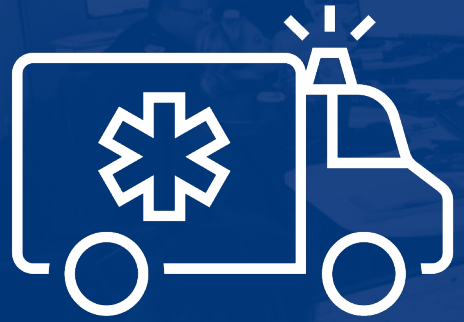
Advances in Rapid Patient Care for the Future of Australian Paramedics





…Emergency Response and Primary Health Care Services

Joe Acker
Chief Executive, Ambulance Tasmania

Tasmanian Government



Real Life Examples

1. Enhancing **communications** between ambulances and hospitals
2. Deploying the latest **education** tools for effective emergency response
3. **Technologies** improving treatment in emergency situations






000
EMERGENCY


AMBULANCE

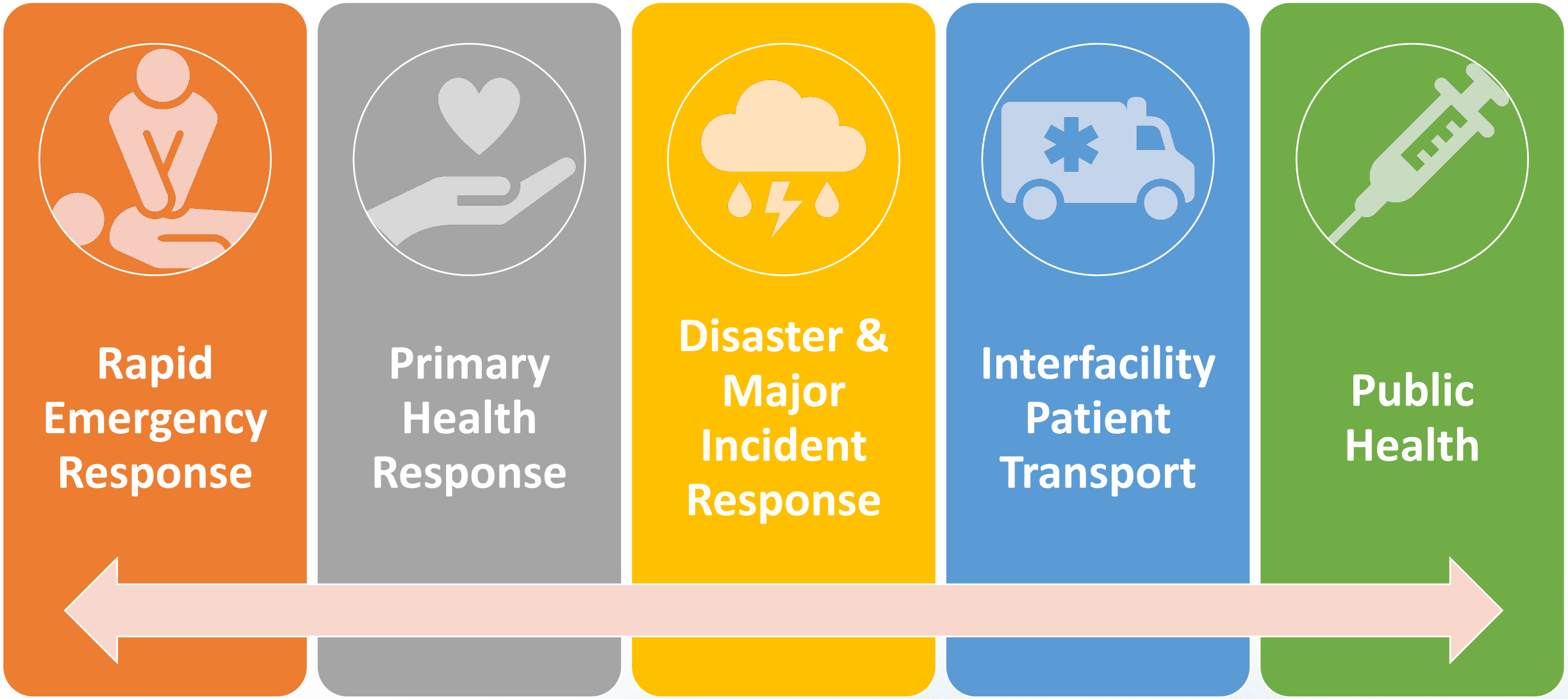



EMERGENCY

2021 Data
Ambulance Tasmania

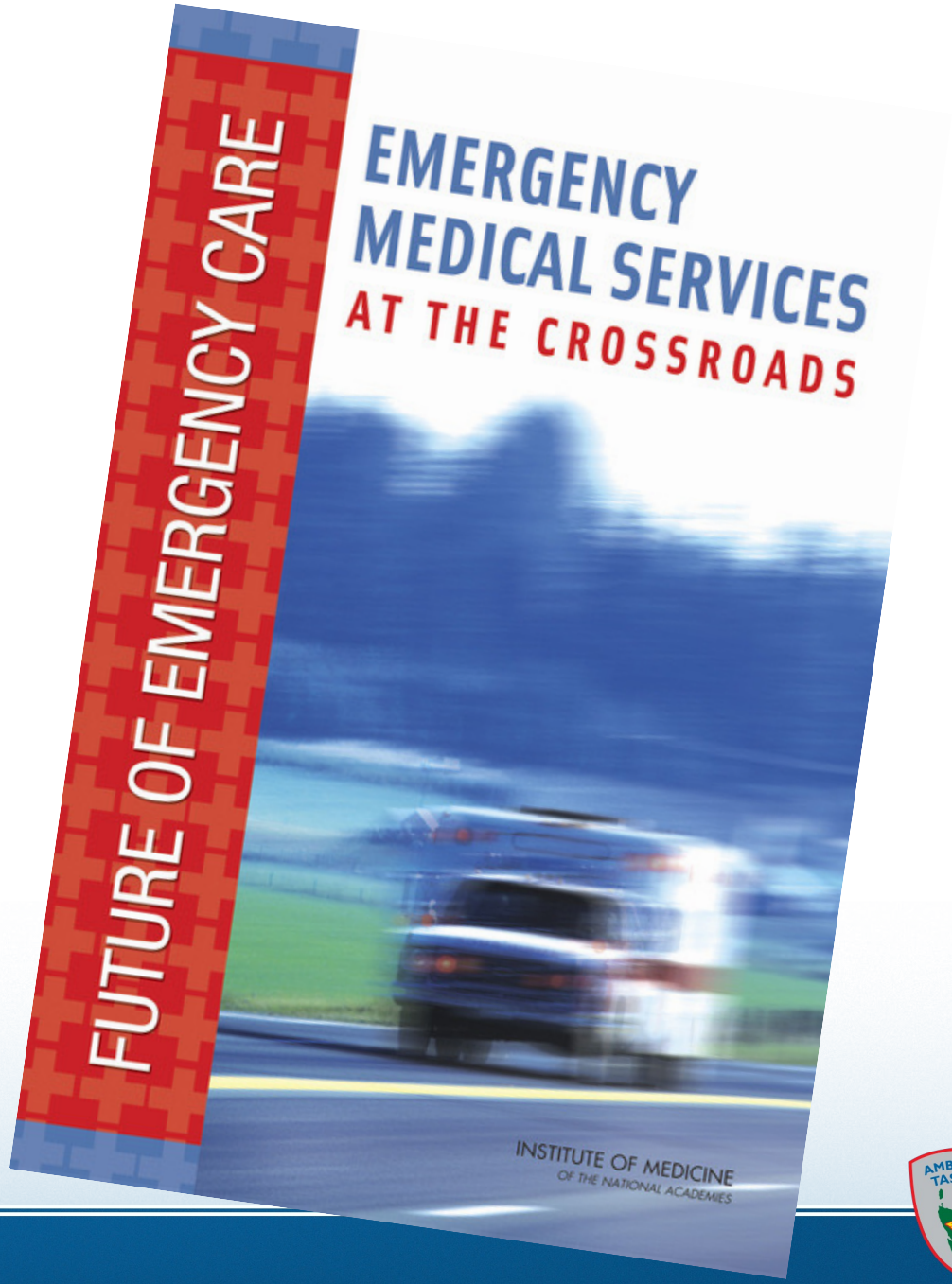
Total 000 Incidents	P0 (highest priority)	P1 (possible life-threatening)	P2-P5 (non-life threatening)	Other (transfers & stand-by)
97,782	953 (<1%)	38,065 (39%)	45,613 (47%)	13,151 (13%)

