

RESUSCITATION TRAINING

Guidelines for Healthcare Professionals

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Resuscitation Training Guidelines

1. INTRODUCTION

The provision of an effective Resuscitation Service must be an Operational priority within every hospital. Health care institutions have an obligation to provide an effective Resuscitation Service and to ensure that their staff receive training and regular updates for maintaining a level of competence appropriate to each individual's employed role. This requires appropriate equipment for resuscitation, training in resuscitation, managerial and secretarial support, financial planning, and continual reappraisal of standards and results. Failure to provide an effective service is a failure in duty of care which constitutes a clinical risk, contravenes the principles of clinical governance, and has implications for clinical negligence premiums.

2 GUIDELINE STATEMENT

Cardiff and Vale UHB is committed to implementing resuscitation training standards and recommendations made by the Resuscitation Council (RC) UK, whose aim is to improve patients' outcome after cardiac arrest both in and out of hospital. To achieve this, the RC (UK) has set standards for resuscitation training in both basic and advanced life support. The content of these guidelines will reflect that guidance.

Additionally, through the Resuscitation Service, the UHB will endeavour to incorporate the prevention of in-hospital emergencies, including cardiac arrest, into its training strategy.

3 AIMS OF THE RESUSCITATION TRAINING GUIDELINE

The aims of these guidelines are as follows: -

- To ensure patients receive safe, current, evidence-based, effective resuscitation, when appropriate.
- To provide staff with guidance on the resuscitation courses that are most appropriate to them depending on their clinical role.
- To implement and develop prevention strategies to reduce the number of preventable cardiac arrests.
- To reduce cardiac arrest morbidity and mortality through education
- To ensure relevant staff are updated and adequately supported to deal with resuscitation situations.
- To promote practice based on current RC (UK) guidelines.
- Ensure staff and patient safety during resuscitation.
- Reduce clinical risks.
- Develop a systematic strategic approach to resuscitation training.
- To satisfy legal and professional requirements.
- To comply with UHB requirements.

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4 IMPLEMENTATION

All newly employed health-care professionals will be made aware during induction of the Organisation's Resuscitation Training Guidelines and their responsibilities under it.

Existing staff will be made aware of these guidelines through training and dissemination of this information to all appropriate Directorates and Managers in accordance with the management of policies and procedures for Cardiff and Vale UHB.

5 RESOURCES

There are no costs in disseminating this information. The guidelines will be distributed electronically and as part of the in-house training programme and on Doctor's induction days. Courses are also advertised on the Resuscitation Service intranet page.

6 AUDIT

The compliance of these guidelines will be audited using databases currently held within the Resuscitation Service and attendance sheets (this cannot be attached with the document as it is an existing operational database).

7 RESPONSIBILITIES

7.1 The UHB Board Members

The UHB carries overall responsibility for the Organisation. It has delegated powers from the Welsh Government in respect of ownership and management of hospitals and other health facilities. The UHB is responsible for the performance of the Organisation.

7.2 Resuscitation Committee

The Resuscitation Committee, lead by its Chairperson, meets on a quarterly basis. Committee members should be conversant with current issues in relation to resuscitation practice. The Resuscitation Committee should be responsible for implementing operational policies and guidelines governing cardiopulmonary resuscitation, practice and training. It should determine the level of resuscitation training required by individual staff members.

7.3 Resuscitation Service

Cardiff and Vale UHB has an established Resuscitation Service that is supported by the Resuscitation Committee in terms of its Clinical Lead. It is responsible for implementing decisions made by the Resuscitation Committee, thereby promoting good practice through training and audit.

The Resuscitation Service is responsible for the assessment of those it teaches, ensuring they meet the standards required by the RC (UK). The Senior Nurse of the Resuscitation Service is responsible for maintaining, managing and strategically developing the Service, within available resources, to meet the needs of the UHB.

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The Resuscitation Service will provide advice to the UHB on all aspects of cardiopulmonary resuscitation including the appropriateness of training programmes for UHB staff based upon risk assessment.

