

News moulais

For people who live and work in the capital

Good advice

Helping to care for patients when it's not an emergency

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Olympic thank you



PARALYMPIAN Martine Wright, who lost both her legs in the London bombings in 2005, praised ambulance staff for their work during the 2012 Games.

The sitting volleyball star and Olympic BMX athlete Liam Phillips both attended a special event held for staff in November, and presented certificates.

Martine said: "Thank you for what you did on 7/7, thank you for what you did this summer and making the Games so special, and thank you for what you do every single day of your working lives."

otroke

MORE than 8,250 patients suspected of suffering stroke in the capital were taken by ambulance crews directly to a specialist hospital last year, according to new figures.

A life-threatening illness that reduces the flow of blood to the brain, stroke needs treatment – which can include being given a clotbusting drug – as quickly as possible to give patients the best chance of survival. In 2011/12, the average

ambulance journey time to London's eight hyper-acute stroke units using blue lights and sirens was just 15 minutes.

London Stroke Clinical Director, Professor Anthony Rudd said: "Stroke is a medical emergency: the quicker patients get to a centre capable of providing the appropriate care the more likely it is that they will survive and go home having made an excellent recovery.

"The London Ambulance Service has been a key partner in delivering a stroke service that is now recognised as being one of the best in the world."

Ambulance staff use a simple assessment, known as the Face Arm Speech Time test, to identify patients who are potentially suffering stroke.

A stroke survivor's story – page 2.

InBrief

Top job

NEW Chief Executive Ann Radmore will be taking up her post with the Service in the new year.

Ann, who is currently the Chief Executive of NHS South West London, will start in the role on 7 January.

She said: "I am delighted to have been appointed and look forward to a new set of challenges that this important role will bring.

"I have lived in London all my life and worked in the NHS since 1983 and feel privileged to have the opportunity to work for this crucial, lifesaving service."



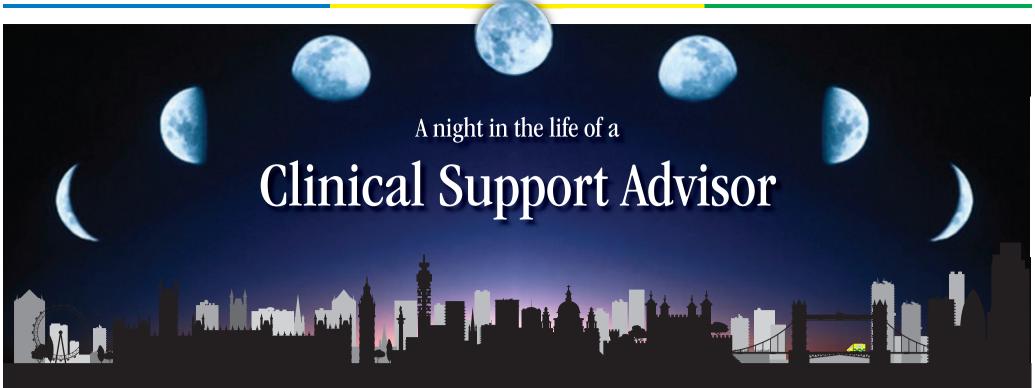
Man sentenced for assault on staff

A MAN was convicted of common assault following an attack on two members of staff.

Daud Omer, 28, grabbed Emergency Medical Technician Paul La Roche by the throat and tried to throw him down some stairs while he was being treated at his home in June this year.

Paul's crewmate was also assaulted outside the address in Abbot Road, Tower Hamlets.

Mr Omer was found guilty at Thames Magistrates' Court and sentenced to a 20-day community order and ordered to pay £50 compensation.





NOT everyone who dials 999 needs to be sent an emergency ambulance, and help for an increasing number of patients is being arranged in a different way to ensure they receive the most appropriate treatment.

For example, an A&E department may not always be the best place for someone, so many patients who ring 999 will either be called back by an experienced paramedic or emergency medical technician, or referred to NHS Direct for a clinical telephone assessment.

These patients may then be advised to see their GP, visit an urgent care centre or make their way to a minor injuries unit. Those who do require an ambulance will still receive one, but the over-the-phone assessment can enable the right response to be sent, while offering the patient advice and reassurance.

Clinical support advisor Alison Blakely is one of a number of staff who work in the emergency control room to help decide the best way to respond to the range of calls the Service receives every day.

