

**EVIDEM****Topic guide: Paramedic and Ambulance staff****Date****Participant ID****Associated CH ID:**\_

Sex <input type="checkbox"/> Male <input type="checkbox"/> Female	<b>Age:</b>
<b>Professional qualifications:</b>	
Length of time present post:	_____years _____ months
Time since qualified	_____years _____ months
Geographical area covered?	
Specialist training:	Details:
Dementia	
Mental Capacity Act (MCA)	
On average how often do you go into a care home?	<input type="checkbox"/> Every day <input type="checkbox"/> Regular arrangement <input type="checkbox"/> More than once a week

	<input type="checkbox"/> About once a week <input type="checkbox"/> Once a fortnight <input type="checkbox"/> Once a month <input type="checkbox"/> Less than once a month
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**Emergency treatment for people with dementia**

1. In your experience, what are the most common reasons for an emergency ambulance being called to people with dementia in residential care homes?
  
2. How does somebody having dementia impact on the treatment you give?

**Working with residential care homes**

- How would you describe your working relationship with residential care homes?
- Do you feel calls to people with dementia in care homes are usually justified?
  - Why/ Why not?
  
- Who is responsible for contacting you?
- Do you find some residential care homes call for 999 ambulances more than others?
- In the past year, how many times do you think you've been called out to a residential care home?
  - Are you aware you'll be seeing a patient with dementia?
  - At which point are you informed? (i.e at arrival, receipt of the call)
- Can you think of a visit to a residential care home where you felt that things could have gone better?

**End of life planning and protocols**

- Are there any protocols in your ambulance trust regarding older people and resuscitation?

- If somebody has written instructions about DNR, are you obliged to follow these?
  - How often do these need to be updated?
- If there are verbal or informal written instructions how far are you able to follow these?
  - What is your legal position?
- Is it a difficult decision not to transport to hospital?
  - Are you under any pressure to convey to hospital, or not to convey?
- Does a resident having dementia, or not, have an influence on commencing or withdrawing CPR?
- What do you think are the most important aspects when you are called out to someone with dementia that is very poorly or dying in a residential care home?
- Are there any changes you would like to see with regard to emergency ambulance calls to care homes for people with dementia towards end of life?
- Is there anything else you would like to say about being called out to someone with dementia towards the end of their life in a residential care home?

**Finally, we would like to give you two scenarios to consider?**

1. *Ben*, 81 years old. Admitted to a residential care home approximately 2 years ago. Pre-existing conditions include a diagnosis of dementia (type unspecified) and heart failure (CCF).

The care staff feel he has been deteriorating over the last 3 weeks, and saw his GP 2 days ago with a chest infection, for which Ben was prescribed a course of antibiotics. The care home staff report, as directed by the GP, Ben is now receiving tlc.

At around 9pm a care worker dialled 999 for an ambulance because Ben was becoming more and more breathless and was 'struggling'.

In the care notes, there is a DNAR order and a wish to die in the care home informally recorded, dated 2 years ago.

**How would you respond and why?**

2. *Doris*, 93 years old. Admitted to a residential care home approximately 6 months ago.

Has memory problems, particularly with short term memory and gets confused, but does not have a formal diagnosis of dementia. She has osteoarthritis and is generally very frail and most of time she is cared for in bed.

At around 4.30pm, *Doris* suffered a brief loss of consciousness and was then very sleepy, so the care staff dialled 999 for an ambulance.

*Doris* has stated she would like to die in the care home, and this was recorded in her care notes at point of admission. There is nothing recorded about resuscitation.

**How would you respond and why?**