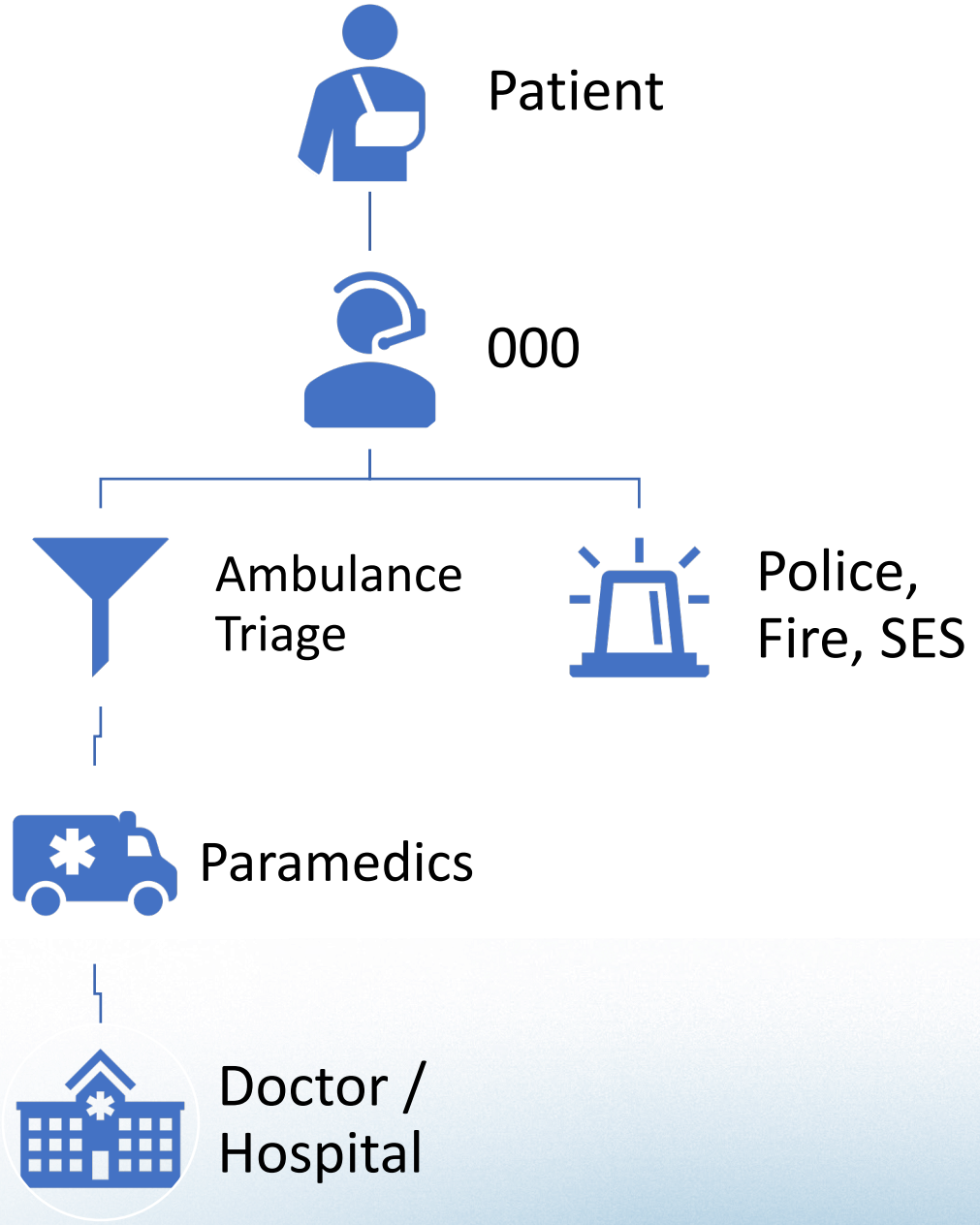
Patients arriving at hospital: 74,113 (76%)

