EAPCCT SURVEY OF EUROPEAN POISONS CENTRES:
STAFF PROFILE

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Background
A survey of all European Poisons Centres (PCs) was carried out in 2012 by the European Association of Poisons Centres and Clinical Toxicologists (EAPCCT) in order to identify staffing, organisation, services provided, research and training. The objective was to describe the working of the centres and perhaps to provide help where needed in the future.

Methods
An invitation to complete an on-line questionnaire with 66 questions using SurveyMonkey® was sent out to all European PCs by e-mail in June 2012. Responses were analysed using Excel® and descriptive statistics. Where possible comparison has been made with a similar survey carried out in 2000 and published in 2001.¹ The services available from the respondent PCs are discussed elsewhere.²

Results
By 1 November 2012 responses had been received from 32 PCs in 21 different countries, covering most parts of Europe (response rate 41.6%), see Figure 1. This compares with a return rate of 84.5% (60 responses) in the 2000 survey.

Staffing
The median number of professional staff in the 27 centres responding to this question was 14 (range 1-36). The qualifications of directors are shown in Table 1.

Table 1: Qualifications of PC directors

<table>
<thead>
<tr>
<th>Qualification</th>
<th>2000</th>
<th>%</th>
<th>2012</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Medicine</td>
<td>57</td>
<td>95.0%</td>
<td>27</td>
<td>87.1%</td>
</tr>
<tr>
<td>Pharmacy</td>
<td>3</td>
<td>5.0%</td>
<td>3</td>
<td>9.7%</td>
</tr>
<tr>
<td>MSc in chemistry/biology</td>
<td>1</td>
<td>3.2%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

In 2012 77.4% of centres were staffed by dedicated staff for all opening hours (cf 66.7% in 2000). However, in one centre there were no dedicated staff and another was staffed by paediatricians (unclear if this was their only task). In 2000 6 centres (10%) had no dedicated staff. In 16% of centres other staff answered enquiries out of hours (cf 21.7% in 2000).

The majority of centres employed physicians, scientists/specialists in poisons information (SPIs) and/or pharmacists, with some employing more than one type of staff (Figure 2).

In 2012 all centres required information staff to have at least a university degree, with the exception of one that employed non-graduate nurses (96.9% compared with 81.7% requiring a university degree in 2000).

In 23 centres (71.9% of 81.7% in 2000), as well as answering poisons enquiries, physicians treated poisoned patients, with the proportion of working time spent on this averaging 32% (range 3-100; median 20%) of their working time.

Access to a medical toxicology specialist physician was available 24/7 in 25/30 responding centres (83.3%; same percentage in 2000), with < 24 hour access in 3 (10% of 6.7% in 2000) and no access in 2 (4 in 2000).

Figure 1: European countries with PCs responding to the questionnaire

Figure 2: Poisons information staff (may be more than one category of staff/PC)

Training
Specific training was provided for new SPIs in 24/30 (80.0% cf 63.3% in 2000) responding centres, usually organised by the director, manager and senior staff. Training duration ranged from 1 day to 1 year (median 3 months), although in some centres it depended on the type of staff. Eighteen centres (60% cf 51.7% in 2000) had written guidelines for training new staff.

Assessment
No formal assessment of new staff was made in 7/30 centres (23.3% cf 28.3% in 2000). In the other 23 who replied some combination of observational assessment (23), oral (7) and written (4) examination occurred. Certification for poisons information staff was available in 10/30 centres (1 local, 8 national, 1 international) (30.0% cf 23.3% in 2000).

Continuing professional development
Eighteen out of 30 centres (60.0% cf 50% in 2000) had a programme of continuing professional development for staff.

Conclusions
Conclusions that can be drawn from this survey are limited by the low response rate and therefore comparisons with the 2000 survey are difficult.

Although most centres had appropriate 24 hour medical toxicology support, specific training for new scientific staff with formal assessment on completion and a programme of professional development, these were not always available and action is needed to improve staff training and development opportunities in affected poisons centres. However, there did seem to be some improvement since 2000 and the proportion of centres with specific training for new staff did appear to be rising.

There may be a tendency towards employing less expensive information staff, but more centres now require a university degree.

References