



“Flash Teams” in Resuscitation:

A survey of pre-hospital clinicians

Benjamin Watts¹, James Raitt²

¹ Emergency Medical Retrieval Service, Scottish Specialist Transfer and Retrieval Service, Glasgow, UK;

² Thames Valley Air Ambulance, Stokenchurch, UK



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Background

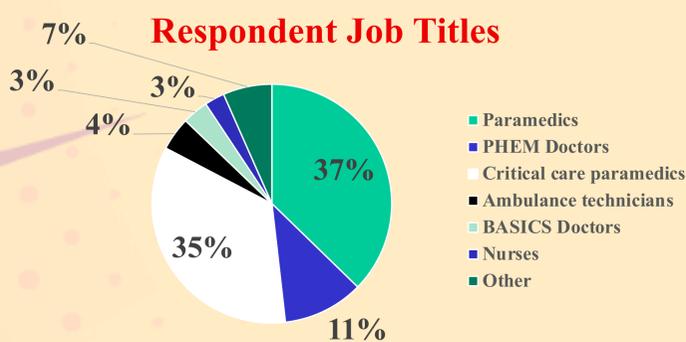
Approximately 30,000¹ out-of-hospital cardiac arrests are resuscitated each year in England, 27,300 killed or seriously injured in road traffic collisions, including 1,560 road deaths² and approximately 25,000 critical care team missions each year³. There are 33,000 registered Paramedics within the UK⁴, therefore resuscitation, particularly in trauma, is a rare event for standard ambulance clinicians. However, these significant events often have multiple crew and critical care responses, forming a ‘Flash Team’ or an impromptu team-of-teams. Multi-disciplinary team formation in acute, time-critical, and environmentally and circumstantially challenging out-of-hospital incidents can be awash with difficulty and have incredibly positive or devastating consequences. So how do we get it right the first time, every time?

Methods

A Google forms survey of 5 multiple-choice questions and 2 free-text questions was distributed via Twitter and other Social Media. Responses were gathered anonymously.

Results

111 responses were received, 110 included (one duplicate removed).



Years of experience 0-3 years (16.4%), 4-5 years (7.3%), 6-10% (30.9%), 10+ years (30%) and 20+years (15.5%).

Participants were asked if they had negative experiences of forming “flash teams” (Answers Yes/No/Other) all “other” answers (n=6) fitted into either “Yes or No (split 3/3)” but included a description. 67.2% of respondents had negative experiences of forming flash teams, and 32.8% had no negative experiences.

References

1. Health Care quality improvement partnership. Out-of-hospital cardiac arrest report Accessed 10/01/2023 <https://www.hqip.org.uk/resource/medical-and-surgical-out-of-hospital-cardiac-arrest-report/>
2. Department for Transport. Reported Road Casualties Provisional Results 2021. Accessed 10/01/2023 <https://www.gov.uk/government/statistics/reported-road-casualties-great-britain-provisional-results-2021/reported-road-casualties-great-britain-provisional-results-2021>
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4. Health and Care Professions Council. FOI response Created 08/08/2019. Accessed 10/01/2023 <https://www.hcpc-uk.org/resources/freedom-of-information-requests/2019/registered-paramedics-and-the-percentage-who-are-cpd-audited-every-year---august-2019/>



108 participants responded regarding training in non-technical skills for resuscitation, 50.9% of all participants trained regularly, 38% had received one-off training and 11.1% had never had training in non-technical skills.

Sub-group analysis of non-specialist roles VS specialist roles (PHEM team members/critical care providers) demonstrated the difference in training availability, with 21% of non-specialists having never had training, 36% received one-off training and 43% having regular training compared to 65% of specialists training regularly, 31% having one of training and only 4% of respondents never having had training in non-technical skills for resuscitation.

The long answer questions received 93/110 responses each, (“What are some of the challenges you have found forming a flash team?” “What do you find works well when forming a flash team?”) There were several recurring themes.

Discussion

A small sample of self-selecting respondents although not representative of the entire pre-hospital experience, does provide a snapshot and perhaps a basis for further research exploring current experience and optimisation of training for both critical care teams and those interacting with them.

Key themes which should be trained (with a mixed theoretical and majority practical approach) are communication, shared mental model, closed-loop communication, introductions, collaborative working, emergency handovers, competent followership, clear leadership, leadership transitions, appropriate use of checklists, flattened hierarchy with humility/approachability and open honest debrief and follow-ups where possible.

Challenges Forming Flash Teams:



What Works Well?