7.4 Directorate and Line Managers

While the UHB has a responsibility for the provision of training through its Resuscitation Service, those who manage staff, particularly clinical staff, have a responsibility to monitor uptake and to ensure staff receive adequate time to deliver and attend training.

7.5 Individual Staff Members

Each individual has a responsibility to attend allocated training sessions, as well as for their own actions in respect of their limitations and scope of professional practice. Individual staff members who have a professional and contractual requirement to teach resuscitation to their colleagues must agree to do so according to the guidance provided by the Resuscitation Service.

8. Training Providers

All staff within Cardiff and Vale UHB who are being given study leave or financial assistance from within the Organisation towards resuscitation training courses, must access this training from the Resuscitation Service for Cardiff and Vale UHB. If the Manager of the Resuscitation Service states that the Service is unable to provide this training within a reasonable time frame or meet the demand for the training request, only then can external training instructors be asked to deliver this training.

If external training providers are required by a ward/department:

- The Resuscitation Service must be given the name of the instructor or company they wish to use to deliver the training.
- This must be provided prior to the training being undertaken.
- All external instructors providing adult resuscitation training must be UK Resuscitation Council accredited ALS instructors.
- All external instructors providing paediatric resuscitation training must be accredited Advanced Life Support Group APLS Instructors or UK Resuscitation Council accredited EPLS instructors.

The manager for the Resuscitation Service will have the overall decision if the external training providers are appropriate and qualified to provide the required training.

9. 0 TRAINING

The Resuscitation Service adheres to an Annual Training Schedule (Appendix 1) which illustrates a cyclic model for the delivery of training on an annual and systematic basis. Depending on circumstances, the time-scales and workload may be altered according to service needs or resource provision. However no substantive changes will occur without prior consultation with the Resuscitation Committee.

Courses offered by Cardiff and Vale Resuscitation service:

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- Basic Life Support- Adult (BLS)
- Paediatric Basic Life Support – (PBLs)
- Adult BLS Cascade Training
- Paediatric BLS Cascade Training
- Automated External Defibrillator (AED) Training
- AED Cascade Training
- Recognition and Treatment of Anaphylaxis
- Recognition of the Sick Patient for Health Care Support workers
- Paediatric emergency ward-based scenarios
- Ward based sick patient and mock-arrest scenarios (adult)
- Immediate Life Support (ILS)
- Advanced Life Support (ALS)
- Advanced Life Support Recert
- Advanced Paediatric Life Support (APLS)
- Advanced Trauma Life Support (ATLS)
- Paediatric Life Support (PLS)
- Acute Life-threatening Events - Recognition and Treatment (ALERT)
- Ill Medical Patients, Acute Care and Treatment (IMPACT)
- Neonatal Life Support (NLS)

9.1 In-House Training

Basic Life Support (adult and paediatric)

All UHB clinical staff, within acute and community settings, will be trained and updated yearly in basic life support skills in accordance with the RC (UK) guidelines. Although BLS is delivered predominantly using the cascade training system, the Resuscitation Service deliver a minimum of 12 one-hourly BLS sessions per year in the department to update those who cannot use the cascade training system.

It is recommended that non-clinical staff receive basic life support awareness as appropriate, ideally every two years, if Resuscitation Service or cascade training resources allow.

All new staff entering the UHB will be given an adult or paediatric BLS awareness leaflet at monthly Corporate Induction.

BLS Trainers/Competence Assessors

A cascade training system has been implemented to maximise the numbers of staff trained each year. Resuscitation Services will train and update link trainers for each clinical area annually and maintain responsibility for resuscitation standards. BLS Trainers/Competence Assessors will submit monthly training returns to the Resuscitation Service. Certificates will be issued on behalf of the Resuscitation Services by the cascade trainers and a central register maintained. All BLS Trainers/Competence Assessors must attend an update session annually in order to continue training.

The cascade trainer will act as a direct link between the Resuscitation Service and clinical areas.

