

Summer / Autumn 2023

GREAT NORTH NEWS

www.gnaas.com



Flying forward

Innovations, inspirations,
and expanding horizons.

**Charity-funded,
world-class
critical care.**

     /GNAirAmbulance

Registered Charity No. 1092204
Isle of Man Registered Charity No. 1329

Together, we save lives

The recent cost of living crisis has and will continue to have a huge impact on our service. Our charity relies on the generosity of the public to continue its life-saving mission.



Read more about an incident we attended on the Isle of Man on P4 -5



It has been a busy start to the year for our charity with lots of improvements to the service that increase our care to the people of the North.

Our 24/7 service launched in January this year and is now fully rolled out across the North East. Since then, we have attended an extra 190 call-outs in the region because of this 24 hour service. These were incidents that we would not have been able to attend previously and patients we have consequently been able to treat with our advanced care. Becoming a 24/7 service has been a long-term goal for myself and the charity, so we're very proud to continue that journey.

We have also been working hard to fund and cover additional nights in Cumbria and now cover seven days and four nights in the area, with an expectation to add more evenings over the coming months, so that no matter when someone is in need, the team are able to respond.

Through our collaboration with Manx Care in March 2022, we successfully piloted a new service to transfer seriously injured or unwell patients by helicopter from the Isle of Man directly to the UK for emergency medical treatment. By expanding our operational scope, both in terms of time and geographical reach, we have taken a significant step forward in providing comprehensive care.

Since the launch of the trial, the charity's critical care teams have been deployed 20 times, responding to road traffic collisions, medical incidents, falls, burns and horse-riding incidents.

We have now extended the trial and our service is being provided seven days a week, from 8am to 8pm during the summer and dependant on hours of daylight in the winter months.

We also provided additional care during the Isle of Man TT, which sees thousands of visitors to the usually quiet Island, during the week-long competition.

We strive to continually improve our medical knowledge and explore any new innovations in the field that can improve our service. With that in mind, our charity has joined a new research trial to explore treatments for bleeding trauma patients.

The two-year SWIFT (Study of Whole Blood in Frontline Trauma) trial involves nine other air ambulances in the UK with the project led by NHS Blood and Transplant in partnership with the Ministry of Defense.

The aim of this research is to compare the outcome of patients who receive red blood cells and plasma transfusions versus whole blood.

All in all, we're off to a great start to the year. Although we are looking forward, we have not forgotten where we came from and the soul of the charity that is its supporters.

We would not be where we are today without their unwavering support, whether that be the volunteers who offer their time, the fundraisers who throw themselves into challenges or the supporters who can make a difference from donating unwanted clothes to leaving a legacy all in the name of all in the name of raising money to keep the charity going and saving lives.

We thank you from the bottom of our hearts.

David Stockton
Chief Executive



"I was a mess when I got to hospital. I had bashed my face big style and had a gash on my eye."

Aretha Lawson, a carer from Jurby, Isle of Man, had been at work when she began to feel unwell.



"I plan on doing fundraising for them this year."



"I am a carer, and I was at a client's house doing my usual jobs when all of a sudden, I started to feel very sick, dizzy and sweaty.

The next thing I remember is waking up on the concrete outside."

The 54-year-old then managed to get herself from the pavement into her car before blacking out. She said: "When I came around again in my car, I rang my husband Julian who rushed down to find me.

"The knees of my trousers were all ripped and rotten and I had a terrible cut to the head, so I really had hit the floor with some force, but I didn't know then how bad it was."

Julian called 999 and the Isle of Man Ambulance Service arrived. "They told Julian I was very ill, and it wasn't long until a second ambulance arrived.

I've been told my heart wasn't beating properly and the team of paramedics were working on me for a long time."

The Isle of Man Ambulance Service decided to call on the help of GNAAS, who arrived on scene.

The team, assessed Aretha before deciding that she was stable enough to be taken by road to Nobles Hospital.

Aretha said: "I was a mess when I got to hospital. I had bashed my face big style, had a gash on my eye, had twisted my knees and bruised my whole leg. They did tests on me and scans to see why I had collapsed but they couldn't pinpoint what it was, which was so scary."

Aretha was in hospital for three days before going home and being put on bed rest.

Aretha said:
"Before my accident, I hadn't heard of GNAAS but now I follow all of their social media pages and I plan on doing fundraising for them this year."

