

Vol 18 Issue 3

March 2018

AMBULANCE *Life* *Digital Magazine*

The Magazine for ambulance personnel throughout the UK

NEWS

PRU success
for LAS

AIR AMBULANCE

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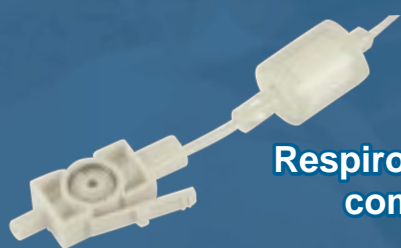
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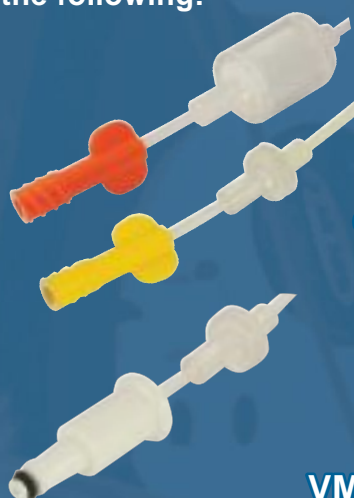
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Welcome...

This month's feature article on page 4 is a review of the first 111 days of a unique collaboration between London's Air Ambulance, Barts Health NHS Trust and London Ambulance Service's remodelled Physician Response Unit (PRU) which has revealed emergency care is being transformed for patients in East London. By taking the emergency department on the road and to the patient, 67% of patients seen have been treated and discharged at home, allowing the patient to avoid hospital and begin their recovery immediately in the community.

Following last month's article about paramedic care in the home which raised a lot of interest, this month we report on how a South East Coast Ambulance Service (SECamb) paramedic has helped develop a step-by-step flowchart to support care homes to make informed decisions about when is the right time to call 999 for ambulance assistance see page 12.

Technology in pre-hospital and ambulance care continues to evolve and on page 14 we take a look at how South Central Ambulance Service NHS

Foundation Trust (SCAS) West Midlands and North East NHS Foundation Trusts, have been awarded a share of £5m to develop into world class digital organisations.

NHS England recently announced that SCAS and two other ambulance trusts, will be the first organisations to enrol on the ambulance version of the Global Digital Exemplar (GDE) programme. Over the next two years, SCAS will receive an additional £1.7m from NHS England (which the Trust will match fund) to continue its pioneering work in digital transformation.

Also this month we have a roundup of air ambulance news, people in the headlines plus training and other news for those in the pre-hospital/ambulance sector.

Thanks to all readers who sent in their contributions and keep up the great work.

Jill Bareham

Editor

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PRU on the road



• Physician Response Unit Tony, Nabeel & James

A review of the first 111 days of a unique collaboration between London's Air Ambulance, Barts Health NHS Trust and London Ambulance Service's remodelled Physician Response Unit (PRU) has revealed that emergency care is being transformed for patients in East London. By taking the emergency department on the road and to the patient, 67% of patients seen have been treated and discharged at home, allowing the patient to avoid hospital and began their recovery immediately in the community.

Staffed with a senior emergency doctor and ambulance crew member in the car, the clinical experience of the medics enables the PRU team to treat a wider range of illnesses and injuries at scene compared to ambulance crews which take

many emergency patients to hospital. Of 652 patients treated by the PRU during its first 111 days of extended service 449 patients were treated in the community. Of these 312 would otherwise have been taken to the emergency department at

hospital

The PRU carries advanced medication, equipment and treatments usually only found in hospital such as instant result blood tests, urine tests and sutures to stitch serious wounds. This means the PRU can treat patients where they are, avoiding a trip to East London's hospitals.

Patients have been overwhelmingly positive about being able to receive a specialist medical consultation in their own home, avoiding having to go to hospital.

Patient Case Study

70 year old Joshua Adeleke was seen by the PRU doctor and ambulance crew after phoning 999. On arrival the medical team found him septic, suffering from a severe and potentially life-threatening infection, and needing immediate intervention. Using the advanced equipment the PRU carries in its rapid response vehicle, the team were able to swiftly give him intravenous antibiotics and fluids, perform blood tests and alter some of his blood pressure medications. Thanks to the expertise of the medics, the interventions meant Joshua could be discharged there and then with tablet antibiotics avoiding a visit to hospital. The medics contacted his local GP surgery to ensure that Joshua's care was continued and he had support afterwards. Joshua made a full recovery and said the service was "fantastic. I really appreciated that I didn't have to go to hospital." Joshua's treatment illustrates the great integration of care the PRU is able to provide.

Alongside increased patient satisfaction, a better experience for patients and easing pressure on busy emergency departments, the service review has also identified significant savings for health services; £410,938 was saved in the first 111 days.

Using average costs sourced from NHS Reference Costs 2015-16 (Department of Health) the review analyses the positive impact made in three areas; emergency department attendances, hospital admissions,

and ambulance resources.

Impact: Emergency Department (ED) Attendances - saving of £43,056

- The PRU team estimated that out of 449 patients that were managed in the community over 111 days, 312 patients would have likely been conveyed by ambulance to the Emergency Department.
- At an average tariff cost of £138 per ED episode, this equates to an estimated cost saving of: £43,056
- Impact: London Ambulance Service - saving of £73,632
- There was an estimated reduction in 312 LAS ambulance conveyances (2.8 per day). At a unit cost of £236 this equates to an estimated cost saving of: £73,632
- Impact: Hospital Admissions - saving of £294,250
- In 111 days, the team estimated that 71 patients who were managed in the community would otherwise have been admitted to inpatient wards in hospital.
- This equates to an inpatient

bed occupancy reduction of 535 bed days when matching the same group of patients and the typical length-of-stay for their diagnosis, if they had been admitted to hospital

- The cost of a non-elective inpatient bed per night at Barts Health NHS Trust is £550. Therefore this activity gives an estimated cost saving of £294,250.

The total saving across all three impact areas is approximately £410,938.

The PRU is run as a partnership between London's Air Ambulance charity, London Ambulance Service and Barts Health NHS Trust. London's Air Ambulance provides the cars and some of the equipment. Barts Health NHS Trust provides the clinical governance, training, rest of the equipment and the senior doctor who works half the time in the Emergency Department of The Royal London Hospital and half the time with the PRU. London Ambulance Service provides the emergency ambulance crew and task the service from the 999 control centre in Bow.

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A fob to carry your Apple Watch, for nurses, medics and paramedics.

Ambulance Life has teamed up with Medical Aide Memoire giving 2 lucky readers a chance to win one of the fobs.