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If this system is to succeed, the UHB must support this initiative to make this training mandatory. The Line Managers of BLS trainers have a responsibility to monitor uptake and to ensure trainers receive adequate time to deliver and attend training.

AED Training

The UHB is committed to providing early defibrillation utilising a mixture of AEDs and manual defibrillators in line with RCUK recommendations. All staff will be permitted to perform this intervention after receiving training from Resuscitation Practitioners. Each candidate must possess a current BLS certificate. Candidates can nominate themselves or be nominated by their manager by contacting the Resuscitation Service's Course Administrator. After successful completion of training they will be certified for one year. Each health care professional is responsible for arranging an annual up-date with the Resuscitation Service to maintain clinical competence and continue their ability to deliver a DC shock via an AED in the event of a cardiac arrest. Re-certification will be undertaken by either attending an in-house refresher session or by attending an Immediate Life Support (ILS) course. Individuals are reminded that it is their responsibility, to act within the guidelines they have been given by the Resuscitation Service as well as within their scope of practice.

Defibrillator Familiarisation

As defibrillators are updated, new models may be introduced in to clinical areas. As the technology may differ to that previously used, awareness training will facilitate the transition to the new machines. This training will be offered to all medical and nursing staff on wards where these machines will be sited. ***This training does not authorise an individual to defibrillate.***

AED Training/Competence Assessment

A cascade training/competence assessment system has been implemented to maximise the numbers of staff trained each year. Resuscitation Services will train and update link trainers for each clinical area annually and maintain responsibility for resuscitation standards. AED trainers/competence assessors will submit monthly training returns to the Resuscitation Service. Certificates will be issued on behalf of the Resuscitation Services by the trainers and a central register maintained.

The AED trainer will act as a direct link between the Resuscitation Service and clinical areas.

Recognition and Treatment of Anaphylaxis

This training will take place at the request of departments, Directorates etc when needed but is primarily delivered on the UHBs Intravenous Additives study day. To maximise the numbers of staff able to receive this training, regular anaphylaxis lectures will be provided by the Resuscitation Service in the lecture theatres, individuals must book on these sessions and they will be advertised on the Resuscitation Service's Intranet page. Please see the Resuscitation Service's Anaphylaxis Guidelines for more information on delivery and provision of this training.

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Recognition of the Sick Patient Awareness

This session is primarily delivered on the Health Care Support Worker (HCSW) Induction and development days as well as being an integral part of the Bodyworks course provided for surgery and T&O HCSWs. It is also provided as part of the 1000 lives campaign as a practical refresher to the ALERT.

Paediatric Emergency Scenarios - Ward Based

'Mock' cardiac arrest scenarios are provided by the Resuscitation Service (Paediatric Link) in conjunction with a paediatric Consultant/Senior Doctor and utilise a SimBaby. They are provided to all Paediatric clinical areas with priority given to high risk areas and are non-planned to improve realism. Scenarios often start with an acutely unwell baby or child and deteriorate into cardiac arrest. These calls often result in a paediatric 2222 call being put out which 'tests' the emergency response and in particular when clinical areas move, ensures members of the Resuscitation team are aware of the new location. These scenarios also improve familiarity with the emergency equipment and highlight potential problems before a real situation occurs.

Ward based sick patient and mock-arrest scenarios (adult)

'Mock' cardiac arrest scenarios are provided by the Resuscitation Service to consolidate training learnt on the externally accredited courses (ILS and ALERT), as well as refreshing BLS and AED knowledge. By running these in the individuals own clinical area, the Resuscitation Service is aiming to add to the realism and test local responses and identify any potential issues prior to an actual cardiac arrest.

9.2 Externally Accredited Courses

The Resuscitation Service offers a variety of externally accredited courses which are certified by their respective governing bodies.