She added: "They still don't know what caused me to collapse that day, so I am definitely trying to slow down, focus on myself and listen to my body.

"It's so reassuring to know that GNAAS is ready to respond when the worst happens and can make a real difference to the lives of the people here."



**GNAAS
Isle of Man**

Figures from April 2022- June 2023



**14 months of
providing critical
care so far**



**28 helicopter
responses**



**15 patients
airlifted**

Pre-hospital amputations

How our critical care team tackle life-changing decisions.

'The patient is going to die unless we get them out.'

Chris Smith,
Medical Director
at GNAAS.



On the rare occasion it is needed, our critical care team are skilled enough to perform amputations on patients at the scene of an incident.

We would carry out a pre-hospital amputation if the environment was particularly dangerous and the patient's life was at risk. It is usually in scenarios where the patient is trapped and needs to be released quickly so we can perform other life-saving treatments. These situations include mass casualties, building collapses, or even after a blast injury like a gas explosion.

It is not a procedure that is done in the spur of the moment; all other avenues are investigated first. We work closely with local fire services, using their tools and knowledge to try and release the patient by any other means first.

Once all other options have been exhausted, we call the duty consultant to get a second opinion. If they agree to proceed with an amputation, then

we talk to the patient and explain the situation as clearly as we can to them. We want them to be aware of the reasons for the decision, as it can be life-changing for them.

We try to do everything we can to save as much of the patient's limb as possible, using the fire service's tools and spending additional time to create more space so we can get to the lowest point of that leg or arm.

A higher limb amputation (above a joint) can mean potentially more problems in terms of rehabilitation and what prosthetics a patient can have. We want this patient to survive first and foremost, but we also want them to have a good quality of life too.

There is a term in emergency medicine; life or limb, and that is the only time we would perform these types of highly-skilled interventions- if the patient is going to die unless we get them out.



Life or limb

Collaborative training for difficult decisions in the field.

'A lot of our job isn't necessarily black and white; we work in the grey.'

Jamie, head of training
and HEMS paramedic.



The amputation of someone's limb is not something we take lightly, it's life-changing for that person.

We need to make sure that not only are we doing it for the right reasons, but we're competent in our decision-making leading up to it, and we're absolutely confident in the procedure itself in every way that we can be. That's why we train and practice simulations regularly.

There are multiple ways in which you can amputate someone's limb, using different kit. We have our own surgical kit for amputations, but it can take a long time to perform and most of our cases are time-critical, which is where our training with local fire and rescue services comes in. If someone is in cardiac arrest then it may be a case of using some of the fire brigade's tools to amputate the person's limb quickly to get them out so we can start other medical interventions.

We've got a very good relationship with our local fire and rescue service; there's a lot we learn from them and a lot they learn from us. We train with them to really progress our practice and finesse certain elements of it.

The fire brigade are often called to incidents where a patient is trapped and amputations are more likely to be done. They don't know our standard operating procedures for amputation because that's not their role, but they do know their equipment very well. In the training, we give them an understanding of when we would do this procedure and how it is done, and they take our clinicians through using the equipment that could perform an amputation.

Thankfully, it's a procedure we don't do very often, but that is why we need to train for it more regularly. Whenever we train, it's always the non-technical skills that we practice the most, how you communicate effectively with each other; how you rationalise the decisions that you make in the patient's best interest; and then we debrief and learn from it.

We want to make sure that as a critical care team, we are fully prepared to do this, and any other, surgery that is required in order to save someone's life.



Get involved

GNAAS is entirely charity funded, there are many ways you can help keep us flying and saving lives across the North.



Legacies

With a gift to our charity in your Will, you can help us be there for people who need us in the future.

gna.as/giftinwills



Regular giving

A regular Direct Debit donation is a simple, secure and effective way to support our life-saving work. A reliable income means we can plan our work more effectively. Without a regular income, our life-saving service couldn't continue to operate.

gna.as/regulargiving



Events

Whether you're a seasoned athlete or just looking for a new challenge, get active with our physical events. Socialise with your fellow supporters at balls, bake sales, bike nights and more!

gna.as/events



Support us on social media

Are you following our social media accounts? We post updates and stories daily. Stay in the know by following [GNAirambulance](https://www.facebook.com/GNAirambulance).



