



London Ambulance Service **NHS**
NHS Trust

Resuscitation Policy

DOCUMENT PROFILE and CONTROL

Purpose of the document: is to ensure that: clinical staff have the ability to provide resuscitation whether it is basic life support (BLS) intermediate life support (ILS) or advanced life support (ALS) to a patient who has collapsed in cardiac or respiratory arrest.

Sponsor Department: Medical Directorate

Author/Reviewer: Consultant Paramedic. To be reviewed by September 2015

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27/09/12	2.1	Assistant Director Fleet and Logistics	Minor amendments following approval
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26/07/12	1.4	Consultant Paramedic	Minor amendments
26/08/10	1.3	Senior Clinical Advisor	Minor amendments to responsibilities, procurement and monitoring section
22/02/10	1.2	Senior Clinical Advisor	reformatted
12/12/08	1.1	Assistant Head of Clinical Audit and Research	amended 11.9
27/09/08	1.0	Medical Director	new policy

***Version Control Note:** All documents in development are indicated by minor versions i.e. 0.1; 0.2 etc. The first version of a document to be approved for release is given major version 1.0. Upon review the first version of a revised document is given the designation 1.1, the second 1.2 etc. until the revised version is approved, whereupon it becomes version 2.0. The system continues in numerical order each time a document is reviewed and approved.

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Links to Related documents or references providing additional information		
Ref. No.	Title	Version
H&S 013	First Aid Procedure	
	Education Strategy	
JRCALC Guidance	Clinical Practice Guidelines for Use in UK Ambulance Services	
H&S002	Health, Safety and Risk Management Training and Provision of H&S Information?	
OP/028	Procedure for the Management of Patients in Possession of a Do Not Resuscitate Order	
OP/014	Managing the Conveyance of Patients Policy and Procedure	
OP/025	Exchange in the Event of Equipment Failure	
OP/026	Procedure for Vehicle Inventory and Checking of Service Vehicles	
TP056	Core Training Policy (inc. Training Needs Analysis)	

Document Status: This is a controlled record as are the document(s) to which it relates. Whilst all or any part of it may be printed, the electronic version maintained in P&P-File remains the controlled master copy. Any printed copies are not controlled nor substantive.

1. Introduction

The London Ambulance Service NHS Trust (LAS) will ensure that through agreed educational programs all staff engaged on operational clinical duties are educated in resuscitation. In addition it will ensure that selected non-operational staff will receive resuscitation training to ensure compliance with the Health and Safety (First Aid) Regulations 1981.

2. Scope

This policy outlines the Trust's position with regard to skills and training on resuscitation according to the guidance in the JRCALC/European Resuscitation Council and LAS guidelines

3. Objective

The key objective of this Policy is to ensure that: clinical staff have the ability to provide resuscitation whether it is Basic Life Support (BLS), Intermediate Life Support (ILS) or Advanced Life Support (ALS) to a patient who has collapsed in cardiac or respiratory arrest. This is essential if the mortality and morbidity following such situations is to be reduced.

4. Responsibilities

- 4.1 The **Clinical Quality Safety and Effectiveness Committee** have overall responsibility for managing compliance with the requirements of this policy.
- 4.2 The **Medical Director** has overall responsibility for the implementation of this policy in accordance with the LAS/Resuscitation Council UK/European Resuscitation Council and the JRCALC guidance and for ensuring that all clinical and where appropriate non-clinical staff deliver care in accordance with this policy.
- 4.3 **Ambulance Operations Managers** are responsible for ensuring that appropriate levels of consumables are maintained in station stores.
- 4.4 **All Clinical Staff** should ensure that they maintain their ability to deliver resuscitation (as appropriate) in line with their clinical staff grade. Resuscitation training is a key part of Core Skills Refresher (CSR) programme.

5. Levels of Resuscitation Training for Operational Staff.

Resuscitation training is set out in the Training Needs Analysis (also see TP056 Core Training Policy) and is provided according to the level of clinical responsibility for each staff grade.

Staff will be trained in resuscitation as detailed below:

5.1. Patient Transport Service (PTS) Staff

- PTS Staff will receive resuscitation training as part of their Induction Training Course. This training will include the use of a bag valve mask combined with oxygen as an adjunct to resuscitation, the use of Oropharyngeal airways, suction equipment and the use of an Automated External Defibrillator (AED)
- The importance of the documentation of clinical practice will also be emphasised.
- This training will be known as basic life support.
- Competence at this skill level is assessed as part of the recognised programme of education
- Refreshment of resuscitation skills will be carried out as part of the Trusts CSR Programme.

5.2 Control Room Staff

- Control Staff will receive resuscitation training as part of their Induction Training Course. This training will include the use of a bag valve mask combined with oxygen as an adjunct to resuscitation, the use of Oropharyngeal airways, suction equipment and the use of an Automated External Defibrillator (AED)
- The importance of the documentation of clinical practice will also be emphasised.
- This training will be known as basic life support.
- Competence at this skill level is assessed as part of the recognised programme of education.
- Refreshment of resuscitation skills will be carried out as part of the Trusts CSR Programme.

