



DO INTENSIVE CARE PARAMEDICS REDUCE LIGHTS-&-SIRENS TRANSPORT?



Michael J McClean - Registered Paramedic, BSci(Hons), BClinPractice (Paramedic); Ambulance Paramedic & Paramedic Clinical Educator – ACT Ambulance Service
Craig B Campbell – Registered Paramedic, DProf, MSc, BTech:EMC. Senior Lecturer Paramedicine; Postgraduate Course Coordinator – University of Tasmania
Alannah Morrison – Registered Paramedic, GCert Edu, BHLthSci; Executive Manager, Initial Services – Queensland Ambulance Service
A/Prof Belinda Flanagan – Registered Nurse, Registered Midwife, Registered Paramedic, PhD, MPH, MMid, GradCertProfLearning, BApplSci (Nurs), AssocDipSci (Ambulance); Director of Paramedicine – University of Tasmania

Introduction

Transporting with the use of “Lights and Sirens” (LST) presents unique risks to patients, paramedics, and community. This is a unique crossroads of best practice, medico-legal, patient safety and workplace health and safety challenges. Shorter transport time may lead to improved outcomes for some patients, but LST increases the likelihood of an Ambulance being involved in a road traffic crash... A much worse outcome.

INTENSIVE CARE PARAMEDICS (ICPs) CAN PROVIDE ADDITIONAL INTERVENTION. DOES THIS LOWER CHANCE OF LST TRANSPORT?

Materials and Methods

62,932 CASES OVER AN ELEVEN-YEAR PERIOD

Medical (n=48862, 77.64%), Trauma (N=6578, 10.45%), Alcohol and Other Drugs (N=3025, 4.81%), Mental Health and Psychiatric (N=2087, 3.32%) Other (N=2380, 3.78%)