- Advanced Life Support (ALS)
- Advanced Life Support Recertification
- Advanced Paediatric Life Support (APLS)
- Advanced Trauma Life Support (ATLS)
- Paediatric Life Support (PLS)
- Immediate Life Support (ILS)
- Ill Medical Patients Acute Care and Treatment (IMPACT)
- Acute Life-threatening Events Recognition and Treatment (ALERT)
- Neonatal Life Support (NLS)

These will be run according to need and available resources within the Resuscitation Service. There will be fair and equal access to these courses based on clinical priority, please see Appendix 2 and 3 for course recommendations dependant on clinical role. Study leave and funding must be secured prior to entry on any course. Priority will be given to staff working within the Organisation.

Immediate Life Support course (ILS)

This RC (UK) approved course will run throughout the year and it has been developed in order to standardise much of the in-hospital training undertaken already

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by Resuscitation Practitioners. Its aim is to train healthcare personnel to become Resuscitation Team members and develop skills in simple airway management, safe defibrillation (manual and/or AED) and the use of emergency drugs. This enables them to manage patients in cardiac arrest until the arrival of a Resuscitation team and to participate as members of that team. As part of optional targeted training Anaphylaxis and NEWS is also covered in ILS.

Each candidate must possess a nomination from his or her manager with a signed application form, unless a candidate is self funding. After successful completion of training they will be certified for one year. Each practitioner is responsible for arranging an update with the Resuscitation Service.

Individuals are reminded that it is their responsibility to act within the guidelines they have been given by the Resuscitation Service as well as within their scope of practice

Acute Life-threatening Events - Recognition and Treatment course (ALERT)

This nationally recognised course is designed and run by Portsmouth Hospital's NHS Trust. This one-day course is offered to all nursing and midwifery staff throughout the UHB and is provided by the Resuscitation Service. The course is also offered to the pre-registration nurses and midwives during their consolidation period and to pre-registration FP1s. The aim of the course focuses on the recognition of the sick patient and prevention of cardiac arrest. This course is based on the principle that early detection of disordered physiology and initiation of prompt simple actions reduces complications and saves lives.

Each candidate must possess a nomination from his or her manager with a signed application form, unless a candidate is self-funding.

Individuals are reminded that it is their responsibility to act within the guidelines they have been given by the Resuscitation Service as well as within their scope of practice.

Advanced Life Support (ALS)

The 2-day ALS course aims to teach the theory and practical skills to effectively manage cardiorespiratory arrest, peri-arrest situations and special circumstances, and to prepare senior members of a multidisciplinary team to treat the patient until transfer to a critical care area is possible. This course is designed for healthcare professionals who would be expected to apply the skills taught as part of their clinical duties, or to teach them on a regular basis. Appropriate participants include doctors and nurses working in critical care areas including A&E, CCU, ICU, HDU or members of the cardiac arrest. All team leaders on the Resuscitation team must have an in date ALS certificate.

All applicants should hold a current clinical appointment and professional healthcare qualification. The current ALS certificate lasts for 4 years and practitioners are expected to ensure they are up-dated if their clinical position requires an in-date ALS certificate. It is advised that all Resuscitation Team members should have an in-date ALS certificate. Practitioners are also expected to familiarise themselves with any changes in the national resuscitation guidelines.

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Individuals are reminded that it is their responsibility to act within the guidelines they have been given by the Resuscitation Service as well as within their scope of practice.

ALS recert course

This 1 day course is to re-certify individuals who have previously completed a full 2 day ALS course and are either still in date or their certificate is within 1 year of expiry. The principles of the course are the same as the 2 day, however there is more emphasis on practical scenarios rather than lectures and workshops.

Advanced Paediatric Life Support (APLS)

The 2-day APLS course aims to teach the theory and practical skills to effectively manage paediatric cardiorespiratory arrest, peri-arrest situations, paediatric trauma management and special circumstances, and to prepare senior members of a multidisciplinary team to treat the patient until transfer to a paediatric critical care area is possible. Appropriate participants include doctors and experienced nurses working in paediatrics, anaesthetics or critical care areas. All applicants should hold a current clinical appointment and professional healthcare qualification. All team leaders on the Resuscitation team must have an in date APLS certificate.

