



Pre-Hospital Critical Care and Retrieval Service

Governance Report – Summary

Reporting period: 1 to 31 August 2010



This report is a summary of the monthly Governance Report submitted to the Clinical Governance Committee, and shared with the Ambulance Trust as a means of reporting against our Service Level Agreement. The full report is available from the Helimedix Manager, Natalie Norman, if required. It includes additional sections on:-

- Team member's currency
- Maintenance status of transport platforms and equipment
- Duty Advice Doctor (DAD) activity
- Significant Events

The SLA commenced in September 2007 and much of the report will show our achievement from this date as well as the current month and previous month.

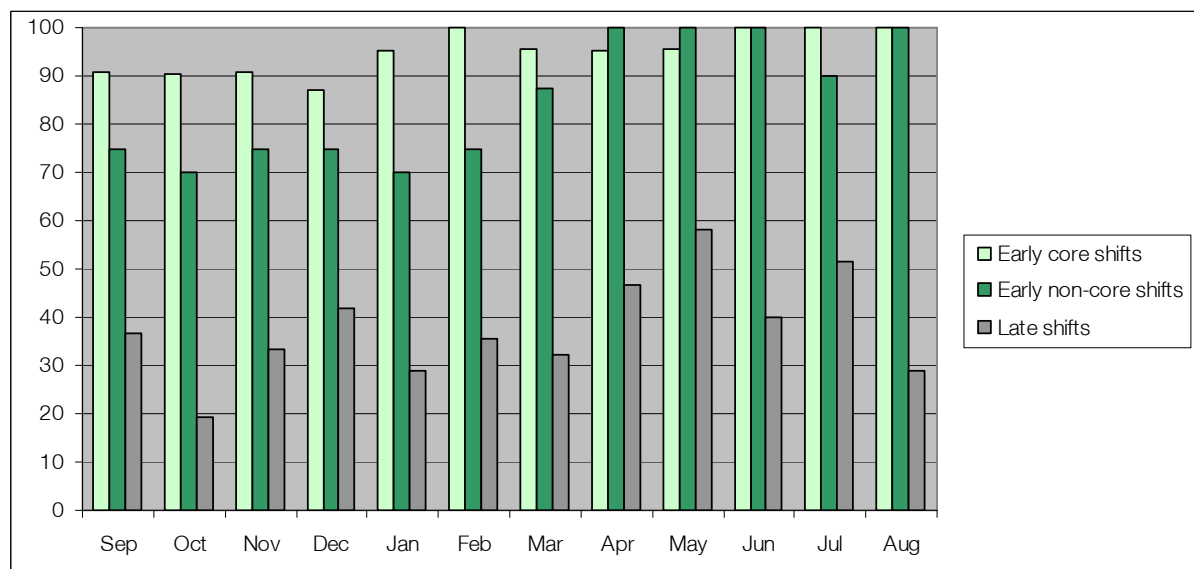
1.0 Staffing

1.1 The table below summarises the staffing of the service during August 2010.

A shift is staffed only with a current EMT Doctor and EMT Paramedic, and there are 2 shifts each day – early (0700-1700) and late (1600-0100). We refer to ‘core’ shifts which are those agreed within the terms of the SLA i.e. early shifts Sunday to Thursday.

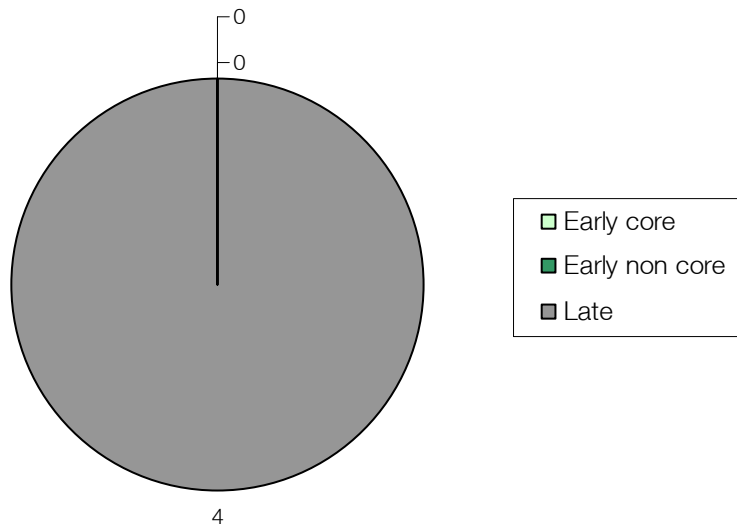
Shifts and staffing (% of hours provided)	August 2010	July 2010	SLA To date (from 10 September 2007)
Core Shift Cover Sun to Thu, 07.00 to 17.00	100%	100%	95.9%
All Shift Cover Sun to Sat, 07.00 to 01.00	70.1%	74.2%	60.6%