Now you can wear your watch to work without compromising infection prevention control requirements.

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To enter the competition answer the question below:

Q. In this issue what page does Lifesavers start on?

Email your answer to: info@ambulance-life.co.uk
and in the subject line insert: **COMPETITION TIME.**

Competition closes: 31st March 2018



Terms and conditions

- Competition details form part of these terms and conditions.
- The entrant(s) must be aged 18 or over.
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First aid skills shortage in the UK

Three of the UK's largest charities are seeking public support for first aid to become a compulsory part of the school curriculum, following new research which shows more than nine in ten adults (95%) would not be able to save lives in first aid emergencies.

Along with the British Red Cross and St John Ambulance, the British Heart Foundation is calling on people throughout England to take part in the Government's call for evidence on Personal, Social, Health and Economic education (PSHE), and join their push for first aid skills to be taught in all schools.

Research commissioned by the British Red Cross asked more than 2,000 UK adults about their knowledge, confidence and willingness to intervene in three potentially life-threatening first aid emergencies - helping someone who is bleeding heavily, is unresponsive and breathing, or is unresponsive and not breathing.

The findings show the vital need to provide first aid lessons in schools to address the public's lack of knowledge and confidence to step in during a first aid emergency. The research shows:

- Only 1 in 20 people would feel knowledgeable, confident and willing to act in those three scenarios - 95% of people would not.
- Seven in ten adults lack the knowledge and confidence to act if someone collapsed and was unresponsive and breathing.
- Nearly seven in ten people polled lack the knowledge and confidence to act if someone was bleeding heavily.
- In addition to these scenarios, eight in ten adults also said they lack the knowledge and confidence to act if a baby was choking.

Further research British Herat

Foundation carried out in 2017 showed that 60% of adults would be worried about knowing what to do if they witnessed someone having a cardiac arrest and only 20% of respondents were able to correctly identify the signs of a cardiac arrest.

Meanwhile, a survey by St John Ambulance shows that 80% of people feel that first aid lessons should be compulsory in all schools.

Speaking about the importance of CPR, our Chief Executive Simon Gillespie said: "CPR really is the

difference between life and death for thousands of people every year in the UK who suffer a cardiac arrest. Every second counts, so it is vital that school children across the UK are equipped with this simple, life-saving skill. It takes less than an hour to learn CPR, so dedicating just one PSHE lesson per year could create a generation of lifesavers."

By making it compulsory for every child to receive just one hour of first aid education a year as part of PSHE, hundreds of thousands of young people could be empowered with the skills to save a life.

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Warning to private ambulance drivers



Pprivate ambulance drivers in the south west are being warned they will be prosecuted if they use sirens and flashing blue lights illegally.

Only companies authorised by an NHS Trust are allowed to use sirens and blue flashing lights in an emergency.

Currently only Bristol Ambulance Service is authorised locally by South Western Ambulance Service NHS Trust.

Drivers of private ambulances from other firms in the region are being warned they could be fined and get points on their driving licence if they are found to be using emergency lights and sirens on the public highway illegally.

It comes as the owner of a privately owned medical event company was fined £300 with additional costs of £115 and given 7 points on their driving licence in February.

He had been found guilty of

driving without due care and attention; cause use of a vehicle fitted with a blue light, and use a vehicle fitted with a two tone horn/siren.

The charges related to an incident where a private rapid response vehicle was spotted driving through Minehead on July 22 last year while using its emergency lights and sirens despite not being authorised to do so and whilst not involved in a medical emergency.

It follows another case where a private ambulance provider was also prosecuted for road traffic offences by using a car marked up as an ambulance with emergency lighting fitted, allowing him to avoid paying tolls on the second Severn Bridge.

There are clear guidelines and rules relating to the equipping of an Ambulance on the road which includes the Ambulance Deregulation Act 2015.

Avon & Somerset Constabulary

Superintendent Andy Williams, Head of Road Safety, said: "Unauthorised drivers using sirens and blue lights on public roads can pose a danger to the public.

"Not only that but others have been known to use them for financial gain.


"We're working with South Western Ambulance Service NHS Trust to ensure those Private Ambulance Service and Event Medical providers operating within the force area comply with the legislation.

"This includes the correct marking up of their vehicles, the incorrect fitting and use of emergency equipment and the driving within the highway code and not in an emergency response mode.

"Those who flout these laws will be reported and dealt with robustly as shown recently."




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TEAM SUCCESS

Emergency services in North Wales collaborated and launched a new initiative aimed at protecting people in their homes in August 2016.

The Community Assistance Team has now assisted over a thousand people since it was launched.

The pilot is running in Denbighshire and Conwy in the form of a specialised team of staff working together to respond to vulnerable people who experience a fall in their home.

The aim of the initiative is to reduce the number of people who need to attend hospital as a result of a fall, thereby reducing the pressure and demands on ambulance and medical services.

The team consists of fully trained staff members, recruited from North Wales Fire and Rescue Service who are equipped to provide a service of excellence and an improved patient experience.

Kevin Roberts, Senior Fire Safety Manager at North Wales Fire and Rescue Service, said: "We are extremely pleased with how this initiative is going and are glad that our team have been able to assist over a thousand people.

"The benefits of collaborative working with other emergency and public services are obvious, both in monetary savings and in respect of delivering improved services to our communities.

"By responding as a specialised team to non-injury falls in this way we hope to alleviate some of that pressure as well as provide a much improved service."

Liz Hughes, Ambulance Operations Manager at the Welsh Ambulance Service, said: "The Community Assistance Team is a perfect example of how emergency services can work



• North Wales Community Assistance Team

together to better patient care and community safety.

"The scheme is also helping to reduce the number of people who need to attend hospital, which in turn is reducing the pressure and demands on ambulance and medical services - and when you're in the midst of a very busy winter period, this is a huge support.

"Well done to the team for helping over 1,000 patients."

Mrs Eileen Harrop, who has witnessed the team assisting her husband, said: "What a brilliant service; it is better than waiting for an ambulance as the team was with us in less than an hour.

"There was no need for an ambulance to attend as Rodney has never been injured when falling so frees up vital resources for high importance calls."

The initiative is supported by Welsh Government in conjunction with the three emergency services, Denbighshire County Council, Conwy County Borough Council, Betsi Cadwaladr University Health

Board and Galw Gofal/Care Connect and North Wales Regional Call Monitoring Service.

The team members work a shift pattern covering known peak times between 7.00am - 11.00pm.

They respond in a branded Community Assistance Team vehicle that is fully equipped with all of the necessary specialist equipment, including lifting devices so as to safely assist a person back to a seated position.