The current APLS certificate lasts for 4 years and practitioners are expected to ensure they are up-dated if their clinical position requires an in-date APLS certificate. Practitioners are also expected to familiarise themselves with any changes in the national resuscitation guidelines.

Individuals are reminded that it is their responsibility to act within the guidelines they have been given by the Resuscitation Service as well as within their scope of practice.

Advanced Trauma Life Support (ATLS)

The three-day ATLS course aims to teach a simple systematic approach to the management of trauma patients through interactive tutorials, skills teaching and simulated patient management scenarios. It teaches a safe, reliable method for immediate management of the injured trauma patient. It is recommended during the first or second year of specialist training and all candidates must be FP2 or above in surgery, orthopaedics, anaesthetics or emergency medicine. An ATLS certificate lasts for 4 years but practitioners are expected to up-date their knowledge during this period.

Individuals are reminded that it is their responsibility to act within the guidelines they have been given by the Resuscitation Service as well as within their scope of practice.

Paediatric Life Support (PLS)

This one day course has been developed in order to standardise much of the in-hospital training undertaken already by Resuscitation Practitioners. This course is suitable for medical or nursing staff who work within the field of paediatrics but do not require an APLS qualification. Its aim is to train healthcare personnel to develop skills in simple airway management of children and infants and to effectively manage a

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paediatric cardiac arrest and peri-arrest situation until the Paediatric Resuscitation Team arrive. Staff trained in PLS will then act effectively as a member of the arrest team. Successful completion of the course means that staff are certified for 4 years but all practitioners are responsible for ensuring their knowledge remains up-to-date during this period.

Individuals are reminded that it is their responsibility to act within the guidelines they have been given by the Resuscitation Service as well as within their scope of practice.

III Medical Patients Acute Care and Treatment -IMPACT

Designed by the Federation of Royal Medical Colleges and the Royal College of Anaesthetists, this 2-day course introduces the principles and practice of acute general medical care and focuses on the recognition of the sick patient and prevention of cardiac arrest. This course enhances the skills needed for dealing with life-threatening medical emergencies. Currently, there is no need to update this certificate however practitioners will be expected to ensure their medical practice and knowledge remains up-dated.

Individuals are reminded that it is their responsibility to act within the guidelines they have been given by the Resuscitation Service as well as within their scope of practice.

Neonatal Life Support

The aim of this 1 day course is to give those responsible for initiating resuscitation at birth the background knowledge and skills to approach the management of a newborn infant during the first 10-20 minutes in a competent manner. The course concentrates on the importance of temperature control, practical airway management and ventilatory support. It is provided for nursing, midwifery staff and doctors working in a neonatal environment. Successful completion of the course means that staff are certified for 4 years but all practitioners are responsible for ensuring their knowledge remains up-to-date during this period.

Individuals are reminded that it is their responsibility to act within the guidelines they have been given by the Resuscitation Service as well as within their scope of practice.

10.0 TRAINING PROGRAMME FOR COMMUNITY HOSPITALS

In order to provide training for the community hospital staff, the Resuscitation Service undertakes annual visits to all the Community Hospitals within Cardiff & Vale UHB. This one day visit will incorporate:

- BLS competency assessor training
- AED training
- AED competency assessor training
- Cardiac arrest trolley audit
- Troubleshooting any staff concerns relating to resuscitation

11.0 ACCESS TO TRAINING

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The Resuscitation Service will give fair and equal access to all members of the UHB. Staff requesting training will be assessed on an individual basis according to the following risk categories.

11.1 *High Risk*

Resuscitation team leaders
Members of the Resuscitation team
Clinical doctors working in the acute setting
Critical care and emergency department nurses

11.2 *Medium Risk*

Ward nurses
Theatre Staff
Ward nurses working in Community Hospitals
Hospital based Mental Health Nurses
Midwives
Radiographers
Dental staff
Cardiac technicians
Operating Department Practitioners
Clinical Doctors working in the non-acute areas

11.3 *Low Risk*

Physiotherapists, Occupational Therapists, Outpatients staff.
Health care support workers
Community based mental health nurses
Community nursing and health visitors
Porters and ancillary staff with patient contact
Staff with no patient contact (Admin & clerical, works & estates, catering and general management etc).

