

IRISH EMERGENCY MEDICS FLYING HIGH IN ENGLAND

The opportunity to gain experience in pre-hospital emergency medicine as flight doctors with charity air ambulances in England, was the main reason for two Irish medics to move across the water. They spoke to Deirdre O'Flynn about their journey to date, and the need for similar structures to be set up by helicopter emergency medical services in this country.

Having profiled Dr Lisa Guthrie in the previous issue of 'Emergency Services Ireland' on her work with husband Bernard in the Order of Malta at the frontline of the pandemic in Ireland, we recently got her feedback on moving to England to take on additional training in pre-hospital emergency medicine with the air ambulance unit in Essex and Hertfordshire.

In July 2020, Dr Lisa Guthrie joined Essex and Hertfordshire Air Ambulance (EHAAT) in England as a flight doctor. Lisa, who hails from Ballina, Co. Mayo, was previously a specialist registrar in University Hospital Galway, and was also the Order of Malta's first female chief medical officer, since the organisation set up in Ireland in 1938.

She has certainly welcomed the new challenge, having worked in Emergency Departments around Ireland as part of her training for 10 years. "I'm now part of the Critical Care Team giving life-saving critical care that delivers a pre-hospital emergency medical service," said Lisa. EHAAT is a charity that delivers critical care to the people of Essex, Hertfordshire, and surrounding areas – and relies on funding from the UK's National Lottery, the UK Government and donations from local people.

EHAAT has been tasked with over 25,000 missions since the charity air ambulance service was founded in 1999. Operating out of Earls Colne Airfield in Colchester, EHAAT is now developing a second airbase in North Weald (in the Epping Forest District of Essex).

CRITICAL CARE DELIVERY

Delivering critical care with EHAAT often involves attending at roadside or farmyard accidents, knife and gun crime, gas explosions, drug-related crises – both inside and outside the M25. "We provide mutual aid inside the M25 if the London critical care services need our help and, likewise, they assist us if we need it."

The nature of the incidents and the training involved in responses has been new to Lisa. "I wasn't prepared for the amount of knife and gun crime," she said, but "the medicine is the same. However, in an Emergency Department, you have the back-up of colleagues around you whereas, on the side of the road, it's just me and the paramedic doing the procedure."

Training is the key to response time, and Lisa is full of praise about the training on offer at EHAAT. "Every day at the morning briefing, we go through a standard operating



Tyrone's Eimhear Quinn, Consultant in Emergency Medicine, who is based at Salford Royal NHS Foundation Trust Hospital in Manchester, pictured with Mayo's Dr Lisa Guthrie, on board the Essex and Hertfordshire Air Ambulance last August, when their rotas overlapped.



Eimhear Quinn and Dr Lisa Guthrie pictured with some EHAAT crew members.

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“So that, when I couldn’t intubate someone at 5am, I had a back-up plan for it. I wasn’t nervous and I was able to troubleshoot it with the paramedic. I don’t feel we do that training as a standard in Ireland. It’s ‘ad hoc’ in different places.”

Every Tuesday is Case Presentation Day. “We spend six hours discussing cases from the previous week and you learn so much. On one occasion, we discussed a case where the flight doctor couldn’t get intravenous access and had to go through the bone (IO) to provide medications for an RSI (emergency intubation).

“Two weeks later, I had to deal with that same situation with the same paramedic from the first incident. We did the procedure, went through the same steps and everything was fine. This definitely takes me out of my comfort zone.”

BREAKING COMMUNICATIONS BARRIER

As well as learning about the team, the pilots, the paramedics, the road crew, the police, the Hazard Area Response Team (HART), Lisa said she’s also learning about communication and being confident. “You have to step up – yes, I can ring a consultant for oversight, but the training has expanded my confidence in decision making. I can feel myself getting more confident in my skillset.”

Lisa’s communication skills have also improved.

“There are different barriers to communication, not least the masks and different accents. We use a closed-loop communication, which is more definite and to the point. There is no ambiguity and you need that in an emergency situation.

“You say exactly what is happening, what I can see and what I am doing. If I don’t say it, the paramedic doesn’t know what’s going on or vice versa. Again, that’s something I think we don’t do as well as we should in Irish emergency departments, in terms of closed loop communication, relaying of information to the person beside you.”

Interestingly, Lisa has had nothing but positive experiences with her Irish accent helping to break down barriers with people. “People absolutely love the Irish accent and love hearing about Ireland.” She has also bumped into other Irish people working in the emergency services in England, such as Cork-born Dr Ronan Fenton, EHAAT’s Medical Director.

THE WORK-LIFE BALANCE

However, it’s not always easy for Irish people interested in returning home. “If you’re a paramedic in the UK, that qualification isn’t as easily transferred to Advanced Paramedic level in Ireland. There are lots of different aspects to be considered. Speaking with Irish paramedics in the UK, a lot want to come home. However, there isn’t a defined pathway for integration, so they are put off from returning.”