The service is mobilised through ambulance service control, so the public do not need to do anything different than they would have done previously, however if it is appropriate the Community Assistance Team will be deployed instead of an ambulance.

This initiative and others has already been recognised at the All Wales Continuous Improvement Community Awards 2016 in the 'Collaboration' category that celebrated the success of the Tri Service Prevent and Respond Project Team.

Prison sentence

A man has been given a custodial prison sentence after assaulting and threatening to kill a North West Ambulance Service (NWAS) Paramedic who was looking after and comforting him.

An ambulance was called to an unconscious male in Manchester on 5 September 2017 but after getting the patient on the stretcher and in the ambulance the man suddenly became alert and began pulling at the ambulance equipment aggressively.

In an attempt to calm him down, Paramedic, Amanda Beames, comforted the male who seemed upset. He asked Amanda to hold his hand which she did before he started laughing and pulled her on top of him, threatening to kill her and attempting to use her pen as a weapon to attack her with.

Amanda bravely managed to hold down and restrain the male all

whilst travelling on the motorway in a moving ambulance but was left with injuries to her wrist, chest and stomach.

The male, Paulius Zacharovas, 30, of no fixed abode, was later arrested and kept on remand before pleading guilty on 21 February 2018 at Manchester and Salford Magistrates Court to a charge of assault with battery.

Sector Manager for NWAS in Greater Manchester, Annemarie Rooney, said: "This type of treatment towards the very people who are there only to help is absolutely not acceptable and we will not tolerate it.

"This was a vicious attack which has had a lasting effect on our Paramedic and we're glad that he has been brought to justice."

In 2017, there were 204 reported incidents of physical assault against NWAS staff in Greater Manchester

alone.

Paramedic, Amanda Beames, 39, from Bury, said: "This was an extremely frightening experience for me and although I have experienced abuse during my 20 career as a Paramedic, never anything on this scale.

"I have had to take some time away from my role following the attack but feel that this sentencing has given me some closure and I feel determined to get back to the job I love. The support that I have had from my colleagues, friends, family and the Service as a whole has been amazing but it shouldn't be needed. Nobody should ever be treated in that way especially someone who is only there to help."

Mr Zacharovas was sentenced to an eight month custodial sentence and ordered to pay fines of £150.

Deputy Chief Ambulance Officer

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Closing date: 14 April 2018.

CARE REDISCOVERED

States
of Jersey

Paramedic advice for care homes

A South East Coast Ambulance Service (SECAMB) paramedic has helped develop a step-by-step flowchart to support care homes make informed decisions about when is the right time to call 999 for ambulance assistance.

Tom Pullen, a specialist paramedic from the Trust's Clinical Development Team, developed a guidance document on how to appropriately access urgent and emergency care from SECAMB, including the easy-to-follow flowchart.

Tom worked in collaboration with First Community Health and Care, which provides community-based care services in East Surrey and the surrounding areas.

The guidance and flow-chart gives care home providers information on what service they should call if one of their residents needs medical assistance.

Tom said: "It's a very simple idea. We've really engaged with care home providers to make sure that what we ended up with was fit for purpose."

The approach aims to reduce the number of calls to 999 which could be handled more efficiently elsewhere by providing appropriate signposting and optimising patient flow through urgent & emergency care systems.

This in turn reduces avoidable hospital admissions. The guidance was initially trialled in a couple of local East Surrey care homes, prior to being deployed across the region.

"First Community Health Care initially drove the initiative and opened doors," said Tom. "This allowed us to get some valuable feedback from care homes when developing the guidance ensuring that when we went live for the rest of the region we could feel confident with what had been produced."

SECAMB Consultant Paramedic and Head of Clinical Development Andy Collen said: "We know that across the region care homes will often call 999 because they are unsure what to do, and may be concerned about doing the wrong thing. By introducing the flow chart, we are effectively giving care homes another way of providing a safety net. While not a formal decision-support tool, the flowchart can guide staff to "choose well", which is key message in the NHS. We are not advising care homes to stop calling 999, but rather to work with us to promote the best care for patients, and avoid unnecessary risks, bearing in mind there are risks with sending older patients to hospital where this may be avoidable."

The guidance also provides some basic dos and don'ts when calling 999. It uses the same language which is found in NHS Pathways, the clinical system used by 999 and NHS111 providers in the region to triage calls. This helps care homes become more familiar with the way the system works and improves patient experience.

Tom added: "There are some very simple things in the guidance which can really make a massive difference, such as ensuring that the person delivering the care to the resident is the person who calls 999. In some cases, we may need to ask more questions about the patient so having a fuller picture as quickly as possible will ensure we get the right level of care."

With the early success of the scheme seeing the number of calls and admissions to hospital from care homes in the area falling, Tom and the Trust is keen for care homes across the Kent, Surrey and Sussex region to make use of it.

Tom and SECAMB were recognised for their work when the team at First Community Health and Care awarded them 'Partner of the Year' at the community provider's annual awards in November 2017.

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Digital pioneers

South Central Ambulance Service NHS Foundation Trust (SCAS) is one of three NHS ambulance trusts that have been awarded a share of £5m to develop into world class digital organisations.

NHS England recently announced that SCAS and two other ambulance trusts, West Midlands and North East NHS Foundation Trusts, will be the first organisations to enroll on the ambulance version of the Global Digital Exemplar (GDE) programme.

Over the next two years, SCAS will receive an additional £1.7m from NHS England (which the Trust will match fund) to continue its pioneering work in digital transformation. Innovations already implemented by SCAS to make its services more efficient, resilient and safe include:

- digitally integrated clinical patient management systems and dispatch systems
- virtual digital telephony platforms
- electronic patient record system

The announcement of an additional £5m in funding takes the total investment from NHS England to £10m as the three ambulance trusts develop into Global Digital Exemplars.

Charles Porter, Director of Finance at SCAS, said: "We are privileged to have been named a global digital exemplar, which recognises the

Trust as a successful technological innovator at the forefront of the digital arena. This recognition from NHS England will enable us to deliver further improvements in patient care, efficiency and integration within the local health system and the wider NHS.

"The additional funding allows us to accelerate our investment in digital technologies and means we will be able to move more quickly towards our digital vision to be 'paper free' at the point of care and to provide seamless patient care leveraging the full resources of the NHS'."

Vince Weldon, Associate Director of Information Management & Technology at SCAS, said: "This recognition of the Trust's investment in technology over many years to improve patient care and make our staff more effective will allow us to fast-track the next iteration of developments in the digital age. In particular we will see enhanced use of our vehicles as digital hubs, improved forecasting and planning based on the use of wide ranging data, and direct access for our clinicians (both on the telephone and at the patient's side) to

shared and current care information, all of which will improve our ability still further to provide the right care, first time to the people we serve."

