



"The London Ambulance Service (LAS) believes it is important to keep in touch with GPs. We hope you enjoy this month's newsletter and we welcome your feedback."

October 2014

Call Demand—update

On average the LAS receives about 28-35,000 calls per week with approximately 9000 red (immediately life threatening) calls. About 10% of our daily calls (400+) are from health care professionals. We expect the total call volume to increase over winter.

When you decide to send a patient to hospital consider:

- **Alternative methods of conveyance** – family/friends, taxi, public transport.
- **Time frame** – within 8 minutes for immediately life-threatening or within one to four hours. You can request within 30 minutes for unwell patients, not imminently life threatening, but unwell with concern.
- **PTS** - does the patient's condition warrant a paramedic crew or will patient transport services suffice? PTS can manage the less unwell, stable patients and this keeps paramedics available for the more unwell.
- **Special access or requirements** e.g. difficult entrances, entry key codes, very overweight (over 130 kg / 20 stone) and not or poorly mobile.



It is always preferable that the attending General Practitioner makes the request to ensure we have the correct information. This avoids sending the wrong resource(s) which could otherwise have been used for another more unwell patient

We are looking at negotiating a much tougher triage of HCP calls with the Commissioners.

We would also look at any HCP referral getting a 4 hour response unless the GP negotiates otherwise with an LAS clinician

Care plans : Please can you ask patients (and carers) to keep these visible for ambulance crews (and out of hours GPs) as the information will greatly assist with management.

London's stroke system saves lives



The capital's system of stroke care has been praised after being found to have saved around **96 lives a year** since being introduced in 2010.

The study, by UCL, compared the London model in which patients both within and outside the 4hr window to receive thrombolysis treatment are taken directly to a **hyper acute stroke unit (HASU)**, with a system in Manchester in which only patients within the 4hr time are taken to a HASU and under which no extra lives were saved.

LAS clinical lead for stroke, Dr Neil Thomson, said: "We have supported the changes in stroke care in London, recognising that whilst it does mean longer journeys for our patients, it is clearly the right thing to do. Hyper acute stroke care is not just about **thrombolysis**- it's about getting the diagnosis right as soon as possible, addressing the underlying causes and starting rehabilitation immediately. Our crews can rightly be proud of the contribution they make to the outcome of these patients."

The Service is continuing to work closely with the London stroke system and is currently supporting a 'direct to CT' trial at three HASUs.

12,766 - the annual reduction in the number of days stroke patients spent in hospital

The full article can be found at: www.bmj.com/content/349/bmj.g4757



Visit our website
Read more about the subjects covered :
www.londonambulance.nhs.uk

First Aid Training for GPs & surgery staff



The LAS has a team of trainers who deliver first aid courses to the public and businesses across the capital.

Courses include:

Emergency Life Support

A 3 hour course which teaches you the basic skills needed to save a life in an emergency.

Emergency First Aid at Work (6 hrs)

It provides successful candidates with the qualification to act as a works 'Emergency First Aider'. Regulated by Ofqual.

Both of the above courses include defibrillator familiarisation.

Full details can be found on our website:

<http://tinyurl.com/nauarmx>