



Position Paper on Helicopter Shopping

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Abstract

The purpose of this position paper is to address the practice of sequential calls to a variety of air medical providers in an attempt to secure air medical resources for a call response that is limited by weather, landing zone availability, distance, or other safety factor. The common industry term for this type of repeated resource request is ‘helicopter shopping’. This paper summarizes recent changes in air medical transport which encourage “helicopter shopping”. It outlines inherent risk exacerbation to patient and providers as a result of helicopter shopping. It also discusses possible practices to mitigate these risks, including education, communication and gathering of complete request information prior to launch.

Introduction

The Air Medical Helicopter Transport business began in the early 1970’s with a small number of air medical transport helicopters across the country. (footnote) Over the last three decades, this industry, or community, as we call it today, has grown large enough to include hundreds of air medical transport helicopters nationwide. (footnote) Thirty years ago, if the local, and solitary, air ambulance provider turned down or aborted a flight request due to weather...that was the end of it. Today if a program turns down or aborts a flight for any reason, it is easy for Emergency Medical Services (EMS) or hospital personnel to request an alternative aircraft from a variety of surrounding locations. The nationwide availability of multiple aircraft has created a situation in which EMS agencies may continue to call air medical resources until one responds. This situation has become so common, it now has its own moniker, “helicopter shopping”.

The purposes of this position paper are to:

- Alert the air medical community to the common factors that promote ‘helicopter shopping’
- Stimulate discussion among industry leaders, neighboring programs, and regional communications centers to develop best practices to mitigate ‘helicopter shopping’
- Give broad guidelines to the air medical community for the implementation of dispatch and communications systems

- Promote the concept of open communication between all air medical transport services
- Encourage the education of both hospital and emergency medical service providers in order to eliminate the practice of “helicopter shopping”.

Discussion

The majority of fatal air medical helicopter accidents since 1998 have occurred either at night, in bad weather, or both. (footnote) While helicopter shopping is not the cause of these accidents, (footnote) the International Association of Flight Paramedics believes it is a contributing factor. To clarify, we do not believe the request of additional air medical resources is an inherently hazardous event. ‘Helicopter shopping’ creates an additional risk for crews and patients because of the way it is carried out. Poor communication and lack of information sharing between requesting agencies and air medical helicopter transport organizations is at the center of this issue.

The International Association of Flight Paramedics believes that if one helicopter is unable to respond or has to abort a request for a patient transport, under certain conditions, another helicopter may be able to complete the mission safely.

The International Association of Flight Paramedics recommends the following practices to eliminate “helicopter shopping”.

Establish an organized dispatch system in order to coordinate all helicopter requests in a particular region. This dispatch system should be recognized by the Emergency Medical Services Agency responsible for the same region. This system can be set up by individual county, regional area, state, or any other boundary that defines the area of a geographic or service region. The boundaries are not important. What is important is that all agencies involved in the transport of air medical patients understand how the system works and agree to the process. A single air ambulance dispatch system or network from each region will improve communication and eliminate the need for repeated requests for air ambulance, especially in areas serviced by more than one provider. All requests for air ambulances from law enforcement, fire, ambulance and all other legitimate requestor in the area would be directed through the designated dispatch network. Any emergency agency may be designated to perform this coordinating duty. The type of agency that coordinates this air ambulance dispatch may vary from region to region. The dispatch network makes it easier for requesting agencies to call for air medical transport. This same network makes it easier for multiple air medical service providers to exchange information. If multiple air medical transport service providers operate in one region, especially if service areas overlap, they should openly communicate and share flight information.

Air medical transport service providers should require all information about requests for transport be available at the time of the initial request. That information must include pertinent information about whether another air medical service provider has turned down the request, and the reason the request was denied. Even more important is the information about the response or attempted response of any provider to the mission, especially in cases in which the mission was aborted due to weather. It may be possible for another air ambulance service to safely respond from another location, however

weather information gained from another aircraft attempting the same mission is critical.

Ground emergency medical service agencies, including fire and law enforcement, need education about the helicopter dispatching network. The responsibility of educating ground emergency medical service providers will fall to air medical transport service providers. They must take it upon themselves to educate emergency medical services and associated agencies. It is crucial that EMS and first responder personnel understand the necessity of allowing the regional helicopter dispatch network to locate and request the most appropriate mission specific air ambulance provider. They should be educated in order to understand why helicopters may not be able to complete the mission. The educational information should include weather minimums, weather behavior, appropriate patients, and helicopter performance issues.

Air medical service providers must communicate with each other about interfacility transports. Hospital to hospital transfers are usually not monitored by any type of emergency medical service agency. The arrangement between air medical transport service provider and requesting hospital may be contractual. Other air medical service provider may be requested if the usual provider is not available. We owe it to the air medical community to share information with each other about the reasons interfacility transports are turned down. Hospitals may be the most aggressive of all "helicopter shoppers." The air medical community must share all pertinent environmental (weather, landing zone, construction, safety) information about requests we turn down or abort.

Accidents and incidents hurt the whole air medical community, not just the competing medical provider. Communication between air medical transport service providers is paramount to assuring as safe a community as possible.

Conclusion

Helicopter shopping, like any other potential safety risk, is not the sole reason for the unsatisfactory air medical safety record over the last few years. However, the increasing number of air medical helicopters available and the willingness of requesting parties to "shop" has created a situation the we must mitigate in order to enhance the safety of the community.

Establishing safe helicopter dispatch networks to be used for dispatching scene and interfacility requests for transport will help make helicopter shopping unnecessary and unacceptable. These dispatch networks will be supported with education of requesting parties and their personnel regarding capabilities and limitations of air medical transport aircraft and crew. Open communication of weather and flight factors is the key to safer, more efficient operations.

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