Here she talks about some of the situations she dealt with during a shift.

A man with a numb A man with a num foot and calf pain has dialled 999, and I call him back to carry out a further assessment. He tells me that he doesn't want an ambulance, but that he has not been able to move very easily recently following surgery. This has put him at increased risk of deep vein thrombosis, so although he doesn't have any other symptoms at the moment he could potentially become very ill. I suggest that he attends his local emergency department and, grateful for the advice, he feels he is well enough to be taken there by his wife.

3:2087 I speak to a woman who calls us very regularly – sometimes a number of times a day. She is one of quite a large number of patients for who we have special protocols in place about how to help them. We will now only send staff to her address for particular types of calls, and on other occasions we will first carry out an assessment over the phone. She tells me that she would like a cup of tea and a chat, so I contact the social services on-call team who know her well. They will visit her and contact us if they think that she might need to go to hospital.

It is a typically busy night shift, and I speak to a number of other callers and patients. They include the family of a terminally-ill woman whose details are registered, so we are able to contact the hospice care team involved in looking after her so that we can respect her wishes to not be taken to hospital.

A man in his early 20s has called with back pain. He has been under the care of his GP for this ongoing problem and although he is able to move, the pain is worse this morning despite taking painkillers. I advise him that an ambulance will not be the most appropriate way of getting new tablets and, as the pain is not unbearable, it would be better to wait until his GP surgery opens in the morning. He is happy with this and agrees that an ambulance will not be sent.

A woman has hurt her ankle while running for a bus, but has managed to get back home and called 999 from there. Although it is swollen and painful, she is able to move the ankle and put weight on it. After advising her to take some painkillers, I suggest that the best place for her to be assessed would be a local minor injuries unit. One of her friends has just arrived at her house and so we agree that they will drive her there.



Stroke survivor tells his story

A 29-year-old PE teacher has spoken of his shock at suffering a stroke.

Peter Banks became unwell at his home in Hillingdon in January this year and was taken directly to the hyper-acute stroke unit at Charing Cross Hospital, rather than the local emergency department.

Specialists at the unit scanned Peter's brain to confirm he was suffering a stroke and gave him thrombolysis – a clot-busting drug to restore the flow of blood to the brain.

He was discharged five days later and has since returned to work at Acton High School.

Peter said: "I'd played golf in the morning and was at home doing some filing when my vision started to lose focus. Due to my age and level of fitness, I didn't know what was happening.

"My girlfriend was at



Reunion: Peter Banks with ambulance staff who treated him

church, so I called my parents in Sheffield. My speech was slurred and they dialled 999 for an ambulance."

"I didn't know what was happening."

A member of staff in a response car and an ambulance crew attended. Using the Face Arm Speech Time (FAST) test, they suspected that Peter was suffering stroke.

Paramedic Sam Barton said: "We could see that he was displaying the symptoms, and he could not communicate very well. At that point we looked at a picture of him to find out what he looked like normally.

"It was then we decided to take him to the unit at Charing Cross Hospital because they would have the best skills and equipment to treat a patient suffering stroke."

999 text film welcomed

PEOPLE with hearing loss are being shown how to access 999 for an ambulance in a new online video.

Motorcycle Paramedic Richard Webb-Stevens, who has hearing difficulties himself, uses British Sign Language in the film to tell deaf, hard of hearing and speech-impaired people how to use the emergencySMS service.

Once registered, users can send a text message to call for help from the ambulance, fire, police or coast guard.

A national charity has recognised the work of the Service in making the video.

Action on Hearing Loss Head of Capacity Helen Arber said: "We welcome the commitment by the London Ambulance Service to ensure deaf people who use British Sign Language are able to use emergencySMS.

"The subtitles will ensure



Reaching out: The two-minute film uses British Sign Language and subtitles

that the one in six people in London with a hearing loss will also be able to access the video."

Richard volunteers with the Service's Deaf Awareness Forum to develop and maintain links between ambulance staff and

London's deaf, hard of hearing and speech-impaired community.

Last year Richard appeared on BBC See Hear and was interviewed about his work caring for patients with the motorcycle response

How to register using **SMS** text messages:

- 1. Send the word 'register' in an SMS message to 999
- 2. You will then receive SMS messages about the service
- 3. When you have read these SMS messages reply by sending 'yes' in an SMS message to 999
- 4. You will receive an SMS message telling you that your mobile phone is registered or if there is a problem with your registration



InBrief

Baby boomer



A PARAMEDIC who delivered 22 babies during his career was among more than 30 people recognised at a ceremony for retired and long-serving members of staff.

