

An ED case feedback service for ambulance staff:

Early utilisation of a "Paramedic Postbox"

Introduction

"Closing the feedback loop" is a vital part of clinician development, but feedback, although desired, is harder for paramedics to access than other healthcare professionals.

Aware of a previously-reported ED-to-EMS feedback system in Birmingham, we were keen to introduce a similar service.

Our "Paramedic Postbox" opened in July 2017 and runs between individual paramedics/EMTs and EM middle grades, without formal involvement of our local ambulance service, Welsh Ambulance Service Trust (although they are aware, and supportive).

Aim

To review the early-phase (first six months) utilisation of our "Paramedic Postbox", with reference to the topics EMS staff seek feedback on, and whether any use it repeatedly.

Results

- There were 86 requests in six months, mostly from paramedics (78%), with 16 requests from EMTs and three from Transport Service staff.
- The 86 requests were made by 42 individuals. 23
 people used it once, 11 twice, four thrice, and four
 people used it four or more times (the highest being
 nine requests in six months).
- The most common feedback request was regarding patients with chest pain:

| Theme of request | No. of requests |
|----------------------|-----------------|
| Medical - cardiology | 19 |
| Medical - neurology | 16 |
| Medical- other | 24 |
| Trauma | 13 |
| Surgery | 11 |
| Paediatrics | 3 |

- Feedback was predominantly sought regarding diagnosis and outcome of patients. Other recurring topics included ECG interpretation, and seeking reassurance regarding appropriateness of prehospital treatment.
- EMS staff seemed reluctant to commit to stating their differential diagnosis when seeking feedback, but of the 80 that gave a diagnosis, 56 were correct.

Conclusion/Discussion

Our feedback service has been well utilised by Welsh Ambulance paramedics, technicians and patient transport staff. Early usage patterns suggest EMS staff predominantly want to know the diagnosis and outcome of medicaltype patients.

Further work is required assess the educational value and user-experience of the Paramedic Postbox, but it is encouraging that half of its users have accessed the service more than once, with 12% using it repeatedly, suggesting it has become established as part of their personal learning resources.





"Paramedic Postbox" One Year On:

Utilisation of a feedback scheme between an ED and EMS staff



Introduction

"Closing the feedback loop" is a vital part of clinician reflection and development, but case feedback, although desired, can be difficult for paramedics to access.

We opened a "Paramedic Postbox" in July 2017, enabling paramedics/EMTs to request case feedback directly from EM middle grades. There is no formal involvement of our local ambulance service, although they are aware, and supportive.

Aim

To evaluate usage of our Postbox (July 2017-July 2018 inclusive) with reference to the type of feedback requested, and patterns of service utilisation in this maturing service.

Results

- There were 148 requests for feedback in the first year of the Postbox service: 86 requests made by 43 individuals in the first six-month period, and 62 requests by 35 individuals in the second six-month period.
- There is a strong positive correlation between previous and ongoing usage. For the 17 users who made requests in both six-month periods, the number of requests made, analysed as paired data, showed a Pearson Correlation Coefficient of 0.73, confirming that significant previous use begets significant ongoing use.
- This small cohort of heavy service users we have dubbed "Super-Reflectors".

- The 28% drop in service utilisation over the second six-month period compared with the first is due to a reduction in the number of feedback requests made by the "super-reflectors" rather than a drop in the number of individuals requesting feedback: ongoing use of the service remained buoyant with 18 new
- The spread of topics and requests for information has remained broadly similar to that seen in the first six months:

users during the second

six-month month period.

Conclusion/Discussion

Our "Paramedic Postbox" is now firmly established. A steady flow of new users is taking advantage of the system, and we are encouraged to find a core of "Super-Reflectors" using the service repeatedly. This indicates that our feedback system is trusted, and we hope it also indicates that case feedback is becoming an integral part of reflective practice for these clinicians.