Will Smart, Chief Information Officer for Health and Care at NHS England, concluded: "We have taken a different approach with the ambulance branch of the GDE programme and are asking the three successful Trusts to think of ways in which they can work together to drive improvements through the use of digital technology.

"By stepping up to become world class these three Trusts will join the most digitally advanced healthcare organisations across the globe and help deliver a sustainable and transformed NHS."

The Trust's participation in the Global Digital Exemplar programme will ensure SCAS continues to lead the way in demonstrating how digital technology can positively impact on patient care and support transformation projects to revolutionise the way in which healthcare is delivered.

As part of the programme, SCAS is keen to work with other NHS organisations and pursue jointly funded projects with the Trust's external partners.





MobiMed - Integrated IT solution for patient monitoring, decision support and electronic patient record.

Monitoring

Vital parameters are monitored in the ambulance and automatically transferred to the hospital. (ECG, SpO2, NIBP, EtCO2 and respiration). Adjustable alarm levels can be set and are updated dynamically. ECG analysis can be performed directly, either at patient-side or at the hospital.

Electronic patient record & decision support

Decision support for immediate care and transport taken at the patient-side. Transport facilitated directly to appropriate care destination (PCI-, stroke-, trauma-, pediatric unit).

The different departments of the hospital have access to the information and assist in making decisions and propose health care on arrival.

Examples of functionality

- Integration with hospital records
- Mass casualty management
- Pharmaceutical module with dosage calculation
- Smart card login
- Summary Care Record integration module
- Camera
- Ambulance ledger for surveillance of several ambulances
- Decision support tools examples: ATLS: ABCDE, NEWS/MEWS, SATS/RETTS
- Search reference material: disease history, drug guidelines, treatment guidelines.
- Messaging function
- Reporting module

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Digitising pre-hospital Air Ambulance

Professor Richard Lyon MBE, Associate Medical Director of Kent, Surrey & Sussex Air Ambulance (KSS) provides an insight into the challenges faced by his service and how the adoption of new technologies is helping to alleviate pressure, improve working conditions and ultimately, patient outcomes.

The challenges

Pressures faced by air ambulances can sometimes differ from those on land, but the technology used by both has the potential to transform the delivery of care so that all emergency services are moving forward together.

At KSS Air Ambulance, we are continuously looking to improve the care we deliver to our patients. We are very busy, going on over 2,000 missions every year across Southeast England and we are the only air ambulance to operate 24 hours a day with a helicopter. A significant number of our patients are critically injured following major trauma and many undergo pre-hospital anaesthesia or receive advanced medical care like a blood transfusion or a surgical procedure. Capturing data in these challenging interventions is imperative to ensure decision makers have as much clinical information as they need to make the best possible decision for onward care.

The digitisation of healthcare is well underway and it is now time for the emergency services to further embrace technology to help a sector arguably under the most pressure and scrutiny,

transition into newer, better clinical models of care.

At the forefront of technology

KSS has always strived to procure state-of-the-art technology. We're proud to be the first air ambulance in the UK to adopt the new AW169 helicopter, which is revolutionising pre-hospital patient care. Reflecting this calibre of technology within the helicopter we're now using the Tempus ALS (Remote Diagnostic Technologies (RDT)) patient monitor defibrillator. It's the smallest and lightest monitor we've used on HEMS and robust enough to withstand the military battlefield (which is where it came from), and now the demanding pre-hospital environment.

Tempus technology onboard the Kent Surrey & Sussex AW169 helicopter

Elsewhere, in 2012, we started to explore developing a bespoke electronic patient database and reporting system that would be unique to the HEMS environment. Two of our previous registrars launched HEMSbase (MedicOne Systems Ltd), a web-based suite that allows us capture mission data in real time. We use it for tasking, mapping, taking scene pictures,

recording patient details, clinical care and patient outcome. We do all of this in real time on iPads and this allows us to handover a printed patient record at hospital. For us, HEMSbase is crucial for audit, research and development.

The challenge, however, has been the ability to capture rich, detailed, physiological data, which can be seamlessly integrated into our patient records. Using the Tempus' in-built simcard, we are now able to beam complete monitor records directly into HEMSbase on every mission we fly. Technology like this is helping us fulfil our data-driven ambitions.

Utilising the data

In addition to enhancing direct patient care, all the data from the Tempus monitors are downloaded on a daily basis for Clinical Governance and audit. My own interest is in pre-hospital research and it's crucial that we have accurate pre-hospital physiology data. For example, we are currently evaluating the impact of introducing blood transfusion into our service. We need to know patients' cardiovascular status at various stages of the mission to inform this study to try and establish which patients would benefit from a pre-hospital blood transfusion.

Being able to handover an electronic patient record at

spital care at KSS



• *AW169 set to change pre-hospital patient care*

hospital, which accurately documents the patient's physiology on a minute-by-minute basis, is very helpful for the hospital team in terms of diagnosis and planning on-going care. The new technology is allowing us to capture this data in a way we've never done before.

Looking to the future

To fully embrace the digital pre-hospital environment, we are looking for new, robust ways to connect paramedics on scene to the helicopter and on to the hospital. We want to ensure data can keep pushing the boundaries of healthcare for the better. One advance to look out for in 2018 is a new remote telemedicine functionality for the Tempus monitoring technology called

Corsium Suite.

At KSS HEMS we always have a Duty Consultant available for remote medical support. This is invaluable for complex medical and trauma cases. Corsium Suite will allow the Duty Consultant to view the patient's clinical data in real time, meaning that we won't need to give continuous updates via the radio or telephone. The HEMS Consultant will be able to support the duty team remotely by accessing the monitor securely via the web, from wherever they may be. This is an exciting development we are looking forward to introducing as soon as possible.

We have recently launched a new service for certain out-of-hospital cardiac arrest patients.

This involves using mechanical cardiopulmonary resuscitation to transport patients to King's College Hospital to potentially be placed on extracorporeal membrane oxygenation (ECMO). We are exploring the potential to live stream data from the scene, ambulance or helicopter, directly to the hospital team, which will allow them to plan the patient's subsequent clinical course.

Harnessing rich, on-scene data has the potential to transform the way we deliver care in the pre-hospital environment. As the pace of adoption begins to quicken, I'm excited to see what efficiency improvements will be made over the coming year to help benefit patients and the NHS.

