

# St Martins Community First Responders Working with West Midlands Ambulance Service





John Roberts

Effie Cadwallader

#### St. Martins Community First Responders

**John Roberts**, whose grand-daughter attends Ifton Heath Primary School, has lived in St Martins since 1999. He was one of the original Shropshire CFRs when the scheme was first developed here before being extended nationwide. He is also an accredited First Aid Trainer with British Red Cross and is happy to offer basic life support instruction to interested groups.

**Effie Cadwallader** has lived in St Martins for 28 years. After a career teaching and playing sport she is now a part-time teacher of violin and bagpipes. She is a member of Oswestry Sinfonia and Cantiones, the local orchestra and chamber choir, and is married with two children, both now at university after attending Rhyn Park School. She has been a CFR for 3 years.

#### The Role of the Community First Responder

St. Martins lies 8 miles across country from the ambulance station and 25 miles from Shrewsbury A&E department. It takes an ambulance on lights and sirens sixteen minutes to reach here assuming it is on station and has a clear run. Government targets dictate an 8 minute response time for serious emergencies. We know that cardiac arrest victims deteriorate at 10% per minute, so what price a Community First Responder?

There are two of us in our village and between us we are available at a moment's notice on average 280 of the 288 hours a week. Effie covers nights and weekends mostly, while John covers evenings and those days when Effie is at work. Our "patch" has a radius of around 10 miles, overlapping with another 3 CFRs in outlying villages.

We are formally trained by the West Midlands Ambulance Service over a period of two months, spending a couple of shifts on the ambulances before becoming operational. Our emergency equipment, which includes a defibrillator, is provided, together with overalls and a mobile phone. When a 999 call is made from our area Ambulance Control rings to send us on our way at the same moment as the nearest ambulance is despatched.

CFRs work alone. Our task is to assess the situation, provide what treatment we can including basic life support when necessary, prepare the scene for the arrival of the ambulance crews, offer comfort and reassurance to the patient and relatives, and hand over to the crew when they arrive. Technically, our job is over at that point but often there is further help to be given, fetching and carrying, filling in the forms, keeping the relatives informed, etc. We can't diagnose, of course, but we can treat the symptoms of many medical and traumatic emergencies and the sooner this treatment starts the better the prognosis for the patient. The job requires sound training, confidence without complacency, calmness and clear thought under pressure, tact, compassion, absolute confidentiality, and a thick skin. Experience makes for a more efficient CFR and there is something new to be learned from every job.

Most jobs are straightforward but occasionally we meet with something very funny, very sad, very nasty or very frightening. We are not isolated, however. Our controlling paramedic, Terry Foster, keeps a close eye on us, offers practical and psychological support, arranges monthly training meetings and updates when required. We are also in contact with the other CFRs (in Gobowen, Oswestry, and Whittington) constantly so we can laugh past the difficulties and talk through the horrors.

CFRs are volunteers. They receive no payment at all. They are admired and trusted by their communities and respected

by their local ambulance service.

## Recent Statistics

During November 2008 St Martins CFRs responded to 27 `999` calls as follows:

Locations: St Martins 10, Chirk 1, Weston Rhyn 3, Ellesmere 5, Dudleston Heath 5, Oswestry 1, Gobowen 2

Times: 00:00 - 06:00 **6**. 06:00 - 12:00 **3**. 12:00 - 18.00 **9**. 18:00 - 23:59 **9** 

## Help Us To Help You!

Please ensure that your property is marked clearly where the entrance meets the road.

When we are sent on a job we are given the address by Ambulance Control. At night we use a lamp to try and spot names and numbers from the car. If there is no number on your gate or it is obscured or unclear, or the name is at the front door at the end of the drive it is going to take us longer to find you, and minutes are precious in many emergencies.

Recently I was sent to a possible heart attack on one of the longer roads in St. Martins where all the houses have names. I had to stop at every house without an obvious title to run up the drive and find its name before driving on to the next. The correct house turned out to be totally unmarked so it was an extra 4 minutes before I was at the patient's side. Think about that untreated cardiac arrest victim deteriorating at 10% per minute. Think about that big fat sign on the gate!

## Tip of the Month

## CALLING AN AMBULANCE

Calling 999 can summon an emergency ambulance.

An emergency ambulance will take the patient to the A & E department of the nearest hospital and the crew will provide treatment on the way if necessary and possible.

Call 999 sooner rather than later if you suspect a heart attack. Symptoms include chest pains, vomiting, breathlessness, sweating, very pale or grey colour, anxiety.

When you call 999 you will first talk to a general controller who will ask you which of the emergency services you need: fire, police, ambulance or coast guard.

Once you have asked for "Ambulance" you will be put through to an ambulance controller. You will be asked for the following information:

The patient's address. It is helpful if, in addition to the address, you can give a postcode and detailed directions when the property is difficult to locate or could be confused with another, as well as the patient's name.

As soon as you give this information the nearest ambulance is despatched. The Controller will, however, keep talking to

you. Don't think that this delays the ambulance being sent – it doesn't! Ask the Controller how long the ambulance will be.

The patient's age and condition or symptoms, e.g. chest pain, breathing difficulty, unconscious, etc.

If there is a serious problem the Controller will give you instructions what to do. A walkabout telephone is useful.

At night you will be asked to put on all the lights that are visible from the road to help the ambulance (and CFR!) find the house. If there is someone else with you or you can safely leave the patient you may go outside to watch for the ambulance.

Lock away any dogs. They can become agitated by strangers even if they are normally docile. Ensure the most obvious door is unlocked. You may want to stay with the patient which is fine, but if the doors are locked the crew cannot get in!

For advice you can always ring NHS Direct or Shropdoc/Newdoc for out-of-hours cover. An emergency ambulance is not a substitute for a doctor's appointment and is not a taxi service to hospital.