



FACULTY OF
**PRE-HOSPITAL
CARE**

STUDENT & TRAINEE GROUP

Career Insight



Career Insight:

Lauren Deanus

Advanced Clinical Practitioner (ACP) currently working in **Pre-Hospital Care**

Interviewer: Tim Harvey, FPHC STG South East Regional Representative

Editor and Graphic Design: Dr Sophie Riley, Chair of the FPHC Student and Trainee Group

Please tell me about your career pathway?

M My route into the healthcare field was not straightforward and at 18 I ended up studying an English Literature degree. However, I think my interest in nursing was sparked by volunteering at residential activity camps for children with life-affecting and life-limiting medical conditions. Despite an initial interest in paediatrics, I fortunately found myself studying a combined Adult and Paediatric Nursing degree which has proved to be extremely beneficial to my Pre-Hospital career.

After qualifying, I spent the first three years in the Emergency Department, followed by Paediatric Oncology. At the six year point I then started my ACP training in adult Oncology and Haematology. If I'm honest I found the training pathway really challenging, particularly balancing working

full time with studying, portfolio work and some sort of a social life. Yet, despite the challenges I found it really beneficial having someone watching my practice again. I think that often when you become a senior nurse you receive less direct supervision and therefore have less learning opportunities to progress your practice.

“

Being on a training pathway, discussing and unpicking interesting cases with ACP and medical colleagues and having my clinical skills critiqued was a real opportunity to develop as a nurse, and something I really enjoyed.

”

Throughout this time, I had continued to volunteer for the same children's charity I had volunteered for at age 19. I spent a year working



as a nursing co-ordinator for them in a paid role alongside my NHS role which involved making plans on how to safely manage medically complicated children at this camp. Figuring out what to do for children on CPAP if the power went out and timing a child's TPN infusion to finish before the important disco were my priorities. It provided a really useful insight into working in the Pre-Hospital setting and I found working alongside doctors a good opportunity to learn and also to teach as our roles complemented each other really well.

“

I began working in event work in the UK whilst doing my ACP training and found I really enjoyed this, particularly sporting events, and in December 2024 I left my full-time post to focus my time on trying to forge a full-time career in the Pre-Hospital field.

”

What inspired you to become involved in Pre-Hospital care?

I think it is the environment that is most appealing. I have always loved being outdoors, especially hiking, running and watersports. Initially I started off covering events in the UK which were mostly sporting

events and mass public events, but I also worked as an assessor for the Duke of Edinburgh Award alongside this.

However, sports medicine is my passion. I find it really inspiring watching people doing really incredible things and I enjoy helping to push people beyond a point that most clinicians would be comfortable with. I have supported ironman events, ultra-marathons in the jungle, cycle races in the Scottish Highlands, the Trans Andean Cycle Race, multiple other running events, and hope to be in Kenya and Kyrgyzstan in the next year.

One participant from an ultra-marathon probably put it best:

“A super fit bunch of doctors, paramedics and nurses who are able to resist their instincts and training of getting us to stop whilst watching us hobble and wobble through their checkpoints. They do everything from kit adjustments, body taping, chafe and scrape covering (when we can't reach those parts ourselves anymore) to severe medical interventions. All with a reassuring smile, to our faces anyway. Best of all, sometimes a simple pat on the head to convinces us we're not actually dead and they'll check again at the next station. Apart from the 'how long left?' the most common question I had was 'When did you last pee and what colour was it?'”

What advice would you give to those looking to become involved in Pre-Hospital Care?

I would say if you have a specific interest in the jungle/mountains/arctic, try and get personal experience in these environments, whether that is sport or simply travelling. You simply need to



become comfortable with being uncomfortable and so camp, live in a hammock, basically anything to get you out of your comfort zone.

“

UK based events can be a good way to get a foot in the door.

There are many events companies and these can be a good way of getting used to working in the pre-hospital environment and starting to build your CV.

”

Networking (although I'm not a massive fan of it), is really important in this field - I went to the World Extreme Medicine conference and that was very inspiring and a good starting point for meeting like-minded people who can begin to suggest ways to develop and forge a pathway for a Pre-Hospital career. Once you begin working on events or attend conferences/courses to do with extreme medicine you find you naturally start chatting to people with similar interests who can signpost you to companies or courses they have done and would recommend.

There are some really good courses out there. I really enjoyed the Diploma in Tropical Nursing, the World Athletics Race Emergency Medicine Course and the Expedition and Wilderness Medicine course with WEM. I learnt about tropical disease, race management,

wilderness dentistry and more. I did sim sessions including those focused on managing car crashes (car accidents are the leading cause of deaths overseas for expeditions).

Mountain leader training (40 days in total of solo hiking days or days leading a group) has been invaluable. You learn practical skills such as rope skills/advanced micro navigation and softer skills focussed on how to support inexperienced people in outdoor environments.

What are the greatest challenges involved in Pre-Hospital care for you?

So many. Dislocated and possibly fractured limb in a remote area half a day from a hospital or x-ray, difficult cardiac arrests, rapidly spreading wild fires across the race route and the physical challenge of carrying comprehensive medical kit up hills, mountains, jungle, rivers and everything in between. However, logistics usually provides the biggest headaches.

In these events you want to ensure the right kit and people are in the right place at the right time and that the international team and local team are well co-ordinated together. This does not always happen and trying to achieve this in resource poor environments and without always having a shared language can be really challenging. Comms is always a challenge and having several different modes of communication such as phone, tracker, Garmin and sat phone really helps although is not guaranteed to work everywhere!

One event, a large lightning storm started to strike the road mid cycle race. The sweeper bus



(the bus that should follow the last rider) was not in its usual position, comms went down (meaning no communication with the other team members) and so co-ordinating a response to medical problems was unsurprisingly difficult.

Where do you see Pre-Hospital Care developing in the future?

I hope (and think) it will become more multidisciplinary. Being a nurse in the pre-hospital world can be a bit hit and miss. There are fewer jobs out there, but also less people applying for them. Some companies are really good at deploying you, whereas others are a little unsure how to effectively utilise nurses and what their skills set includes. I do hope that we see more nurses in this field. I think between Doctors, Paramedics and us, our roles complement each other's really nicely. I also think as this happens we will see more structured pathways appearing for these roles.

What lessons from Pre-Hospital Care have you applied to your in-hospital practise?

There's a lot of defensive medicine practiced in the NHS which can sometimes lead to patients being put through unnecessary tests. Something you have to be good at in the pre-hospital environment is managing risk and making difficult decisions. Shared decision making is unbelievably important- especially in expedition medicine. Explaining risks to competitors, whilst supporting them (as much as possible) to get them over the finish line is integral to adventurous sport. I feel I have become a better ACP as a result.

“

Finally, just say yes, say yes to every opportunity, every offer of help, of a meeting, sometimes a job (that is really awkward to fit into your calendar) you never know what will happen as a result.

”

Acronyms:

ACP: Advanced Clinical Practitioner

CPAP: Continuous Positive Airway Pressure

TPN: Total Parenteral Nutrition

WEM: World Extreme Medicine