

terminally ill patients would be admitted to hospital or have cardiopulmonary resuscitation following a cardiac arrest. Participants in the focus and education groups reported that the tool appeared to be helpful and appropriate. The tool is being currently tested and results from this evaluation will be available for presentation.

Conclusion Lack of consistency in how ambulance crews deal with end of life situations highlights the importance of a decision support tool. Sponsor: NHS West Midlands.

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031 DEVELOPMENT AND EVALUATION OF A DECISION SUPPORT TOOL FOR AMBULANCE WORKERS

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Aims Recently completed research demonstrated that ambulance crews had received little training in managing terminally ill patients and showed marked variation in what they consider to be a valid DNAR or what they would accept as an advance care plan indicating that a patient would not want to be admitted to hospital. This research informed the development of an end of life care online education package. However, as it might be difficult for crews to call to mind such learning in an emergency situation, we also developed and are currently evaluating a decision support tool to assist ambulance crews in managing terminally ill patients.

Methods End of life vignettes were presented to 21 ambulance clinicians in order to inform the development of the tool. A multidisciplinary expert group subsequently designed the tool. Suggestions for modification were made by two focus groups of ambulance clinicians. 60 ambulance clinicians have been trained to use the tool and currently involved in a survey to evaluate the effectiveness of the tool in practice.

Results Data from the vignettes provided further confirmation of the lack of consistency among ambulance crews in their approach to decision making at the end of life, despite working in the same ambulance trust with standard policies and procedures. There was strong evidence that their decision-making is particularly risk averse leading to the likelihood that