



South East Coast Ambulance Service



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Best Patient Care? Or is it?

**Malcolm Finn
International Development Advisor
Learning and Development Lead**



11 NHS Ambulance Services in England

- North East
- North West
- Yorkshire
- East Midlands
- West Midlands
- Great Western
- South Western
- South Central
- East of England
- London
- South East Coast





South East Coast Ambulance Service



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The Story





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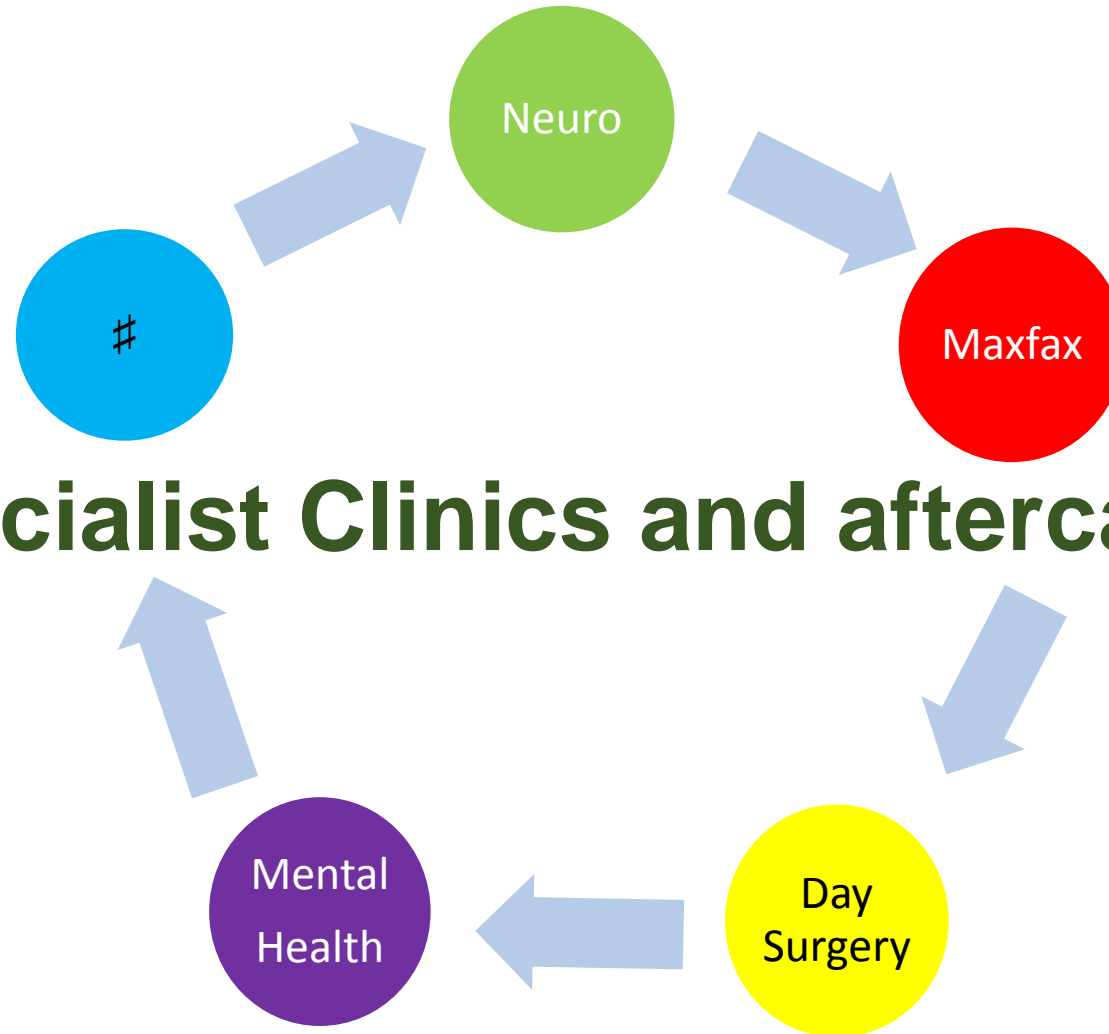


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Physiotherapy
Occupational Therapy



