

RESUSCITATION PATHWAY

Treatment Pathway code:	WAHT-TP-108
Treatment Pathway Owner:	<i>Chris Doughty, Senior Resuscitation Officer</i>
Approved by:	<i>Clinical Governance Group</i>
Date of Approval:	<i>3rd July 2018</i>
Date of review:	<i>3rd July 2020</i>

POP UP TITLES AND NUMBERING

<p>Resuscitation Policy</p> <ul style="list-style-type: none"> • Scope of the policy • Definitions, responsibilities and duties • The emergency team response • Post resuscitation care • Resuscitation equipment, replenishment and cleaning • Manual handling • Cross infection • Anaphylaxis • Use of resuscitation equipment • Procurement • Do not attempt CPR (DNACPR) guidelines • Training and awareness • Appendix 1 – Equality impact assessment for Trust-wide policies • Appendix 2 – Checklist for the review and approval of key documents • Appendix 3 – Plan for dissemination of key documents • Appendix 4 – Financial risk assessment • Appendix A1 – WRH – Site emergency response plans • Appendix A2 – Alex – Site emergency response plans • Appendix A3 – KTC – Site emergency response plans • Appendix A4 – ECH – Theatres and Burlington Ward response plan • Appendix 5A – Emergency Response Protocol Worcestershire Breast Unit • Appendix B1 – Emergency adult equipment, guideline and checklist • Appendix B2 – Emergency paediatric equipment list, guideline & checklist • Appendix C – Terms of reference for resuscitation committee • Appendix D – Resuscitation committee reporting schedule 	
<p>Adult Do Not Attempt Resuscitation (DNAR)</p> <ul style="list-style-type: none"> • Principles • Decision making framework • Making a DNACPR • Communication on decisions where the patient has capacity • Communication on decisions where the patient lacks capacity • Recording a DNACPR decision • Reviewing a DNACPR decision 	

<ul style="list-style-type: none"> • Temporary suspension of DNACPR decisions • DNACPR decisions and patient transfers • DNACPR decisions and West Midlands Ambulance Services • The use of implanted electronic devices • Training • Appendix 1 – National guidelines • Appendix 2 – DNACPR form • Appendix 3 – Details of ordering DNACPR form and patient booklet • Appendix 4 – Standard DNACPR audit tool • Appendix 5 – WMAS process form • Appendix 6 – WMAS patient communication form • Appendix 7 – Temporary suspension of DNACPR 	
<p>Anaphylaxis Policy</p> <ul style="list-style-type: none"> • Introduction • Scope of pathway and patients covered • Guideline • Appendix 1 – Resuscitation Council UK • Appendix 2 – Blood test for Tryptase levels 	

KEY DOCUMENTS TRANSFERRED INTO THIS PATHWAY

Key Document Name	Owner	Code	Version
Resuscitation Policy	Chris Doughty	WAHT-CG-025	5
Resuscitation Policy - Appendix 1 Equality Impact Assessment	Chris Doughty	WAHT-CG-025 - Appendix 1	5
Resuscitation Policy - Appendix 2 Checklist for review and approval of key documents	Chris Doughty	WAHT-CG-025 - Appendix 2	5
Resuscitation Policy - Appendix 3 Plan for dissemination of key Document	Chris Doughty	WAHT-CG-025 - Appendix 3	5
Resuscitation Policy - Appendix 4 Financial Risk Assessment	Chris Doughty	WAHT-CG-025 - Appendix 4	5
Resuscitation Policy - Appendix A1 WRH Site Plan	Chris Doughty	WAHT-CG-025 - Appendix A1	5
Resuscitation Policy - Appendix A2 AHR Site Plan	Chris Doughty	WAHT-CG-025 - Appendix A2	5
Resuscitation Policy - Appendix A3 KTC Site Plan	Chris Doughty	WAHT-CG-025 - Appendix A3	5
Resuscitation Policy - Appendix A4 ECH Site Plan	Chris Doughty	WAHT-CG-025 - Appendix A4	5
Emergency trolley checking guideline	Chris Doughty	WAHT-CG-025 - Appendix B1	5
Paediatric Emergency Trolley Checklist	Chris Doughty	WAHT-CG-025 - Appendix B2	5
Resuscitation Policy - Appendix C RDPC Terms of Reference	Chris Doughty	WAHT-CG-025 - Appendix C	5
Resuscitation Policy - Appendix D Reporting Schedule	Chris Doughty	WAHT-CG-025 - Appendix D	5
Adult Do Not Attempt CPR (DNACPR) Policy	Steve Graystone	WAHT-CG-074	6

AMENDMENTS MADE TO PATHWAY

Date	Amendments made	Approved by
17/01/2017	Appendix 5A changed –Emergency Response protocol- Worcestershire Breast Unit – change to the emergency number used	Chris Doughty
07/01/2018	Updated resuscitation documents – terms of reference, Appendix A2 alex site, checking guideline, paed checking guideline	Chris Doughty
June 2018	Documents extended for three months whilst documents are reviewed and approved	TLG
03/07/2018	Documents reviewed and approved for further two years at Clinical Governance meeting	CGG
23/11/2018	Updated references to resus policy now includes a SOP for traumatic cardiac arrest, Appendix A2 AHR site response plan, change in bleep number for on call anaesthetist	Resuscitation committee
16 th January 2019	Addition of appendix A7 WRH site plan Avon 5 to Resuscitation Policy	Chris Doughty

CONSULTATION

This Treatment pathway has been circulated to the following individuals for consultation

Name	Designation
S Graystone	Consultant Anesthetist & ICM
I Levett	Consultant in ED
D Abban	Consultant Cardiologist
B Kamalarajan	Consultant Paediatrician
J Luscombe	Consultant Orthopaedic Surgeon
S Spencer	Consultant Physician
C Bush	Matron in ED
M Tarrant	Matron in ED
S Murray	Associate Chief Nurse
C Doughty	Senior Resuscitation Officer
A Graham	Resuscitation Officer
D Yates	Resuscitation Officer
S Cook	Pharmacist

This Treatment pathway has been circulated to the chair(s) of the following committee's / groups;

Resuscitation & Deteriorating Patient Committee

Safe Patient Group

IMPLEMENTATION

Plan for implementation

How are you going to implement and ensure all relevant staff are aware of this pathway?

