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All Wales Alliance for Research and Development in Health and Social Care

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When would you call 999?

Public perception of the role of emergency ambulances in unscheduled health care

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UPCUUCS Project team

Understanding how the public chooses to use unscheduled care services

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Commissioner: Welsh Assembly Government

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Background

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Rising demand

- For all unscheduled care services
- Calls to emergency ambulance services in England increased from 4.7 million in 2001/2 to 7.2 million in 2007/8

Inappropriate use of the 999 ambulance service

‘One pensioner told a 999 crew to wait 40 minutes before taking her to hospital because she was baking a cake. Paramedics gave her a warning and left – only for the woman to ring again exactly 40 minutes later. She told the crew that the cake had risen nicely, and she was ready to go to hospital.’

Daily Telegraph 28/06/02

Confusion about services

- ‘Many people are either unaware of the full range of urgent and emergency care services or are unsure about how and when to use them’
 - *Healthcare Commission ‘Not just a matter of time’ September 2008*
- Many patients go to ‘the wrong service’

Social marketing

- 999 ambulances should only be used in a critical or life-threatening situation
 - Choose Well campaign, Merseyside PCTs
 - Stop and Think campaign, Welsh Ambulance Services Trust

- Learn to recognise life-threatening symptoms
 - Doubt Kills campaign, British Heart Foundation



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The UPCUUCS study

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Overall aim of the study

To provide an understanding of the factors which influence members of the public when they make emergency or unscheduled contact with health care services.



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Presentation objective

To present findings from focus groups on the attitudes and beliefs of members of the public about the purpose and function of the emergency ambulance service in the context of the unscheduled health care system.

Methods

A total of 30 people took part in four diverse focus groups:

- FG1 - mothers of young children;
- FG2 - men from a Muslim background;
- FG3 - members of a 50+ forum;
- FG4 - members of a community organisation in a relatively deprived area.

Vignettes describing four imaginary scenarios for which unscheduled care might be required were used to stimulate discussion.

Focus group discussions were recorded and transcribed to provide the basis for thematic analysis by two researchers.

Scenario 1

- Amanda is the mother of two children, Jack aged four and Chris aged two. Jack has a very bad cold, is coughing and his nose is blocked. At about 11pm, she is aware that Jack is awake and sounds distressed. She goes into his bedroom and finds he has a high temperature (2 degrees above normal) and his cough has become wheezy. Her husband is working away that week.
What should she do?
- *Changed circumstances:*
- Amanda's husband James is also at home.
- Instead of it being 11pm when Amanda finds Jack has a temperature, it is 11 am (Jack's been kept home from school)

<p>Scenario 1 Child has wheezy cough</p>	<p>Scenario 2 Man in rural area cuts his hand on saw.</p>
<p>Expert 1: In most cases, self-care. If the child has other/recurrent problems, contact GP. If child becomes floppy/croupy/widespread rash, phone 999. Expert 2: Ring GP OOH service for advice.</p>	<p>Expert 1: Self care. If wound won't stop bleeding, A&E. Contact GP or NHSD for advice on tetanus. Expert 2: Self care. If stitches required, contact GP.</p>
<p>Scenario 3 Woman in her 70s feels nauseous after change in heart medication.</p>	<p>Scenario 4 Man notices red patch on eyeball.</p>
<p>Expert 1: Self care. If she thinks that nausea results from medication change, contact GP. Expert 2: Self care. Stop taking medication. Wait until GP open, then contact for advice on medication.</p>	<p>Expert 1: Self care. Expert 2: Make appointment with GP.</p>



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Findings

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	Scenario 1 Sick child	Scenario 2 Cut hand	Scenario 3 Nausea	Scenario 4 Bloodshot eye
Expert view 1	<i>Self care GP 999</i>	<i>Self care. A&E. GP or NHSD</i>	<i>Self care. GP</i>	<i>Self care.</i>
Expert view 2	<i>GP OOH service</i>	<i>Self care. GP</i>	<i>Self care GP</i>	<i>GP</i>
Young parents	GP OOH service Self-care	A&E GP (if weekday)	GP OOH service 999 ambulance	GP NHS Direct Pharmacist
Communities First area	GP Self care Minor Injuries Unit 999 ambulance	A&E 999 ambulance	GP Pharmacist Advice from family	GP Optician Self-care Advice from friends
Muslim men	NHS Direct Self care Advice from family A&E GP OOH service	A&E Self care 999 ambulance Air ambulance	Carer 999 ambulance GP NHS Direct	GP Watch and wait GP OOH service
Older people	NHS Direct Advice from friend A&E Pharmacist Self-care	Local first aider Pharmacy 999 ambulance (if pumping blood)	999 ambulance Pharmacist GP	Optician Watch and wait Pharmacist A&E GP

- Respondents were very cautious about making inappropriate use of the ambulance service

FG1:3 'I'd be embarrassed, I think, phoning for an ambulance for that. I'd feel like I was wasting their time.'

FG3:2 'On a personal level, I know I would tend to ...maybe go to bed and, yes, give the GP a ring, but I know I've got a friend down the road who would be ringing 999 and expecting an air ambulance to come out.'

- People talked about 999 ambulances being ‘an immediate response’, yet repeatedly described situations where they believed going to hospital by car would be quicker

FG1:2 ‘If you’re capable of taking them yourself, I would drive them. I wouldn’t call an ambulance....I think an ambulance is when you need an immediate response where they can give immediate treatment.’

- The 999 ambulance service was seen as a complete package from the time of calling, with call-takers valued for their advice and reassurance.

FG4:1 'But even by phoning 999 you get the help from them on the phone. They can give you so much help on the phone and they could weigh up whether you really needed an ambulance and whether they could tell you what to do. ... That lady on the phone with me was fantastic, asking all different things you wouldn't have even thought of looking at.'

- Focus group members brought up outside the UK had a relatively limited understanding of the role of 999 ambulances.

FG 2:2 'When we joined the university coming from abroad, all the brochures and all the documents given to all of us were showing basically that the first thing we should call is NHS Direct. That's the first point of contact and the emergency services, 999, in my point of view it's not that publicised. It's not that emphasised that we should use it at all so I would be quite hesitant to be honest to call 999.'



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Discussion

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- Despite widespread concerns about misuse of the ambulance service, the majority of members of the public were very wary of being seen to make inappropriate use of NHS resources.
- Any future social marketing campaign should reflect this.
- People greatly valued the service as a source of reassurance, but were less clear about its functional role in providing immediate help.

Study limitations

- Only a small number of people were in the focus groups
- People may say something different from what they would actually do in real life
- Some of the discussion was based on assumptions about how other people would typically behave – which may not be correct



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Full UPCUUCS study report
available from
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