Specialist Clinics and aftercare



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ITU





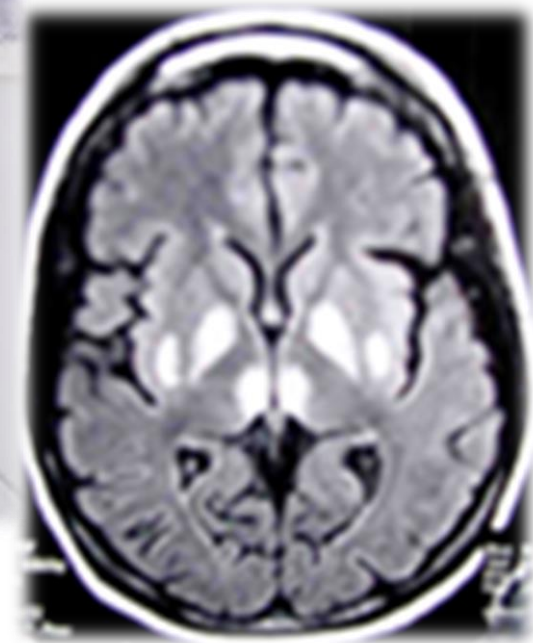
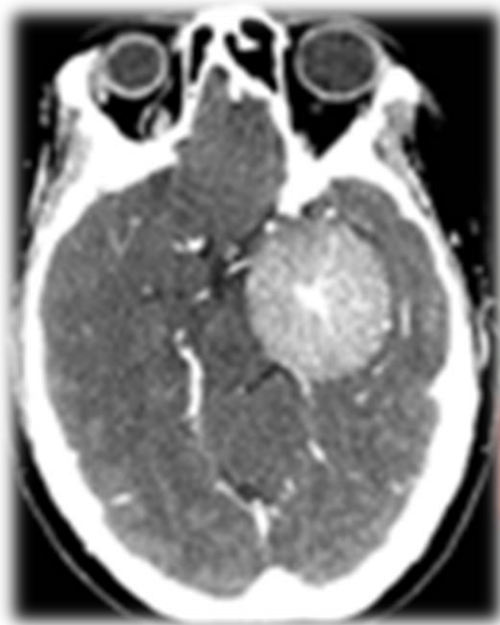
Mark de Rond

Delayed??





Delayed??





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Paramedic

Emergency
Care
Assistant

Emergency
Medical
Technician



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The Figures

1.25 million people die as a result of road traffic collisions each year (WHO 2010)

It has been estimated that 450 – 600 lives could be saved each year (NAO)

20-50 million suffer non-fatal injuries of which many incur a disability due to injury (WHO 2010)

The cost was approx. 3% of a countries GNP (WHO 2010)

5% in low/middle income countries (WHO 2010)

In the UK in 2011 1797 Fatal, 20986 Serious Road Accidents (Dept. of Transport)





Road traffic injuries cause considerable economic loss to victims, families and the nation.

- Cost of treatment (including rehabilitation and incident investigation)
- Loss of productivity
- Family off work or school to care for the injured



Key Costs for Road Accidents (2011) per accident

- Fatal casualties (including lost output, medical, ambulance and human cost)
- £1.8 million
- Serious casualties (including lost output, medical, ambulance and human cost) - £216,000
- Total cost for all fatal and serious casualties in 2011 - £547 million



Family Emotions

- Shock, panic, denial, “Please let him live”
- Relief, elation, denial, “He’s going to be fine”
- Hope, “He’s still making progress, but it’s slow”
- Realisation, anger, depression “He’s not getting back to his old self”
 - Acceptance, recognition, “Our lives are different now”