Trust communications system

Mandatory training

DISSEMINATION

Divisional promulgation through Resuscitation Committee representatives

TRAINING AND AWARENESS

This section should refer to training as identified in the Trusts Training Needs Analysis Appendix A of the Trusts Mandatory Training Policy

Mandatory training

REFERENCES

All references should be 'Harvard' referenced

Title	Code
<p>Advanced Care Plan for a Child or Young Person, West Midlands Paediatric Palliative Care Network. Available from Worcestershire Health and Care NHS Trust clinical policies website. Advanced Communication Skills courses:</p> <p>http://www.strichards.org.uk/Pages/FAQs/Category/education</p> <p>http://www.christie.nhs.uk/school-of-oncology/maguire-communication-skills/programme-of-workshops.aspx</p> <p>Resuscitation Council UK (2014). Decisions relating to Cardiopulmonary Resuscitation. Guidance from the British Medical Association, the Resuscitation Council UK and the Royal College of Nursing.</p> <p>Resuscitation Council UK, British Cardiovascular Society and the National Council for Palliative Care (2015). Cardiovascular implanted electronic devices in people towards the end of life, during cardiopulmonary resuscitation and after death.</p> <p>Worcestershire Health and Care NHS (2014) Mental Capacity Act 2005. Summary and Guidance for staff.</p>	WAHT-CG-074
<ul style="list-style-type: none">• Emergency Treatment of Anaphylactic Reactions Resuscitation Council UK, July 2012• CG 134 : Anaphylaxis NICE, August 2014• Resuscitation Policy Worcestershire Acute Hospitals NHS Trust, May 2013	WAHT-ANA-012

MONITORING AND COMPLIANCE

This section should identify how the Trusts plan to monitor compliance with and the effectiveness of this Treatment pathway. It should include auditable standards and/or key performance indicators (KPIs) and details on the methods for monitoring compliance

What	How	Who	Where	When
<i>These are the 'key' parts of the process that we are relying on to manage risk.</i>	<i>What are we going to do to make sure the key parts of the process we have identified are being followed?</i>	<i>Who is responsible for the check?</i>	<i>Who will receive the monitoring results?</i>	<i>Set achievable frequencies.</i>
Resuscitation Policy Section 13 Resuscitation Trolleys will be checked daily. The resuscitation department will audit these checks.	Random visit to ward/department on a rolling Cycle	Senior Resuscitation officer	RPDC	Twice a year
Resuscitation Policy Section Performance at resuscitation emergencies will be audited through local and national audits (NCAA)	Event audit form completed after each emergency call, whenever possible	Senior Resuscitation Officer	RPDC	On-going audit to be reported at RPDC meetings at least 4 times per year. Annual Summary of NCAA data
Resuscitation Policy Section 13	Evaluation of random notes sample	Senior Resuscitation Officer	RPDC	Once a year
Resuscitation Policy Section 13	Evaluation of training audit	Senior Resuscitation Officer	RPDC	Once a year

EQUALITY IMPACT ASSESSMENT

To be completed by the Treatment pathway owner and submitted to the appropriate committee for consideration and approval.

		Yes/No
1.	Does the treatment pathway affect one group less or more favourably than another on the basis of:	Please see Appendix 1
	Race	Please see Appendix 1
	Ethnic origins (including gypsies and travellers)	Please see Appendix 1
	Nationality	Please see Appendix 1
	Gender	Please see Appendix 1
	Culture	Please see Appendix 1
	Religion or belief	Please see Appendix 1
	Sexual Orientation	Please see Appendix 1
	Age	Please see Appendix 1
2.	Is there any evidence that some groups are affected differently?	Please see Appendix 1
3.	If you have identified potential discrimination, are any exceptions valid, legal and/or justifiable?	Please see Appendix 1
4.	Is the impact of the policy/guidance likely to be negative? If so can the impact be avoided?	Please see Appendix 1
5.	What alternatives are there to achieving the policy/guidance without the impact?	Please see Appendix 1
6.	Can we reduce the impact by taking different action?	Please see Appendix 1
7.	Other comments	Please see Appendix 1

If you have identified a potential discriminatory impact of this key document, please refer it to Human Resources, together with any suggestions as to the action required to avoid/reduce this impact.

For advice in respect of answering the above questions, please contact Human Resources.

FINANCIAL IMPACT STATEMENT

To be completed by the Treatment pathway owner and submitted to the appropriate committee for consideration and approval.

		Yes/No
1.	Does the implementation of this document require any additional Capital resources	Please see Appendix 4
2.	Does the implementation of this document require additional revenue	Please see Appendix 4
3.	Does the implementation of this document require additional manpower	Please see Appendix 4
4.	Does the implementation of this document release any manpower costs through a change in practice	Please see Appendix 4
5.	Are there additional staff training costs associated with implementing this document which cannot be delivered through current training programmes or allocated training times for staff	Please see Appendix 4
6.	Other comments	Please see Appendix 4

If the response to any of the above is yes, please complete a business case and which is signed by your Finance Manager and Directorate Manager for consideration by the Accountable Director before progressing to the relevant committee for approval