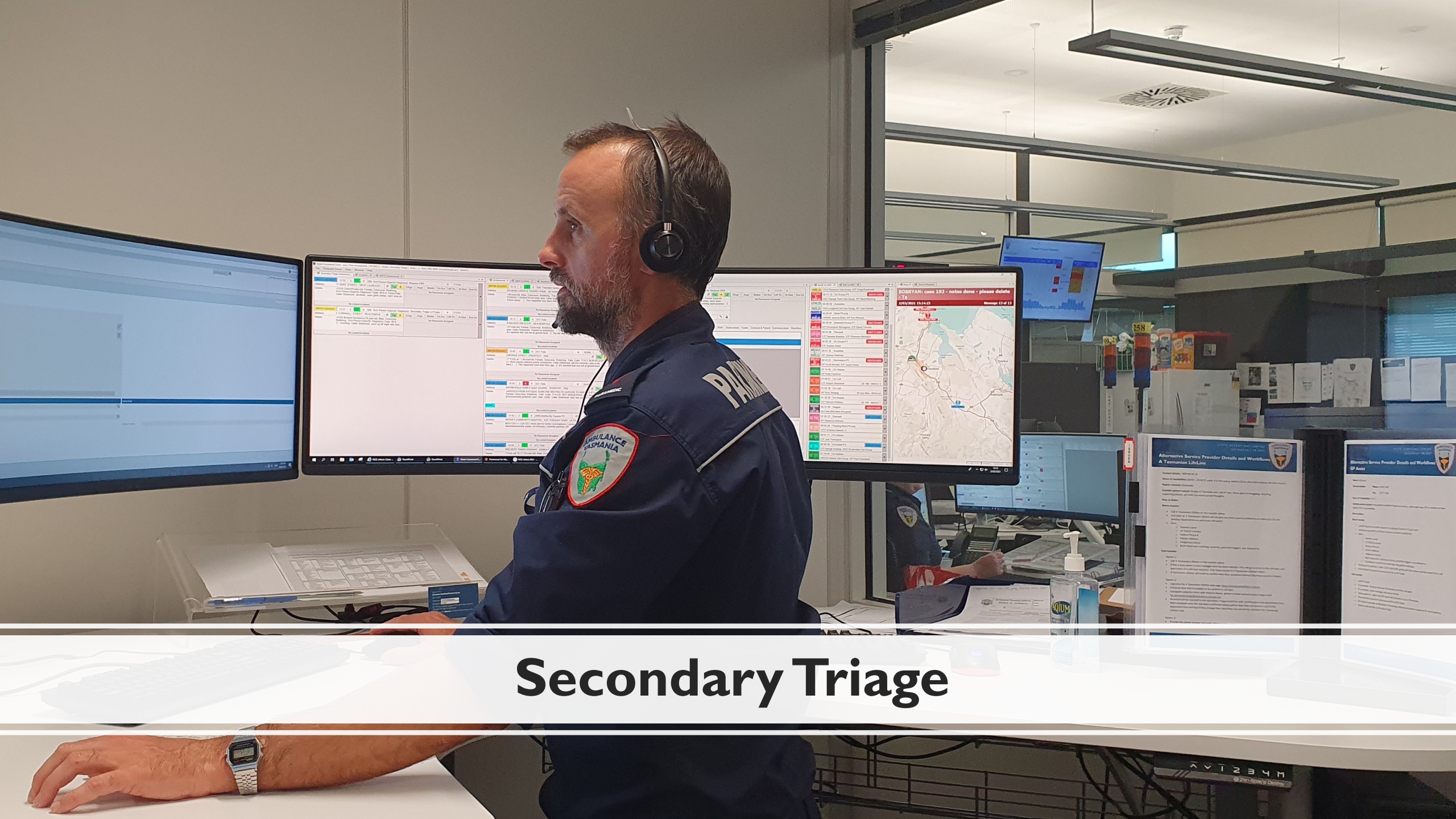

Rapid Emergency Response
Primary Health Response
Disaster & Major Incident Response
Interfacility Patient Transport
Public Health