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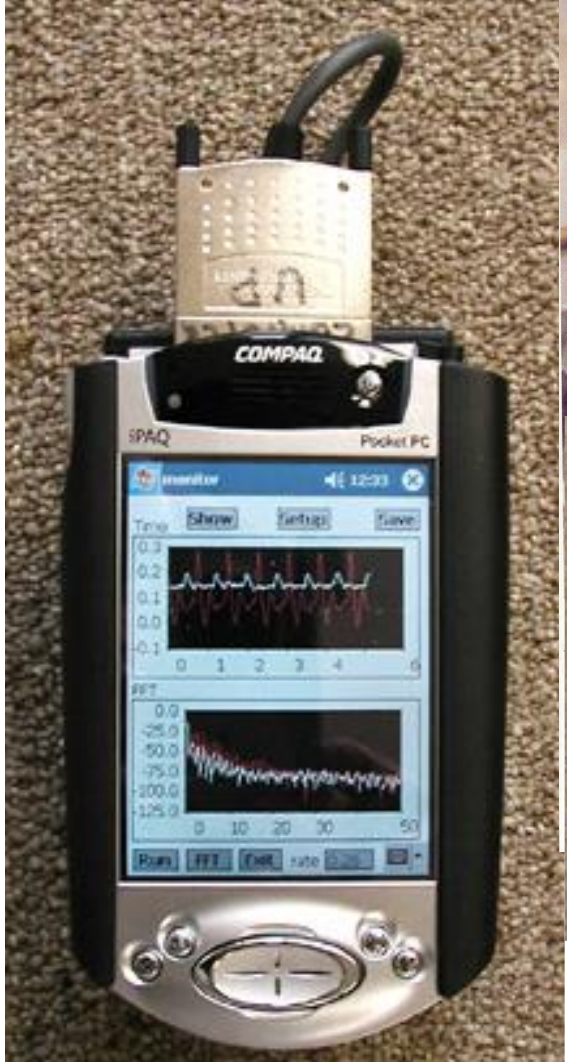
Paramedic

Paramedic Practitioner

Emergency Care Assistant

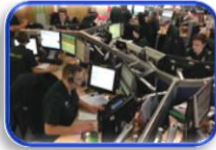
Emergency Medical Technician

Critical Care Paramedic



Developing Ambulance Services

1980s



Ambulance Control



A&E Ambulance



PTS Ambulance

1990s



Ambulance Control



A&E Ambulance



Ambulance Response Car



PTS Ambulance



Air Ambulance

2000s



Hear & Treat



See & Treat



Critical Care - CCP



A&E Ambulance



PTS Ambulance



HART



HEMS

2010s



Hear & Treat



See & Treat



Critical Care - CCP



A&E Ambulance



PTS Ambulance



HART



HEMS



NHS 111

2016



Hear & Treat



See & Treat



Critical Care - CCP



A&E Ambulance



PTS Ambulance



HART



HEMS ?

