

Resuscitation Training Policy

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POLICY

Resuscitation Training Policy

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Rationale: The aim of this policy is to determine the resuscitation training requirements of all staff members within UCLH. This policy reflects the Trust's commitment to developing the personal potential of all employees, by ensuring the development of appropriate expertise knowledge and skills to perform effective resuscitation within their work places. Certain staff groups have a duty to be able to perform basic and/or advanced life support skills competently and relevant to their speciality. Patients and their relatives have a reasonable expectation that staff caring for them can respond appropriately and adequately to common clinical emergencies which may arise in the normal course of their daily activities. Responsibility for continuous professional development lies with the individual employee, and their Ward Sister/Charge Nurse, or Departmental Manager. It is the responsibility of the individual employee and their line manager, to maintain up to date records of training and attendance. Staff have a personal responsibility to be able to effectively deploy and safely use resuscitation equipment located in their work environments. All cardiac arrest team members should be competent, proficient and current in the delivery of advanced life support using national protocols relevant to the patients they may have to care for. The Resuscitation Service will maintain an up to date database of every individual it has trained.

Location: Trust wide

Scope: The operation of this policy applies to all staff members working within UCLH NHS Trust. This policy covers training in basic and advanced resuscitation skills.

Exclusions: None

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Training provided by the resuscitation training service

- The resuscitation service shall provide training for specified staff internally
- The training provided internally will be as follows
 - Basic Life Support & Automatic External Defibrillation
 - Manual Defibrillation
 - LMA insertion
 - Immediate Life Support provider courses
 - Advanced Life Support provider courses
 - Paediatric Basic Life Support
 - Paediatric Life Support (ALSG recognised courses)
 - Obstetric basic life support
 - Internal training in resuscitation teaching techniques
- Training in the following will be resourced externally of the Resuscitation Training Service until such time as it can be provided within the Trust.
 - Advance Paediatric Life Support (ALSG recognised course)
 - Neonatal Life Support provider course
 - Major Incident Medical Management (ALSG recognised course)
 - Generic Instructor Course
- Internal training shall be provided by qualified instructors in their specialty
- Training sessions will be provided using current resuscitation education

best practice guidelines

- The student, instructor ratio shall not exceed 12:1
- Training will be delivered in a venue which is of suitable size
- The equipment used during training shall be the same as that found in the clinical areas wherever possible
- Programmes will be based on national & international resuscitation practice guidelines

Mandatory Training Requirements:

- Appendix A of this document details the mandatory requirement for training of specific staff groups in specific area of resuscitation practice.
- Resuscitation training which is required of staff must be updated on a yearly basis
- It remains the responsibility of the ward/department manager to ensure their staff have had the appropriate training
- Certain groups of staff will be required to undergo advanced training on a yearly basis and this is also listed in appendix A
- The Trust must ensure that sub contractors to the Trust where appropriate have ensured their staff have had appropriate training before allowing those staff to work within the Trust.
- Medical and nursing students should have undergone resuscitation training appropriate to their level and area of work before being allowed to practice in the Trust.
- Regular liaison between the Education bodies and the Trust should occur to ensure that training delivered outside the Trust is appropriate
- Any person who hold a valid resuscitation instructor certificate will be exempt from the requirement to attend annual training in the discipline that they hold the instructor certificate
- Any person who has attended an Immediate or Advanced course outside the Trust which is less than 12 months old will be exempt from the requirement to attend annual training in that discipline on providing a copy of that certificate to the Resuscitation Service. They remain exempt until one year has lapsed from the date of issue of that certificate at which time they must attend the required training.

Non-mandatory training

- The Resuscitation Service will provide a limited number of training programmes for staff groups not listed in appendix A if possible dependant upon resources
- These training programmes will comprise Basic Life Support and AED use
- Where possible all staff working in the Trust are encouraged to attend a Basic Life Support session
- Priority will always be given to those staff groups where attendance is mandatory
- Staff who are designated first aiders are particularly encouraged to attend Basic Life Support and AED training
- The Resuscitation Service will keep records of those staff not required to attend but who attend a training programme

Induction

- Staff listed in appendix A of this document who are starting work for the Trust will receive appropriate training in resuscitation at induction
- Staff not listed in appendix A will be exempt from attendance at Basic Life Support training at the corporate induction programme
- The training provided at induction will be monitored and supervised by the Resuscitation Service
- The instructor student ratio will not exceed 1 instructor to 12 students at anytime
- Appropriate facilities for training to occur will be agreed between the Senior Resuscitation Officer and the Training Department.
- Both the Resuscitation Service and the Training Department will keep records of attendance