Other work is ongoing to seek "feedback on our feedback" with the aim of refining the Postbox service to improve its utility to paramedics.

| Theme of request | First six months | Second six months |
|----------------------|------------------|-------------------|
| Medical - cardiology | 19 (22%) | 10 (16%) |
| Medical - neurology | 16 (19%) | 19 (31%) |
| Medical- other | 24 (28%) | 22 (35%) |
| Trauma | 13 (15%) | 7 (11%) |
| Surgery | 11 (13%) | 3 (5%) |
| Paediatrics | 3 (3%) | 1 (2%) |
| Total | 86 | 62 |

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MOUNTAIN

MEDICINE
BANGOR EMERGENCY DEPT

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Paramedic Postbox:



Educational benefits reported by users of a feedback scheme between ED and EMS staff

Introduction and aim

Reflective practice is a core tool for personal professional development as clinicians, but paramedics often struggle to fully participate in reflection due to difficulties finding out what happened to patients they have cared for. Hence, we opened a "Paramedic Postbox" in July 2017, enabling paramedics/EMTs to request case feedback directly from ED middle grades.

We wished to ascertain how Postbox users described the educational benefit (if any) that they had gained from the feedback service.

Method

All Postbox users who had requested feedback in the first 12-months of the service were contacted by NHS email and asked to participate in an online survey. Reminders were circulated via local EMS social media groups, and the local ambulance service. Consent to contact for service evaluation purposes is a condition of service use, which all Postbox users had confirmed at the time of their feedback request(s).

User comments

User comments confirmed that the Postbox is encouraging learning and changing behaviour:

- "It highlights areas where I need to expand my knowledge"
- "Extremely valuable tool for learning, and validating that correct care given"
- "Great system, which allows informed reflection and will hopefully improve future practice"
- "Valuable learning and development tool"

Results

In the 12-month period, 143 requests for feedback were received from 60 individuals. 33/60 (55%) Postbox users responded, of which 32 had received their requested feedback and were able to complete the questionnaire for analysis. The users' original intentions when using the Postbox were:

| Reason for usage | |
|---|-----|
| To check patient diagnosis | 67% |
| To check patient outcome | 64% |
| To check pre-hospital treatment given was correct | 39% |
| To ask a specific question | 15% |
| All of the above | 36% |

- 76% said that the Postbox had allowed them to reflect on a case
- 70% said that it clarified something they were unsure about, and 48% said they learned something new.
- 42% agreed that their "practice has changed" after receiving case feedback.

Improvements suggested by users mostly referred to service logistics, although there was also interest in ascertaining the cause of death discovered at post mortem examinations.

Conclusion/Discussion

Our Paramedic Postbox is successfully enabling our local EMS colleagues to reflect on cases, with nearly one-third of respondents reporting that their practice has changed as a result of feedback received.



"Paramedic Postbox"



User satisfaction of a feedback scheme between ED and EMS staff



Introduction/Aim

Our "Paramedic Postbox" opened in July 2017, enabling paramedics/ EMTs to request case feedback directly from ED middle grades. Our local ambulance trust is aware and supportive, but has no involvement in the scheme.

We wished to establish whether Postbox users were satisfied with the feedback service during its first year of operation.

Method

Postbox users who had requested feedback in the first year of the service were contacted by their NHS email and asked to participate in an online survey. Reminders were circulated via local EMS social media groups and the local ambulance service.

Consent to contact for service evaluation purposes is a condition of Postbox use, which all users had confirmed at the time of their feedback request(s).

Results

In the 12-month period, 143 requests for feedback were received from 60 individuals. 33/60 (55%) Postbox users responded, of which 32 had received their requested feedback and were able to complete the questionnaire.

Of these 32 completed responses, the majority had a IHCD/ diploma in paramedic science (57%) or IHCD/AAP (31%). Two users had a MSc. 50% qualified in 2014 or later.

76% of survey respondents had used the Postbox more than once, with five (15%) using it more than five times. 100% of users were satisfied with the feedback service (75% excellent, 25% good) and all users said they would use the service again, and would recommend it to colleagues.

97% of users valued that Postbox feedback is strictly between ED doctors and individual ambulance clinicians, with their employer (i.e. the local ambulance trust) having no involvement in the Postbox service.

We routinely include a relevant educational point when providing feedback, in addition to whatever has been requested: 94% of users found this useful.

Conclusion/Discussion

Our Paramedic Postbox (and its independence from the users' employer) is highly valued.

Utilisation by recently-qualified individuals is especially high: it is not clear where this reflects uncertainty managing cases, or increased willingness to engage in reflective practice.

We are encouraged that threequarters of our survey respondents had used the service more than once, and hope our Postbox will support the ongoing development of our EMS colleagues' reflective practice.