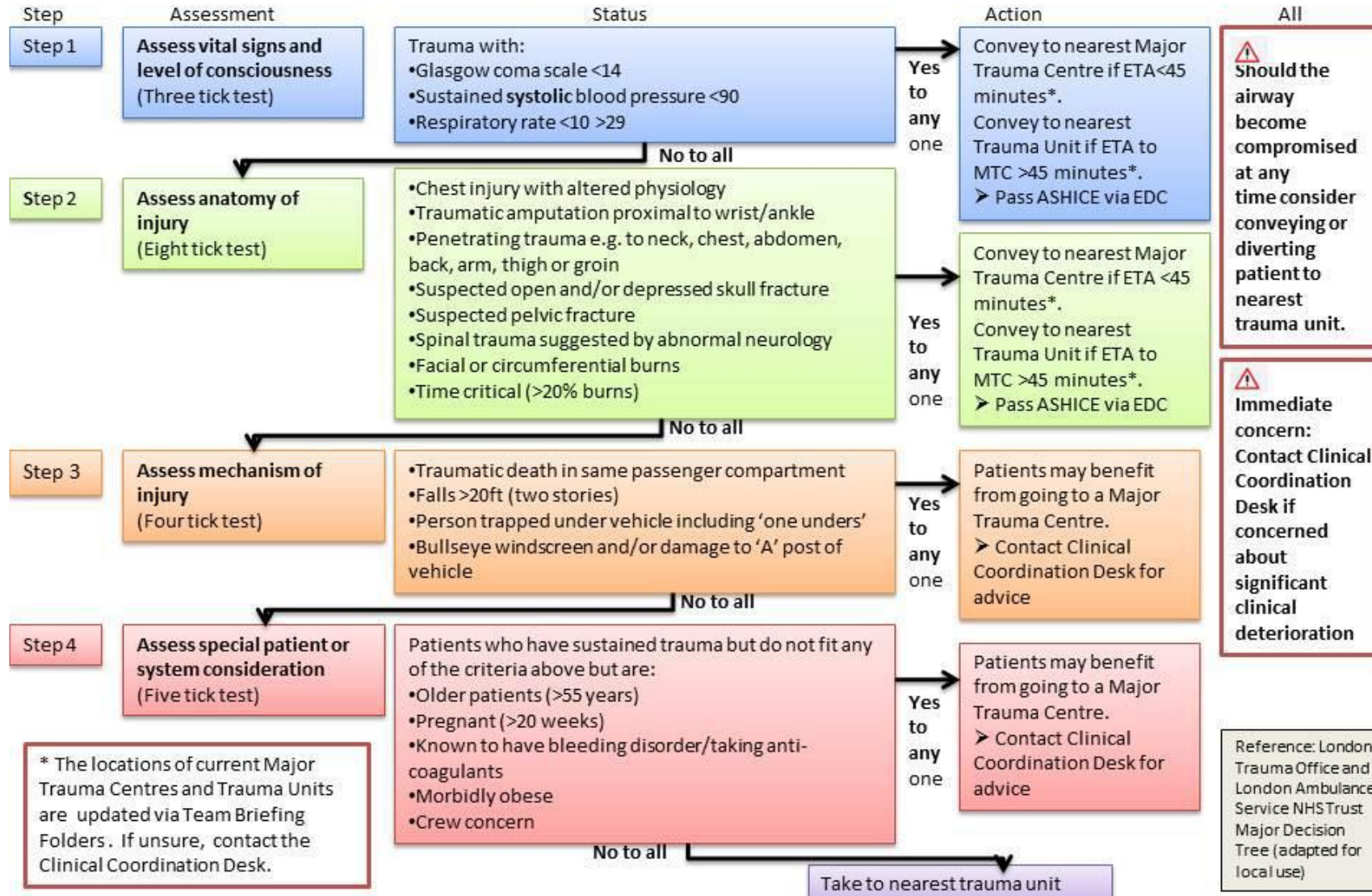


Fire Fighter First Response Unit?



Adult Major Trauma Decision Tree

In cases of paediatric trauma, contact Clinical Coordination Desk



* The locations of current Major Trauma Centres and Trauma Units are updated via Team Briefing Folders. If unsure, contact the Clinical Coordination Desk.



New major trauma centres to save up to 600 lives every year

Review of Major Trauma Networks reveals increase in patient survival rates

[NHS Choices website.](http://www.nhs.uk/choices)

