

Resuscitation policy appendix A 7

Medical Emergency Response Protocol

Worcestershire Royal Hospital

Aconbury East & link bridge

Statement of function :

The site medical emergency team will respond (when summoned via the “2222” call system) to any emergency where their assistance has been thought necessary. While waiting for the arrival of the team staff should commence basic or advanced life support measures as appropriate.

Hours of operation :

The emergency teams will be available at all times.

Access :

The Aconbury East Wards can be accessed via the Aconbury East main entrance, **or** via a link bridge to the main hospital. The link bridge connects to the main hospital at the Operating Theatres lift entrance (lift 2a / 2b), Level 2.

Access to the link bridge from the main hospital is via the main doors to Main Theatres, and turn left.

The quickest route (link bridge or main entrance) should be used to attend any emergency call.

Workflow :

In the event of medical emergency (cardio / respiratory arrest) staff should initiate basic life support measures as appropriate. Help should be obtained as soon as possible by dialling “2222” on an internal telephone. The nature of emergency and location should be relayed. Switchboard will then activate the appropriate emergency team’s “speech” bleep devices.

The hospital emergency teams will be informed of an emergency and it’s location via an emergency “speech” bleep.

In the event of an emergency during transfer (patient on bed / trolley), staff should follow the standard procedure for transfer emergencies. The aim is to move the patient to the nearest clinical area where staff and equipment will be available to assist, unless the primary destination is considered more appropriate (ie : operating theatres / cardiac catheter lab). Where possible, appropriate emergency care should be given en-route (ie: airway management).

Equipment :

Trust standard emergency equipment is located in all clinical areas. These will be maintained in line with Trust guideline (WR4913). Local induction must orientate staff to this equipment.

An EZ-IO Intraosseous device is available on Aconbury 4.

In the event of a 'on-the-floor' collapse (visitor / ambulant patient) away from a clinical area (ie : corridor / Aconbury Main Entrance) the 401 bleep responder (or local responders) should obtain a portable defibrillator and resuscitation equipment bag from Aconbury 4.

Staff training :

Training standards are detailed in the Trust Resuscitation Policy.

As a minimum, clinical ward staff will be trained to Resuscitation Level 2 (via mandatory training or induction), as with all other clinical areas. This training includes standard equipment familiarisation.

Audit :

All 2222 'Medical emergency' calls are subject to the Trust emergency call audit and National Cardiac Arrest Audit (as appropriate). Emergency calls to Aconbury Unit will be identified specifically and reported to the Resuscitation & Deteriorating Patient Committee for review.