Paramedicine is at a Crossroads



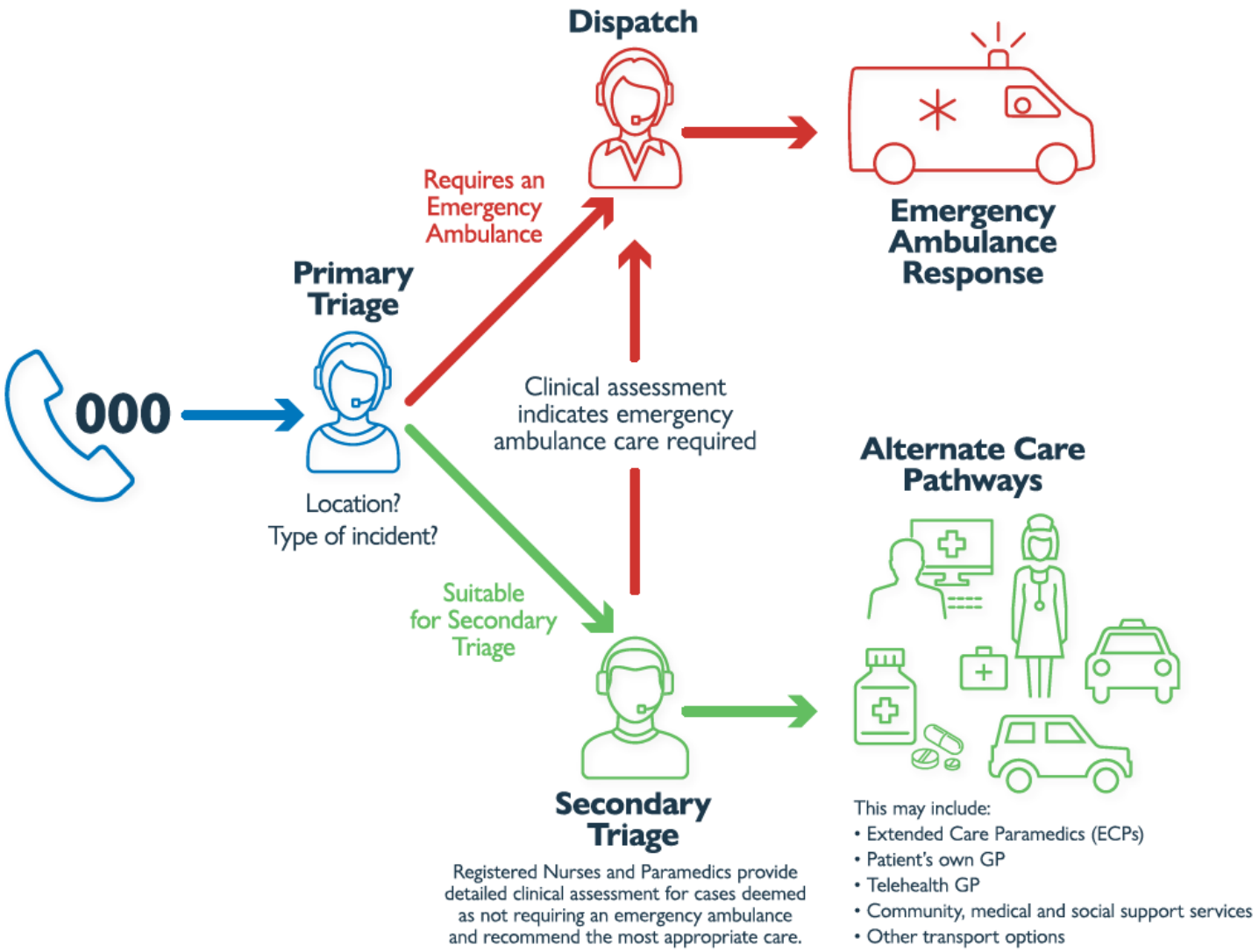



Patient
000
Ambulance
Triage
Police,
Fire, SES
Paramedics
Doctor /
Hospital



Secondary Triage

AMBULANCE TASMANIA


Dispatch
Requires an Emergency Ambulance
Emergency Ambulance Response
Primary Triage
000
Location?
Type of incident?
Clinical assessment indicates emergency ambulance care required
Suitable for Secondary Triage
Alternate Care Pathways
Secondary Triage
Registered Nurses and Paramedics provide detailed clinical assessment for cases deemed as not requiring an emergency ambulance and recommend the most appropriate care.
This may include:
• Extended Care Paramedics (ECPs)
• Patient's own GP
• Telehealth GP
• Community, medical and social support services
• Other transport options

Secondary Triage



Communication

- 000 Phone system
- Links to referral partners
- Clinicans who can assess over the phone