1.2 The graph below shows the percentage of cover provided for each month, for the past 12 months.

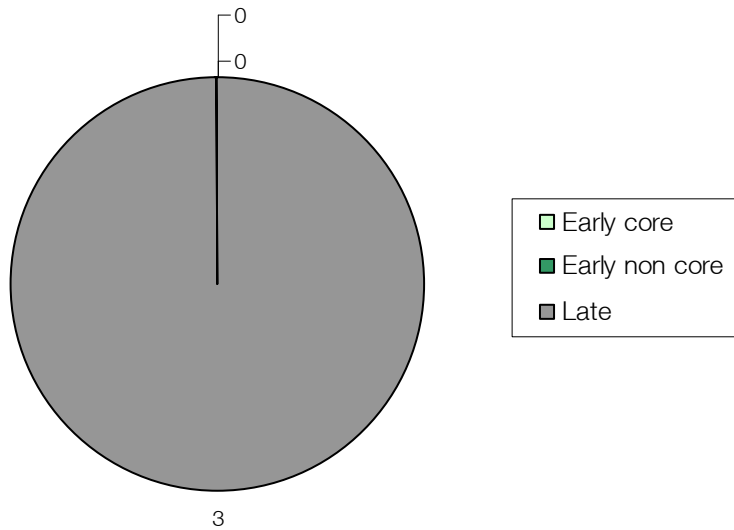


1.3 Of the 62 shifts available during August, 22 were not covered for the following reasons:

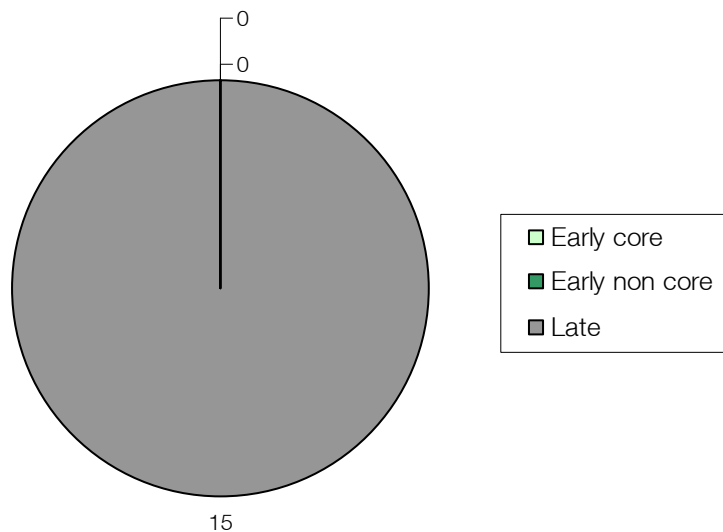
No Doctor Available



No Paramedic Available



No Team Available



2.0 Activity

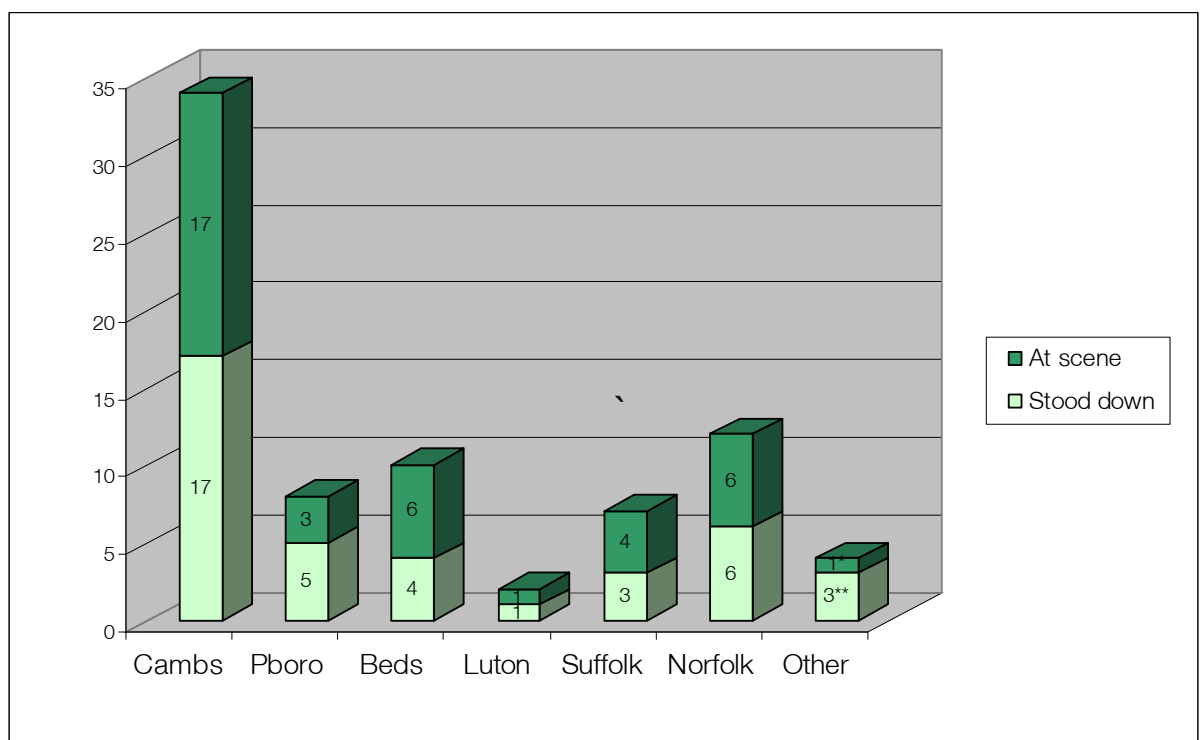
2.1 The table below summarises the activity of the service during August 2010.

Operational Activity - All Shifts	August 2010	July 2010	SLA To date (from 10 September 2007)
Number of automated notifications	303	342	20165
Number of activations	77	78	2518
Average number of activations per day	2.48	2.52	2.32
