



FACULTY OF  
**PRE-HOSPITAL  
CARE**

STUDENT & TRAINEE GROUP

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*Career* Insight:

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# Career Insight:

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## David O'Toole

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### **Please tell me about your career pathway?**

**I**n my early 20s, I was a full-time triathlete. I competed around Europe for a few years, but after retiring due to a couple of injuries and some nasty crashes, I decided to get a 'real job'. I went back to finish my original history degree, which I had put on hold for about four years after completing the first two years. I then worked as a lifeguard for around two years before joining the ambulance service. It was through the lifeguard course, along with my first aid at work and other training, that I caught the bug for the medical world and gradually worked my way up.

I joined the ambulance service in 2012 as an apprentice paramedic. The course was four and a half years long, involving full-time work

and studying a foundation degree in our own time, alongside the full-time rota. I qualified as a paramedic in 2017 and then spent around four years working in my local area. Initially, I worked on ambulances and then on a Fast Response Unit. During that time, I also topped up the foundation degree to a Bachelor's degree and studied two Master's degrees. It's not the normal path, but I did it to keep myself entertained in my free time, as I get bored easily.

I then wanted to branch out a bit and challenge myself, so I moved to the Tactical Response Unit (TRU). This exposed me to a lot of different environments and spontaneous events, and it allowed me to work closely with the police and sharpen my skills in a new way. After about a year and a half at TRU, I started my secondment as a flight paramedic with London HEMS, which is what I've been doing for the last two years.



**What inspired you to become involved in Pre-Hospital Care?**

I guess it was when I was working as a lifeguard. Doing my first aid course and dealing with the first aid emergencies in that role gave me a bit of exposure into being able to help people using those skills. There were a couple of incidents where we had to call the ambulance service in and I was really impressed with the way that they worked, and I thought, well, if I've done some of this first aid course, I'd really like to take it to the next step.

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Seeing how paramedics were able to just arrive and have this kind of calm confidence in dealing with things that we were completely incapable of managing and how they did it with such reassurance was what made me realise that I wanted to do the same. The next opportunity there was to join the ambulance service I applied, and fortunately got accepted.

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The move towards TRU was simply because I'd done about three or four years working on an FRU in my local area, but I felt like I needed to challenge myself a little bit more and push the boundaries of what I could do.

At the same time, I really enjoyed working as a solo responder, so moving to TRU meant I could retain that solo working, whilst still applying those skills in a different area. I was working in central London and going to all manner of jobs in and around London where I wasn't familiar with the areas, wasn't familiar with the other ambulance crews, I was also working doing lots of different events and exercises that I hadn't been exposed to before. It was just a different challenge.

When it came to joining HEMS, it was more about joining a team that I felt suited my personality. Everyone that works at London HEMS is ultra-focussed and ultra-driven to achieve the best possible outcomes for patients, and they dedicate themselves completely and entirely to that. The standards that they hold themselves accountable are super, super high, and that was something that I really wanted to be a part of. I really wanted to be a part of a group of people with that shared goal and that shared desire to achieve the best outcomes.

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

I think the best advice that I can give anyone that wants to work in Pre-Hospital care, is to just do it because I think it's the best job in the world, and being able to apply medical care in a variety of different circumstances is really, really rewarding. You get the unique opportunity to meet patients in their own environment and not within the walls of a hospital. I think Pre-Hospital care is very, very different, which is why it's its own speciality. I



think there's lots of opportunities for people to move into Pre-Hospital care without necessarily having a great deal of experience. There's lots of event work and lots of different ways of volunteering with charities where you can apply invaluable skills as a hospital clinician in the prehospital arena

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

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I think the greatest challenges are mostly around the environment. You can never predict where you're going to have to provide care for people. I think a lot of those challenges are that lots of what we see in Pre-Hospital Care is very unpredictable and spontaneous, and so you have several factors to juggle, as well as trying to provide care for the patient.

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There's also a lot of work to be done in managing the scene and the various people that might have been involved, but who aren't necessarily patients themselves. You also are trying to form teams with other clinicians, services and people that you've never met before, but you are expected to be able to work with those people and create a highly effective, functioning medical team to be able to give that patient the best care.

I think the biggest challenge for me personally, especially as a HEMS clinician, is that I'm going to turn up to patients that have got a number of different clinicians there already, and given the nature of our job, our patients are normally very severely injured, so it means we have a large number of people and services on scene. They're often big incidents and they're going to be stressful for people, so these are the biggest challenge. The way in which I think that we can be most effective as a HEMS team is to kind of bring that demonstrable experience, decision making and leadership skills to that scene. It's not necessarily about all the different skills in a toolbox that we can bring, but it's about being able to bring calm confidence and reassurance and knowing when people just need to be told, "You're doing a great job so carry on, and how can we help?" versus the other extent where we need to take over that person's care and deliver a specific intervention because the patient needs it, and everything kind of in between. It's an element of providing reassurance, coaching, leadership and decision making.

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

I think there's things that we probably anticipate being the biggest type of interesting advances. For us at LAA, we're bringing an ECMO service to London, which is the first time that's been achieved in the UK. Previously you would have thought something like this was an exclusively in-hospital procedure, but we're demonstrating now that, much like has been achieved in places like Paris, that these high



level interventions get good outcomes for patients who you would consider to be unsalvageable in the Pre-Hospital environment, and we can deliver that in a timely and effective way. I think the biggest thing that we can do to advance the care is to look at how we as human teams interact with technology and bridge the gap between those two things. That might be that we look at things like AI and being able to help our decision making process as we know that as humans we're probably a little bit flawed, sometimes in the decision making or even the clinical assessment, and there's good data out there to suggest that we're maybe not as good as we think we are. I'd probably like to see stronger bond between the way that we, as clinicians, use technology to benefit the patients. I think that overall, particularly for me as a paramedic, you can see how the job of a paramedic has changed in a very, very short space of time. What paramedics can now achieve today, the kind of skill set and the levels of clinicians are going to massively, massively improve, in the next five-ten years. Pre-Hospital Care is probably going to be a very, very different place even compared to now, which is quite exciting to be to be part of and hopefully I'm still a HEMS clinician at that point.

**Acronyms:**

**TRU:** Tactical Response Unit

**HEMS:** Helicopter Emergency Medical Services

**AI:** Artificial Intelligence

**LAA:** London's Air Ambulance

**FRU:** Fast Response Unit

**ECMO:** Extracorporeal membrane oxygenation