Prehospital Response Of Mental health and Paramedic Team (PROMPT):

Experiences from a Three Month Pilot

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Background

- In 2018 AV attended over 60,000 mental health related cases – 10% of workload

- Barwon District

  - 4,000 cases which equated to 10 cases per 24hrs.

- Traditional response

  - ALS Paramedic Crew

    - + / - MICA Crew (mechanical restraint)

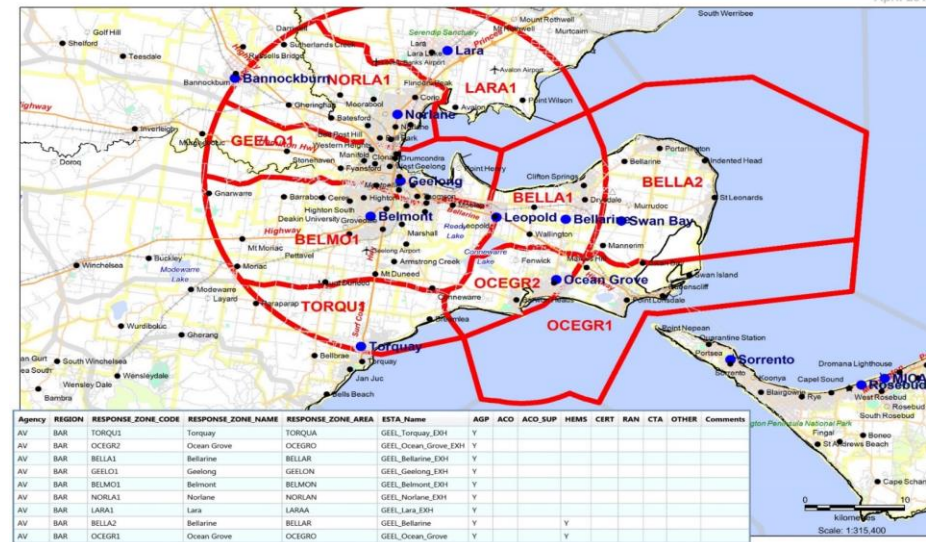Prehospital Response Of Mental health and Paramedic Team (PROMPT) Pilot

Objectives

Primary

- Safely reduce the number of MH patients transported to ED through appropriate referral to community services or direct admission to an inpatient unit

Secondary

- No. of re-attendances within 24 hrs

- Comparisons of time intervals (scene, transport, total case)

- No. of adverse events

Method

Setting

- Barwon District – Greater Geelong

  - 1,247 klms^2 / pop. 233,429

- University Hospital Geelong (Barwon Health) - One Inpatient Unit

Design

- Prospective Cohort Study

- Three month period (n=240)

- Thursday – Monday; 1300-2300hrs

- 7 day follow up incl. CSQ-8

- Stakeholder focus group

- Multidisciplinary safety committee

Results

- PROMPT dispatched to **129** cases and undertook an assessment (+/- commenced management/ provided advice) of **68** people (68/129; 53%).

- Majority were male (42/68;62%) and middle aged (median (IQR) age 38.5 (29-50) years)

- PROMPT teams arranged transport for **23** of the 68 people assessed (23/68;34%). Of those transported, **8** were direct admissions to Swanston Centre (8/23;35%), the remaining **15** to UHG ED*.

- Those not transported (n=45) were referred to:

Referral	n	%
Community mental health team	28	62%
No emergency / mental health care required	6	13%
MH Triage	4	9%
LMO	4	9%
Private psychologist / psychiatrist	3	7%

- **Overall, PROMPT intervention resulted in 78% (53/68) of patients being safely diverted from ED and referred to more appropriate health providers / settings.**

*4 Transports to ED as no inpatient beds

Conclusion

- The majority of patients attended could be safely and appropriately redirected from ED

- Embeds a *'least restrictive model of care'*

- Staff and patient experience feedback was overwhelmingly positive

- Relationships between craft groups improved. Two way sharing of knowledge.

- Client Management Interface (CMI) and The Care Manager (TCM) provided client history which was integral to decision making

- Six month pilot extension due to finish March 2020, with rigorous evaluation

Thank-you

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- AV and BH PROMPT Team

- Barwon AV Operational Staff

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