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| **REPORT ON VISITS TO THE EMERGENCY OPERATIONS CENTRE****EOC visits 2019****Recommendations****Parity of Esteem -** Health and Social Care Act 20121. The LAS should produce a statement for their Quality Account and Clinical Strategy,

explaining what steps have been taken to implement and achieve parity of esteem between mental and physical health. **Parity of esteem - mental health nurses**1. It would be of great benefit to patients if more mental health nurses could join the

LAS team. Weekends can be particularly stressful, when mental health services are less available in the community.**Parity of esteem – mental health nurses**1. In view of the duty of Parity of Esteem between patients with physical and

mental health problems, and the low numbers of mental health nurses in EOC, more emphasis should be placed on the training of all staff in the clinical hub to engage with patients suffering a mental health crisis. The training and experiencethat paramedics are receiving through the south east London mental health car, is an exemplar for how this can be done well.  **Call Handlers – mental health training**1. Mental health training for call handlers needs to be substantially improved,

 beyond the two compulsory days (year one only). Although staff have the option  of further mental health training this is not compulsory. We recommend that all  Call Handlers participate in Mind’s Blue Light training. **Responding to patients in a mental health crisis - data**1. Data should be provided showing the number of calls received by EOC for

 patients in a mental health crisis (including suicidal ideation) each day, and the  capacity of the LAS to respond to these calls. Data on the time taken for mental  health nurses to respond to patients in a mental health crisis should also be  provided. **EOC mental health card**1. The LAS should review and redesign its EOC mental health flow chart, used to assess

 the severity of mental health emergencies. The flow chart for mental health is  poorly designed, says little, has a poor script with non-specific information  and makes it difficult to respond to mental health calls. **Call handlers’ access to mental health nurses**1. Call Handlers should continuously be provided with information on the availability

 of mental health nurses in EOC, to enable them to respond adequately and  appropriately to new callers suffering from a mental health crisis.  **Role of mental health nurses**1. The roles of mental health nurses should be clarified, e.g. at a particular time,

 whether a mental health nurse’s primary role is to engage directly with patients,  with front line staff, or to arrange transport to mental health facilities. Poor  communications may be leading to emergency ambulance responses, when other more  appropriate and nuanced responses might be best for the patient. **Under-evaluation of the needs of suicidal patients**1. We would like clarification about the LAS response to patients experiencing

 suicidal ideation. In some cases, these patients are provided with a Cat 3  response – 2 hours: but may be much longer. This puts lives at risk of death or  serious harm. 1. There should be a greater focus on effective responses to patients experiencing

 suicidal ideation. Better collaboration is needed with specialised local mental  health services, to respond quickly and effectively to save lives and reduce harm.  **LAS support for patients detained by the police**1. Patients subject to police detention under s135/136 should have a Cat 1 (ARP)

 face to face response from a mental health nurse or Advanced MH Paramedic.  **Alternatives to A&E in a mental health crisis**1. Alternative clinical resources are needed for seriously ill patients with a

 mental health problem, who have not been Sectioned, but need inpatient care.  Taking them to an A&E department, is often not the most appropriate place  for them and can be a disastrous experience.  **Mental health car - access**1. The mental health car currently working in south east London, should be rolled

 out across London to provide better care for people in a mental health crisis.  Data should continue to be produced to show outcomes of this intervention and  frequency of post-visit calls from patients who have received this service. Parity of responses to patients whose calls are received at Bow and Waterloo  should be demonstrated. **Audit of the outcomes of mental health care**1. CARU should carry out an audit of patients who have received mental health

 care from paramedics, and those who have received care from the south east  London mental health car, to ascertain whether the mental health crisis was  resolved, or the patient provided with additional episodes of care or inpatient treatment  over the following few weeks. **Access to summary care records and CmC**1. We would like assurances that paramedics and mental health nurses visiting

 patients in a mental health crisis, always have access to their summary care  records and care plans/CmC if they have been placed in the patient’s  records/notes. We would also like assurances that Call Handlers, Paramedics  and Emergency Crew are trained to access CmC by the most efficient and  effective process.  **No eating and drinking while waiting for an ambulance** 1. Patients in a mental health crisis waiting for an ambulance, are told

