

Abstract citation ID: afad246.096

Scientific Presentation - Falls, Fracture and Trauma

2004 **How confident are we in decision making? The quantitative analysis of ambulance response to older adult fallers: A pilot survey**

I. Gunson^{1,2}, L. Bullock¹, T. Kingstone¹, M. Bucknall¹

¹Keele University

²West Midlands Ambulance Service University NHS Foundation Trust

Introduction: The number one reason for older people to be taken to hospital emergency departments is a fall¹. An “Ambulance Improvement Programme Pillar”² is trying to reduce conveyance to hospital for falls, however it is not understood how the attending clinician’s confidence impacts decision-making. The objectives were to assess recruitment rate and feasibility of online survey delivery, and determine the experiences and confidence of frontline emergency clinicians in attending older adults who have fallen.

Method: Online cross-sectional survey, undertaken in one English ambulance service in May 2023. Items included participant demographics and 5-point Likert scales of confidence. Data were summarised using descriptive statistics and Chi-square analyses to compare confidence between localities and years’ experience.

Results: 81 responses were received from across the regional ambulance service’s 16 localities, supporting online survey delivery to be feasible in this population. 76% of respondents were paramedics, and 53% were aged 25-34. 60% of respondents rated being ‘Somewhat confident’ in assessing older adults who have fallen, with responses ranging between ‘Neither confident nor unconfident’ to ‘Completely confident’. No significant difference was found between the locality and confidence levels for assessing this patient population. However, there appeared to be significant variation between confidence levels relating to utilisation of hospital pathways and localities (p-value=.0045). Length of experience in both frontline ambulance and overall healthcare provision was not significantly associated with different levels of confidence.

Conclusion: Online survey delivery is an effective method in this population. Locality of work had a relationship with confidence in utilising hospital avoidance pathways, however, it did not relate to assessing this population. Confidence levels were not found to be related to the number of years providing care.

References 1. Dewhurst. (2023). *National Falls Prevention Coordination Group*. <https://committees.parliament.uk/writtenevidence/117837/pdf/>

2. NHS England and NHS Improvement. (2019). *Ambulance Improvement Programme*. <https://www.england.nhs.uk/wp-content/uploads/2019/09/planning-to-safely-reduce-avoidable-conveyance-v4.0.pdf>



ID NOW™ PLATFORM

KNOW FASTER SO YOU
CAN ACT QUICKER

NOW



Now, you can provide rapid molecular respiratory testing for COVID-19, influenza, RSV and strep A in any acute care setting, where and when it's needed most.



IDNOW.ABBOTT

NOW

IMPROVED WORKFLOW
with single patient swab for
COVID-19 and influenza A & B