New ambassador

Matt Perry, the ex-professional rugby union player, has pledged his support for Wiltshire Air Ambulance by becoming an Ambassador for the charity.

Matt, who lives in Bath and whose mother and sister live in Wiltshire, said: "Wiltshire Air Ambulance is a fantastic charity and I'm honoured to come on board as an Ambassador to help support it."

During his 12 year rugby career Matt played for Bath, England and the British Lions. At 23 he became the most capped full back for the national team with 36 caps. He played in the 1999 World Cup as well as the Lions tour to Australia in 2001. He also won the Heineken European Cup while playing for Bath.

After injury forced him to retire from the sport in 2007, he began working in business coaching and now runs his own company, Transition 15, based in Bath, helping individuals, teams and organisations.

Matt is also impressed by the charity's new airbase



• **Wiltshire Air Ambulance Charity Ambassador Matt Perry with WAA pilots Nicky Smith (left) and Matt Wilcock (right).**

at Semington, near Melksham, which is nearing the end of construction and is close to achieving its fundraising target. The new facility will bring together the helicopter, aircrew and charity team and secure the charity's future.

He said: "The new airbase is a fantastic facility that will further enhance the operation and delivery of Wiltshire Air Ambulance's lifesaving service. The new site is centrally located so the helicopter will still be able to reach all parts of Wiltshire within 11 minutes."

Ambulance upgrade

A new upgraded air ambulance helicopter has entered Midlands Air Ambulance Charity's fleet.

Registered with the call sign 'G-RMAA', the £7 million Airbus helicopter was introduced to the service on Tuesday 27th February 2018 from the organisation's RAF Cosford airbase in Shropshire. The new helicopter was officially unveiled on Monday 26th February by the charity's chairman, Brendan Connor with supportive charity ambassadors, John Challis, Sir Lee Pearson CBE and Neil Back MBE.

The lifesaving charity operates three strategically located air ambulance helicopters across six Midlands counties*. In addition to the new wholly owned H145 helicopter, the charity owns a H135 helicopter, and will continue to lease one further H135 aircraft from its aviation partner,



• **Sir Lee Pearson CBE, Neil Back MBE and John Challis with the Midlands Air Ambulance**

Babcock Mission Critical Services.

The larger H145 air ambulance helicopter was originally built by Airbus in Germany, and received its medical fit out at Babcock in Staverton, Gloucestershire. Charity ambassadors Mike Tindall MBE and Nigel Mansell were present on the day of the delivery of the new helicopter to the charity's RAF Cosford airbase earlier this month.

The new helicopter will undertake an average of three air ambulance missions every day and will provide a great number of benefits to patient care within the Midlands. It travels greater distances without the need for refuelling and enables the aircrew to respond even faster due to

increased speed capability. The larger interior means additional aircrew can be flown to major incident scenes, and further medical equipment can be carried on board to treat more complex emergencies.

Brendan Connor, chairman of Midlands Air Ambulance Charity, said: "Excellent pre-hospital patient care is at the heart of everything we do. To support our mission, build resilience, and strengthen the long-term sustainability of the charity, we made the strategic decision to invest a proportion of donations into a larger, upgraded H145 model. The new airframe will enable us to reduce our operating costs and complements our plans to further improve pre-hospital care in the region."

Kent, Surrey & Sussex Air Ambulance **Brighton Marathon & 10K**




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Praise for new airbase



• On the helipad at Wiltshire Air Ambulance's new airbase at Outmarsh Farm, Semington, are (l-r) David Philpott, Chief Executive of Wiltshire Air Ambulance, Cheryl Johnson, Head of Business Development & Capital Appeal at Wiltshire Air Ambulance, and Robert Bertram, Chief Executive of the HELP Appeal.

Wiltshire Air Ambulance's state-of-the-art new airbase has been praised by the HELP (Helicopter Emergency Landing Pads) Appeal, which has generously funded the helipad with a £250,000 donation.

On 22 February Robert Bertram, Chief Executive of the HELP Appeal, visited the new airbase at Outmarsh Farm, Semington, near Melksham, for the first time since construction began.

The HELP Appeal is the only charity in the country that funds the development of helipads at Major Trauma Centres, key A&E hospitals and air ambulance bases.

Mr Bertram toured the building and saw the helipad, the Flight and Operations Centre, the charity team office, training suite and visitors' viewpoint, which looks over the helipad.

He was told that the design of the airbase and the helipad will help to enhance response times for Wiltshire Air Ambulance's helicopter as the Flight and Operations Centre, where the pilots and paramedics are based, is located in close proximity to the helipad. In addition, the helipad has trace heating which will stop ice forming in freezing conditions enabling the helicopter and aircrew to respond to emergency incidents without delay.

Mr Bertram said: "The HELP Appeal is about saving time wherever possible, for example through funding lifesaving helipads all over the country including those at Bristol Royal Infirmary or Southmead Hospital and funding the cost of the helipad at Wiltshire Air Ambulance's superb new airbase. It is important to shave vital minutes off the time it takes Wiltshire Air Ambulance pilots and paramedics to take off and transfer a critically ill patient to the hospital care they urgently need because saving time, saves lives."

David Philpott, Chief Executive of Wiltshire Air Ambulance, said: "We are extremely grateful to the HELP Appeal for their generosity in donating £250,000 for our new helipad. The funding has enabled us to build the best possible helipad, which will ultimately help us to save lives. This is because our pilots and paramedics will have immediate access to the aircraft as their room is close to the helipad, saving valuable seconds.

"The trace heating on the helipad is a new benefit for our operation. Instead of the aircrew having to clear away ice and snow off the helipad manually, the trace heating will clear it automatically. Not only will this be safer working conditions for our aircrew, but it will also enhance our response times in inclement weather."

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Alive to walk daughter down the aisle

A Chesterfield dad who suffered a cardiac arrest will be able to walk his daughter down the aisle thanks to the ambulance crew who saved his life.

Leonard Lichtveld, 70, who lives in Ashgate with his daughter Tina and future son-in-law Tom, suffered a cardiac arrest at home on the morning of 3 January.

Thanks to the quick response and life-saving treatment from the East Midlands Ambulance Service (EMAS) ambulance crew, Leonard will be able to walk his daughter Tina and her fiancé Tom down the aisle at their wedding on 21 April.

Last month Leonard was reunited with the team who worked to save his life - 999 call handler Brodie Bancroft and ambulance crews James Illing, James Farndon, Rebecca Stokes and Ross Wormall.

Leonard explained that he hadn't felt well just before he collapsed at 9am on 3 January.

He said: "I said to Tom 'I think I'm going to kick the bucket' and then I just dropped."

