

## CONFERENCE ABSTRACT

### Development of an education programme – ‘Transporting critically ill adult and child’

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**Introduction:** The reorganisation of health services and the delivery of the ‘hub and spoke’ Model of Care for Adult Critical Care (HSE 2014) and Paediatric Model of care (2010) necessitates the requirement to transfer critically ill patients between hospitals to an appropriate location.

Transporting critically ill patients is an integral part of the role of doctors and nurses in Intensive care, Anaesthesia, Emergency Medicine and Paediatrics. Trained specialist retrieval teams have lower rates of morbidity, mortality and adverse clinical events (Droogh et al 2015) and is recommended by most Intensive Care Societies (ICSI, AAGBI, ESICM), yet most critically ill patients in Ireland are transferred by non specialist teams. The isolated nature of transporting the critical patient means that supervision and support is difficult.

**Short Description of Practice Change Implemented:** A one day national training programme was developed for medical, nursing and ambulance staff to address deficits in knowledge and skills regarding the transport environment and in the risks of transporting critically ill patients.

**Aim and Theory of the change:** A standardised approach to patient assessment, preparation and packaging is taught. As this is taught nationally, it is hypothesised that, as there is increasing familiarity with the training programme, this will become the norm across disciplines and hospital sites. A reduction in adverse clinical events in transfer and increased staff and patient satisfaction is expected.

**Targeted Population and stakeholders:** The target population include doctors, nurses and ambulance staff involved in the transport of critically ill adults and children. Stakeholders include the above and also the referring and receiving critical care units nationally, who will benefit from an improved standard of patient care.

**Timeline:** A direct and indirect needs analysis and international standards and practice review was undertaken over a 6 month period, highlighting the deficit in training and the lack awareness of the transport environment. Over 14 months 228 number of participants were taught on 11 days of education.

**Highlights:** An education programme was developed by a consensus of experts. The assessment of the programme was evaluated by satisfaction and feedback from registrants on completion. Feedback from participants has been consistently positive.

**Sustainability:** The programme is limited by the small numbers of faculty specialising in transport medicine. Future expansion will require further development of the training programme to build a national faculty, which can continue roll out of the education.

**Transferability:** The programme has demonstrated already, transferability between hospital sites. CPD accreditation has been granted by the College of Anaesthetists. It is anticipated that the programme can be incorporated into existing post graduate education programmes for doctors, nurses and ambulance staff.

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**Keywords:** transport critically ill; education programme

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