

Northern Ireland Blood Transfusion Service

POLICY DOCUMENT**Document Details****Document Number:** POL:08:MP:008:04:NIBT**No. of Appendices:** NONE**Supersedes Number:** POL:08:MP:008:03:NIBT**Document Title:** NIBTS RESUSCITATION POLICY**ISSUE DATE:** 29TH JUNE 2024**EFFECTIVE DATE:** 23RD JULY 2024**Document Authorisation****Updated By:** Carly Lack, Session charge Nurse**Date:** 29.12.2023**Authorised By:** Dr Allameddine Allameddine, Medical Director**Date:** 25.06.2024**CROSS REFERENCES**

This Policy refers to the following documents:

Doc Type	Doc. No.	Title
		No documents are associated with this Policy.

This policy has been screened for equality implications as required by Section 75 and Schedule 9 of the Northern Ireland Act 1998.

Key Change from Previous Revision:

Updated document's author and authoriser
Updated AED used in NIBTS

1 STATEMENT

This policy provides an overview of issues which must be considered in the setting of resuscitation involving donors, staff or members of the public. It considers areas of equipment, staffing and training in dealing with such incidents.

2 INTRODUCTION

Sudden cardiac arrest is the third leading cause of death in Europe, affecting over 250.000 individuals a year. Survival is often possible if immediate treatment is available. Survival is most likely to occur when:

- The collapse is witnessed
- Cardiopulmonary resuscitation (CPR) is commenced immediately
- The arrhythmia is ventricular fibrillation (VF) or pulseless ventricular tachycardia (VT)
- Defibrillation is carried out at an early stage

Automated External Defibrillators (AEDs) are sophisticated, reliable and safe devices used to deliver a shock to victims of cardiac arrest. These devices can analyse the cardiac rhythm and either prompt the user to deliver a shock when appropriate (semi-automatic AED) or deliver a shock automatically (automatic AED). The AED used by NIBTS is the ZOLL AED Plus, which employs semi-automatic operation: analysing the patient and instructing rescuers to administer shock as required

An AED is available at all sessions via the Belfast or Omagh Team. There is also one available on the Blood Mobile, and at Headquarters.

3 RESPONSIBILITY

At all times, when a session is in progress, a minimum of one member of staff who has been trained in the use of AED and one member of staff who has been trained in basic life support should be present in the donation area.

4 POLICY

4.1 MANDATORY RESUSCITATION EQUIPMENT

Suction
Laerdal pocket mask
Airways, Guedel size 3 and 4
Defibrillator and gel pads
Scissors
Razor

4.2 SESSION MANAGEMENT

In the event of any individual on the premises suffering a cardiac arrest, the area should be screened off as soon as possible. The session manager should decide at the earliest opportunity if the session should be temporarily closed.

After the incident has concluded, the Senior Nurse/Unit Leader or Manager should review any issues around continuation of the session, and seek advice from senior NIBTS personnel if deemed necessary. The medical consultant on-call should be notified and a full written report summarising the incident should be presented to the Donor Consultant by the next working day.

4.3 'GOOD SAMARITAN ACTS'

If a member of the public enters the session and requests help with an incident which has occurred outwith the session, staff should attend the casualty. Staff remaining at the session should complete donations already started but should not start any new donations unless enough staff adequately trained in resuscitation remain at the session. This decision is the responsibility of the Senior Nurse/Unit Leader or Manager, who should also take into account any current appeals for blood or less than satisfactory stock levels.

4.4 DEBRIEFING

All staff involved in a resuscitation incident should be debriefed by the Donor Consultant, Senior Nurse and a representative of the Regulatory Affairs & Compliance Department at the earliest opportunity. As appropriate, the involvement of Occupational Health Services may also be considered.

5 EQUALITY SCREENING OUTCOME

This policy has been drawn up and reviewed in light of the statutory obligations contained within Section 75 of the Northern Ireland Act (1998). In line with the statutory duty of equality, this policy has been screened against particular criteria. If at any stage of the life of this policy there are any issues within the policy which are perceived by any party as creating adverse impacts on any of the groups under Section 75, that party should bring these to the attention of the Head of HR & Corporate Services.

6 TRAINING REQUIREMENTS

All training must be delivered to the current standards of the Resuscitation Council (UK)

All medical and Nursing Staff involved in direct donor care should have mandatory training in the use of AEDs.

All Donor Attendants, Nursing staff and any other staff for whom it is deemed necessary should receive training in basic life support.

Training should be renewed out on a rolling 18 monthly basis. The Senior Nurse will be responsible for ensuring that training is carried out for all eligible nursing staff. A nominated medical officer will be responsible for ensuring that training is carried out for all eligible medical staff.