



SEE-IT Study Newsletter

Emergency Medical Services Streaming Enabled Evaluation In Trauma: The SEE-IT Trial

WELCOME TO THE FINAL SEE-IT NEWSLETTER

This newsletter includes: a final update from the research team, an overview of the main findings, how we are sharing our findings, what we plan to do next and how you can keep in touch with future developments.

Update from the Research Team

We have spent much of our time since the last newsletter analysing all the data we collected during the trial. This has included statistical analysis of trial data and surveys, the health economics analysis (looking at costs) and qualitative analysis of surveys, observations and interviews. This has given us the information necessary to produce the final report for our funding body, the [NIHR](#). The report will be available via our website once published.

In addition to the report, the research team have been busy writing a number of academic journal articles including:

(1) The method (protocol) for the study, which is available [here](#).

(2) The main results paper, which is available [here](#).

We have many other journal articles in the pipeline, all of which will be linked via our website once published.

We understand that academic papers can be difficult to digest, so have ensured we are sharing the findings in other accessible formats, including in this newsletter and the animated video we made with our patient public team members (link included on page 3).

What did we find?

We found that:

- 86% of callers (62/72 callers who were asked) **were willing and able** to use livestreaming; only three callers declined to use the technology.
- **Livestreaming worked in 85% of those calls** (53/62 who received the GoodSAM text requesting livestreaming). Reasons why it didn't work were mainly technical; 999 callers and dispatchers found livestreaming **easy to use**.
- Livestreaming supported the decision to stand down the Air Ambulance in 2 incidents, allowing redeployment. Decisions about critical care paramedics were also changed as a result of livestreaming (7 were sent and 2 stood down).
- **We didn't find any evidence of additional stress or upset** caused by livestreaming to 999 callers or ambulance service staff, but we couldn't collect enough survey responses to be absolutely sure. We asked 999 callers to complete online surveys and interviews but only 4 callers completed the survey and 2 were interviewed. However, 999 callers said they found using livestreaming **reassuring**.

We had hoped to have data from staff in another Ambulance Trust who were not using livestreaming to compare the survey results from the staff in the trial site, but unfortunately the response rate at the comparison site was too low for this purpose. However, the observations, surveys and interviews with staff provided no evidence of harm.

Overall, the findings supported the decision to continue this research and design a further study that will assess the effectiveness, benefits, costs and potential harms of livestreaming.

Future priorities include:

- The need for an **in-depth evaluation** of the use of livestreaming, including potential benefits and drawbacks.
- To explore **how best to include and engage 999 callers and ambulance service staff in future research**.
- To investigate the **barriers and facilitators** for use of livestreaming with older adults and those who have difficulty communicating in English language.
- To **evaluate other uses of livestreaming**, including in non-trauma related incidents and less serious incidents.



Animated Video: Testing Live Streaming during Trauma Incidents

Our 3-minute animated video can be viewed [here](#). We have worked very closely with our **Patient and Public Involvement and Engagement (PPIE)** group to create this video and ensure it is accessible to members of the public. In May 2023 our PPIE group met for a 'creative day', where we discussed the proposed content of the video, which findings to highlight and the design features such as music, colours, voiceovers and animation style. Our PPIE group also assisted with editing the script, the animated storyboard and auditioning voiceovers for the final edit. Each stage of the video production was guided by [CC Animation Studio](#), who have worked with us from start to finish to bring our ideas to life and create the video. We hope you like it; we've really enjoyed the process!

Events since the last newsletter

Pint of Science (May 2023)

The SEE-IT Research Team were invited to present an outline of the study to members of the public in a informal setting... a pub in Guildford! Public engagement is a fantastic way for us to raise awareness of the study, but also get feedback on different aspects of the study e.g. acceptability. We also did a simulation to show the audience how GoodSAM livestreaming worked, using actors and a member of the audience as the '999 caller'. It was a fantastic evening! *Photo credit: Paul Stead.*



University of Surrey Showcase (June 2023)

The event was a great opportunity for the team to show members of the public the excellent research we have going on at the University. Scott (pictured) and Carin did multiple interactive demonstrations throughout the day and the feedback was very positive. People were keen to get involved and mentioned use of the livestreaming technology would make them feel reassured during an emergency.



GoodSAM 10 Conference (September 2023)

Most recently, we were invited to present an overview of the study findings at the GoodSAM 10 conference in London. The conference was mainly health care professionals and we learnt a lot about how GoodSAM is being used in different settings e.g. Police and Fire departments. The programme was packed full of the fascinating work GoodSAM has been involved in over the past 10 years. It was also great to meet (in person) so many familiar faces we've been working with throughout the trial.



What's next?

We plan to share the findings through multiple platforms and events, including (but not limited to):

- **Summary reports:** We have written a brief summary report which has been sent to all UK Ambulance Services, to relevant professional bodies and the Director for Acute Care at NHS England. We'll also send reports to those that were involved in the study.
- **An online webinar:** We are hoping to host a webinar event in the next few months (open to everyone) to share the findings of the trial in more detail. Please email see-it@surrey.ac.uk if you'd like to receive the sign-up link.
- **Academic conferences:** We plan to attend and present the findings at national and international conferences, to ensure the research community is kept informed.
- **Other events:** We hope to do other public engagement events to publicise our findings so if you think we should come to an event near you, please do get in touch with the team!

Please share our newsletter with as many people as possible. Research is vital for the advancement of treatment for patients. Before any changes are introduced, it is essential that patients and the public are involved in that research - **your voice matters!** 📢

If you are interested in getting involved in future research in this area, then please email us at see-it@surrey.ac.uk or sign up via [this link](#).

Finally, we'd like to say a **huge thank you** to everyone who has been involved in running and organising the SEE-IT Trial. The core teams and stakeholder groups have included over 50 individuals but many more have been involved in other aspects of the trial, including patients, ambulance service staff, hospital staff, and members of the public.

We hope you've enjoyed the final newsletter!

With our best wishes from the SEE-IT Research Team

www.surrey.ac.uk/seeitstudy

see-it@surrey.ac.uk