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Another difference is the work-life balance. "We're definitely well trained in Ireland, but at times, you have to work in excess of 70 hours a week in Ireland. In the UK, there are enough people to allow for part-time work. There's a more holistic view in the UK that work is not your life. You don't lose training or respect if you step back for a few years.

"EHAAT knew that I had children when I applied for this role and they offered to help me with schools if we were all going to move to the UK. When I started in July, the rota manager messaged me to say EHAAT would accommodate me flying home to be with my family and would facilitate me to have time off over Christmas. I've never had a job where I could talk about my family like that.

"I'd love to come back to Ireland to work as a Consultant in Emergency Medicine with an interest in PHEM. It has been a great experience to go abroad to see how another system works and to hopefully help to structure PHEM in Ireland."



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FLEXIBLE WORKING ROTAS

If PHEM is restructured in Ireland, Lisa's Tyrone-born colleague Eimhear

IRISH AIR CORPS AIR AMBULANCE

The Irish Air Corps, in partnership with the Irish Coast Guard, has provided an air ambulance service for many years in Ireland. Having recently added four new Pilatus PC12NG aircraft to its fleet, the Air Corps is awaiting delivery of two Airbus C295 aircraft, which will allow a significant increase in the capability it provides.

The HSE National Ambulance Service, in conjunction with the Irish Air Corps and the Department of Defence, also operates an Emergency Aeromedical Service, which is based at Custume Barracks in Athlone and is staffed by an Air Corps flight crew and an NAS Advanced Paramedic.

For further information visit www.nationalambulance.ie



Quinn may be interested in returning home. A Consultant in Emergency Medicine, Eimhear is based at Salford Royal NHS Foundation Trust Hospital in Manchester.

Interestingly, Lisa and Eimhear overlapped for a month last August at EHAAT. "My rotas were flexible allowing me to work in EHAAT and Salford," said Eimhear, who now also takes shifts with the North West Air Ambulance, which has three helicopters covering Greater Manchester, Cumbria, Lancashire, Merseyside, and Cheshire, and flies out of Barton and Blackpool airports.

In Salford, rotas are done 16-20 weeks in advance and monthly with North West Air Ambulance, with consultants encouraged and facilitated to work within their means and to pursue areas of interest.

"It's hard to work full-time in an emergency department – some do – and working less than full-time is encouraged on the basis that pursuing your area of interest – whether that's sports medicine, paediatrics, or in my case, the air



The Irish Coast Guard (IRCG) also provides additional air support, using their range of SAR Helicopters, based at Shannon, Dublin, Sligo and Waterford).



ambulance – makes you happier.”

Eimhear loves her role with the North West Air Ambulance, which flew 199 missions in October 2020 alone. “As with the other air ambulance services, it is a charity, and costs Stg£2400 for each mission – sometimes, it flies five daily, and we have three helicopters.

There’s been impressive progress in HEMS from the EMT to the Advanced Paramedic specialist – and there is now training for critical care paramedics, which will give them more autonomy so that they can do more.”

MORE STRUCTURE AND SUPPORT

And, as a consultant with the air ambulance service, Eimhear is slow to give up that experience when no similar role in the helicopter emergency medical service (HEMS) – or flexibility to include it – exists in Ireland.

“In addition, consultant numbers in Ireland are very low – we have 20 consultants in the Emergency Department in Salford, whereas you would only have five or six in Ireland, so you can see why burnout is such an issue there.”

Add in the 30 per cent disparity in pay between new consultants and those appointed before 2012, the lengthy out-patient waiting lists among the worst in Europe, and “Ireland needs to make it more attractive to come home”, Eimhear claimed.

Money is not a factor, she said – “I

don’t get paid as much in the UK as I would in Ireland” – but the system in the UK is more structured and more supportive, “and I can do my HEMS work”.

The UK medical sector is also more flexible in terms of speciality registrar training times – “the NHS encourages trainees to spend 50-80% of their time as a trainee, which allows them time for caring or family roles and the time is just added on to the end of the training time. And it is

a robust system, requiring mandatory portfolios of evidence of learning.

“Yes, the UK is a bigger country and there’s loads of bureaucracy in the NHS, but it’s a friendlier environment and is able to sustain more staff,” said Eimhear.

For more information on Essex and Hertfordshire Air Ambulance visit <https://www.ehaat.org/> and for North West Air Ambulance visit <https://nwaanet/>

IRISH COMMUNITY RAPID RESPONSE (ICRR) AIR AMBULANCE

Ireland’s first community-funded air ambulance celebrated its first 12 months in operation on 30 July 2020. During that time, the Irish Community Rapid Response (ICRR) Air Ambulance responded to over 513 emergency medical incidents in rural and urban locations across Munster, Leinster and Connaught.

Tasked by the HSE National Ambulance Service, the ICRR team responds to the most serious emergencies, where time can make the difference between life and death. The most common call-outs include cardiac arrest, road traffic collisions, falls from height, equestrian incidents, farming-related injuries and stroke. For further information visit www.icrr.ie.