Tom, 31, a paramedic for Yorkshire Ambulance Service (YAS), couldn't find a pulse on Leonard and so immediately began CPR, rang 999 and spoke to a 999 call handler on speakerphone.



• Leonard with his family and EMAS crew

Tina and Tom's children Lily, 5, and George, 2, were in the room at the time of their grandfather's collapse.

Lily bravely followed her dad's instructions to find the front door keys and unlock it - something she has never done before - so that Tom could continue with CPR.

Last month Lily and George were presented with Laverick bravery awards for helping to save the life of their grandfather.

Tina, also a paramedic for Yorkshire Ambulance Service (YAS), explained that although Tom had begun CPR on Leonard when he collapsed, he needed the EMAS crew and defibrillator to revive his

father-in-law.

Leonard received three shocks with the defibrillator before his heart restarted and he began breathing again.

He said: "I remember being taken to the ambulance, but I wasn't frightened because I knew I was in good hands."

"I am so grateful to everyone who helped me."

She said: "We are so overwhelmed and so grateful to the 999 call handler and two ambulance crews. They arrived so quickly."

"Our wedding day is going to be extra special now. If it wasn't for the ambulance crew we would be planning a funeral instead."

NURSES, MEDICS AND PARAMEDICS

Don't forget to enter our competition to win a job to carry your Apple Watch.

Ambulance Life has teamed up with Medical Aide Memoire to give 2 lucky readers a chance to win one of the fobs.

See page 6 for more details of how to enter...



Born in the back of an ambulance

Sinead Pole was 38 weeks pregnant with her second child when she started having contractions in the early the hours of a frosty morning in December.

Initially she dismissed these as Braxton Hicks rather than real labour pains, however, when the contractions became more frequent she called 999.

East Midlands Ambulance Service (EMAS) Ambulance Technician Amanda Smith and Emergency Care Assistant Anthony 'Tony' Graham arrived at Sinead's home in Oakham soon after the 999 call to find her on the floor. As Sinead was clearly in labour they decided to take her to the Leicester Royal Infirmary.

As everyone left for the hospital, Sinead's partner Adam stayed at home to look after their three-year-old daughter, Scarlett.

A few minutes into the journey, Sinead's contractions became even more frequent and the amniotic sack had started to appear even though her waters had not broken. At this point Ambulance Technician Amanda Smith knew that they would not be able to make it to hospital as the baby wasn't going to wait.

Amanda said: "I remember going to the window of the cab of the ambulance and shouting to my crew mate Tony to pull over because the baby was coming".

Baby Joshua was born within five minutes of the ambulance stopping.

For mum, Sinead it was a frightening experience. She



• **Technician Amanda Smith, dad Adam, mum Sinead with Baby Joshua and Emergency Care Assistant Anthony Graham**

said: "I thought that my baby had died. He was born with the sack around his head, and he did not make any sounds for what seemed like a long time, but of course it was only a few seconds.

"It was such an emotional time. It will be something that I will never be able to forget.

"The ambulance crew were amazing and I can't thank them enough."

For Amanda, who has been with EMAS for three years, Joshua is the sixth baby that she has helped to deliver. For Tony, who has been with EMAS for five years, this was his first birth. He said: "This was a very special night for me. It was my very first delivery. I was so elated. It was like witnessing a miracle."

Sinead, Adam and baby Joshua were reunited with Amanda and Tony last month at Oakham Ambulance Station.

Thank you

A west Norfolk man has been reunited with his lifesavers, close to the anniversary of suffering a cardiac arrest.

Edward Boon collapsed and stopped breathing on 4th February last year at his home in Middleton, near King's Lynn.

Staff from the East of England Ambulance Service NHS Trust (EEAST) praised the reactions of his wife Jill who immediately dialled 999 and help arrived within six minutes of the call.

The 72-year-old and his wife were able to personally thank some of the ambulance staff who treated him.

Following 47 minutes of treatment, the crews managed to resuscitate Edward with the support of the East Anglian Air Ambulance and Carl Smith, who was responding for Norfolk Accident Rescue Service.

He was transported to the Queen Elizabeth Hospital in King's Lynn where he spent seven days in a medically induced coma and was transferred to Papworth Hospital for further care.



• **Edward Boon with Paramedic Laura Player, EMT Craig Peters, Student Paramedic Carl Webster, Duty Locality Officer Owen Claydon-Nicol and Critical Care Paramedic Carl Smith**

Edward and Jill said they wished to pass on their sincere thanks to all the staff involved.

Jill said: "Edward has made an amazing recovery and we cannot thank you enough."

Edward said he had no memory of the incident. He explained: "I remember going to Hunstanton in the morning and returning home to watch sport on the television. The next thing I remember is waking up in hospital seven days later and being told what had happened."

PARAMEDIC REMEMBERED

Louise Cox is undertaking the challenge of completing the Virgin Money London Marathon on the 22nd April 2018 in memory of her friend and colleague Paramedic Kathryn Osmond who passed away on her 41st birthday after a brave battle with cancer (on 18th April 2017).

Louise felt inspired to take on this particular fundraising challenge as she ran the London Marathon in 2007 with Kathryn. Ten years later Kathryn faced the most unrelenting and hideous adversary that even her most amazing determination, courage and resolve could not overcome; Malignant Melanoma. During the last year of her life Kathryn opened up to her friends and family, and subsequently the wider press, sharing her experience of fighting cancer.

Kath achieved amazing things with her fundraising towards experimental treatment which could not be funded by the NHS and was passionate about sharing education about prevention and early detection of cancer (#runningman4Kath). Louise was one of the Paramedics who danced by Clifton Suspension Bridge in the Runningman4Kath video which went viral and set off fundraising activities amongst Emergency Services and medical personnel to raise the £70,000 needed for her treatment.

Kath was posthumously named as one of the regions 100 Great Westeners, recognised by voters for her work as a Paramedic and patient safety manager within the ambulance service and her role in promoting awareness of early detection of Malignant Melanoma and research into finding what she

referred to as 'the magic bullet' or a cure for the disease.

During the final stages of Kathryn's treatment, the Rowcroft Hospice provided comfort, support and specialist services both at home and at the hospice in Torquay. They enabled her family and friends to share precious and joyful moments in an environment that helped to make the most of time together.

Kath was determined that her friends, family and colleagues should maintain the momentum achieved with the fundraising started with the #runningman4Kath, and use every opportunity to help others and learn from her experiences.

Louise a Critical Care Paramedic for South Western Ambulance Service hopes to raise £5000 for Hospice UK as she shows gratitude for their care and support, and provide for others in Kathryn's memory.

