

## STANDARD OPERATING PROCEDURE DOCUMENT (SOP)

Title	Use of the Defibrillator and Resuscitation Equipment		Doc. No.	OP041 & CL029
Scope	Clinical Directorate	Operational Directorate		
Purpose	To provide guidance for clinical and non-clinical staff in the use of the defibrillator and resuscitation equipment.			
Guidelines	This Standard Operating Procedure outlines the procedure and monitoring of the defibrillator and resuscitation equipment: <ul style="list-style-type: none"><li>Operational staff – to understand their role</li><li>Clinical staff – procedure for the use of the equipment</li></ul>			
PROCEDURE			RESPONSIBILITY	
1	There is a defibrillator situated in the following locations: <ul style="list-style-type: none"><li>In the Meds Room at Wavertree Base</li><li>All Primary Care 24 Urgent Care Centres</li></ul> The centres also have a red resuscitation bag with the defibrillator. The defibrillator will be placed in the resuscitation bag.  It is the responsibility of the drivers and the receptionists to ensure the equipment is in place at the start of each shift.		Primary Care 24 Receptionist / Driver	
2	The driver collects the defibrillator and resuscitation equipment from the meds room at Wavertree base and puts them in the boot of the med car being used on shift.  The defibrillator and resuscitation equipment is situated in the following location in each centre: <ul style="list-style-type: none"><li>Aintree – located on top of the drugs trolley in the store room</li><li>Garston – located on top of the drugs trolley in the store room</li><li>Old Swan – located in the store room with the drugs trolley</li><li>Huyton – located on top of the drugs trolley in the store room</li><li>RLUH – located inside the stock cupboard in the clinician room</li><li>Runcorn – located on top of the drugs trolley in the store room</li><li>Widnes – located on top of the drugs trolley in the store room</li><li>Kirkby – located in the store cupboard in the clinician room</li></ul>		Primary Care 24 Receptionist / Driver	

	<ul style="list-style-type: none"> <li>• <b>Lowe House</b> – located in the store cupboard in the clinician room</li> <li>• <b>Childwall EAS</b> – located in store cupboard in clinician room</li> <li>• <b>Townsend EAS</b> – located in store cupboard in clinician room</li> <li>• <b>Rainhill EAS</b> – located in the store room</li> </ul> <p>It is the responsibility of the receptionist to ensure the equipment is available and accessible for the clinician at the start of each shift.</p>	
3	<p>Any issues should be reported to the shift manager or dispatcher.</p> <p>Checks of the defibrillators in the Urgent Care Centres will be carried out by the medicines management team on a weekly basis.</p> <p>Checks of the defibrillators in the vehicles will be undertaken by the medicines management team on a weekly basis.</p> <p>Additionally the defibrillator and resuscitation bag will be checked after every use.</p> <p>All relevant documentation will be completed and forwarded to the medical lead for scrutiny and sign off. The documentation includes a maintenance checklist.</p>	Primary Care 24 Receptionist / Medicine Management Personnel
4	<p><b>Actions during a collapse:</b></p> <ol style="list-style-type: none"> <li>1. All members of staff have responsibility for patient safety and are required to attend training in Basic Life Support (BLS), resuscitation and use of defibrillator equipment</li> <li>2. The member of staff who first becomes aware of the problem will assess the situation and ensure they have help from other members of staff, including a clinician if present</li> <li>3. It is acceptable for the member of staff who is initially involved to lead on the resuscitation or to defer to a more qualified staff member where available</li> <li>4. Another member of staff should ring 999 for emergency services whilst the original staff member proceeds to use the resuscitation equipment</li> <li>5. The staff member may refer to the instruction sheet with each defibrillator to assist in ensuring the correct procedure is followed</li> <li>6. The first step is to remove the defibrillator from its bag and place it next to the patient. The 'on' button should then be pressed and the voice commands followed. This includes applying the pads in the appropriate places on the skin of the patient and plugging the cable into the defibrillator</li> <li>7. The defibrillator then automatically assesses the heart rhythm of the patient and decides whether a shock is indicated</li> </ol>	Primary Care 24 Clinician / Receptionist / Driver

