████████████████████	<b>Area Stakeholder Engagement Manager</b> ████████████████████
Bromley	████████████████	
Greenwich	██████████████████	
Lambeth	██████████████████████	
Lewisham	██████████████████	
Southwark	████████████████████	
<b>South West London</b>		
Croydon	██████████████████████	<b>Area Stakeholder Engagement Manager</b> ████████████████████
Kingston	██████████████████	
Richmond	██████████████████	
Merton	██████████████████████	
Sutton	██████████████████	
Wandsworth	████████████████████	

