

Creating a decision support tool to help paramedics decide if their patients need to go to hospital

Submission date 02/03/2021	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered <input checked="" type="checkbox"/> Protocol
Registration date 17/03/2021	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input type="checkbox"/> Results
Last Edited 19/05/2023	Condition category Other	<input type="checkbox"/> Individual participant data <input type="checkbox"/> Record updated in last year

Plain English summary of protocol

Background and study aims

Paramedics have specialist knowledge and skills in helping people in emergencies. For example, if you are involved in a road traffic collision, house fire or if your heart stops. These events are quite rare, and the bulk of ambulance service patients who call have problems that are described as 'urgent'. These cases are where you may need access to healthcare and medical help, but there is only a very small chance your problem is life threatening.

The care of urgent patients is complex and trying to find the right place for their care can be hard. In 2014 in Yorkshire, up to 16.9% of patients could have avoided being taken by ambulance to the Emergency Department (ED). This group of patients had no special tests or treatments and were sent home. This means they had a minor problem that could have been managed elsewhere.

When the ED is busy, ambulances have to wait a long time to handover the care of their patients. In the winter of 2017 in England, 41,879 ambulance handovers took more than 1 hour. This delay stops ambulances being free to respond to the next emergency. These problems mean paramedics need to make sure the ED is the right place for their patient before they take them there.

This project aims to develop a tool to help with that decision. It is designed to show the paramedic the likelihood of ED being an avoidable experience if the patient was to be transported. They can apply this tool to all their patients.

Who can participate?

All patients who called an ambulance and received a face-to-face response between 1st July 2019 and 29th February 2020.

What does the study involve?

The first step will link data from the ambulance service with that from all Emergency Departments in Yorkshire between July 2019 and February 2020. This data will show the complete patient journey from their call for help through to leaving the ED. The data will be anonymised so the researchers will only be able to see what happened in a journey, not whose

journey it was. This information will help create a tool that identifies patients who may not need to be taken to the ED. The next step will test the tool in different settings by subdividing the data. The tool will also be applied to a group of patients that were not transported to hospital.

What are the possible benefits and risks of participating?

The study will help to create a decision support tool so that future patients can get to the most appropriate healthcare setting, first time.

Where is the study run from?

Yorkshire Ambulance Service NHS Trust and the University of Sheffield (UK)

When is the study starting and how long is it expected to run for?

April 2019 to March 2022

Who is funding the study?

1. National Institute for Health Research (UK)

2. Health Education England (UK)

Who is the main contact?

Jamie Miles

j.miles@sheffield.ac.uk

Contact information

Type(s)

Scientific

Contact name

Mr Jamie Miles

ORCID ID

<https://orcid.org/0000-0002-1080-768X>

Contact details

Yorkshire Ambulance Service HQ

Springhill 1, Brindley way

Wakefield

United Kingdom

WF2 0XQ

+44 (0)333 130 0550

jamie.miles@nhs.net

Additional identifiers

Clinical Trials Information System (CTIS)

Nil known

Integrated Research Application System (IRAS)

260505

ClinicalTrials.gov (NCT)

Nil known

Protocol serial number

IRAS 260505

Study information

Scientific Title

The Safety INdEx of Prehospital On Scene Triage (SINEPOST): the derivation and internal validation of a risk prediction model to support ambulance transport decisions to the Emergency Department

Acronym

SINEPOST

Study objectives

Primary research question: Can ambulance service clinical data predict an avoidable attendance at the ED in adults?

Secondary research question: What is the simulated transportability of the model derived from the primary outcome?

Ethics approval required

Old ethics approval format

Ethics approval(s)

Approved 11/11/2019, Yorkshire and the Humber - South Yorkshire Ethics Committee (Yorkshire & The Humber - South Yorkshire Research Ethics Committee, NHSBT Newcastle Blood Donor Centre, Holland Drive, Newcastle upon Tyne, NE2 4NQ, UK: +44 (0)207 104 8079; southyorks.rec@hra.nhs.uk), REC ref: 19/YH/0360

Study design

Observational multi-centre cohort study using a retrospective linked dataset

Primary study design

Observational

Study type(s)

Diagnostic

Health condition(s) or problem(s) studied

Unselected (not selected by disease or demographic status) adult patients who called an ambulance and received a face-to-face response

Interventions

Transported ambulance patients will have the prehospital care record linked to the ED record and a new binary variable will be created as to whether the level of care they received in ED justified the transportation by ambulance. Models will then be built to predict the positive class (avoidable attendance).