	<p>8. If a shock is indicated the defibrillator voice will advise the team to stand clear of the patient and for the staff member to press the button that delivers a shock</p> <p>9. When this has happened the defibrillator will then reassess the patient's heart rhythm and decide whether a further shock is required</p> <p>10. The staff member must ensure that chest compressions continue appropriately at all times when there is no requirement to stand clear. Current guidance advises thirty compressions followed by two rescue breaths</p>	
5	At an appropriate time, during or after resuscitation, the Shift Manager must be fully informed of events, the outcome and the staff involved.	Primary Care 24 Clinician / Receptionist / Driver / Shift Manager
6	The Shift Manager will ensure that resources are mobilised after the resuscitation episode to provide support for all staff involved in the resuscitation. This may include calling in standby resources and enabling operational and clinical staff to take an appropriate break.	Primary Care 24 Shift Manager
8	The Service Manager will contact members of the operational team involved as soon as possible after the event to provide or arrange support and de-briefing.	Primary Care 24 Service Manager
9	The Service Manager will arrange to inform the Director of Quality and Patient Safety by telephone on the next working day of the episode of resuscitation and the contact details of any clinicians involved.	Primary Care 24 Service Manager
10	After each resuscitation episode the member of staff involved must complete a PC24 Incident Form via Datix,	Primary Care 24 All Staff
11	Staff are trained in AED and CPR every 3 years.	Primary Care 24 Trainers
12	<p><b>Appendices:</b></p> <ol style="list-style-type: none"> <li>1. Equipment in car / bags</li> <li>2. DEFIB – defibrillator actions during a collapse</li> </ol>	Information Only

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Title		Use of the Defibrillator and Resuscitation Equipment		Doc. No.	OP041 & CL029
Version			v6		
Supersedes			All previous versions		
Approving Managers/Committee			Operational Directorate		
Date Ratified			March 2011 (original)		
Department of Originator			Service Manager / Medicine Management		
Responsible Executive Director			Chief Operating Officer / Medical Director		
Responsible Manager/Support			Medical Lead / Medicines Management		
Date Issued			January 2017		
Next Review Date			October 2022 (or when there is a change in procedure)		
Target Audience			Clinical and operational staff		
Version	Date	Control Reason		Accountable Person for this Version	
V1 – V4	2011 to 2015	Reviewed and updated as required		Various	
V5	January 2017	Reviewed and updated as required		Logistics Manager	
V6	September 2019	Reviewed and updated as required		Meds Management Administrator	
Reference documents		Electronic Locations		Locations for Hard Copies	
OP041		Primary Care 24 Intranet		Standard Operating Procedures File in the Call Centre	
Document Status: This is a controlled document. Whilst this document may be printed, the electronic version maintained on the PC24 Intranet is the controlled copy. Any printed copies of the document are not controlled.					

## Appendix 1

## Equipment in Cars and Urgent Care Centres

- ✚ Resus bag
- ✚ Two drug Boxes – known as A and B boxes (cars)
- ✚ Drugs trolley / cabinet (UCCs)
- ✚ Clinician bag / equipment

### CONTENTS OF RESUSITATION BAG

- ◆ Oxygen bottle with mask attached (cars only)
- ◆ Adult patient single use resuscitator bag
- ◆ Paediatric single use resuscitator bag
- ◆ First aid mask
- ◆ Gruedel airway
- ◆ Volumatic spacer
- ◆ 3 pouches with emergency medication



Oxygen is checked regularly but if used on your session and the oxygen levels reach the '**red zone**' on the side dial please report to medicines management



### Cars A&B Boxes / UCCs Trolleys

The list of medications that each box holds is listed and placed in the box - this can be seen through the lid of each box, for the trolleys this list should be on the side or top of the trolley.

A&B bags hold a tick sheet that must be marked off for any items that are used

Drugs used - cars and UCCs – the clinician must ensure a prescription is also written up and placed inside the box / paperwork folder once complete.

*\*Please note - if you write out a prescription and then you do not require it – DO NOT rip it up, please put a line through it and write VOID and place back in the box. All prescriptions must be accounted for!*

### Doctors Equipment

Cars - The clinician bag holds all your day to day equipment

UCCs – these items are stored in your cupboard / boxes each centre varies – please familiarise yourself with the location of these.

**Gloves**

**Thermometer**

**Pulse oximeters**

**Tongue depressors**

**Urine bottle etc. etc.**

#### **No Clinical Waste must be left in these Bags!**

It is the clinician's responsibility to check the bag before they go out on the road if it is not sealed and to ensure no items are left in the bags that have been used.

The clinician must appropriately dispose of any used equipment (Urine Bottles etc.).

**DEFIB – Defibrillator****Actions during a Collapse**

1. All members of staff have responsibility for patient safety and are required to attend annual training in Basic Life Support (BSL), resuscitation and use of defibrillator equipment
2. The member of staff who first becomes aware of the problem will assess the situation and ensure they have help from other members of staff, including a clinician if present
3. It is acceptable for the member of staff who is initially involved to lead on the resuscitation or to defer to a more qualified staff member where available
4. Another member of staff should ring 999 for emergency services whilst the original staff member proceeds to use the resuscitation equipment
5. The staff member may refer to the instruction sheet with each defibrillator to assist in ensuring the correct procedures followed
6. The first step is to remove the defibrillator from its bag and place it next to the patient. The 'on' button should then be pressed and the voice commands followed. This includes applying the pads in the appropriate places on the skin of the patient and plugging the cable into the defibrillator
7. The defibrillator then automatically assesses the heart rhythm of the patient and decides whether a shock is indicated