**Moraig Rollo**

**Clinical Lead (East)**

**Scottish Ambulance Service (SAS)/Paramedics**

Meeting took place with Moraig, who reports a significant amount of on-going work is taking place in the SAS that closely links with the public health priorities. This is led mainly by paramedics as well as the wider team, which includes Ambulance Care Assistants, O.T’s, Nurses and 3rd sector services.

Moriag highlighted 3 pieces of work that is on-going at the moment that is suitable towards the AHP implementation plan and the work that is being done through NES. The focus of these pieces of work is around health protection, early intervention and improving upon health inequalities

**Project 1**

Return of spontaneous & cardiac resuscitation

A current service has been established whereby the SAS have implemented by stander CPR training alongside the implementation of further public access to defibrillators. Historically these have been shown to be placed in more socially affluent areas of Scotland, however the team are now looking to place these in low socio-economic areas to be more accessible for all. Historically they have been placed in Schools but after 4pm these are closed meaning they can’t be reached after a certain time. The team have established more of these and the training in hard to reach areas.

This team are also responsible for the teaching of CPR to a member of the community when they phone 999.

Project 2

Mental Health Car’s

This is a service that is led by a paramedic with support from an OT. They are a fast acting MH response team that will attend someone’s home when a patient is under significant distress associated with mental health. It has been found that if support can be implemented quickly in someone’s home then this can often stabilise the patient better and lead to improved outcomes over a hospital admission.

**Project 3**

Frailty identification – NHS Grampian – April Lockhead

Focus of the work is based around falls prevention and early identification. The team work alongside and deliver training to ambulance care assistants (ACA’s) to recognise the early signs of frailty, falls risks when in the home and walking outside. They would then flag this, which would then lead to other services being set in place.

**AHP Public Health Meeting**

**April Lockhead – Scottish Ambulance Service**

**NHS Grampian**

Meeting took place with April over MS Teams.

April is now a paramedic in the SAS, however has been an Occupational Therapist in the past.

She is the clinical lead in this area for falls and frailty. This has led to this aspect of health care becoming higher on the agenda in the SAS.

No training has previously been set in place in the SAS, however over time April has established a structured training program for the teams.

A new referral pathway has been established whereby on early recognition of frailty and risk of falls a paramedic is now aware and has the ability to refer directly to community services for support.

This has been further established through training of the Ambulance Care Assistant staff, who are also recognising these issues early when in patient’s homes and transferring to community services. Preventative model of care.

The service is also using structured outcome measures through the rock wood frailty scale. This links with any patient over 65 and if health related issues are shown they are directly referred to an AHP. Currently established at Aberdeen Royal.

April highlighted that through SAS, there are a range of AHP’s working in the service now.

April has agreed to write a case-study to support our work through NES and will have this completed in a couple of weeks. She has consented for this to be shared across the required platforms.