Intervention Type

Other

Primary outcome(s)

An avoidable attendance at ED, defined as first attendance with some recorded treatments or investigations, all of which may have reasonably been provided in a non-emergency care setting, followed by discharge home or to GP care. Measured by combining elements of routinely collected ED clinical data once a patient is discharged from ED.

Key secondary outcome(s)

There are no secondary outcome measures

Completion date

31/03/2022

Eligibility

Key inclusion criteria

Cohort 1:

1. Age 18 years old or older
2. Transported to ED by Yorkshire Ambulance Service between 01/07/2019 and 29/02/2020
3. Have an ED Care record of the event
4. Assessed by a qualified ambulance clinician ((either paramedic (of any level) or technician grade II))
5. Had an electronic patient care record completed
6. Transported to an ED between 01/07/2019 and 29/02/2020
7. Were handed over and booked in as a patient to the ED

Cohort 2

1. Age 18 years or older
2. Assessed by a qualified ambulance clinician (either paramedic or technician grade II)
3. Had an electronic patient care record completed
4. Discharged on scene and not transported between 01/07/2019 and 29/02/2020

Participant type(s)

Patient

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Total final enrolment

409937

Key exclusion criteria

Cohort 1:

1. Patient cases where they were less than 18 years old at time of episode
2. Patient cases where they had five or more patient contacts within the data collection period

Cohort 2:

1. Patient cases where they were less than 18 years old at time of episode
2. Patient cases where they had five or more patient contacts within the data collection period
3. Patient cases that were transported by the ambulance crew on scene

Date of first enrolment

01/07/2019

Date of final enrolment

29/02/2020

Locations

Countries of recruitment

United Kingdom

England

Study participating centre

Yorkshire Ambulance Service NHS Trust

Yorkshire Ambulance Service HQ

Springhill 1

Brindley Way

Wakefield

United Kingdom

WF2 0XQ

Study participating centre

Barnsley Hospital NHS Foundation Trust

Gawber Rd

Barnsley

United Kingdom

S75 2EP

Study participating centre

Pinderfields Hospital

Aberford Rd

Wakefield

United Kingdom
WF1 4DG

Study participating centre
St. James's University Hospital
Beckett Street
Leeds
United Kingdom
LS9 7TF

Study participating centre
Leeds General Infirmary
Great George Street
Leeds
United Kingdom
LS1 3EX

Study participating centre
Harrogate and District NHS Foundation Trust
Lancaster Park Road
Harrogate
United Kingdom
HG2 7SX

Study participating centre
Huddersfield Royal Infirmary
Acre Street
Lindley
Huddersfield
United Kingdom
HD3 3EA

Study participating centre
Calderdale Royal Hospital
Salterhebble
Halifax
United Kingdom
HX3 0PW

Study participating centre

Hull Royal Infirmary

Anlaby Road
Hull
United Kingdom
HU3 2JZ

Study participating centre

Rotherham NHS Foundation Trust

Moorgate Road
Rotherham
United Kingdom
S60 2UD

Study participating centre

York Teaching Hospital NHS Foundation Trust

Wigginton Road
York
United Kingdom
YO31 8HE

Study participating centre

Airedale General Hospital

Skipton Road
Steeton
Keighley
United Kingdom
BD20 6TD

Study participating centre

Doncaster Royal Infirmary

Armthorpe Road
Doncaster
United Kingdom
DN2 5LT

Study participating centre

Northern General Hospital

Herries Road

Sheffield
United Kingdom
S5 7AU

Study participating centre
Bradford Royal Infirmary
Smith Lane
Bradford
United Kingdom
BD9 6DA

Study participating centre
Dewsbury and District Hospital
Halifax Rd
Dewsbury
United Kingdom
WF13 4HS

Study participating centre
Scarborough General Hospital
Woodlands Drive
Scarborough
United Kingdom
YO12 6QL

Sponsor information

Organisation
Yorkshire Ambulance Service NHS Trust

ROR
<https://ror.org/01sawky49>

Funder(s)

Funder type
Government

Funder Name

National Institute for Health Research

Alternative Name(s)

National Institute for Health Research, NIHR Research, NIHRresearch, NIHR - National Institute for Health Research, NIHR (The National Institute for Health and Care Research), NIHR

Funding Body Type

Government organisation

Funding Body Subtype

National government

Location

United Kingdom

Funder Name

Health Education England

Results and Publications

Individual participant data (IPD) sharing plan

The data sharing plans for the current study are unknown and will be made available at a later date

IPD sharing plan summary

Data sharing statement to be made available at a later date

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Protocol article		08/11/2021	19/05/2023	Yes	No
HRA research summary			28/06/2023	No	No
Study website	Study website	11/11/2025	11/11/2025	No	Yes