Stood down following activation	39	33	1165
Stand down rate	50.65%	42.31%	46.27%
Number of scene attendances	38	45	1353

2.2 Area of activity

The Team responds primarily to incidents within the counties of Cambridgeshire and Bedfordshire, but is able to respond to all counties in the East of England and those neighbouring areas. We report our activity by Primary Care Trust (PCT) area which in some cases may differ to county boundaries.

Graph 1 – activations (split into ‘stood down following activation’ and ‘scene attendances’) by PCT in Cambs and Beds (Cambridgeshire, Peterborough, Bedfordshire, Luton, Suffolk, Norfolk and Other)

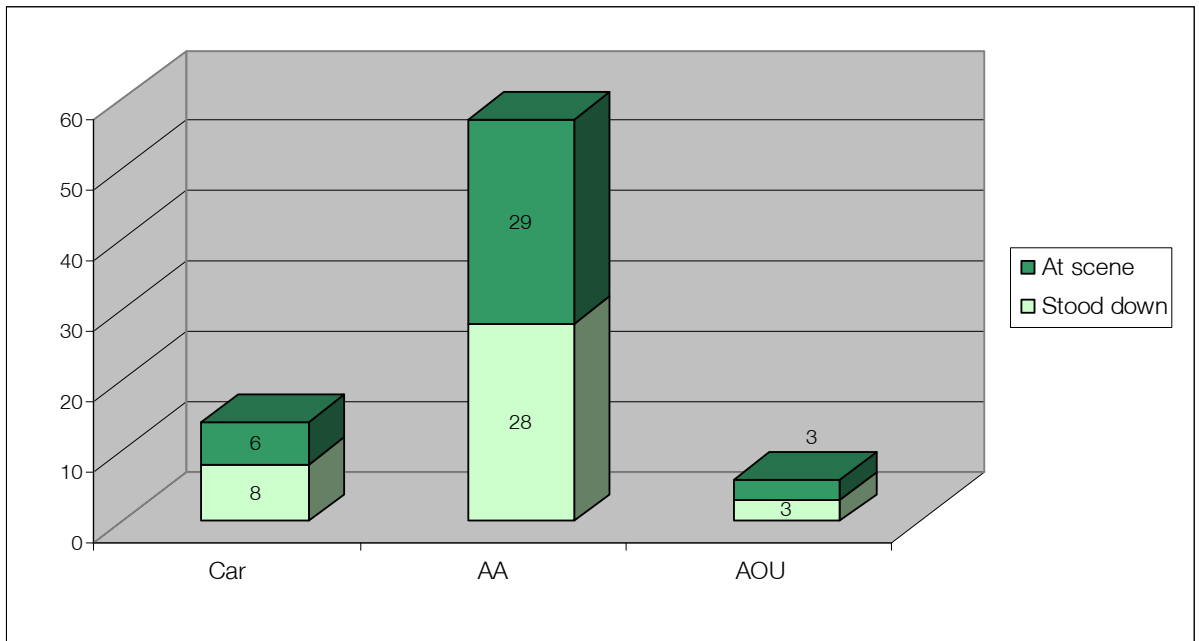


* The Helimedix team attended one incident in Northampton.