 not to eat or drink, except for sips of water. This advice is inappropriate for this group of patients and can have negative consequences for the patient’s  mental state.  **Mental health – inappropriate assessment questions**1. The script for patients in a mental health crisis that asks the patient (or a carer in

 relation to the patient: a) Do you feel violent? b) Is there a risk of violence, is inappropriate and inconsistent with statutory duty of parity of esteem.  Most violence is unrelated to mental health problems and occurs with patients who are  intoxicated, not those in a mental health crisis. People suffering from mental health  problems are more likely to be victims of violence. This question should be deleted  from the script. 1. The LAS should review its emphasis on threats of violence in the assessment

of patients in a mental health crisis, because this approach to mental health assessments leads to inappropriate responses from the LAS and police.  **Improving the CPR script**1. When a caller is asked to give chest compressions (CPR), the Call Handler counts out

 the beats. But if the phone is not near the caller, they cannot hear the beats being called out,  nor can the Call Handler hear what the person is doing. If it is not currently the case,  we recommend that the Call Handler should advise the caller to put their phone  on “speaker” and be placed nearby. The same would be the case if the caller  was asked to carry a task to assist the patient, or to ensure the safety of the patient,  or to open the door before the ambulance team arrives.1. Where a patient is suffering from serious mental health problem and the police

detain the person, as they are not clinically trained, paramedics should always attend if possible, to take the person to a statutory ‘place of safety’.  **Rest break agreement – shortage of ambulances**1. The Rest-Break Agreement may result in raised pressure at 5.30am and a

 serious shortage of ambulances, which could lead to potentially harmful delays  in the treatment of seriously ill patients. We recommend the LAS provides an  explanation for this situation, evidence of any harm and details of action being  taken to mitigate harm to patients.  **Access to clinical data for front line staff**1. Access to clinical data for paramedics regarding previous recent calls,

 responses and outcomes are very limited. A paramedic could visit a patient  who has been seen several times in the recent past and have no access  to relevant previous clinical data. This situation in inappropriate and should  be urgently transformed to ensure continuing access for historical clinical data.  **Responding to call when the signal drops**1. It was reported by Call Handlers that the phone signal often drops during EOC

 calls and contact is lost with caller. We would like to see the advice provided to  Call Handlers experiencing this situation and the risk analysis in relation to these cases.  **Clinical hub - SoP**1. The following wording in the Clinical Hub SoP should be reviewed:

“Additionally, the following patient groups should be treated with **caution;**  mental health patients, under 18s, substance abuse, the elderly, patients who are  alone or have significant co-morbidities”. The word “caution” should be replaced with  e.g. “special care” (Assessment and the Manchester Triage System, 2018). **Optical contamination**1. Patient experiencing optical contamination from unset plaster, paint or other

 hazardous substance should be taken or advised to travel directly to Eye  Casualty, e.g. at Moorfields, St Thomas’ or the Western. A 111 referral is not  appropriate in these cases.  **Maternity**1. More input is needed from maternity staff for woman suffering traumatic or difficult

Births at home. The maternity card used in EOC should also be updated and improved. **Training – major incidents**1. There is a need for more ‘major incident’ simulation training for EOC staff.

 **Training - interdisciplinary**1. We recommend improved interactions and interchange between front-line staff

and Dispatchers – to better understand each other’s roles and how their interaction could be improved. |     |