Every year in the UK, hospices provide vital care to 200,000 people with terminal or life-limiting illnesses, as well as providing support for many of their loved ones. From managing someone's pain, to looking after their emotional, spiritual and social needs, hospice care supports the whole person, helping them to live their life to the full. Hospice care is free for everyone, and is provided for however long it is needed, which could be days, weeks or even months.

'Completing the marathon is a huge personal challenge. I would usually go for a jog, maybe up to 5km and kept



• Louise Cox



• Kathryn and Louise at the finish of the London Marathon 2007.

a reasonable level of fitness with this and cycling the couple of miles on my commute to work. Distance running is something I have not trained for since completing the Bath Half in 2012. I am following a training plan and increasing the distance towards the huge challenge of the 26.2 miles, juggling the training with work and family commitments. My aim is to complete the race and get my medal, not a specific time, from my recollections of 2007 running with Kathryn it is an amazing experience, and it will be an emotional one doing it in her memory.' 'Eleven years since I first (and last) ran the marathon with Kathryn, this #runningwoman will need your help to make the most of this opportunity to raise money to ensure everyone has access to hospice care and support when they or their loved ones need it.'

• **Donations of sponsorship can be made at www.virginmoneygiving.com/LouiseCox9**

Walking over cancer

A member of the East of England Ambulance Service NHS Trust (EEAST) team is preparing to take on an ultra-challenge to help walk all over cancer.

In May, safeguarding facilitator Denise Kendall will be walking from London to Brighton to raise money for Cancer Research UK.

Combining her love of exercise with a passion to help contribute towards lifesaving cancer research, a gruelling 100km continuous sponsored walk seemed the way forward.

Denise's intensive training is well underway and her latest session saw her head out from Biggleswade ambulance station with colleague Anna Price for a 24 mile walk,

which they completed in just over eight hours.

Denise said: "So many people I know have been affected by cancer so this is my way of showing my support and that I care. Since my first encounter with this disease through my father-in-law to be, 26 years ago, I have watched it affect my oldest friend, my best friend, and some of my colleagues.

"I was always scared of fundraising but I'm now taking on this ultra-challenge for an ultra-cause to make up for all those 5k and 10k charity runs which I never did."



• Fundraising for Cancer Research UK EEAST
Safeguarding Facilitator Denise Kendall

If you'd like to show your support and sponsor Denise - visit her just giving page here -

<https://www.justgiving.com/fundraising/denise-kendall>

Behind the scenes

A long-serving East Midlands Ambulance Service (EMAS) member of staff has revealed she has spent almost 5,000 hours cleaning and kitting out every brand new ambulance rolled out since 2009.

Carol Robinson, who works as an Ambulance Support Team Member at EMAS Alfreton workshop, works behind the scenes making sure each and every EMAS vehicle is ready to enable crews to save lives.

In the last nine years, Carol has kitted out 370 ambulances which takes 10 hours each to clean and stock and 241 Fast Response Vehicles and Patient Transport Services ambulances – reaching a grand total of 4,900 hours.

Without Carol, EMAS ambulances would not be able to go out onto the road to save lives.

As part of the roll out of 68 brand new ambulances across the East Midlands and to demonstrate how much work goes into preparing an ambulance ready for the road, Carol has taken part in a time lapse.

During the stocking process, Carol must ensure every piece of equipment on the ambulance is in the right place, is in date and is ready to help save a life.

Carol said that she feels proud every time she stands back to look at a fully-stocked ambulance, and it is a



• EMAS Support Team Member Carol Robinson

privilege to see the brand new vehicles.

She said: "The ambulances are my babies so it's a shame to see them go and leave the nest. But I get 100% job satisfaction."

Each of the new Fiat Ducatos ambulances costs around £125,000 to have built and kitted out, and can carry 4.2 tonnes.

Farewell Chief

The Welsh Ambulance Service has bid farewell to Chief Executive Tracy Myhill after three and a half years at the helm.

Tracy has been appointed Chief Executive at Abertawe Bro Morgannwg University Health Board and last month took up post.

Patsy Roseblade, the Trust's Executive Director of Finance and Deputy Chief Executive has been appointed the Trust's Interim Chief Executive.

Patsy joined WAST in 2012 and has worked in the NHS at a senior level for 18 years.

Meanwhile, Medical Director Brendan Lloyd will be the Trust's Deputy Chief Executive.

Brendan began his career as a GP, and served as Medical Director at Cardiff and Powys Local Health Boards before joining the Welsh Ambulance Service in 2014.

Patsy said: "This is the beginning of a new chapter for the Welsh Ambulance Service, and I very much look forward to building on the sterling work led by Tracy."

Brendan added: "I'm delighted to have been appointed Deputy Chief Executive, and grateful for the opportunity to help Patsy steer the organisation through the next phase of our transformation journey."

In addition, after four and a half years in the role, Chair Mick Giannasi will be leaving the organisation when his tenure comes to an end on 31 March.

A recruitment process will be held to appoint a substantive replacement in the autumn.

In the interim, the Cabinet Secretary for Health and Social Care has asked WAS current Vice-Chair, Martin Woodford, to step up into the Chair's role.

Martin who joined the service in 2014, has more than 30 years' experience in the local government and healthcare environment.

New Executive Director

South East Coast Ambulance Service NHS Foundation Trust (SECamb) is pleased to announce the appointment of a new Executive Director of Nursing & Quality.

Following an extensive recruitment process, Bethan Haskins will officially join the Trust on 1 April. Bethan fills the role carried out on an interim basis by Steve Lennox, who will be remaining with the Trust for a number of months to provide additional capacity in the directorate.

Bethan has a broad range of experience and worked most recently as Chief Nurse across a number of Kent clinical commissioning groups. She has also been a specialist advisor to the CQC in relation to safeguarding and paediatric services.

Bethan previously worked for BMI Healthcare, where she held the positions of Ward Sister, Deputy Director of Nursing, Regional Director of Nursing and, latterly, Chief Executive of three hospitals in London.

SECamb Chief Executive Daren Mochrie said: "I am delighted that we have appointed Bethan to this important position on our Executive Team. I know SECamb will benefit greatly from her skills and experience. On behalf of everyone at the Trust I'd like to formally welcome her and I look forward to working closely with her."

"I'd also like to thank Steve Lennox for the dedication and hard work he has shown while filling this position



• Bethan Haskins joins SECamb

on an interim basis. I know that he will continue to be a huge asset for the Trust in the coming months."

Bethan said: "I am delighted to have been appointed and I am looking forward to joining SECamb and meeting and working with everyone over the next few months."