I'm happy with it

Sign here please

Request for feedback

| 1 | Which patient do you want feedback on? | | |
|---|---|--|--|
| | Date patient arrived at ED Approx time | | |
| | Name DOB | | |
| | Address/where conveyed from | | |
| | What was your working diagnosis? | | |
| 2 | Is there anything else you want to know? | | |
| | We'll automatically include date of attendance, gender, diagnosis and patient management/destination after ED. We will not include patient name or traceable unique identifiers. | | |
| | Any specific questions? | | |
| | | | |
| 3 | Tell us your WAST email address & PIN number | | |
| | We cannot email feedback to private email addresses. Please write very neatly! Paramedic Technician APP | | |
| | Sign to say you've read the small print | | |
| | I've read the small print and The feedback service is run by the Middle Grade doctors of Bangor ED. | | |

Our goal is 100% to support your learning and practice. We will not use unique patient

identifiers when replying to your feedback request, and the feedback process is completely confidential - *even if care provided has been less than optimal* - unless it fell so far short of acceptable standard that it triggered fitness to practice concerns. We will collect and share and/or publish *collated* and completely non-identifiable data

(for example, what kind of cases are generating requests for feedback)

We may also contact you at a later date to obtain feedback on our feedback.



PHEM Postbox SOP

1

Request slips

- 1. Keys to post-box live on hook inside xxxxx drawer in xxxxxxxxxxxx
- 2. Collect request slips from post-box, and work out from the name and DOB what the D-number is (you'll probably need to ask receptionist for help finding this via PIMS).
- 3. Ask receptionist to pull cas-card.

2

Data gathering

- 1. Review Cas-card & establish ED management and initial differential diagnosis.
- Check WCP for blood/imaging results and any discharge letter.
- 3. Ring ward to get an update if patient still an inpatient.

3

Spreadsheet data entry

- 1. Number the request slip in chronological order (see spreadsheet) and then file it in the "request folder" in MM room once done.
- 2. Enter data onto spreadsheet note required data includes requestor details, and whether they had any specific questions, as well as type of patient.

4

Email response

- ★ Email to wales.nhs.uk address only
- ★ Do NOT include date of call, patient's name, DOB or D-number in reply

Email format:

- 1. Patient age, gender, location of job (town/village; not exact)
- 2. Paramedic diagnosis (they should have put it on the feedback request form), ED diagnosis, and final diagnosis if available/applicable
- 3. ED investigations and management
- 4. Destination after ED
- 5. Answer any specific questions
- 6. Signpost to any useful papers or resources that you are aware of; if you know of any applicable evidence, find links to it (i.e. promoting EBM)

5

Problems?

- Feedback is given in total confidence and should proceed *unless* the care given fell so far short of acceptable standards that it raised fitness to practice concerns.
- In the unlikely event that you are asked for feedback on a case whose management you think raises such questions, discuss with Linda Dykes as to best way to proceed.



The Clinical Fellows & Registrars of Bangor ED are delighted to announce the launch of the

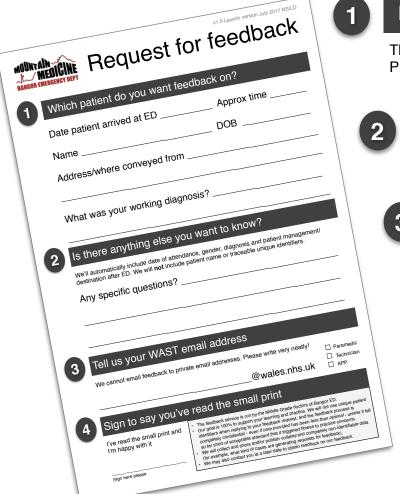
Prehospital Postbox

For WAST Paramedics & EMTs

Want to know what happened to that interesting patient you brought to Bangor ED?

◆◆◆

Fancy some friendly, confidential feedback on any aspect of your management or documentation?



Fill out a feedback form

They're in a plastic wall-holder next to the Prehospital Postbox in YG ED ambulance lobby!

Put form in Prehospital Postbox

It is locked and secure!

3 Await the reply!

- Feedback will be to your WAST email addresses, but won't contain specific patient-identifiable information.
- We'll include the diagnosis-on-leaving-ED (or as far through the patient journey as we can find out), management, and patient destination after ED, plus any specific questions you have asked.
- We will endeavour to feedback within 2 weeks (but it may be slower depending on number of requests!)

Confidential . Independent. All About Learning