**USE OF LANGUAGE LINE**

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| **LANGUAGE** | **AUG 18** | **SEP 18** | **OCT 18** | **NOV 18** | **DEC 18** | **JAN 19** | **FEB 19** | **MAR 19** | **APR 19** | **MAY 19** | **JUN 19** | **JUL 19** | **TOTAL** |
| ROMANIAN | 229 | 208 | 243 | 286 | 283 | 357 | 370 | 360 | 345 | 319 | 363 | 338 | **3701** |  |
| POLISH | 274 | 225 | 203 | 246 | 274 | 257 | 220 | 288 | 271 | 328 | 268 | 223 | **3077** |  |
| BENGALI | 148 | 180 | 230 | 189 | 290 | 269 | 248 | 252 | 238 | 298 | 262 | 276 | **2880** |  |
| ARABIC | 104 | 134 | 139 | 159 | 184 | 181 | 147 | 122 | 175 | 139 | 255 | 270 | **2009** |  |
| TURKISH | 108 | 116 | 109 | 105 | 150 | 136 | 160 | 158 | 123 | 141 | 125 | 160 | **1591** |  |
| SPANISH | 93 | 123 | 101 | 104 | 162 | 134 | 115 | 148 | 116 | 141 | 144 | 165 | **1546** |  |
| PUNJABI | 85 | 105 | 121 | 122 | 113 | 121 | 112 | 126 | 143 | 171 | 104 | 160 | **1483** |  |
| URDU | 70 | 75 | 74 | 87 | 79 | 83 | 102 | 105 | 82 | 82 | 113 | 104 | **1056** |  |
| RUSSIAN | 62 | 72 | 76 | 91 | 108 | 97 | 79 | 98 | 120 | 100 | 77 | 74 | **1054** |  |
| ITALIAN | 63 | 64 | 74 | 84 | 106 | 99 | 113 | 89 | 67 | 93 | 73 | 81 | **1006** |  |
| TAMIL | 53 | 93 | 76 | 81 | 84 | 68 | 92 | 88 | 86 | 83 | 58 | 65 | **927** |  |
| BULGARIAN | 50 | 51 | 59 | 63 | 82 | 81 | 73 | 78 | 60 | 82 | 110 | 80 | **869** |  |
| FRENCH | 64 | 52 | 67 | 63 | 90 | 72 | 54 | 74 | 63 | 87 | 67 | 87 | **840** |  |
| PORTUGUESE | 52 | 58 | 69 | 65 | 67 | 56 | 55 | 55 | 58 | 103 | 89 | 56 | **783** |  |
| SOMALI | 40 | 56 | 55 | 52 | 59 | 49 | 53 | 53 | 56 | 63 | 68 | 76 | **680** |  |
| FARSI | 43 | 49 | 62 | 47 | 57 | 57 | 55 | 63 | 51 | 47 | 74 | 74 | **679** |  |
| MANDARIN | 41 | 33 | 55 | 54 | 79 | 67 | 64 | 58 | 45 | 51 | 51 | 70 | **668** |  |
| LITHUANIAN | 46 | 31 | 43 | 44 | 62 | 55 | 57 | 44 | 65 | 47 | 26 | 33 | **553** |  |
| ALBANIAN | 21 | 41 | 41 | 47 | 59 | 50 | 47 | 50 | 41 | 36 | 59 | 46 | **538** |  |
| HINDI | 45 | 38 | 39 | 33 | 37 | 46 | 36 | 37 | 56 | 61 | 57 | 47 | **532** |  |
| GUJARATI | 13 | 18 | 20 | 27 | 38 | 25 | 32 | 25 | 30 | 36 | 24 | 28 | **316** |  |
| CANTONESE | 32 | 40 | 24 | 14 | 18 | 29 | 17 | 19 | 18 | 20 | 18 | 30 | **279** |  |
| GREEK | 17 | 12 | 16 | 22 | 25 | 21 | 22 | 32 | 26 | 41 | 30 | 15 | **279** |  |
| HUNGARIAN | 20 | 27 | 16 | 16 | 18 | 29 | 13 | 20 | 19 | 30 | 14 | 17 | **239** |  |
| Portuguese Br. | 16 | 5 | 12 | 14 | 23 | 15 | 15 | 20 | 26 | 23 | 28 | 18 | **215** |  |
| SORANI | 10 | 12 | 16 | 15 | 12 | 21 | 13 | 21 | 14 | 24 | 15 | 29 | **202** |  |
| TIGRINYA | 6 | 7 | 15 | 9 | 19 | 21 | 17 | 16 | 15 | 16 | 18 | 16 | **175** |  |
| VIETNAMESE | 4 | 15 | 16 | 13 | 16 | 22 | 11 | 8 | 18 | 18 | 18 | 15 | **174** |  |