Lottery

Save lives. Win prizes. It's easy to sign up online - you could soon be in the draw for just £1 a week and be in with a chance of winning £1,000.

gna.as/playourlottery



Fundraising

Organising your own fundraising event may seem a bit daunting, but we can help you get started, have fun and raise the essential funds that keep the helicopters flying. However you decide to fundraise, we will be there to support you every step of the way.

gna.as/requestpack



"Volunteering with the air ambulance is my way of trying to thank them for literally saving my life after an out-of-hospital cardiac arrest."



Volunteering

Sue Wilkinson, 71, from Stockton, was given an 8% chance of survival following a cardiac arrest. Thanks to the help of our critical care team, her life was saved, and she now volunteers for our charity.

In July 2021 Sue had been enjoying coffee with her friends when she started to feel unwell.

She said: "A crew from the North East Ambulance Service was sent out and they were taking my medical history when I said "I think I am going to faint," and my heart stopped. They pulled me onto the floor, started CPR and called GNAAS."

The retired civil servant was placed in an induced coma at the scene by the critical care team from our charity and taken to James Cook University Hospital in Middlesbrough, where she stayed for six days.

She has since reunited with the teams who helped her and signed up as a volunteer.

She said: "There are loads of ways volunteers can help GNAAS. No matter how much or how little time people have available, there will always be something they can do."

David Stockton, chief executive officer at our charity, said: "We are very grateful to have more than 100 regular volunteers supporting our charity as well as several who lend a hand on a one-off basis during summer events."

They all play a vital role in helping to raise the money we need to keep our service flying."

Whether you can spare a few hours or want to volunteer on a more regular basis we'd love to hear from you.

Find out more and sign up at
gna.as/volunteer





No Grey skies here

Back in 2018, Ian Grey was the charity's newest paramedic recruit. Last year, Ian took off for pastures new but now, he's landed back on base for the second time...

"I left the charity back in January 2022 to teach paramedic science at Sunderland University. Lecturing is always something I really wanted to do so when the opportunity came up, I grabbed it with both hands.

The past year of teaching has been amazing, and it's been great doing something totally new, meeting new people, and building on skills.

That said, I am delighted to be back at the charity. I am ready to get stuck back in, meet new team members, and get back up to speed as quickly as possible – a lot has changed in the past year. I hope the team are happy to have me back! There are so many amazing parts to this job here at GNAAS but the team is by far the best.

When I left school, I went straight to work, I didn't take the usual university route, but I always knew this was what I wanted to do although I never really thought it would be possible.

I wanted to be a paramedic so that I could have the ability to help people at their worst moments. I arrived at GNAAS in 2018 after 15 years with the North East Ambulance Service. It's the most rewarding job I have ever had by miles.

One of the most memorable call-outs I've attended was a paraglider who crashed into the fells in Cumbria. It was such a remote location with bad weather and tough conditions so it will always stick with me.

The incidents we attend can be very serious. They are what I'd call proper emergencies, where the skills, experience, and equipment we bring can make a real difference. That's what it's all about. The job is unpredictable, and we never know what's going to happen next. It's really challenging at times but the team we work with makes it all worthwhile."



6 months of missions...

The following data shows what our teams have been up to in the six months from 1 December 2022 to 31 May 2023.



1,079 deployments
1,029 incidents



570
Helicopter



509
Rapid response vehicle

Call-out type



18
Burns



214
Cardiac arrest – medical



29
Cardiac arrest – traumatic



10
Drowning



159
Fall



21
Industrial



107
Medical



77
Self-harm



26
Sport and leisure



5
Transport – other



3
Transfer



35
Other



227
RTC (see breakdown)

Road Traffic Collision (RTC) type



12
HGV



2
Van



16
Bicycle



48
Pedestrian



45
Motorcycle



104
Car

Helicopter responses per area



7
Scotland



25
Northumberland



645
North East



288
Cumbria



12
Isle of Man



28
Teesside



4
Other



20
Yorkshire

Get involved with our exciting events!

Whether you want to get active or be social, there's an event in our calendar for you.

To see this year's events, visit: gna.as/events



Signing up to an event or holding your own fundraising event for our charity means our critical care team can continue to be there for those who need us most.

Donate now or get in touch: gna.as/donate

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