





BEHAVIORAL HEALTH EMERGENCIES ENCOUNTERED BY COMMUNITY PARAMEDICS: LESSONS FROM THE FIELD AND OPPORTUNITIES FOR SKILLS ADVANCEMENT

PRESENTED BY: Bronwyn Keefe and Kelsi Carolan

November 14, 2018

Learning Objectives

- By the end of this session, participants will be able to describe the skills and attributes of community paramedics serving older adults and people with disabilities who have complex behavioral health and medical needs.
- By the end of this session, participants will be able to describe the challenges community paramedics face in serving older adults and people with disabilities who have complex behavioral health and medical needs.
- 3. By the end of this session, participants will better understand the gaps in training paramedics face related to behavioral health.

Goals for Today

- Review the study aims and significance of topic
- Describe the methods: open-ended interviews with paramedics and team approach to thematic analysis
- Provide an overview of the results
- Discuss implications of the project and next steps
- Questions/discussion

Introduction/Background



- Paramedic education has traditionally focused on response to lifethreatening medical emergencies (Brady, 2012).
- Paramedics are increasingly expected to respond to mental health crises, but may not be prepared to do so (Brady, 2012).
- There is limited research on paramedics' experiences, attitudes, and perceptions about responding to mental health crises—
- With a particular dearth of literature from the United States (Berry, 2014; Brady, 2012; Rees, Rapport, & Snooks, 2015; Rees, Rapport, Thomas, John, & Snooks, 2014; Shaban, 2005).

Funded by: Patient-Centered Outcomes Research Institute (PCORI) Award (IHS-1502-27177)

Research Questions



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- Do paramedics feel well prepared to respond to mental health crises?
- How do paramedics describe the challenges and facilitators involved in responding to these situations?
- What are the skills they use to respond to these situations?



SUZANNE KREITER/GLOBE STAFF

Paramedic Ruben Torres will undergo training at EasCare LLC, one of several Massachusetts ambulance companies that plan to branch into home health care.



Methods

Qualitative interviewing and analysis:

- Developed an open-ended interview guide in collaboration with experienced paramedics
- Conducted 60 minute telephone interviews with 23 paramedics
- Interviews were audio-recorded and transcribed verbatim
- Data were analyzed using a thematic analysis approach, as outlined by Braun and Clarke (2006)
- Team meetings to establish a codebook
- Tests for interrater reliability
- Member-checking for validity



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Results: Demographics

Characteristic	Mean (SD)
Age, years	40.9 (8)
Gender	
Male	14
Female	9
Race	
White	22
Hispanic, Black	1
Marital Status	
Married	18
Single	4
Divorced	1
Widowed	0
Education	
High school	4
Some college	12
Associate's Degree	6
Bachelor's degree	1
Average years in the field	18



Results

We found that paramedics:

- report frequently working with patients who are having a mental health crisis
- 2. report having inadequate mental health training
- 3. have many difficulties managing these patients, relying primarily on their professional experiences and/or strong interpersonal skills rather than explicit training to address patients' needs



- The paramedics interviewed described dealing with mental health emergencies as a routine part of the job, yet these were often some of the most difficult aspects of their job.
- Participants reported that the individuals they encounter often have limited support systems and many are socially isolated, which exacerbates mental health issues.
- Situations arose around issues of self-harm, managing calls related to substance use, and maintaining personal safety



"It's hard to know how to help someone that doesn't have anybody else to help them. Nobody else in the world, nobody I can call for that. They're by themselves, they're lonely. Not just the homeless population, but there's a lot of people at home, especially a lot of the elderly population. They just don't have anybody. That always breaks my heart."



- When paramedics were asked about the amount or types of training they received in mental/behavioral health, the majority expressed that it was lacking and not sufficient to equip them to do their job to full capacity.
- Many paramedics expressed that they would like more training in the area of mental health and substance use so they could feel more competent and confident about various treatment methods and how to support the person in crisis

Theme 2: Paramedics Report Inadequate Mental Health Training



"They do have a section in it ... not that it doesn't cover half of what you need to, it doesn't cover a lot. It's a section. It's not a big portion of a section. It is a small portion actually."

"Not really. And mental health was actually not part of that from what I can remember. And we actually deal with a lot of mental health patients."

Theme 2: Paramedics Report Inadequate Mental Health Training



"I would put more in there because we're coming across a lot more patients who have episodes where they're just completely not themselves, and they fight, and there's ways to go about talking to these people, where you don't end up in a physical altercation with these people, or having to physically restrain them with soft restraints, tying them to the stretcher. You know what I'm saying? But to teach enough ways to deal with them because I think it would be better to put more emphasis on that as well." Theme 3: Paramedics Report that Experiential Learning and Strong Interpersonal Skills are Critical Tools



- Participants reported that the experiences of interacting with patients having mental health crises has been central to their developing skills in this area, in lieu of adequate formal mental health training.
- Participants revealed a great capacity for empathy and strong interpersonal skills, which they rely on heavily when interacting with patients who are having mental health emergencies.

Theme 3: Paramedics Report that Experiential Learning and Strong Interpersonal Skills are Critical Tools



"I treat them with respect, listen, and don't be so judgmental. Everybody has a story and everybody has a problem and you just try to ... don't make them feel isolated."

"You've got to be able to draw the information out from the person themselves. And it's a skill that they don't teach in school. They don't teach you how to talk to somebody. They don't teach you how to throw questions at somebody in a way that they'll answer and it'll lead to the next question. You set them up to answer in a way that gives you all that information. That's one thing the schools don't do. They don't teach you that part."

Discussion/Implications



- The data highlights the types of mental health crises paramedics frequently encounter, provides insight into paramedics' complex roles, and demonstrates the potential risks responding to mental health crises may impose on paramedics' personal safety and emotional well-being.
- Most notably, the data indicates a significant gap in paramedic training.
- Additional training to appropriately respond to and work with individuals experiencing behavioral health emergencies will better serve both the individuals as well as paramedics and other emergency providers.

I have no commercial relationships to disclose.







This Continuing Education activity is jointly provided by The Annenberg Center for Health Sciences at Eisenhower and The Gerontological Society of America.

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