

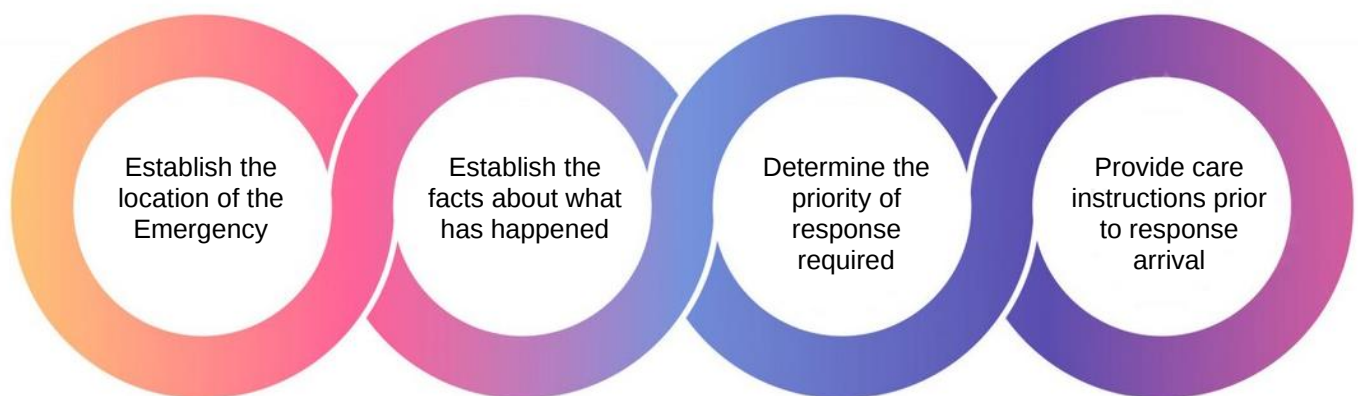


Calling 999 for an Ambulance – A Guide for Education Establishments

It is always best practice if someone who is with the patient can ring 999, so you will need to get a telephone to the patient or get the patient to a telephone. Using a mobile phone to call where a landline is not near to the patient will avoid any undue delay.

This is important for a variety of reasons, if the call is about an illness the call Emergency Medical Dispatcher (EMD) may want to know if there is a rash, what their breathing sounds like, any rapid swelling of the lip, face, throat, or tongue, does their skin feel normal temperature etc. If the call is about an injury the EMD may ask questions like, is the limb cold, pale, or blue, can the patient weight-bear, are there any pins and needles in the limb, any bleeding etc. This will also enable any life saving instructions to be relayed prior to the arrival of ambulance clinicians.

When you first ring 999 you will be put through to an emergency operator who will ask which service you require (Police, Fire, Ambulance). The BT Emergency Operator will then connect you to an Emergency Medical Dispatcher (EMD) at the Ambulance Service, whose role is outlined below.



The South Western Ambulance Service uses a triage tool called Medical Priority Dispatch System (MPDS), which establishes a universal standard for EMD's taking emergency 999 calls based on the signs and symptoms reported by the caller. Calls are prioritised so that patients with life threatening conditions receive the fastest and most appropriate response. The ambulances are only sent on blue lights and sirens to the most serious conditions, thus minimizing the risk to other road users and the wider public.

When you are connected to the ambulance service, the EMD will immediately begin to gather information, following the steps below.

- You will be asked two pre-triage questions, ***Is the patient breathing?*** and ***Is the patient awake?*** If the patient is not breathing, you will not be asked if the patient is awake. If the patient is not awake, you will be asked ***Does their breathing sound noisy?***





- You will then be asked ***Okay, Tell me exactly what has happened?*** at this point the ambulance service will only want to know a brief summary of what is happening/has happened. i.e. “they have injured their ankle playing football”, “they have breathing difficulties” etc.
- You will then be asked to confirm the address of the emergency including a contact telephone number just in case you get cut off and the EMD can call you back. These may be requested a second time to confirm that have been correctly recorded.
- The call will then be triaged, based on the description of events described. For this to be done more effectively the EMD will need to speak with the patient or someone who is with the patient.
- The EMD will carry out a safe effective assessment of the symptoms reported, as the clinical assessment progresses each answer determines the next question to be asked.
- Instructions on how to manage the patient will be given by the EMD, in response to the symptoms presented. These may include simple wound care, patient positioning or even CPR instructions.

An ambulance may be physically dispatched at any point in the process, so there is not necessarily a delay by having to answer more questions.

Obviously, these questions will vary depending on the symptoms and condition of the patient, it does therefore require the patient or someone with the patient to answer these questions, to enable the call to be prioritised most appropriately. Not all incidents will require an ambulance to attend.

Following the assessment, you may be asked if the school or the parents are able to transport the patient to hospital, Doctors surgery, Minor Injury unit or to contact the NHS111 service or await a call back from an Ambulance Service Clinician.

Remember:

- **If, when asked is the patient breathing, you answer no, this could potentially be a life-threatening emergency and an ambulance will be dispatched immediately or even diverted from a lower priority emergency call.**
- **If deemed necessary, the EMD will ask you if someone is able to get a defibrillator if one is available and may give you the location of the nearest Community Public Access Defibrillator (CPAD).**
- **The EMD will talk you through what you can do to help, such as providing instructions on how to perform Cardiopulmonary Resuscitation (CPR). This requires a phone to be next to the patient and ideally on loudspeaker. You will be asked to shout out the chest compressions as you give them, so the EMD knows what is happening. If there is more than one person able to perform CPR, please remember to swap as it will be very tiring.**
- **Do not stop resuscitation when paramedics arrive, as they will require a few seconds to gather and assemble their equipment. They will let you know when they are ready to take over.**
- **Where possible, it is important for someone to meet and direct the ambulance crew, as this may assist them in getting to the patient quicker.**