5.3 Accident & Emergency Support Staff

- Accident & Emergency Support (A&E Support) Staff will receive resuscitation training as part of their Induction Training Course. This training will include the use of a bag valve mask combined with oxygen as an adjunct to resuscitation, the use of Oro-pharyngeal airways and suction equipment. A&E staff will also be trained in the use of an automated external defibrillator.
- The importance of the documentation of clinical practice will also be emphasised.
- This training will be known as basic life support.
- Competence at this skill level is assessed as part of the recognised programme of education
- Refreshment of resuscitation skills will be carried out as part of the Trusts CSR Programme.

5.4 Emergency Medical Technicians

- Will receive resuscitation training as part of their Training Course. In addition they will receive further training in the use of a defibrillator/monitor device.
- This level of training is known as intermediate life support.
- Competence at this skill level is assessed as part of the recognised programme of education
- Refreshment of resuscitation skills will be carried out as part of the Trusts CSR programme
- In addition staff during their probationary period will receive assessment, support and guidance.
- When there are any major changes to the international/national resuscitation guidelines, all staff will receive training and assessment in the new guidelines for resuscitation, in line with JRCALC/European Resuscitation Council and LAS guidelines.

5.5 Paramedic Trained Staff

- Additional advanced life support skills will be taught as part of the Paramedic Training Course, this will include advanced airway management and cannulation, drug algorithms and advanced invasive skills.
- Competence at this skill level is assessed as part of the recognised programme of education

- Refreshment of resuscitation and advanced life support skills will be carried out in accordance with the Trusts CSR programme.
- When there are any major changes to the international/national resuscitation guidelines, all staff will receive training and assessment in the new guidelines for resuscitation, in line with JRCALC/European Resuscitation Council and LAS guidelines

6. Education and Record Keeping

- 6.1 Records of all clinical staff who have undertaken and successfully completed the relevant level of resuscitation training as part of their programme of education will be kept. All records are kept at the Education Archive at Fulham.
- 6.2 The Learning Management System will collate records of all resuscitation training completed with clinical staff, and follow-up in accordance with the Core Training Policy.

7. Procurement of Resuscitation Equipment

The process for ensuring the procurement of resuscitation equipment and how the Trust documents that resuscitation equipment is checked, stocked and fit for use, is detailed in the OP026 Procedure for Vehicle Inventory and Checking of Service Vehicles and OP25 Procedure for the Scheduled Maintenance and Exchange of Ambulance Equipment. To ensure that the necessary resuscitation equipment is always available the following process has been developed:

- 7.1 Stock levels of consumables in station main stores are monitored by Vehicle Preparation staff. Lower thresholds of stock should be agreed at complex level with the Ambulance Operations Manager. Once the lower threshold is reached, Vehicle Preparation staff will include the appropriate items requiring replenishment on the consumables pick list.
- 7.2 Referring to the pick list supplied by Vehicle Preparation staff, the station administrator (or the person responsible for the ordering of consumables, if different) will order the appropriate items using the Trust's procurement system. Deliveries will be made directly to station sites through the Trust's established supply chains. It is the Ambulance Operations Manager's ultimate responsibility to ensure that proper levels of stock are maintained at his or her station(s).
- 7.3 All Operational staff will also ensure that the resuscitation equipment is functional and clean as part of the daily checks procedure, as instructed during their training.

8. Recognition of Life Extinct Guidelines (ROLE)

- 8.1 Staff will follow the JRCALC guidance and the guidance in OP014 Managing the Conveyance of Patients Policy and Procedure.

9. Do not attempt resuscitation orders (DNAR)

- 9.1 Staff will follow the JRCALC guidance and the OP014 Managing the Conveyance of Patients Policy and Procedure.

IMPLEMENTATION PLAN				
Intended Audience	All staff			
Dissemination	Available to all staff on the Pulse			
Communications	Revised Procedure to be announced in the RIB and a link provided to the document			
Training	Induction, Annual CSR updates and team briefing as identified in the TNA.			
Monitoring:				
Aspect to be monitored	Frequency of monitoring AND Tool used	Individual/ team responsible for carrying out monitoring AND Committee/ group where results are reported	Committee/ group responsible for monitoring outcomes/ recommendations	How learning will take place
Duties, including adherence to guidelines and documentation standards (Section 4)	Annual PDR process Quarterly Area Governance Reports (include CPI checks)	AOM reporting via Area Quality Meetings	Clinical Quality Safety and Effectiveness Committee	Learning disseminated via various mechanisms including Medical Directorate Bulletins, Area Quality Meetings, Routine Information Bulletins, etc
How the organisation documents that resuscitation equipment is checked, stocked and fit for use (Section 7)	Quarterly usage reports	Logistics department report to the Vehicle and Equipment Working Group and highlight findings at Area Quality Meetings		