12.0 LEVELS OF TRAINING BY RISK CATEGORY

12.1 High Risk Staff

All members of the Resuscitation team will have an appropriate and recognised in-date advanced resuscitation certificate e.g. ALS, APLS.

It is recommended that clinical doctors, particularly those in acute areas, also obtain appropriate ALS certification. All Resuscitation Team Leaders must have an in-date ALS certificate.

Senior nurses working within EU and Critical Care may wish to obtain ALS certification. However, all nurses working in these areas should maintain an in-date ILS certificate.

ILS or BLS and AED may also be accessed by Cardiac Technicians and General Dental Practitioners.

Where resources permit, an ALS course would be relevant to all staff in the *high risk* category.

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Please see Appendix 2 for the Resuscitation Training Algorithm for medical and nursing staff working in the high risk area to help guide the suitability of courses.

12.2 Medium Risk Staff

All staff within this group must maintain an annual BLS certificate accessed either by their cascade trainers/competence assessors or via the Resuscitation Service. Staff within this category who have access to an AED should also receive annual certification; not all ward members require an AED certificate but it is recommended that 2 members of staff per shift have an in-date AED certificate. An AED ILS and an ALERT course can also be accessed by these staff members.

Please see Appendix 3 for the Resuscitation Training Algorithm for medical and nursing staff working in the medium risk area to help guide the suitability of courses.

12.3 Low Risk Staff

All staff within this group will attend a BLS update annually. Those staff working in areas with an AED should also receive annual instruction in its use. As a minimum, where there is an AED, it is recommended that at least one member per shift should have an in-date AED certificate.

Please see Appendix 4 for the Resuscitation Training Algorithm for staff working in the low risk area to help guide the suitability of courses.

13 ADVERTISING COURSES

Courses run by the Resuscitation Services department will be advertised within the UHB training Prospectus and on the Resuscitation Service's intranet site. Booking of courses will be through the Resuscitation Service Administrator. Where training is targeted at special groups, there may be local advertising e.g. posters or mail shots.

14 TRAINING EQUIPMENT

The Resuscitation Service will be adequately equipped to carry out whatever training they are expected to deliver. It will be the responsibility of that service to deliver, maintain and securely store this equipment accordingly. Within the acute hospitals, where equipment is stored, departments may borrow BLS equipment when it is not in use. Named individuals from within the clinical department borrowing equipment will be responsible for its collection, safekeeping and return to the Resuscitation Service.

15 TRAINING FACILITIES

The Resuscitation Service will endeavour to deliver training in the most effective and efficient way. Where possible, this training will be delivered at a time and place that is sensitive to clinical demands. However where specialist training or some large group training is required, sessions will be delivered from a central location in either UHW's or UHL's Resuscitation Training room.

16 TRAINING ATTENDANCE

Adequate notice of planned training will be given to ensure the least possible inconvenience to clinical priorities. Wherever possible the Resuscitation Service will organise training sessions at times and dates that are conducive to clinical demands.

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Staff who cannot attend planned training sessions for any reason should contact the Resuscitation Service Administrator as soon as possible to allow vacancies to be filled. The Resuscitation Services will inform the line manager of any staff member who fails to attend planned training without giving prior notice. For courses where there is a fee associated, re-imburement of these fees will depend on notice given of cancellation. The cancellation fees are documented on the application form to ensure that all applicants are aware of this prior to applying for the course.

17 FURTHER INFORMATION

These Guidelines are in response to the Standards for Clinical Practice and Training. A Joint Statement from the Royal College of Anaesthetists, The Royal College of Physicians of London, the Intensive Care Society and the Resuscitation Council (UK).