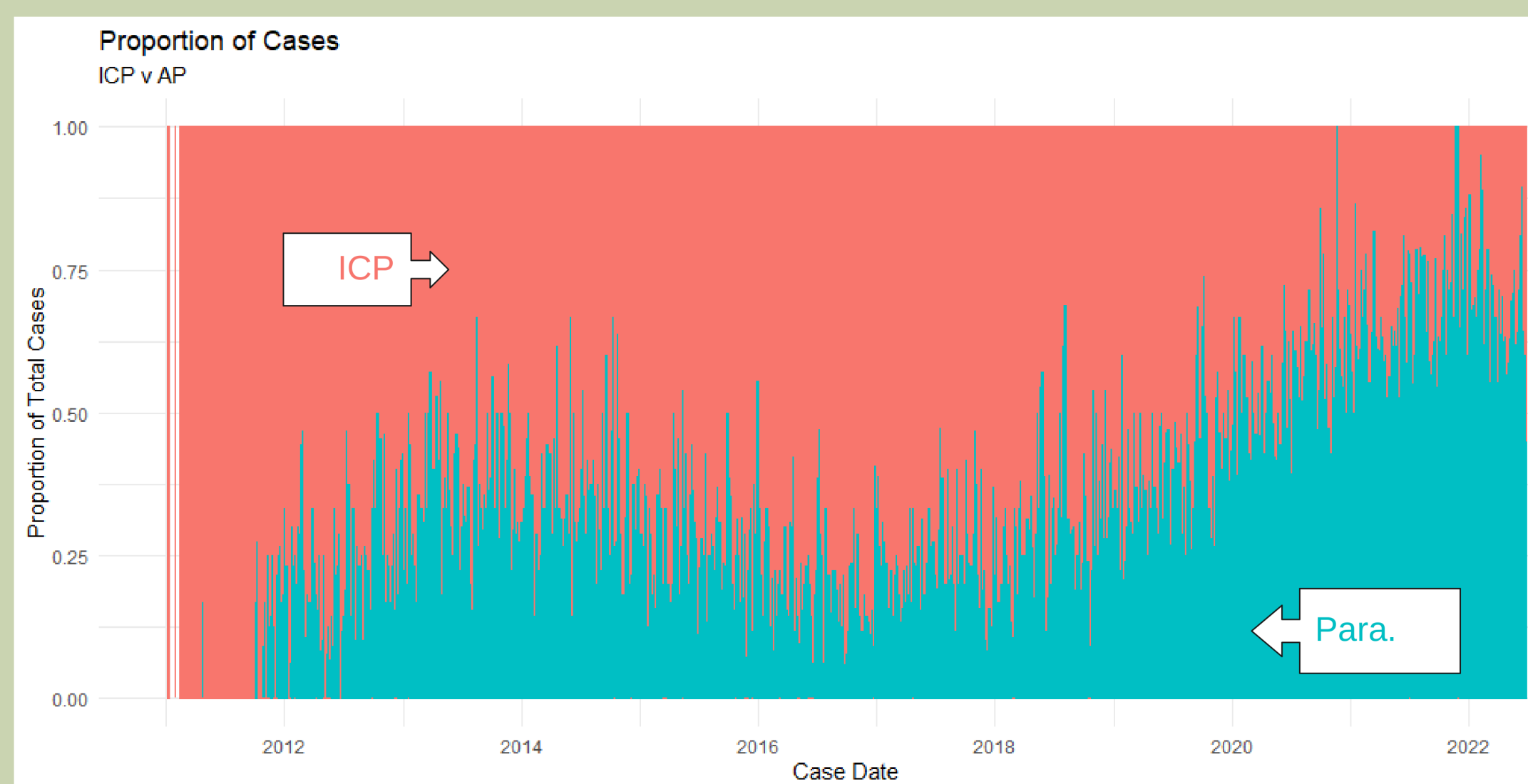
55,353 INDIVIDUAL CASES ENROLLED

- Pts 16-113 years old.
- 52.70% Female
- ICP to Paramedic: **3:1**
- No LST to LST: **0.075:1** (LST ~7 %)

PEARSON'S CHI-SQUARED TEST:

correlation between Scope and likelihood of LST.

Results



TRANSPORT STATUS			
	Transported	Not Transported	Total
ICP	41485 (65.92%)	5701 (9.06%)	47186 (74.98%)
Paramedic	13829 (21.97%)	1917 (3.05%)	15746 (25.02%)
Total	55314 (87.89%)	7618 (12.11%)	62932 (100%)

There is no significant correlation between the presence of a higher clinical scope paramedic and the likelihood of LST.

TRANSPORT PRIORITY			
	No LST	LST	Total
ICP	38,629 (93.04%)	2,888 (6.96%)	41,517
Paramedic	12,839 (92.79%)	997 (7.21%)	13,836
Total	51,468 (92.98%)	3,885 (7.02%)	55,353

The relation between Paramedic scope and LST was **not significant**, $X^2(DF=1, N = 55353) = 0.95, p = .328$.

If any association was present – it was **very, very weak** (OR = 0.9628, 95% CI [0.893, 1.037]).

These findings mean that of the **multitude of factors** contributing to a LST decision, *the scope of attending Paramedics was not one.*

Conclusions

Highlights the **complexity** involved in trying to define a **single outcome** (LST) by a **single predictor** (Paramedic scope) in **clinical practice**.

Potentially generalisable into other systems – especially **dual-tiered Australian services**. Caution should be used about the **effect of guidelines** and protocols as well as the **physical setting**.

Other factors such as **culture, interpersonal relationships, emotional hijacking, clinical momentum** and **policy and procedure** may influence the rates of LST.

Further investigation is warranted into other **potential predictors** and **influences on LST**.

ASSOCIATIONS

MM, CB, AM, BF: University of Tasmania, Medical Science Precinct, 17 Liverpool Street Hobart, TAS 7000, School of Medicine, Discipline of Paramedicine
MM: ACT Ambulance Service, 9 Amberley Avenue, Fairbairn, ACT 2609
AM: Queensland Ambulance Service, GPO Box 1425, Brisbane, QLD 4001

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FURTHER INFORMATION

Please contact: michael.mcclean@act.gov.au
Select References: bit.ly/LST_Refs
Some Stats: http://rpubs.com/McClean_M/LST_Updates