

NHS Education for Scotland

Transcript of 'Dealing with sudden and unexplained deaths – perspectives from Ambulance Service (NES Bereavement Conference, 2019) video – Steven Short

Hi there, my name's Steven Short and I'm the Clinical Effectiveness Lead for Cardiac Arrest and Palliative and End of Life Care with the Scottish Ambulance Service.

What does your job involve?

Anything that our clinicians deal with in terms of how they manage cardiac arrest or how they manage palliative and end of life care patients. I help to develop the policies and guidance and education for my colleagues who do the job out there, so they can manage these patients effectively.

What are you talking about at the Conference?

So, I'm doing a presentation about how ambulance clinicians deal with sudden and unexpected death. The differences between the trauma they see in the pre-hospital environment, possibly compared to some of the death that is witnessed in hospital and how the cope with that, their coping strategies, their coping mechanisms and also the personal resilience they have to develop in order to achieve that.

How can emergency workers be supported?

So, we have a range of options and I think one of the most important things that I'll talk about is how our clinicians use peer to peer support. The staff room or the mess room chat, as my colleagues like to call it. How they get back from jobs and they talk to each other, they speak to each other, it's just a mechanism for them to let off steam sometimes to some of the trauma they witness within their professional lives.

Are there any challenges you'd like to highlight?

I think there's a number of challenges, the first one is, and I'll talk about this, or, my colleagues are really keen to talk about these things, but sometimes finding peers to speak to can be really challenging within the NHS in these modern times, because often there isn't any peer available at that time. So it is all about the importance of them developing that personal resilience and strategies so that they can process some of the traumas that they've witnessed, because if they don't, it becomes then increasingly difficult as time goes on to process these things and work it through in their own heads and work out just how damaging it can be to their own mental wellbeing.

I think one of the things, and one of the things I speak about in my presentation, is this idea that often what we witness is quite dirty death. It is very unexpected, it is often very uncontrolled and often in very unpleasant circumstances. So we have a particular focus on this because, yes our colleagues see really big horrific jobs but actually, evidence tells us that it's the drip effect, it's the frequent, and it really is frequent exposure to this dirty death, as we describe it, that has the biggest affect on their mental wellbeing, and actually can cause post-traumatic stress for our colleagues. So, this constant exposure to cardiac arrest has a real adverse effect on their wellbeing if we don't help them to work through strategies to deal with that.

So, we now have a much better agenda in terms of that whole, 'Are you ok?' idea. It's developing a culture of, it's good to speak about this, and it's ok to speak about this. And, it's ok not to be ok. We want a culture where all of our colleagues, and myself included, can walk in and say, 'I'm really struggling here, I need help', whether that's personal wellbeing through the use of apps, or whether it's taking it further and self-referring to maybe some counselling to help you work through some of the traumas that you've seen.

So I think it is often that personal battle, I think there was traditionally perhaps a culture that people didn't want to speak about things so openly, they would bottle it up, whereas now we're trying to develop that culture of its ok not to be ok and to go out and seek that help which is available to them through self-help or counselling.

What does the term bereavement mean to you as a clinician?

So, I think it's this idea that bereavement isn't about personal bereavement necessarily, bereavement affects us all. So, every time we see a death, whether it is expected or unexpected, we'll have some sort of bereavement process as professionals about that. And it's about saying we want to be including all us in that bereavement care and understanding it's not necessarily a personal journal form a personal experience, it can be a personal journey from the bigger picture experience.

The film was produced in March 2020 and can be found at www.sad.scot.nhs.uk or https://vimeo.com/392432666

For more information visit www.sad.scot.nhs.uk or contact supportarounddeath@nes.scot.nhs.uk

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