Perceptions of paramedic and emergency care workers of those who self harm: A systematic review of the quantitative literature

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**Background:** The U.K. has one of the highest rates of self harm in Europe at 400 per 100,000 of population. Paramedics and emergency staff may be the first point of contact for those who self harm, therefore understanding professional’s views and approaches to care are crucial. This poster reports on a systematic review of the quantitative literature of perceptions of paramedic and emergency care workers of those who self harm. It forms part of a larger project using Evolved Grounded Theory Methodology where a previous metasynthesis has explored and interpreted the qualitative literature with regard paramedics perceptions care for people who Self Harm.

**Aim:** The aim of this study was to systematically review published quantitative literature relating to paramedic and emergency workers’ perceptions and experiences of caring for people who self harm.

**Methods:** Electronic literature searches were conducted (June 2013) of CINAHL®, MEDLINE®, OVID® and Psych INFO®, using a broad search strategy with key words Self Harm, Paramedic and Perceptions. Mesh terms and truncation were applied as follows: [self harm* OR suicide* OR Overdose* OR mental health*] AND [paramedic* OR nurse* OR doctor*] AND [emergency* OR pre hospital* OR ambulance*] AND [perceptions of care*]. No language or date restrictions were applied. References included papers and grey literature such as guidelines, policy documents and conference proceedings were also hand searched PRISMA guidelines were followed. Two researchers independently screened titles, abstracts and full papers against **a priory** eligibility criteria. Data synthesis was achieved by extracting and descriptively analysing study characteristics and findings.

**Results:** 16 studies met the inclusion criteria; one included ambulance staff, and all used questionnaires. Training, policies and guidelines improved staff knowledge and confidence in caring for people who self harm. Limited access to training was reported, ranging from 75% to 90% of staff not receiving any. Limited departmental procedures to guide staff were also reported. Staff in acute settings exhibited increased feelings of negativity, becoming less positive closer to front line care. Recent studies report positive attitudes amongst emergency staff.

**Discussion:** Despite guidelines indicating need for education and policies to guide staff in self harm care, there is limited evidence of this happening in practice. The lack of literature including paramedics suggests a gap in our understandings around care for self harm. This gap warrants greater attention in order to improve and evolve our understandings of care for patients who self harm in their first point of contact.