Training Resources

- The Trust will ensure that suitable facilities are available in which to train staff in all aspects of resuscitation
- Equipment used in training will be the same as that found in clinical areas
- Adequate and suitable manikins will be available to provide realistic scenarios for staff undergoing training
- A minimum of 1 instructor to 12 students will be maintained except for advanced life support provider courses where the ration will be 1 instructor to 3 students
- The Trust will provide one resuscitation officer per 300 beds
- The Trust will provide a resuscitation officer whose specific role is paediatrics and neonates.
- The Resuscitation Service will utilise some of its income to resource external course for staff.
- Dedicated monies will be available for the Resuscitation Training Service to maintain, upgrade and purchase new equipment for training, this funding may come from the income generation activities of the Resuscitation Service

Cascade Training

- The Resuscitation Service will facilitate a programme of training at local level.
- Trainers in each directorate will be identified, trained, equipped and accredited to train others in their directorate in resuscitation techniques by the Resuscitation Service
- Any training undertaken by cascade trainers will be documented and centrally collected by the Resuscitation Training Service
- Cascade trainers will hold a minimum of ALS or ILS provider status if teaching adult resuscitation techniques, a minimum of APLS, PALS or PLS status if teaching paediatric resuscitation techniques and a minimum of NLS if teaching neonatal resuscitation
- Cascade trainers will attend an instructor study day provided by the Resuscitation Service prior to commencing training others
- Cascade trainers will be assessed by one of the resuscitation officers during 2 teaching sessions and may be reassessed at any time without prior notice
- Cascade trainers will attend one study day per annum provided by the

Resuscitation Service

- Cascade trainers will be able to issue certificates of attendance and competence in basic resuscitation techniques to attendees of their training sessions, these certificates will be provided by the Resuscitation Training Service
- Cascade trainers will be allocated time off from their normal duties to undertake training, this time will be agreed with their ward/department manager.

Advanced Resuscitation Training

- Medical practitioners registered with the GMC working in acute settings should ideally have adult or paediatric advanced life support training¹ as appropriate to their speciality
- All Registrars who hold cardiac arrest bleeps should ideally have adult or paediatric advanced life support training as appropriate to their speciality
- All nurses who are part of a cardiac arrest team should ideally have as a minimum an Immediate Life Support provider course and/or Paediatric Life Support Provider course as appropriate to the team they are part of.
- All anaesthetists who form part of the cardiac arrest team should ideally have adult and/or paediatric advanced life support training as appropriate
- Advanced resuscitation training will be supplied by the Resuscitation Service either within the Trust or resourced externally
- Possession of certification of advance life support training should ideally become a mandatory requirement for middle grade medical practitioners leading arrest teams within the Trust
- Staff who attend advanced training which includes basic life support will have that session counted as their annual basic life support update

Administration

- The Resuscitation Service will be responsible for all booking onto resuscitation training programmes with the exception of the corporate induction programme
- Booking onto training programmes must be in writing signed by the department/ward manager
- Confirmation of booking will be notified to individuals in writing
- Lists of persons booked onto internal training courses, with the exception of the Advanced Life Support provider course, will be available to all staff with access to public folders
- Non-attendance without sufficient notification at a training programme will incur a charge levied at source from the departmental/ward budget where the member of staff is based
- Non-attendance will be notified to individual's department/ward manager and be displayed on public folders
- Details of the charges to be levied are contained in Appendix B
- The trust will ensure that the Resuscitation Service has adequate administrative support to facilitate training programmes
- The Resuscitation Service will maintain an up to date database of every individual it has trained.
- The Resuscitation Service will present bimonthly reports of training activity to the resuscitation committee
- The Resuscitation Service will attempt to notify staff who have attended

training sessions in writing that they are due to attend further training 11 months from the date of their training session

- The Resuscitation Service will keep copies of all attendance registers for a period of 3 years