** The Helimedix team was stood down from one incident in Essex, two E N Hertfordshire and one Northants.

2.3 Operational activity by transport platform

Graph 2 – activations (split into ‘stood down following activation’ and ‘scene attendances’) by road, Air Ambulance, and Air Operations Unit.



There were no night hems missions in August

2.4 Transport platform availability

2.4.1 Availability of the transport platforms during service operating hours

	Response Vehicle (Lexus) (actual number of hours and % of total possible)	Air Ambulance (actual number of hours and % of total possible)	Police Helicopter (actual number of hour and % of total possible)
All early shifts (07:00 to 17:00)	228/310 73.5%	257.58/310 83.1%	251.25/310 81%
Core early (Sun-Thur 07:00 to 17:00)	178/230 77.4%	205.83/230 89.5%	183.25/230 79.7%
Non-core early (Fri/Sat 07:00 to 17:00)	50/80 62.5%	51.75/80 64.7%	68/80 85%
Late shifts (16:00 to 01:00*)	177/248 71.4%	0	206.5/248 83.3%
All possible shifts	405/558 72.6%	257.58/558 46.2%	457.75/558 82%
All possible shifts July 2010	547.5/558 98.1%	235.67/558 42.2%	407.25/558 73.0%
All possible shifts SLA to Date (10 September 2007)	18357.5/19566 93.8%	6834.17/19566 34.9%	11165.42/19566 57.1%

* Figures calculated on 9 hour shift duration so that 16:00-17:00 period isn't duplicated between Early & Late shifts.

3.0 Regional activity

The Clinical Coordination Centre (CCC) was introduced on a 12 month trial from 1st April 2010. The main purpose of the centre is to identify and dispatch the appropriate specialist resources (four air ambulance assets, HART/USAR and BASICS). The CCC operates between the hours of 07:00 – 18:00 7 days a week.

A monthly report is produced by the centre which reports on the regional activity and is circulated to all organisations involved in the delivery of the services. This report does not detail any deployments outside of the current CCC operating hours.

3.1 Summary table of regional air ambulance activity

	Early Shifts	Early shifts with doctors	Late shifts with doctor	Early shift scene attendances	Late shift scene attendances
Essex – EHAAT (08.00 to 18.00)	DATA NOT PROVIDED BY EEAST				
Herts - EHAAT (08.30 to 16.00)					
Norwich - EAAA (07.30 to 17.30)					
Wyton - Magpas (early 07.00 to 17.00 late 16.00 to 01.00)	31/31 100%	31/31 100%	9/31 29%	36	2

4.0 Clinical care

4.1 Patients attended by team

The Team made contact with 46 patients within this period, and patient report forms have been completed satisfactorily and reviewed for 46 patients. All cases involving a pre-hospital emergency anaesthetic, procedural sedation or death will be reviewed by the Helimedix Clinical Director with the Team at the Pre-hospital Forum.

Incidents at which patient attended:

AMPDS Code	Categories	Qty (in Aug)
01	Abdominal pains	
02	Allergies	
03	Animal attack	
04	Assaults	
05	Non-traumatic back pain	
06	Breathing problems	
07	Burns/explosions	1
08	Carbon monoxide	
09	Cardiac/respiratory arrest	3
10	Chest pain	
11	Choking	1
12	Convulsions/fitting	
13	Diabetic problems	
14	Drowning/diving incidents	
15	Electrocution	
16	Eye problems/injuries	
17	Falls/traumatic back injury	6

AMPDS Code	Categories	Qty (in Aug)
18	Headache	
19	Heart problems	
20	Heat/Cold exposure	
21	Haemorrhage/laceration	
22	Industrial/machinery accident	
23	Overdose/ingestion/poisoning	2
24	Pregnancy/childbirth/miscarriage	
25	Psychiatric/suicide attempt	
26	Sick person (specific diagnosis)	
27	Stab/Gunshot wound	1
28	Stroke (CVA)	1
29	Traffic Accidents (RTC)	21
30	Traumatic Injury (specific)	
31	Unconscious/passing out	2
32	Unknown problem	
35	Healthcare Professional on scene	
T	Pre-arranged transfers	

Age range of patients attended

0-8	9-15	16-35	36-60	>60	Unknown
1	2	15	15	11	2

Area in which patient attended

Cambs	Pboro	Beds	Suffolk	Norfolk	Other
15	3	2	19	5	2

* One patient was attended in Luton and one in Hertfordshire.