Dave Roberts – pictured right with Chairman Richard Hunt – was based at Romford ambulance station and worked for the Service for 27 years.

He said: "After I delivered one woman's baby, she asked me what my name was. I replied 'Dave', and she said, 'Well, I'll call my baby Dave, then!""

Science of alcohol

AN AMBULANCE crew were among speakers at a special Science Museum event about the impact of alcohol on society.

Phil Guthrie and Kevin Lawlor talked about their experiences of responding to patients who have drunk too much, and the way in which the Service manages these types of calls.

Pudsey pull

FUNDRAISERS pulled an ambulance 12 miles through central London for BBC Children in Need.

It took the team of 20 staff almost eight hours to tug the four-tonne vehicle from Homerton ambulance station in Hackney to BBC Television Centre at White City, raising over £2,900 for the charity.



Tweets tell story of 999 demand

FOLLOWERS of social media site Twitter had unique access to one of the busiest emergency control rooms in the world when the Service held a 12-hour 'tweetathon' in October.

It covered every 999 call handled by a couple of call takers with over 13,000 followers able to see 'live' why people were requesting an ambulance. However, no identifiable details about the patients – such as their ages or locations of the incidents - were shared.

Head of Control Services Richard Webber said: "Tweeting some of the calls we received gave people a snapshot of the huge variety of work we deal with, and took them through some of the questions we ask and the advice we give."

During the session, dozens of people asked questions about the Service and expressed support for the initiative as a way of better understanding how and when to use the 999 system.

Follow @Ldn_Ambulance

Our top tweets

First call is to an elderly man who's been found at home not breathing. Juliet asks the caller to start chest compressions #999ambulance



A teenager has called to get help for stomach pains she's had for the last 4 days #999ambulance



If it isn't an emergency consider seeing your GP so we can keep ambulances free for those who need them #999ambulance

Patient care key to hospital plans



In safe hands: Not all patients are taken to A&E

MAINTAINING patient care is the key priority for the Service as it joins discussions about proposed changes to hospital services in London.

A number of A&E departments in the capital could be downgraded as part of plans that are being consulted on with the public.

Where these processes happen in different parts of the capital, the Service will ensure that the likely impact on ambulance journey times is one of the issues that will be taken into consideration.

Deputy Director of Operations Jason Killens said: "We will support changes that we believe will improve

care for our patients.

"We already bypass A&E departments to take people we diagnose with life-threatening conditions - such as heart attack, major trauma and stroke patients – to specialist centres where they receive expert care and stand a much better chance of survival.

"In cases of proposed A&E closures, we work closely with our NHS partners to ensure that the potential impact on ambulance journey times and any increase in demand is understood, and where necessary we seek extra funding so that we can provide additional ambulance resources in the area."

A TEDDY bear 'hospital' for children to practice their bandaging techniques was one of the activities drawing crowds at a Service health fair.

More than 300 people – including the Mayor of Enfield – attended the event in Southgate in November.

Visitors had the chance to learn resuscitation skills and

compare an ambulance from the 1970s with the modern day version, while staff from the Stroke Association and British Heart Foundation were also on hand to offer health advice.



A good rabbit: Hundreds of people of all ages got to talk to staff at the health fair



Always call 999 if somebody is seriously ill or injured.

About the care you have received

Contact our patient experiences department if you have any comments, feedback or complaints about the service you have received from us.

Call the team on 020 3069 0240 or email patientexperiences@londonambulance.nhs.uk

About membership

To speak to us about membership or update your details, call our membership office on 0800 7311 388 or email membership@londonambulance.nhs.uk

Online

Go to our website at www.londonambulance.nhs.uk, search for ldn_ambulance on Twitter or londonambulanceservice on Facebook.





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Stop and think. A&E and 999 services are for emergency and

A&E and 999 services are for emergency and life-threatening conditions only.

Your local high street pharmacy offers convenient, expert and confidential advice for a range of common illnesses and injuries, such as coughs, colds, sore throats, upset stomachs, aches and pains.

For more information on choosing the right service visit www.nhs.uk



Make sure you Choose Well.

Get the right treatment for you and help the NHS to manage its resources.