Assessment

- All individuals will be formally assessed in their resuscitation skills at the time of teaching
- An assessment form will be completed for every individual who undertakes resuscitation training
- Every individual will need to meet the standards set by the Resuscitation Service which are based on national and international resuscitation guidelines before being issued with a certificate of competence
- Certificates of competence will be valid for 1 year from the date of issue with the exception of the Advanced Life Support Provider certificate which is valid for 3 years, the Advanced Paediatric Life support certificate which is valid for 4 years and the Paediatric Advanced Life Support certificate which is valid for 3 years
- Any resuscitation officer may request an individual to attend retraining at anytime following the investigation of an adverse resuscitation incident where it was proved that the response to a cardiac arrest failed to follow local or national protocols and that patient care and outcome may have been compromised
- Any resuscitation officer may request an individual to attend retraining at anytime where they personally witness a response to a cardiac arrest that failed to follow local or national protocols and that patient care and outcome may have been compromised
- Where a resuscitation officer requests an individual to attend retraining they must attend a training session within 4 weeks of the request being made
- Any request for retraining will be made in writing to the individual and a copy sent to their line manager
- Individuals who fail to meet the required standard will be given counseling and must attend a further training session within 4 weeks of failing to achieve the required standard
- If an individual fails to achieve the required standard following a second training session intensive individual training will be provided by the Resuscitation Service and the individual reassessed
- If following intensive training the individual again fails to meet the required standard the Senior Resuscitation Officer in conjunction with the individuals line manager and Human Resources will determine the appropriate course of action. This might include:
 - Further training
 - Ensuring appropriate supervision whilst involved in patient care
 - Identification of learning objectives and strategies to achieve them
 - Removal from the cardiac arrest team if appropriate
 - Restriction of clinical duties
- The Resuscitation Service shall keep all assessment forms for a period of 2 years
- All assessment will be based on national and international resuscitation guidelines and will reflect current best practice

Defibrillation

- Healthcare providers with a duty to perform CPR should be trained, equipped and authorised to perform defibrillation using an Automatic External Defibrillator (AED)²
- Basic Life Support training shall include training in the use of AEDs
- All individuals will be formally assessed in their use of AEDs at the time of teaching
- An assessment form will be completed for every individual who undertakes resuscitation training
- Every individual will need to meet the standards set by the Resuscitation Service in the use of AEDs which are based on national and international resuscitation guidelines before being issued with a certificate of competence
- Individuals who fail to meet the required standard will be given counseling and must attend a further training session within 4 weeks of failing to achieve the required standard
- If an individual fails to achieve the required standard following a second training session intensive individual training will be provided by the Resuscitation Service and the individual reassessed
- If following intensive training the individual again fails to meet the required standard the Senior Resuscitation Officer in conjunction with the individuals line manager and Human Resources will determine the appropriate course of action. This might include:
 - Further training
 - Ensuring appropriate supervision whilst involved in patient care
 - Identification of learning objectives and strategies to achieve them
 - Removal from the cardiac arrest team if appropriate
 - Restriction of clinical duties
- Advanced and Immediate Life Support courses will provide training in the use of both AEDs and manual defibrillators
- Any person who hold a current valid Immediate Life Support certificate including manual defibrillation is authorised to use either an AED or manual defibrillator with in the Trust
- Any person who hold a current valid Advanced Life Support certificate including manual defibrillation is authorised to use either an AED or manual defibrillator with in the Trust
- Holders of Advanced Life Support providers are encouraged to attend an annual update of their defibrillation skills and sessions will be provided by the Resuscitation Service to accommodate this
- Any person holding an current adult or paediatric advanced life support instructor certificate is authorised to use either an AED or manual defibrillator without the need for any formal assessment
- Any resuscitation officer may request an individual to attend retraining at anytime following the investigation of an adverse resuscitation incident where it was proved that defibrillation failed to follow local or national protocols and that patient care and outcome may have been compromised
- Any resuscitation officer may request an individual to attend retraining at anytime where they personally witness defibrillation that failed to follow local or national protocols and that patient care and outcome may have been compromised

- Where a resuscitation officer requests an individual to attend retraining they must attend a training session within 4 weeks of the request being made
- Any request for retraining will be made in writing to the individual and a copy sent to their line manager
- Only individuals who hold a certificate of competence, a valid current Immediate or Advanced Life Support certificate are authorised to use defibrillators within the Trust
- The Resuscitation Service will hold a list of those individuals trained and authorised to use defibrillators within the Trust.
- Any person who has attended an Immediate or Advanced course outside the Trust in will be authorised to use defibrillators on providing a copy of that certificate to the Resuscitation Service.