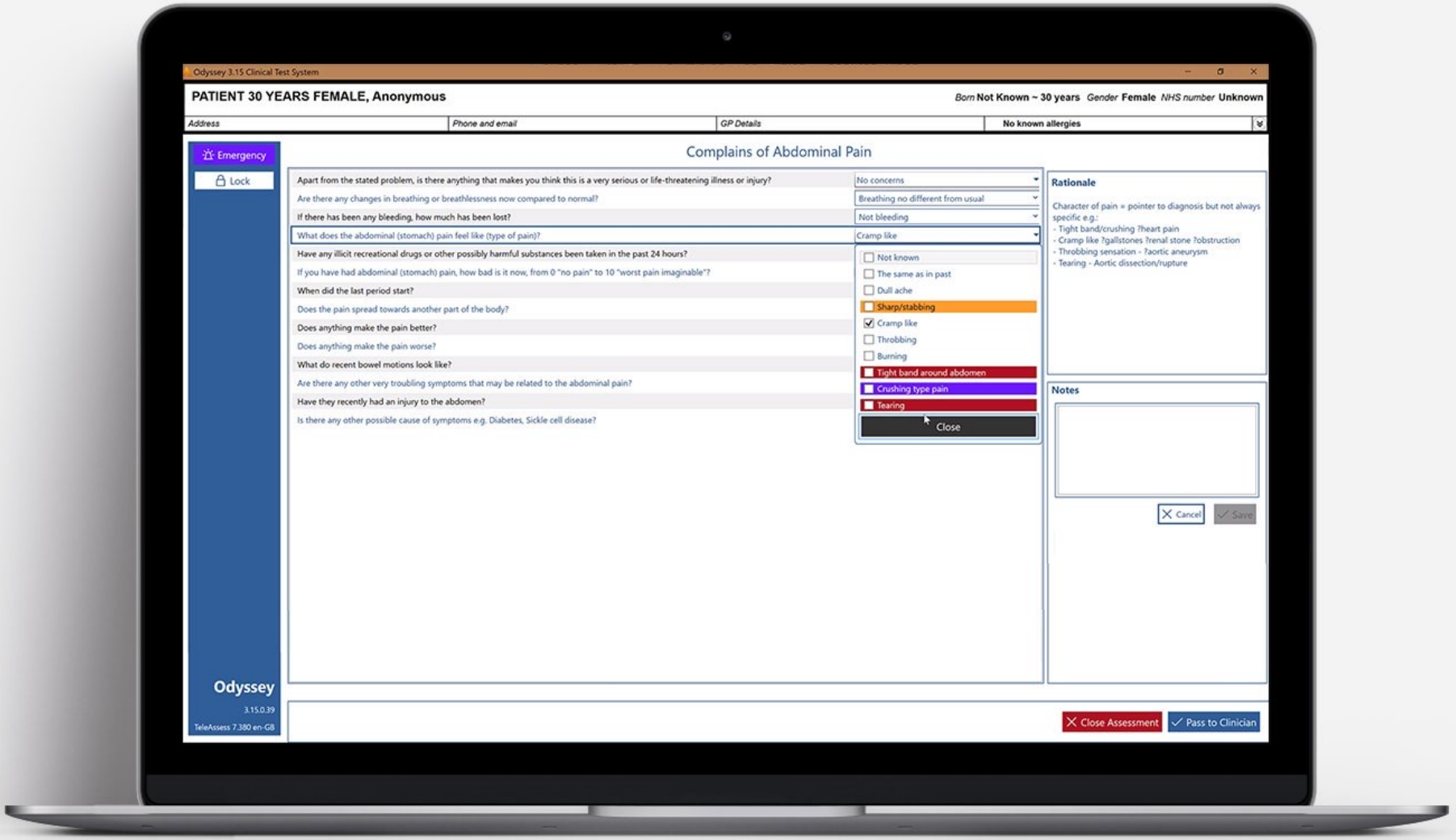
Education

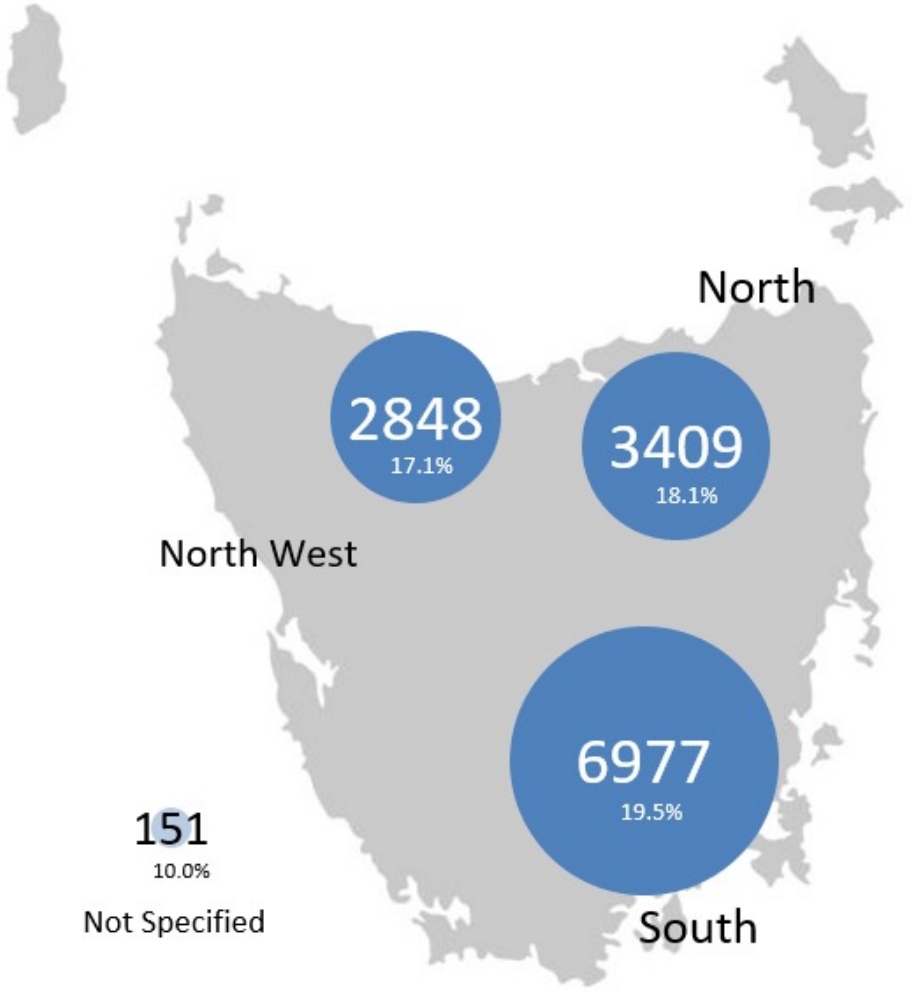
- Multidisciplinary (paramedic, nurse, MH)
- Clinical, technical, non-technical, interdisciplinary, reflective practice