4.2 Pre-hospital emergency anaesthesia (PHEA) audit report

4.2.1 Team members undertook four pre-hospital emergency anaesthetics during the month.

- 09/08/10 Swaffham, Norfolk 55yo male in RTC with major head, chest and facial injuries. RSI to protect airway and brain. Transferred by air to Addenbrooke's hospital.
- 21/08/10 N Walsham, Norfolk 40yo male in motorcycle RTC with major head and truncal injuries. RSI to protect airway and brain. Transferred by air to Addenbrooke's hospital.
- 23/08/10 Little Downham, Cambs 50yo female, polypharmacy overdose. RSI to protect airway. Transferred to Addenbrooke's hospital.
- 31/08/10 Butterwick, Norfolk 57yo male fall down stairs with major head injury. RSI to protect airway and brain. Transfer by land to Queen Elizabeth hospital, Kings Lynn.

4.3 Pre-hospital procedural sedation audit report

4.3.1 Team members undertook two procedural sedations during the month:

- 15/08/10 Marham, Norfolk 20yo female in RTC, trapped. Procedural sedation to facilitate extrication. Transfer by land to Queen Elizabeth hospital.
- 20/08/10 Alconbury, Cambs Female in 50s in RTC – trapped with femur #. Procedural sedation to facilitate extrication. Transfer by land to Peterborough District Hospital.

4.4 Pre-hospital cardiac arrest

4.4.1 Team members attended seven pre-hospital cardiac arrests during the month

- 03/08/10 Hartford, Cambs 80yo male choked on steak, cardiac arrest. Management as per ALS SOP. ROSC and transfer to Addenbrooke's hospital by land. [Discharged fully intact day 15.]
- 07/08/10 March, Cambs 28yo male found in cardiac arrest. Management as per ALS SOP. Death pronounced on-scene.
- 10/08/10 Chatteris, Cambs Male in 80s collapsed. In cardiac arrest on arrival of team. Management as per ALS SOP. Death pronounced on-scene.
- 11/08/10 Kings Lynn, Norfolk 54yo male collapse at work with respiratory distress. En-route to hospital in ambulance had asystolic cardiac arrest. Management as per ALS SOP with ROSC.
- 12/08/10 Ramsey, Cambs Male involved in RTC in cardiac arrest on arrival of team. Management as per Traumatic Arrest SOP. Pronounced dead on-scene.
- 23/08/10 Milton, Cambs 87yo male collapsed and in cardiac arrest on arrival of team. Management as per ALS SOP with ROSC. Transfer by road to Addenbrooke's hospital.
- 28/8/10 Bluntisham, Cambs 74yo male collapsed and in cardiac arrest on arrival of team. ALS as per SOP. Death pronounced on-scene.

4.5 Hospital disposition

4.5.1 Hospital patient conveyed to

Addenbrooke's	Hinchingbrooke	Peterborough	Bedford	LTDUN	Other
10	1	6	0	3	21

4.5.1 One patient was discharged with advice from the scene of the incident by the Helimedix team and was not conveyed to hospital.

4.5.2 Four patients were pronounced dead on the scene of the incident by the Helimedix.

4.5.2 21* patients were conveyed to another hospital in the region.

- Norfolk & Norwich (1)
- Queen Elizabeth Hospital, Kings Lynn (3)
- West Suffolk General (2)
- Cochester Hospital (14)
- Milton Keynes (1)

* The increased number was due to a major incident in Suffolk.

4.6 Secondary Transfer

4.6.1 No patients were transferred by the team during the month.

5.0 Compliments and Complaints

5.1 No compliments had been received.

5.2 No complaints had been received.

6.0 Media and Public Relations activity

6.1.1 Activity and publicity advised to media by news line and emailed press releases during the month regarding PHCCRS:

Date	Incident	Location
03/08/2010	Choking	Hartford Marina
09/08/2010	RTC	A47 Swaffham
11/08/2010	Cardiac Arrest	Islington, Kings Lynn
15/08/2010	RTC	East Lexham, Norfolk
17/08/2010	Stabbing	Cherry Hinton
17/08/2010	Rail Crash	Little Cornard, Suffolk
20/08/2010	RTC	A1 Alconbury
23/08/2010	Overdose	Little Downham