| AMHARIC | 8 | 13 | 10 | 14 | 10 | 21 | 13 | 17 | 11 | 20 | 19 | 16 | **172** |  |
| PASHTO | 7 | 11 | 14 | 10 | 12 | 17 | 10 | 18 | 6 | 21 | 13 | 15 | **154** |  |
| SYLHETTI | 0 | 3 | 4 | 11 | 13 | 14 | 11 | 12 | 9 | 16 | 18 | 21 | **132** |  |
| GERMAN | 13 | 4 | 6 | 5 | 3 | 7 | 7 | 8 | 4 | 10 | 10 | 3 | **80** |  |
| DARI | 4 | 2 | 3 | 7 | 7 | 11 | 7 | 2 | 8 | 8 | 3 | 6 | **68** |  |
| NEPALI | 2 | 5 | 4 | 7 | 7 | 7 | 4 | 4 | 6 | 8 | 3 | 10 | **67** |  |
| KOREAN | 2 | 1 | 1 | 7 | 8 | 5 | 7 | 6 | 7 | 5 | 5 | 5 | **59** |  |
| JAPANESE | 4 | 5 | 2 | 6 | 1 | 4 | 8 | 5 | 3 | 3 | 6 | 5 | **52** |  |
| SLOVAK | 2 | 3 | 7 | 3 | 7 | 3 | 6 | 3 | 7 | 2 | 6 | 3 | **52** |  |
| TAGALOG | 4 | 1 | 1 | 4 | 0 | 6 | 10 | 2 | 8 | 3 | 5 | 4 | **48** |  |
| CZECH | 3 | 2 | 7 | 0 | 5 | 1 | 6 | 5 | 5 | 2 | 5 | 4 | **45** |  |
| HEBREW | 5 | 0 | 2 | 2 | 2 | 4 | 4 | 1 | 4 | 9 | 8 | 1 | **42** |  |
| THAI | 4 | 0 | 4 | 1 | 0 | 1 | 5 | 3 | 8 | 4 | 5 | 3 | **38** |  |
| UKRAINIAN | 2 | 1 | 0 | 3 | 4 | 3 | 3 | 1 | 4 | 2 | 5 | 5 | **33** |  |
| Portug.Creole | 4 | 1 | 3 | 4 | 3 | 3 | 2 | 1 | 4 | 1 | 4 | 2 | **32** |  |
| SWAHILI | 4 | 1 | 3 | 2 | 3 | 2 | 3 | 2 | 2 | 4 | 2 | 2 | **30** |  |
| AKAN | 1 | 4 | 2 | 1 | 3 | 4 | 3 | 2 | 3 | 1 | 2 | 1 | **27** |  |
| MALAYALAM | 0 | 0 | 5 | 3 | 0 | 3 | 3 | 1 | 2 | 4 | 3 | 1 | **25** |  |
| SINHALESE | 0 | 0 | 1 | 3 | 4 | 5 | 1 | 1 | 2 | 3 | 1 | 1 | **22** |  |
| LATVIAN | 1 | 1 | 1 | 1 | 2 | 2 | 2 | 3 | 5 | 1 | 2 | 0 | **21** |  |
| YORUBA | 0 | 0 | 2 | 1 | 1 | 3 | 0 | 3 | 3 | 3 | 2 | 2 | **20** |  |
| ARMENIAN | 1 | 2 | 0 | 2 | 2 | 2 | 1 | 2 | 1 | 1 | 3 | 1 | **18** |  |
| DUTCH | 2 | 2 | 1 | 0 | 2 | 2 | 4 | 0 | 3 | 0 | 0 | 0 | **16** |  |
| OROMO | 1 | 0 | 0 | 2 | 1 | 1 | 6 | 4 | 0 | 1 | 0 | 0 | **16** |  |
| BOSNIAN | 0 | 2 | 0 | 0 | 0 | 0 | 1 | 4 | 0 | 0 | 3 | 0 | **10** |  |
| CROATIAN | 1 | 4 | 0 | 0 | 0 | 0 | 1 | 1 | 0 | 0 | 1 | 2 | **10** |  |
| HAITIAN CREOLE | 0 | 0 | 1 | 0 | 3 | 0 | 1 | 0 | 1 | 0 | 0 | 4 | **10** |  |
| KURMANJI | 1 | 0 | 0 | 0 | 1 | 4 | 0 | 0 | 0 | 0 | 0 | 4 | **10** |  |
| LINGALA | 0 | 1 | 0 | 0 | 1 | 2 | 1 | 0 | 4 | 0 | 0 | 1 | **10** |  |
| MOROCCAN ARABIC | 0 | 0 | 1 | 2 | 0 | 0 | 1 | 0 | 0 | 2 | 2 | 2 | **10** |  |
| BURMESE | 1 | 3 | 3 | 0 | 0 | 1 | 0 | 0 | 1 | 0 | 0 | 0 | **9** |  |
| MONGOLIAN | 1 | 0 | 0 | 0 | 0 | 0 | 2 | 1 | 0 | 1 | 0 | 4 | **9** |  |
| SERBIAN | 1 | 0 | 1 | 0 | 1 | 0 | 0 | 0 | 2 | 1 | 2 | 1 | **9** |  |
| YIDDISH | 0 | 0 | 0 | 0 | 0 | 2 | 0 | 1 | 2 | 0 | 1 | 2 | **8** |  |
| SUDANESE ARABIC | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 1 | 1 | 1 | 1 | 1 | **7** |  |
| TELUGU | 0 | 1 | 0 | 0 | 2 | 0 | 0 | 1 | 1 | 1 | 0 | 1 | **7** |  |
| GEORGIAN | 1 | 0 | 3 | 0 | 0 | 0 | 0 | 2 | 0 | 0 | 0 | 0 | **6** |  |