TOP ROLE

Emergency patients in Cheshire are benefitting from even more expert clinical skills as Paramedic, Nick Sutcliffe steps up to take on a new challenge as Consultant Paramedic for North West Ambulance Service (Nwas).

Nick, 44 from Preston joined the ambulance service in 1999, qualifying as a paramedic in 2001 before moving on to work in staff training from 2004 until he was promoted to become one of the first advanced paramedics for Nwas in 2010.

Nick said: "I absolutely love my job as a Paramedic and really excited to move this onto the next level where I can further advance my skills and really shape the future of the ambulance service."

"The role will involve supporting a team of advanced paramedics and also working with other NHS

Trusts and partner organisations to implement changes in the way that we respond to patients to help keep us up there at the cutting edge of pre-hospital care.

"I'm really looking forward to getting stuck in!"

Chief Consultant Paramedic for Nwas, Mike Jackson, said: "It's been nine years since we introduced the role of consultant paramedic to the ambulance service and our patients have really benefitted from the specialised learning that each one brings to the organisation which is why we have decided to expand them further."

"Nick has years of varied experience as a Paramedic and has already proved himself as an excellent clinician who's really keen the help make Nwas the best we can be. He's going to make an excellent addition to the team."



Nick also has years of experience working for North West Air Ambulance and has a MSc in Advanced Practice. He's also due in September to start a PhD to further expand his knowledge.

Although the role involves a lot of leadership and learning opportunities, Nick will still be working alongside colleagues on ambulances, cars and helicopters promoting expert practice and top notch patient care.

Act of kindness

A paramedic from Yorkshire Ambulance Service NHS Trust has gone beyond the call of duty to help one of her patients.

Leilah Nolan and her crewmate, Tom Thackray-Collier, were called to a homeless man who was seen wandering around in a gown after discharging himself from hospital in Leeds.

All of his clothes had been cut off whilst he received hospital treatment.

After establishing that he did not need any further treatment, Leilah decided to go to a local

charity shop and buy the man some warm clothes - with money out of her own pocket.

Leilah said: "The man we helped was freezing cold. He desperately needed some warm clothing, and as he was homeless with no money, Tom and I felt it would be nice to buy him something warm."

"We went into the British Heart Foundation charity shop and found a T-shirt, warm jumper and coat, which we thought would be suitable for him, and we were happy to buy them for him."

"When we took the

clothes back to him, he was so happy and even did a little dance. He was shocked that someone did that for him and said he didn't know what to say."

"Whilst we were with him, a lady brought him a hot chocolate and another man brought him a sandwich. For whatever reason, this man was living on the streets and had no money for food or clothes and he needed help."

"As a paramedic, we aren't always needed to help people medically, however, it is nice when we can help people in other ways."

"I hope it encourages



• YAS Leilah Nolan

others to do random acts of kindness. I know if it had been any of my other colleagues who attended to this man that they would have done the same for him. We are all very caring and compassionate towards our patients and treat people with the dignity and respect that they deserve."

Every minute counts



A study, published in the *European Heart Journal*, shows the longer the time lag between heart attack patients seeing a medical professional and receiving stenting treatment, the more likely you are to die.

A ten minute delay

Researchers found that in heart attack patients who have cardiogenic shock (when the heart suddenly can't pump enough blood to meet the body's needs), every ten-minute delay in treatment means there will be an extra 3.3 deaths per 100 patients treated with stenting (PCI). This life saving procedure involves using a balloon catheter to widen blocked arteries and restore blood flow to the heart.

The researchers found a steep increase in deaths the longer it took for patients to receive treatment and that one death in every 12 patients could be prevented when they were treated within the recommended time of less than 90 minutes. A fifth of all patients who received PCI

between 150 to 180 minutes after their first contact with a medical professional died.

The research was carried out in 12,675 patients who had the most severe type of heart attack where part of the heart muscle has died due to lack of blood supply. The patients were transported to hospital via emergency medical services and received PCI treatment in Germany between 2006 and 2015. The full study can be found on the *European Heart Journal's* website.

Heart attack survival is increasing. Previous research that the British Heart Foundation (BHF) has funded showed that survival following a life-altering type of heart attack has increased, due to the increased use of this particular lifesaving treatment.

The researchers found that the overall survival rates of people who had suffered this form of heart attack improved by an average of 3.2 per cent each year between 2003 and 2013. Death

rates in hospital for these patients decreased by 5.9 per cent over the same time period.

Describing the importance of early treatment for heart attack Professor Sir Nilesh Samani, Medical Director at the British Heart Foundation, explained: "Research has shown that an increase in the use of PCI has significantly contributed to improved heart attack survival in the UK. However, although heart attack survival rates are improving, heart attacks still kill roughly one person every 8 minutes.

"This new study clearly shows that every minute counts when it comes to treating heart attack patients.

"The quicker we can diagnose people and offer them interventions like PCI, the more lives that we will save. This is particularly true for those who are more seriously ill. It is absolutely vital that health systems review how heart attack patients are diagnosed and treated, to ensure this happens in the shortest possible time."

Stroke victims getting younger



New figures released last month by Public Health England show the average age for people having a stroke is falling, and highlight the need for the public to act immediately if they suspect someone is having a stroke.

The figures show that 38% of people suffering strokes are middle aged (40-69) - up from 33% a decade ago. The average age for a woman suffering a stroke has dropped from 75 to 73 and for men it has dropped from 71 to 68.

In 2016, 57,000 people suffered a first time stroke in England, and around 30,000 died from the condition, making it the third most common cause of premature death.

The figures were released by Public Health England (PHE) to

mark the start of its Act F.A.S.T. campaign which urges the public to call 999 if they notice one of the signs of a stroke:

Professor Julia Verne, Public Health England Director, said: "Stroke is still one of the leading causes of death in England. While it's often associated with older people, the latest research shows that people are having strokes at a younger age. Everyone needs to be aware of the signs.

Stroke leading cause of disability in UK

Stroke is the third most common cause of premature death in the UK, and a leading cause of disability. There are still around 32,000 stroke related deaths in England each year. And although deaths related to stroke have declined by

49% in the past 15 years, there is an urgent need for new and advanced treatments for preventing the disability they cause.

British Heart Foundation chief executive, Simon Gillespie, said: "Stroke can have a devastating impact on people and their families. It can paralyse a person, or even take away their voice, and some people never fully recover.

"These figures should also put to an end the misconception that stroke only affects older people. Sadly a stroke can happen to anyone at any time and we need to continue to improve treatments. With the public's support, we're funding over £16 million pounds of research to better prevent and treat strokes."

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