Other organisations who have endorsed similar policies include the National Patient Safety Agency, Royal College of Nursing and the Faculty of Emergency Medicine.

18 CLINICAL POLICIES AND REFERENCES

Standards for Clinical Practice and Training. *A Joint Statement from the Royal College of Anaesthetists, The Royal College of Physicians of London, Intensive Care Society and Resuscitation Council (UK) 2008.*

19 DISTRIBUTION

As well as being available for general access via the Intranet, these Guidelines will also be made available to:

- Resuscitation Committee
- Medical Director
- Director of Nursing
- Directorate Managers
- All Senior Nurses
- All Ward Managers
- Learning and Education Department
- Post-graduate organisers

19 EQUALITY IMPACT ASSESSMENT

An Equality Impact Assessment has been undertaken to assess the relevance of this guideline to equality and the potential impact on different groups, specifically in relation to the General Duty of the Race Relations (Amendment) Act 2000 and the Disability Discrimination Act 2005 and including other equality legislation. The assessment identified that the guideline presented a low risk to the UHB.

20 CONTRIBUTORS

All members of the Resuscitation Committee

Appendix 1: Annual Training Schedule

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APPENDIX 2: Course Recommendations for Doctors
working in all Specialities at all Grades

Course	Acute Medicine and Specialities	Emergency Medicine	Surgery	Anaesthetics	T&O	Cardiology	Paediatrics	GP
BLS annually	✓	✓	✓	✓	✓	✓	✓	✓
AED if applicable annually	✓	✓	✓	✓	✓	✓	✓	✓
ILS Yearly Recertification			✓		✓			
ALS 4 Yearly Recertification	✓	✓	✓ Not Essential	✓	✓ Not Essential	✓		
PLS 4 yearly Recertification		✓ Dependant on Grade					✓ Dependant on Grade	
APLS 4 Yearly Recertification		✓ Dependant on Grade		✓ Dependant on Area of Practice			✓ Dependant on Grade	
ALERT No Recertification Required	✓	✓	✓		✓	✓		
IMPACT No Recertification Required	✓	✓		✓		✓		
ATLS 4 Yearly Recertification		✓	✓	✓	✓			

This table is intended as a guide only

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APPENDIX 3: Course Recommendations for Nursing Staff within the UHB

COURSE	Site Managers/ Nurse Practitioner	Ward Nurses Working in High Risk Areas	Ward Nurses working in Medium Risk Areas	Ward Nurses working in Low Risk Areas	Paed-iatric Nurses	Midwives	Hospital Based Mental Health Nurses	Comm-unity Nursing
BLS Yearly Update	✓	✓	✓	✓	✓	✓	✓	✓
BLS Cascade Yearly Update	✓	✓	✓	✓	✓	✓	✓	✓
AED Yearly Update	✓	✓	✓	✓		✓	✓	
ILS Yearly Update	✓	✓	✓			✓	✓ Dependant on role	
PLS 4 Yearly Update					✓			
ALS 4 Yearly Update	✓ (or ILS dependant on experience/role)	✓ Dependant on role/band						
APLS 4 Yearly Update	✓ (Paeds Pracs)				✓ Dependant on role/band			
ALERT No Recertification Required	✓	✓	✓			✓		

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APPENDIX 3 continued: Course Recommendations for Health Care Personnel Working within the UHB

COURSE	PAMS	Dental Nurses	Psychiatric Nurses	Health Care Support Workers	Non-Clinical Staff
BLS Yearly Update	✓	✓	✓	✓	✓
BLS Cascade Yearly Update	✓	✓	✓	✓	✓
AED Yearly Update	✓	✓	✓	✓ Managers Discretion	✓ If there is an AED in the vicinity
ILS Yearly Update	✓	✓			
PLS 4 Yearly Update					
ALS 4 Yearly Update					
APLS 4 Yearly Update					
ALERT No Recertification Required	✓	✓	✓	✓ As an observer	

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