Technology

- Clinical Decision Support Tool
- Patient Medical Record
- Communication tech (recording, data capture, linking records)


Odyssey 3.15 Clinical Test System
PATIENT 30 YEARS FEMALE, Anonymous
Born Not Known ~ 30 years Gender Female NHS number Unknown
Address
Phone and email
GP Details
No known allergies
Emergency
Lock
Complains of Abdominal Pain
Apart from the stated problem, is there anything that makes you think this is a very serious or life-threatening illness or injury?
No concerns
Are there any changes in breathing or breathlessness now compared to normal?
Breathing no different from usual
If there has been any bleeding, how much has been lost?
Not bleeding
What does the abdominal (stomach) pain feel like (type of pain)?
Cramp like
Have any illicit recreational drugs or other possibly harmful substances been taken in the past 24 hours?
If you have had abdominal (stomach) pain, how bad is it now, from 0 "no pain" to 10 "worst pain imaginable"?
When did the last period start?
Does the pain spread towards another part of the body?
Does anything make the pain better?
Does anything make the pain worse?
What do recent bowel motions look like?
Are there any other very troubling symptoms that may be related to the abdominal pain?
Have they recently had an injury to the abdomen?
Is there any other possible cause of symptoms e.g. Diabetes, Sickle cell disease?
Not known
The same as in past
Dull ache
Sharp/stabbing
Cramp like
Throbbing
Burning
Tight band around abdomen
Crushing type pain
Tearing
Close
Rationale
Character of pain = pointer to diagnosis but not always specific e.g.:
- Tight band/crushing ?heart pain
- Cramp like ?gallstones ?renal stone ?obstruction
- Throbbing sensation - ?aortic aneurysm
- Tearing - Aortic dissection/rupture
Notes
Cancel
Save
Odyssey
3.15.0.39
TeleAssess 7.380 en-GB
Close Assessment
Pass to Clinician



13385
Secondary Triage Total for Period

72627
Incident Total for Period

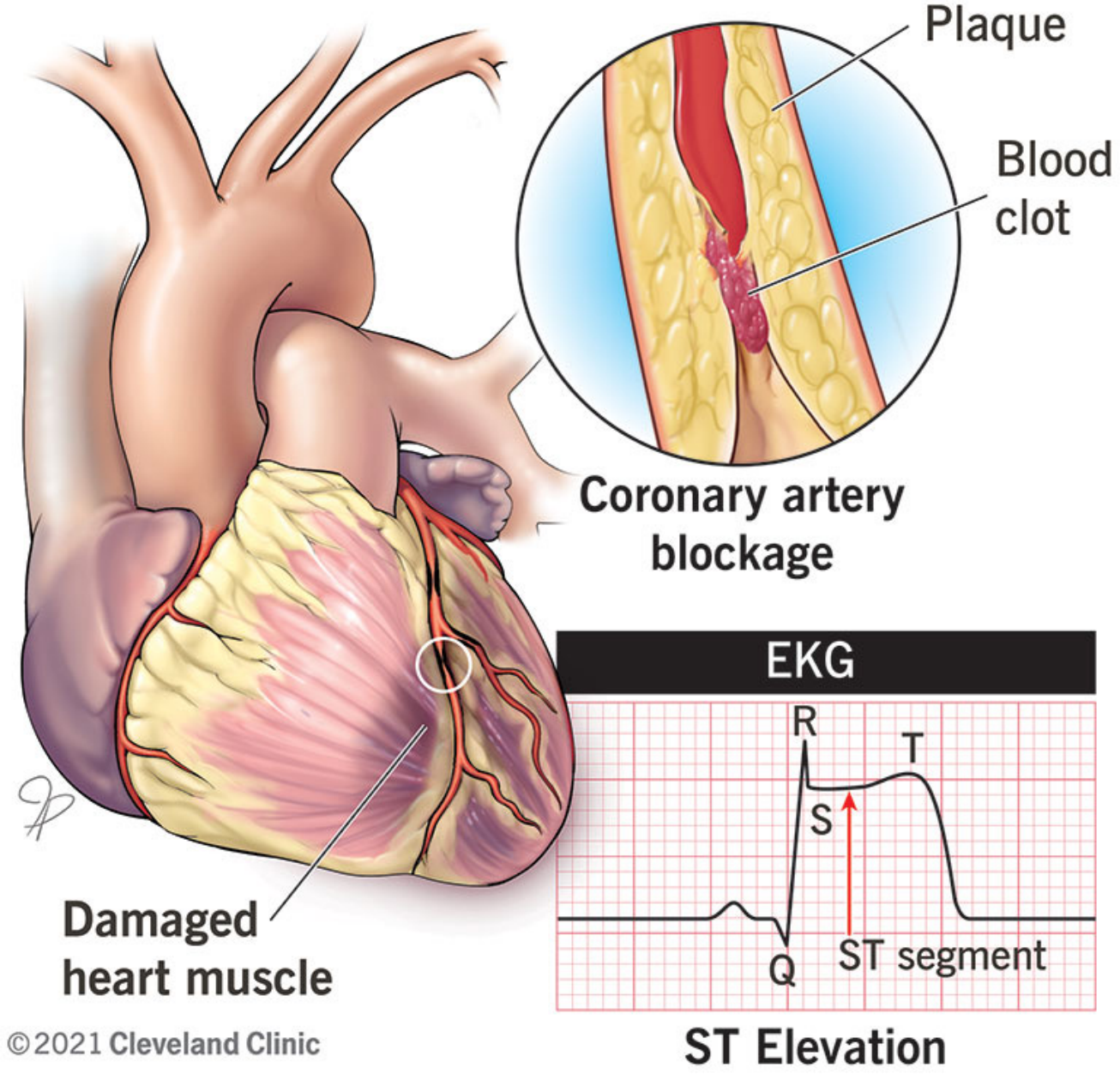
18.4%
Secondary Triage Percentage for Period

