



*"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."*

**September 2014**

## LAS re-contact audit

**Background** - in August 2014, a clinical audit concerning re-contact within the LAS was published. This clinical audit concerned patients who upon first attendance either refused or were not in need of conveyance to hospital, and who subsequently re-contacted the LAS within 24 hours.

The results of this clinical audit were very pleasing. 124 patients re-contacted the LAS following non-conveyance throughout the weeklong study period giving an overall re-contact rate of 2.5%. We found that **99.2%** of crews made appropriate clinical decisions regarding conveyance of the patient in their care; a high and reassuring figure.



**Elderly fallers** - presenting complaints were varied, but of particular note for GPs is the number of elderly patients who presented to the LAS with falls (it is mostly GPs who receive LAS falls referrals). Of the 124 patients who re-contacted the LAS:

- Thirty seven (29.8%) presented with falls on first attendance
- Within 24 hours twenty (16.1%) called us because they had fallen again
- The large majority of these patients were aged 60 or above.

To request a copy of the full report, please contact Joanna Shaw, Clinical Audit Manager, on 02077832514 or at [Joanna.Shaw@lond-amb.nhs.uk](mailto:Joanna.Shaw@lond-amb.nhs.uk).



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## Cardiac arrest trial



You may have seen in the press recently details of a cardiac arrest trial. **The Paramedic 2 trial** is a large-scale randomised control trial that compares the clinical and cost effectiveness of adrenaline versus a saline placebo in out-of-hospital cardiac arrest. The trial aims to improve the outcomes of the 50,000 patients suffering from out-of-hospital cardiac arrest each year in the UK. The trial is run by Warwick University alongside five ambulance services including London, Wales, the South Coast, North East and West Midlands.

**Why is the LAS taking part?** We attend approximately 10,000 out-of-hospital cardiac arrests each year, with a survival rate of 10%. We have endeavoured over the last 15 years to improve survival from out-of-hospital cardiac arrest and this study supports our continued ambition for the survival rate in London to mirror that of other high performing international Emergency Medical Services. The study is subject to Research Governance approval from our Clinical Audit and Research Unit.

**Eligible patients** - patients will be eligible for enrolment if they are in out-of-hospital cardiac arrest and advanced life support is attempted. Exclusions are cardiac arrest secondary to anaphylaxis, patients aged under 16, and known or apparent pregnancy. The trial will recruit patients over three years. It is expected that the first patient will be enrolled into the study in October 2014.

**At hospital** - the hospital will continue with their practices as currently with no changes. The LAS will of course make the Emergency Departments aware of this study.

**What will the findings focus on?** The study will look at survival to 30 days, neurological/cognitive outcome at hospital discharge and three and six months, and treatment costs.

For further details please contact [CARU.Enquiries@lond-amb.nhs.uk](mailto:CARU.Enquiries@lond-amb.nhs.uk) or 020 7783 2504 to speak to a member of the research team.

## Londoners asked to help ease pressure on ambulance service

On average, the Service receives 35,000+ emergency calls a week.

While the LAS continues to prioritise its response to patients with life-threatening conditions, those with less serious injuries and illnesses are being encouraged to call NHS 111 or make their own way to an urgent care centre, pharmacy or GP.

CEO Ann Radmore said: "Every year demand increases and now, in addition to this, there is a shortage of paramedics in the UK which is making it difficult for us to recruit.

"While we are taking steps to tackle these issues, we're asking Londoners to help us and help ease the pressure on our front line staff."

Read the full article:  
<http://tinyurl.com/nbjpv94>