Audit and Evaluation

- Training programmes managed by the Resuscitation Service will be formally evaluated by participants
- Training programmes may be altered in response to the evaluations received
- The Resuscitation Service will review programmes to ensure that they are current, evidence based and educationally sound
- Data obtained from clinical cardiac arrests will be used to identify training needs
- Data obtained from mock cardiac arrests will be used to identify training needs
- The Resuscitation Service will undertake audit of training programmes on a periodic basis
- Evaluation forms will be retained by the Resuscitation Service for 3 years

Mandatory Training Requirements

- The following groups of staff are required to attend adult basic life support training on an annual basis
 - Medical practitioners of all disciplines and seniority registered with the GMC (regardless of clinical duties)
 - All nurses registered with the NMC (regardless of clinical duties)
 - All midwives registered with the NMC (regardless of clinical duties)
 - All Allied Health Professionals as follows:
 - ◆ Operating Department Practitioners
 - ◆ Physiotherapists
 - ◆ Occupational therapists
 - ◆ Radiographers
 - ◆ Cardiac Technicians
 - Health care support workers (including TSA and phlebotomists)
 - Adaptation nurses awaiting registration with the NMC
- The following groups of staff are required to attend paediatric basic life support training on an annual basis if their clinical duties entail significant exposure to patients under the age of 12 years old
 - Medical practitioners of all disciplines and seniority registered with the GMC (regardless of clinical duties)
 - All nurses registered with the NMC (regardless of clinical duties)
 - All midwives registered with the NMC (regardless of clinical duties)
 - All Allied Health Professionals as follows:
 - ◆ Operating Department Practitioners
 - ◆ Physiotherapists
 - ◆ Occupational therapists
 - ◆ Radiographers
 - Health care support workers
 - nurses awaiting registration with the NMC
 - Members of the adult cardiac arrest teams at the Heart Hospital, the National Hospital for Neurology and Neurosurgery and the Royal London Homeopathic Hospital
- The following groups of staff are required to attend neonatal life support training on an annual basis if their clinical duties entail significant exposure to newborn infants
 - Medical practitioners of all disciplines and seniority registered with the GMC (regardless of clinical duties)
 - All nurses registered with the NMC (regardless of clinical duties)
 - All midwives registered with the NMC (regardless of clinical duties)
 - All Allied Health Professionals as follows:
 - ◆ Operating Department Practitioners
 - ◆ Physiotherapists
 - ◆ Occupational therapists
 - ◆ Radiographers
 - Health care support workers
 - nurses awaiting registration with the NMC

Training for Cardiac Arrest Team Members

- All registrars and SpR's working who are part of the cardiac arrest team will should ideally hold a current ALS provider certificate or have attended adult advance life support training within 6 weeks of starting work within

Appendix A

UCLH NHS Trust.

- All registrars or SpR's working who are part of the cardiac arrest team holding a valid ALS provider certificate more than 12 months old should ideally have attended adult advanced life support training within 6 weeks of starting work within UCLH NHS Trust.
- All paediatric registrars and SpR's who are part of the cardiac arrest team should ideally hold a current PALS or APLS provider or instructor certificate or have attended paediatric advanced life support training within 6 weeks of starting work within UCLH NHS Trust.
- All paediatric registrars or SpR's who are part of the cardiac arrest team holding a valid PALS or APLS provider certificate more than 12 months old should ideally have attended paediatric advanced life support training within 6 weeks of starting work within UCLH NHS Trust.
- Anaesthetic Registrar and SHO: Any anaesthetist attending a cardiac arrest call should be competent in the management of the airway. It is anticipated that training in the management of airways will be given by the anaesthetic department and in the course of each anaesthetist's employment within the Trust. Ideally anaesthetists should hold a valid ALS and/or PALS or APLS provider certificate.
- Medical SHO: The medical SHO will generally operate in a supporting role to the Medical registrar during any cardiac arrest. They will be expected to be able to gain IV access, take bloods, and administer drugs among many other tasks during a cardiac arrest. They should ideally hold a valid ILS or ALS provider. If they do not hold a provider certificate or it is more than 12 months old then they should ideally attend an advanced life support update within 6 weeks of starting work within the trust and annually thereafter for the duration of their employment with the Trust.
- Site manager: The site manager may have a variety of roles during a cardiac arrest and is often the first person to arrive. They should ideally hold a valid ILS or ALS provider certificate. If they do not hold a provider certificate or it is more than 12 months old then they should ideally attend an advanced life support update within 6 weeks of starting work within the trust and annually thereafter for the duration of their employment with the Trust. Additionally they may respond to paediatric emergencies and should hold a current PLS, APLS or PALS certificate.
- Outreach Nurse: The outreach nurse should be skilled in critical care nursing and may have a variety of roles during a cardiac arrest and is often the first person to arrive. They should hold a valid ILS or ALS provider certificate. If they do not hold a provider certificate or it is more than 12 months old then they should attend an advanced life support update within 6 weeks of starting work within the trust and annually thereafter for the duration of their employment with the Trust. Additionally they may respond to paediatric emergencies and should hold a current PLS, APLS or PALS certificate.
- Other members of the adult cardiac arrest team: Each member of the team will have specific tasks to perform including chest compressions, the drawing up and administration of medications, dealing with relatives and many other tasks. These people will hold a valid immediate or advanced life support provider course certificate. If appropriate they should also have had paediatric basic life support training.