| KINYARWANDA | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 1 | 2 | 0 | 2 | 0 | **6** |  |
| BEHDINI | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 1 | 1 | 1 | 0 | 0 | **5** |  |
| IGBO | 1 | 0 | 0 | 1 | 0 | 1 | 1 | 0 | 1 | 0 | 0 | 0 | **5** |  |
| LUGANDA | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 0 | 0 | 2 | **5** |  |
| LAOTIAN | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 1 | 0 | 2 | **4** |  |
| WOLOF | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 2 | 1 | 0 | 0 | 0 | **4** |  |
| CHIN | 0 | 0 | 1 | 1 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | **3** |  |
| INDONESIAN | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 1 | 1 | 0 | 0 | **3** |  |
| MACEDONIAN | 0 | 0 | 2 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | **3** |  |
| KUNAMA | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 0 | 0 | 0 | 0 | 0 | **2** |  |
| MALAY | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 1 | 0 | 0 | 0 | **2** |  |
| MANDINGO | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | **2** |  |
| MARATHI | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 1 | 0 | 0 | 0 | 0 | **2** |  |
| Nigerian Pidgin | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | **2** |  |
| ROHINGYA | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | **2** |  |
| TAIWANESE | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | **2** |  |
| ASSYRIAN | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | **1** |  |
| AZERBAIJANI | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | **1** |  |
| BRAVANESE | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | **1** |  |
| CHUUKESE | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | **1** |  |
| DANISH | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | **1** |  |
| FRENCH CANADIAN | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | **1** |  |
| GHEG | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | **1** |  |
| HAUSA | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | **1** |  |
| ILOCANO | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | **1** |  |
| SONINKE | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | **1** |  |
| SWEDISH | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | **1** |  |
| TOISHANESE | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | **1** |  |
| TONGAN | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | **1** |  |
| TURKMEN | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 0 | 0 | 0 | **1** |  |
| **TOTALS** | **1893** | **2013** | **2170** | **2257** | **2704** | **2665** | **2533** | **2633** | **2566** | **2822** | **2752** | **2793** | **29801** |  |
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Final Report – September 2019

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