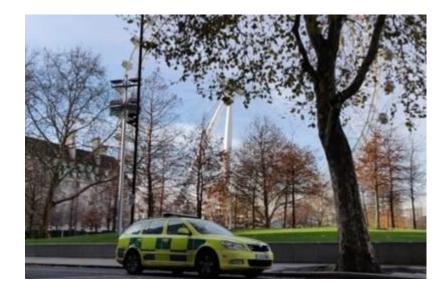


# **GP** Newsletter – South East

## What's happening in your area?

Vulnerable Persons Vehicle



Historically there has been a cohort of potentially vulnerable patients who at times of high incoming demand to the LAS have waited longer for an ambulance than is ideal. This group of patients would include (but is not exclusive to) elderly fallers, patients who have taken an overdose, those in mental health crisis and patients with complex social needs. In the main these vulnerable patients will be assigned a low triage category which effectively delays the LAS response.

To enable the LAS to effectively and safely manage these patients the Clinical Hub has medical oversight of these patients, they also monitor the Ambulance dispatch queue of those who are deemed the most vulnerable.

The Clinical Hub (CHUB) is a group of experienced paramedics and clinicians based at the two LAS control rooms. They are able to speak to the patients via the phone and are able to assess and triage the patient's needs. This group of clinicians are also able to signpost patients to more suitable alternatives where appropriate.

Having identified that there is a small group of patients that have the potential to be at a higher risk the LAS looked to alternative solutions in an effort to reduce risk and increase the patient experience. As a result of engagement with all groups of staff a proposal was put forward to pilot an ambulance that is targeted specifically at this group of potentially vulnerable patients.

In the South East Sector we have been trialing a Vulnerable Person vehicle which is based from within the Bromley Group. The initial pilot was started in December and has run throughout most of the winter months with small breaks to enable time for review, reflection and modification. Following a successful pilot the vehicle has been running on a more permanent basis since 25<sup>th</sup> March 2019.

The vehicle is a fully equipped ambulance staffed with 2 clinicians and is operating 24/7 with the specific aim of assisting the CHUB in supporting the identified group of potentially vulnerable patients.

We have seen an immediate success both in patient experience and a reduction in the time some of the vulnerable patients are waiting for an ambulance response. We have also seen that as this group of patients are generally of a lower acuity they are often suitable for a safe referral to an Appropriate Care Pathway (ACP).

This might include a referral to the local RAPIDS Team, A conveyance to the local UCC rather than the ED and also referrals to the LAS Mental Health response car.

In April the crews attended 247 patients in South East London with 43% of those patients not requiring an ED conveyance.

## **Clinical News**

## Macmillan End of Life Care Team



Since August 2018 Macmillan have been funding a two year programme to improve the palliative and end of life care service provided by the London Ambulance Service. The team consists of a Nurse consultant, Paramedic leads and an evaluation lead. The aim of the programme is to:

- Enhance staff knowledge, confidence and wellbeing
- Enhance patient and family/carer experience
- Reduce inappropriate resuscitation attempts
- Reduce inappropriate hospital conveyance
- Enhance the quality of care provision

From July the team will be implementing an End of Life Care Coordinator network at each ambulance station group that will focus on improving the care provision at a local level. Please get in touch if you would like to link with your local coordinator.

#### **Contact**: EOLC@Londonambulance.nhs.uk



### **Coordinate My Care (CMC)**

CMC is now the only way the London Ambulance Service can access a patient's care plan. CMC is flagged on our system using the patients address. If a 999 call is made the ambulance clinicians attending are notified that the plan is available to view. CMC is suitable for any patient you feel would benefit from their care plan being communicated to London Ambulance Service and 111 clinicians.

CMC is accessible to operational staff via an App on trust issued iPads. Ambulance crews are able to view a patient's care plan on scene, which can provide valuable information to guide clinical decision making. CMC is vital for ambulance clinicians as it provides key information about a patient that they will often have no pre-existing knowledge about. Ambulance clinicians can view your records of treatment

escalation plans, patient's wishes and important decisions that have been made, such as DNACPR status, using CMC. This information can prevent inappropriate emergency department admissions and enables patients to be supported according to their needs and wishes.

Since 1<sup>st</sup> April 2019 the London Ambulance Service have moved to holding all key clinical information about patients on CMC records. Patient Specific Protocols (PSP) are no longer accepted by the LAS. We are currently checking all existing PSPs, and that process will be completed by 1<sup>st</sup> July 2019. GP's will be informed if we discover a patient who requires a PSP to be migrated to a CMC plan.

For additional CMC training click here.

## London Ambulance Service News



### **Behind the Sirens podcast**

They're on the roads 24 hours a day, 365 days a year, responding to over 9 million Londoners, but what really goes on behind the sirens?

From major incidents to prank callers, the London Ambulance Service's new podcast gives listeners a peak into the day to day lives of staff in one of the world's busiest ambulance services.

Behind the Sirens is the perfect buddy for your commute. Join our host, Andrew, as he delves into what happens behind the sirens at London Ambulance Service. He meets with our mental health team, chats with some of our paramedics and delves into what life is like in our 999 control room.

You can subscribe on Apple Podcasts, Spotify and Google Podcasts.



### **Consultant Midwife receives national midwifery honour**

Amanda Mansfield, the Service's Consultant Midwife has received a national award from the Royal College of Midwives (RCM) for her contribution to midwifery.

Amanda received the honour at a ceremony at the Royal college of Midwives Education Conference in Bath and is the first midwife working in pre-hospital care to receive the fellowship.

Commenting on receiving the award, Amanda said: "I feel so honoured to be the first pre-hospital midwife to be recognised with a RCM fellowship."

"For many women, pregnancy and birth are normal life events, however occasionally emergencies do occur and they need to be managed quickly to ensure the safety of both mother and baby. It has been a great privilege to work on developing this emergency care and also help improve the support and training for emergency service staff in this area."

Amanda leads a team of midwives at the Service who have developed and delivered pioneering educational resources for emergency services staff - from those working in the control room to patient facing clinicians. This improved training is helping to make sure mums and babies receive the best care for their needs.

Amanda also led on the development and implementation of a Pan London prehospital Maternity Assessment and Screening tool, enabling clinicians to recognise when women who become unwell during pregnancy require emergency assistance.

Amanda has been a midwife for over 30 years. Before her current role she worked as a strategic midwifery and maternity leader at the Royal Free Hospital in London and at Stoke Mandeville, Wycombe and Wexham Park Hospitals.