Major Trauma Centres



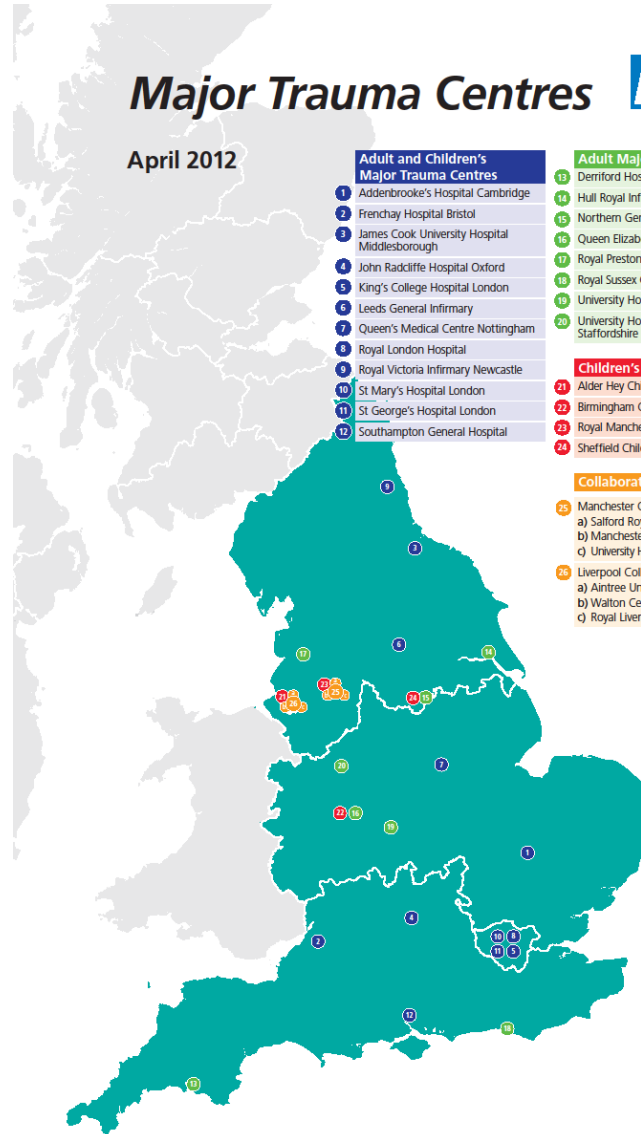
April 2012

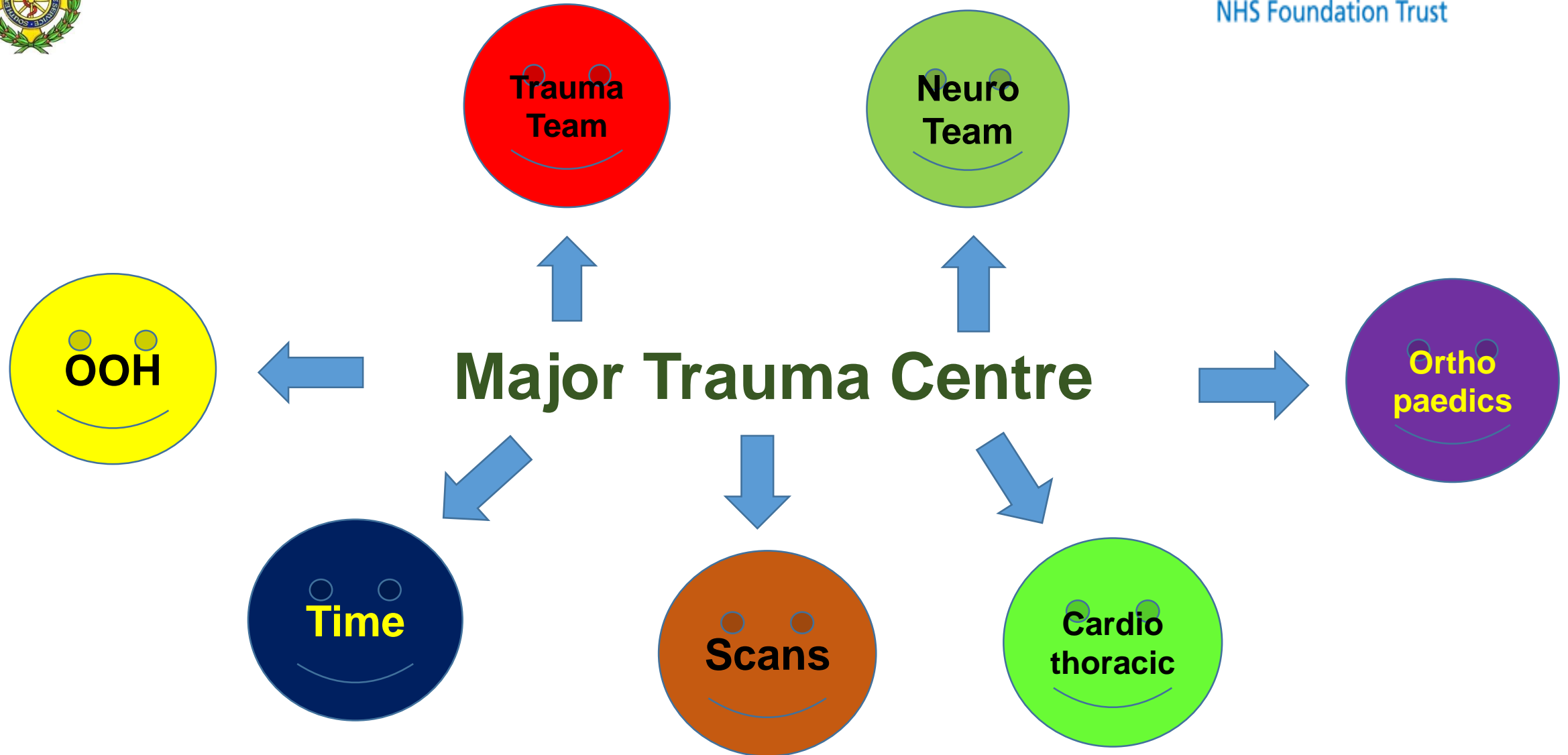
- Adult and Children's Major Trauma Centres**
- 1 Addenbrooke's Hospital Cambridge
 - 2 Frenchay Hospital Bristol
 - 3 James Cook University Hospital Middlesbrough
 - 4 John Radcliffe Hospital Oxford
 - 5 King's College Hospital London
 - 6 Leeds General Infirmary
 - 7 Queen's Medical Centre Nottingham
 - 8 Royal London Hospital
 - 9 Royal Victoria Infirmary Newcastle
 - 10 St Mary's Hospital London
 - 11 St George's Hospital London
 - 12 Southampton General Hospital