Appendix B

Details of charges levied for non-attendance at resuscitation training programmes

The Department of participants who do not cancel their allocation by one week prior to the session, and fail to attend will be subject to a charge.

This will be as follows:

- **£100 per ILS or PALS course**
- **£75 per C & V session**
- **£60 per basic session or other session**

Except in extreme cases of illness etc., in this instance the authorising manager should inform the resuscitation training service of the non-attendance. Should this not be done a charge will still be incurred. Shortage of staff does not count as a valid reason as managers should make allowance for study leave.

References

¹ Resuscitation Council (UK) (2001) CPR guidance for clinical practice and training in hospitals Resuscitation Council (UK), London

² Resuscitation Council (UK) & European Resuscitation Council (2000) Advanced Life Support Course Provider Manual 4th edition Resuscitation Council (UK) & European Resuscitation Council, London

Bibliography:

American Heart Association/International liaison Committee on Resuscitation (2000) Guidelines 2000 for Cardiopulmonary Resuscitation and Emergency Care, An International Consensus on Science Resuscitation 46; 1 – 448

The Association of Resuscitation Training Officers (1993) Standards in Resuscitation Training for Hospital Staff Association of Resuscitation Training Officers, Manchester

Chell A (2000) Resuscitation a guide for nurses Churchill Livingstone, London

Crunden E (1991) An Investigation as to why qualified nurses inappropriately describe their own cardiopulmonary resuscitation skills Journal of Advanced Nursing Vol 16

Kaye et al (1989) Retention of cardiopulmonary resuscitation skills by physicians, registered nurses and the general public Critical Care Medicine Vol 14

Marteau et al (1989) Cognitive factors in the exploration of the mismatch between confidence and competence in performing basic life support Psychology and Health Vol 3

The NHS Executive (1997) Service standards for emergency medical admissions Department of Health, London

The NHS Litigation Authority (2000) Clinical negligence scheme for trusts clinical risk management standards NHS Litigation Authority, London

Pottle A & Brant S (2000) Does resuscitation training affect outcome from cardiac arrest? Accident & Emergency Nursing, Vol 8, pp 46 -51

Resuscitation Council (UK) (2000) Resuscitation Guidelines 2000 Resuscitation Council (UK), London

Resuscitation Council (UK) & European Resuscitation Council (2000) Advanced Life Support Course Provider Manual 4th edition Resuscitation Council (UK) & European Resuscitation Council, London

Resuscitation Council (UK) (2001) CPR Guidance for clinical practice and training in hospitals Resuscitation Council (UK), London

Royal College of Anaesthetists (1999) Guidelines for the provision of anaesthetic services: Anaesthetic practice in respect of resuscitation Royal College of Anaesthetists, London

Royal College of Physicians (1987) Resuscitation from cardiopulmonary arrest, training and organisation Royal College of Physicians, London

Stokes B (1997) Setting the record straight Nursing Standard Vol 11 No 41

United Kingdom Central Council for Nurses, Midwifery, and Health Visiting (1992) The code of professional conduct United Kingdom Central Council for Nurses, Midwifery, and Health Visiting, London

United Kingdom Central Council for Nurses, Midwifery, and Health Visiting (1992) The scope of professional conduct United Kingdom Central Council for Nurses, Midwifery, and Health Visiting, London

United Kingdom Central Council for Nurses, Midwifery, and Health Visiting (1996) Guidelines for professional practice United Kingdom Central Council for Nurses, Midwifery, and Health Visiting, London

United Kingdom Central Council for Nurses, Midwifery, and Health Visiting (1998) Guidelines for records and record keeping United Kingdom Central Council for Nurses, Midwifery, and Health Visiting, London