

# “This is the best job in the world!”

*An interview with Adam Chesters, Specialist Registrar in Pre-Hospital Care (HEMS) at London's Air Ambulance, on trainings and Aeromedical Crew Resource Management*

**ARM:** Adam, Aeromedical Crew Resource Management, developed by EHAC, was completely new for you. What is your opinion after you have run through such training?

**Chesters:** I now consider the concepts and techniques associated with Aeromedical Crew Resource Management, CRM, to be an essential part of my practice. It has become clear to me that interactions on scene and human factors may be even more important than simply having the technical ability to do the job. Having experienced some of the most intensive clinical encounters in my career, I have reflected on what exactly it was that made the situation so stressful. I couldn't understand why a procedure that may be routine in the hospital, could suddenly induce such anxiety. I realised that environmental and human factors were the unknown variables and once I was able to begin to understand these influences and how they were affecting the behaviour and decision-making ability of the crew on scene, I was able to begin to take steps to control and eliminate these factors so that I could better manage the situation and perform as part of a team providing excellent clinical care to our patients.

A huge part of the job is about managing the scene – it is essential to be completely aware of all of the apparent chaos that is going on and to try to bring some sort of order to it through good interactions with those around you. There's so much going on and as the only doctor on the scene, the overall responsibility of making the right decisions for the patient rests with you. I am sure that Aeromedical Crew Resource Management should be taught as a crucial part of any training programme in pre-hospital care and emergency medicine.

**ARM:** Was there anything that impressed you in an extraordinary way?

**Adam Chesters:** My most memorable case was baby Frankie. We were called on a cold and rainy morning in November to a child hit by a car. Frankie was 6 months old and was in a pushchair crossing the road with his mum, when a car struck his pushchair throwing him several yards down the road. Our pilot landed about 50 metres away and as we ran down the road to the scene, we could see that paramedics were assisting ventilation with a bag-valve-mask. I had only been doing the job for about two months and I can still

remember feeling scared as we arrived on scene and realised just how badly injured Frankie was. He had a severe head injury with a dilated pupil, wasn't breathing and barely had a pulse. Despite nearly torrential rain, the team of emergency services on that day were incredible and we safely delivered an anaesthetic, took over his ventilation and stabilised Frankie before flying him to the regional trauma centre for evacuation of his extensive sub-dural haemorrhage.

On that day, Frankie became the youngest patient I'd ever had to treat on my own. I'll always be immensely grateful for the training and incredible support that I received from the HEMS service that day. Every member of the team performed to the very best of their ability, and being able to phone for unwavering clinical support from a senior and very experienced pre-hospital care doctor, undoubtedly helped to provide the care that was required. Frankie made a good recovery and we were lucky to be able to meet him and his parents again some months later when they came to visit the airbase.

**ARM:** Will you take back some principles to your daily work in the hospital?

**Adam Chesters:** One of the aims of taking time away from hospital medicine was to develop skills that I could take back to the hospital environment. I will continue to practice pre-hospital care, but many of the skills that I have learned over the last two years will be of tremendous value in the emergency department. The ability to lead and be a member of a team, understanding the principles of CRM – particularly when treating seriously ill or injured patients – and the decision-making that comes with the experience of treating complex patients, will all be useful. Service development and making sure that the system is safe has been a focus of the last two years, and I hope to take this back to the hospital, too. I will continue to embrace the concept of clinical governance and continuous training and learning, and I hope that my public relations experience and media awareness will also be very helpful in the coming years.

**ARM:** What is your personal result of the HEMS training?

**Adam Chesters:** It has been a privilege to do the job and I am grateful for the opportunity to have worked with such an inspirational team of colleagues who are completely on top of their game professionally. For the most seriously injured patients we see, it is a great opportunity and an awesome responsibility to really make a difference. We are all constantly aware that decisions that we make and interventions that we carry out could save a life. One of the very best things about the job has been hearing about the progress of our patients after we leave them, or perhaps even meeting them some weeks or months later, and knowing that we played a crucial part in their treatment without which they may not have survived.

In my first few weeks on the job, I remember wondering how I was going to cope with all of the extra pressure and the challenges of working in pre-hospital medicine. Fortunately, with a great team of aircrew, wonderful training and with the unfailing support of senior and very experienced doctors who are only a phone call away, the tingling apprehension I get on the way to a job is less acute than it was – although always still there. Undoubtedly the last two years have been full of challenges for me, but I have enjoyed every minute of the job, learned something new every day and am quite sure that it is the best job in the world.



#### Adam Chesters

says that CRM “should be taught as a crucial part of any training programme in pre-hospital care”.



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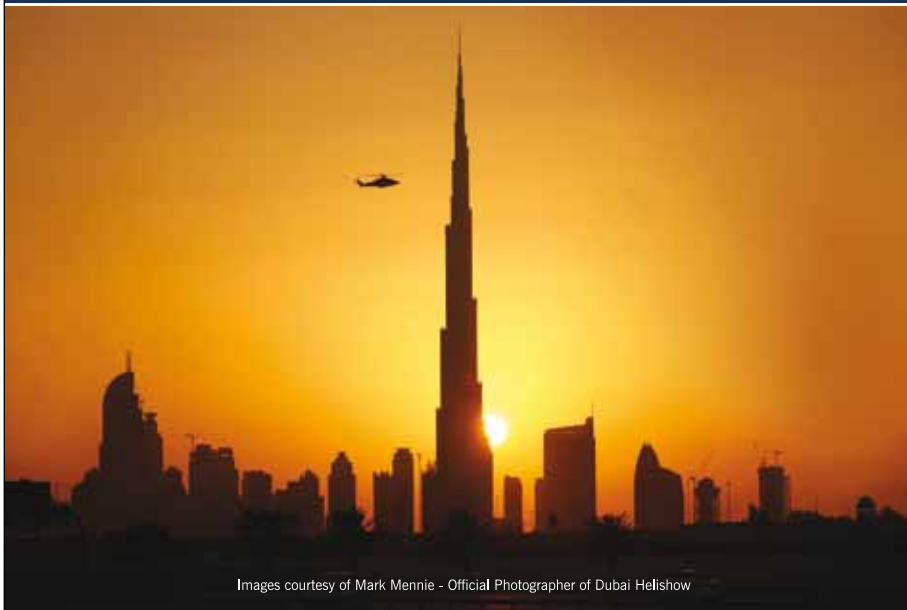
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