

**Policy applies to:**

Mercy Hospital clinical staff are required to hold CPR certification appropriate to their area of work. Support staff may complete an optional update in Bystander CPR (basic training).

**Related Standard**

- *EQUIP Standard 3.2* - Safety management systems ensure safety and wellbeing for consumers/patients, staff, visitors and contractors
- *Criterion 3.2.4* - Emergency and disaster management supports safe practice and a safe environment.

**Rationale**

To ensure that patients receive an appropriate and timely response to clinical emergency situations that is based on Best Practice recommendations and the New Zealand Resuscitation Council (NZRC) standards.

**Cultural Considerations**

Optimal care for seriously ill patients should be individualised; reflect each patient's preferences, hopes, and values; and be shaped by each patient's unique physical, emotional, social, spiritual, and cultural needs. In relation to shared goals of care culture shapes one's experience of illness and death in clinically meaningful ways.

**Objectives**

- ◆ Clinical staff will be appropriately trained and assessed in CPR competence as per NZRC recommendations
- ◆ All Clinical Staff will be familiar with Emergency equipment which will be accessible and appropriately maintained.

It is the expectation of Mercy Hospital that staff will respond to a clinical emergency to the level of their competence. For instance a nurse who has completed the NZRC Core Advanced Rescuer course is expected to follow the NZRC Algorithm / protocol for that emergency. This may involve commencing CPR, defibrillating a shockable rhythm and administering some medications / adjuncts such as oxygen, adrenaline, amiodarone or hydrocortisone as per their level of CPR Training. This may occur before any external support arrives.

**Implementation**

**A. Clinical Staff**

\* The clinical learning and development coordinator facilitates the provision of and attendance on NZRC CORE Advanced courses for the clinical staff at Mercy Hospital. This is supported by the Recognition and Response Committee and the NZRC CORE advanced instructors.

- \* The overall coordination of ongoing updates and yearly refreshers sits with the hospital Recognition and Response Committee and the professional development committee. Training is provided by Emergency Care Instructors with support from CORE advanced instructors. Yearly updates are required for all clinical staff in McAuley Ward, Callaghan ward, Coolock DSU, ICU, Mercy Cancer Care, PACU, Theatre Suite, Manaaki and allied health

- \* The Recognition and Response Committee will review annually the contents of emergency trolleys. This includes standardising content between all of the emergency trolleys and review of content with the Anaesthetic credentialed specialists.
- All clinical staff will have a minimum of CORE Immediate Adult and Child Training
- Each clinical area will have at least one RN who holds a current certification to NZRC Core Advanced Rescuer qualification on each shift. This qualification is valid for three years and is assessed by a certified Instructor.
- Achievement of an NZRC CORE qualification is required by; all anaesthetic technicians, and all registered nurses working in clinical areas (excluding Main Operating Theatre) across the Mercy campus
- Other McAuley, Callaghan and DSU Clinical staff will be trained to NZRC 'Core Immediate level
- New records found in Tautoko
- historical records on Payglobal databases
- \* Scenario training will be provided each year. This will be planned / advertised / delivered by the Recognition and Response Committee and professional development committee.

**B. SUPPORT SERVICES, MARINOTO CLINIC AND NON-CLINICAL HOSPITAL STAFF**

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Basic Life Support training for non-clinical staff will be planned by the Professional Development Committee and offered as resource allows. Sessions will be run by Emergency Care Instructors or CORE Advanced Instructors.

**Evaluation**

- Clinical debrief and process review will be conducted after any resuscitation events. This will be initiated by Senior Clinical staff in conjunction with Recognition and Response Committee. This process includes;
  - a review of processes followed and
  - exploration of what occurred with staff, to ensure that staff involved have the opportunity to explore the sequence of events as they occurred and to raise any questions that require further clarification/review of systems for improvement.

The three questions to ask are;

- What went well?
- What could have been done differently?
- Action Points going forward.
- Incident process will be completed.
- **Arrest records will be completed**

### Internal Documents

- Cardiac arrest/patient emergency process- work manual (SharePoint)
- NZRC Advanced Life Support for Adults/Infants algorithms on Emergency Trolleys
- Emergency trolley contents - work manual (SharePoint)
- Emergency equipment- work manual (SharePoint)
- Emergency procedures poster beside all phones.
- Shared Goals of Care Policy
- Recognition and Response Committee TOR

### External References:

- ◆ Health and Disability Sector Standards – Clause 6.6.1
- ◆ NZRC Policies and guidelines - accessed on <http://www.nzrc.org.nz>
- ◆ NZRC (2014). Standards for resuscitation clinical practice and education, 1-23.



Lippincott Procedures- NZRC guidelines