Source: 2018 Incident Data

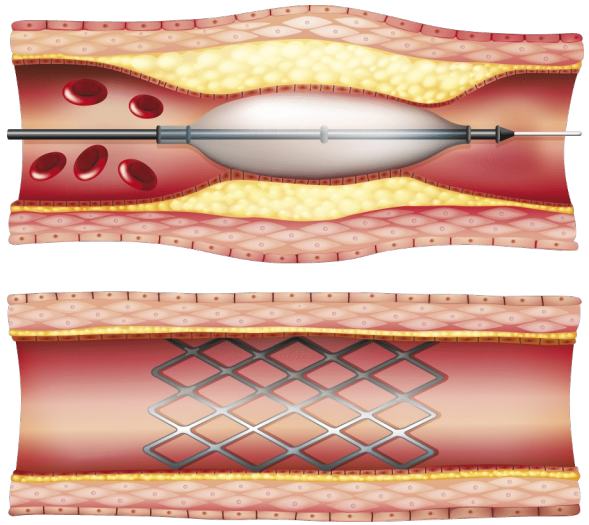
Incidents of low relevance have been excluded from total count
e.g. Air Ambulance, NEPT, Contract



Out-of-Hospital Thrombolysis


Plaque
Blood clot
Coronary artery blockage
Damaged heart muscle
EKG
R
T
S
Q
ST segment
ST Elevation
©2021 Cleveland Clinic

PLAN A:



PLAN B:


Метализе 10000 ЕД

Out-of-Hospital Thrombolysis



Communication

- Voice call paramedic & doctor
- Data connection
- Prepare hospital



Education

- Interprofessional: Doctors & pharmacists educating paramedics
- Blended learning (online & F2F)



Technology

- New drug (Tenecteplase)
- ECG transmission
- Catheterisation Labs


ZOLL
Technology:
Connecting the
patient, paramedics
and doctors


AMBULANCE TASMANIA
THROMBOLYTIC MEDICATION
Property of Ambulance Tasmania
1800 008 008


AMBULANCE TASMANIA



PACER (Police, Ambulance, Clinician Early Response)


EMERGENCY
AMBULANCE
861
AMBULANCE TASMANIA
PARAMEDIC

PACER (**P**olice, **A**mbulance, **C**linician **E**arly **R**esponse)



Communication

- Multidisciplinary team
- Integrated Ambulance & Police Communications
- Dispatched by Ambulance Secondary Triage



Education

- Police, paramedic, mental health clinicians collaborative learning
- Expert-led (Chief Psychologist)



Technology

- Secondary Triage
- eHealth patient record
- Police database


Ambulance
608
POLICE
RAMEDIC
AMBULANCE TASMANIA

Impact of PACER on our *system*

	Week 1	Week 2	Week 3	Total
Patients Seen	30	28	25	**83**
Time on task (avg)	88 min	76 min	89 min	**85 min**
Medications used	3	5	6	**14**
Remained in Community	18	22	17	**57 (69%)**

TASMANIA
POLICE
3M



Thank-you for your time today

Questions or comments please?