- Adult Major Trauma Centres**
- 13 Derriford Hospital Plymouth
 - 14 Hull Royal Infirmary
 - 15 Northern General Hospital Sheffield
 - 16 Queen Elizabeth Hospital Birmingham
 - 17 Royal Preston Hospital
 - 18 Royal Sussex County Hospital Brighton
 - 19 University Hospital Coventry
 - 20 University Hospital of North Staffordshire Stoke on Trent

- Children's MTCs**
- 21 Alder Hey Children's Hospital Liverpool
 - 22 Birmingham Children's Hospital
 - 23 Royal Manchester Children's Hospital
 - 24 Sheffield Children's Hospital

- Collaborative**
- 25 Manchester Collaborative MTC
 - a) Salford Royal NHS Trust
 - b) Manchester Royal Infirmary
 - c) University Hospital South Manchester
 - 26 Liverpool Collaborative MTC
 - a) Aintree University Hospital
 - b) Walton Centre
 - c) Royal Liverpool University Hospital







Latest Evidence

- **August 2010** Ambulance Service Network / NHS Confederation Report
Implementing Trauma Systems: Key issues for the NHS

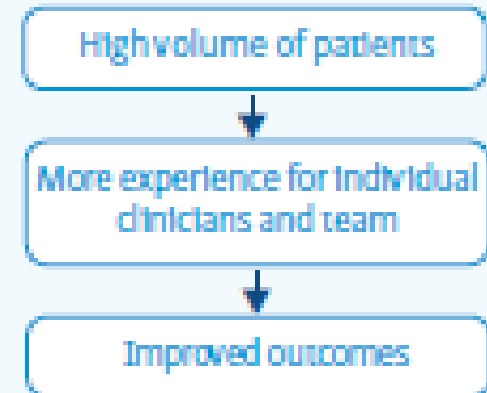
Case study – South East Coast Ambulance Service NHS Trust critical care paramedic pilot

The South East Coast Ambulance Service critical care paramedic (CCP) programme is modelled on Melbourne, Australia's very successful mobile intensive care paramedic (MICA) scheme.

The project takes experienced paramedics and provides them with an additional year of specialist training to enable them to manage the most seriously ill and injured patients more effectively. The curriculum was developed with a grant from the NHS Challenge fund and is delivered through a combination of classroom, clinical simulation and hospital placement-based teaching by senior clinicians. One CCP crew is planned for each PCT area and are selectively tasked by ambulance control to the more critical calls; they typically treat four times as many patients needing resuscitation and trauma care than other paramedic units.

The combination of increased training and increased exposure to the sickest patients, means that clinical skills are well honed and practised frequently, and ensures that the most experienced paramedics are available to the patients who need them most. The scheme was devised with both improving patient outcome and efficiency in mind and required no additional staff or training costs. An NHS Service Delivery and Organisation (SDO) Network evaluation is underway in an attempt to determine which aspects are most important in achieving quality improvements.

Figure 8: Quality – volume relationship: traditional interpretation





The Course

- Duration of 8 months.
- Incorporating:
 - 32 days university sessions
 - 280 hours of practice placement in A&E, Theatre & ITU
 - Advanced Life Support, European Paediatric Life Support Courses
 - Competency based practice post study achieved through Skills Assurance Time



Course content

Four core modules (building clinical judgement, experiential practice and dynamic decision making from which practice can expand according to future patient needs)

- Patient Assessment and Management
- Foundations in Critical Care (physiology, pharmacology, pathophysiology)
- Advanced Airway Management & Advanced Resuscitation
- Critical Care Transport

All integrated to each other and with both technical and non-technical content.



Cost-benefit analysis shows 'value of life saved' is £34,000 for paramedics operating as CCPs, compared to £252,000 for doctors providing.





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“Whatever the complexion of future challenges, having a well developed and more highly trained workforce with specific skills and capabilities, directed at the care of the seriously ill and injured, is an investment that is expected to play an important role in future patient care”

(Paul Sutton and Andy Newton, Sept 2008)



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