

posted, the number of sample using seatbelt while working/travelling in the ambulance elevated to 11 out of 15 (73.33%) [IRR (95%CI) =3.66 (95% CI: 1.02, 13.13), $p = 0.046$]. While at 3 months and 6 months, 10 out of 15 (66.77%) and 6 out of 15 (40%) still adhere to seat belt use, respectively. There is no statistical significance with the rate of seatbelt usage comparing between one, three, and six months after the warning stickers were posted. The most common reason for not using seatbelt is 1) seat cover covering the seatbelt 2) obstructing work 3) cannot reach equipment.

Conclusion Warning stickers posted in the ambulance can increase awareness for seatbelt use of King Chulalongkorn Hospital's EMS personnel while working.

PP30 THE MINNESOTA SATISFACTION QUESTIONNAIRE AS A MEASURE OF ADVANCED PARAMEDIC PRACTITIONER SATISFACTION WITH A THREE PART ROTATIONAL MODEL OF WORKING

¹Stella Wright, ²Duncan Robertson, ¹Gemma Nosworthy, ³Bob Baines, ¹Wyn Thomas, ²Bryn Thomas, ²Mark Timmins, ¹Robyn Watson, ¹Betsi Cadwaladr University Health Board, UK; ²Welsh Ambulance Services NHS Trust, UK; ³Public Health Wales, UK

10.1136/emered-2021-999.30

Background Welsh Ambulance Service NHS Trust (WAST) and Betsi Cadwaladr University Health Board (BCUHB) were jointly awarded Welsh Government Pacesetter funding to assess the viability of a rotational approach to the delivery of care. The three part rotation incorporates the WAST Clinical Contact Centre, solo responding and shifts in BCUHB primary care settings. Nine WAST Advanced Paramedic Practitioners (APPs) started their rotation in north Wales in June 2019, a further eight joined in September 2020. The Minnesota Satisfaction Questionnaire (MSQ) was one of a number of data collection items undertaken as part of a service evaluation to evaluate the impact of this Pacesetter project.

Methods APP Satisfaction was measured using the Minnesota Satisfaction Questionnaire (MSQ), a standardised tool designed to measure an employee's satisfaction with work and aspects of the workplace environment. It comprises a 100-item questionnaire, with each question aligned to one of 20 scales. The MSQ was completed by the first cohort of APPs nine months into their rotation, and by the second Cohort in their third month. APPs were asked to consider all aspects of the rotation.

Results Overall, both cohorts demonstrated a high level of satisfaction, in particular questions associated with intrinsic satisfaction scored better than ones linked to extrinsic satisfaction. For both Cohorts, Social Service, Working Conditions and Activity were all in the top five scoring scales. Whereas, Authority and Supervision (Human Relations) were lower scoring scales for both Cohorts.

The individual raw scores were slightly higher for Cohort II than I. Cohort II also demonstrated a wider range in standard deviation scores across the scales.

Conclusion The MSQ is a simple yet effective measure of assessing workplace satisfaction. For the current Cohorts of Pacesetter APPs, scores indicated a high level of satisfaction across all aspects of the rotation.

PP31 PATTERNS OF USE OF AMBULANCE SENIOR SUPPORT DURING THE COVID-19 PANDEMIC: A SERVICE EVALUATION

¹Fiona Bell, ¹Andrew Hodge, ¹Richard Pilbery, ²Sarah Whiterod. ¹Yorkshire Ambulance Service NHS Trust, UK; ²NHS England, UK

10.1136/emered-2021-999.31

Background In early March 2020, a senior clinical support cell (SCSC) was established within Yorkshire Ambulance Service NHS Trust (YAS). The SCSC aimed to provide an additional layer of clinical leadership within the Emergency Operations Centre to support call centre and decision support for on-scene ambulance staff working in challenging circumstances. It was staffed by advanced practitioners, doctors and other senior paramedics with range of diverse skills from critical to urgent care. We aimed to understand the patterns of use of a SCSC for emergency 999 calls during the COVID-19 pandemic.

Methods Routinely collected call data was retrospectively analysed to understand the patterns of use in the first three months of the service. The reason for the call, patient demographic and any regional differences were described. An anonymous survey was distributed to frontline ambulance crews to understand the reasons for contacting the SCSC, or not, and the outcomes of that contact for patient care.

Results 7296 patient care episodes received either a telephone triage by SCSC for 999 calls or 111 calls transferred for an emergency ambulance response (3160) or had telephone support provided to crews on scene (4136). Telephone triage accounted for 3160 calls where 642 cases (20.3%) resulted in a hear-and-treat outcome, and the findings suggest a low re-contact rate within 24 hours at 2.4%.

The primary reasons for crews seeking support/advice from the SCSC were discharge advice or permission (37%); support for pathways in their area (25%); or for cases where patients refused care or conveyance (11%).

Conclusions SCSC was developed in response to the COVID-19 pandemic, and lessons can be learned to prepare for any future significant service challenges as a result of the rapid implementation of the SCSC and the clinical leadership required to support the pace of change and emerging clinical knowledge and practice.

PP32 PATHWAY TO PORTFOLIO: FROM IDEA TO FULL TRIAL FUNDING

¹Helen Snooks, ¹Jenna Jones, ¹Alan Watkins, ²Leigh Keen. ¹Swansea University, UK; ²Welsh Ambulance Services NHS Trust, UK

10.1136/emered-2021-999.32

Background NIHR funding is provided to studies which will produce evidence to inform policy and practice in healthcare. Exploratory or feasibility work can be difficult to find funding for. We present the timeline and steps in the process from first having an idea for research through to gaining funding for a definitive trial.

Objective To determine costs and effects of Fascia Iliaca Compartment Block delivered by paramedics at the scene of injury for suspected hip fracture.

Methods Literature review