



STANDARD OPERATING PROCEDURE

MANAGEMENT OF MEDICAL EMERGENCIES – NON-CLINICAL STAFF

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| AUTHOR. | AUTHORISED BY | DATE AUTH | RISK MANAGEMENT PROCEDURE NUMBER |
| NAME | NAME | 16-10-2023 | LCRF-SOP-11 |
| Jacqueline Bramley, LCRF Lead | Dr Dennis Hadjiyiannakis LCRF Medical Director | | |
| SIGNATURE | SIGNATURE | REVIEW DATE | |
|  |  | 16-10-2025 | |

RESEARCH AND DEVELOPMENT



BACKGROUND

The NIHR Lancashire Clinical Research Facility (LCRF) is a dedicated facility for researchers to conduct clinical research. Researchers may carry out early phased research of an experimental nature which could potentially carry clinical risks.

There is a risk that patients may deteriorate whilst in the facility or have a cardiac arrest and non-clinical staff play an important role in the smooth running of an emergency situation.

PURPOSE/OBJECTIVE

It is important that all non-clinical staff working within the LCRF understand their role in an emergency situation. It is also important for clinical staff to understand this to allow for appropriate delegation of roles.

SCOPE

This SOP applies to all non-clinical staff working within the LCRF. It is good practice for all staff to have an awareness of this SOP.

PROCEDURE

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1. WHO?

It is the responsibility of all LCRF non-clinical staff to:

- Have read and understood this SOP.
- Have read and understood documents related to the topic as specified in the SOP.
- Follow the procedures in the SOP.
- Maintain and update their knowledge and skills in the management of medical emergencies.

Lead of emergency situation

It is the responsibility of the most competent clinical member of staff in attendance to lead the emergency situation and to delegate roles to both clinical and non-clinical staff.

All other employees

All employees must read and understand this SOP to gain a good understanding of what is expected of them and other team members during an emergency situation.

2. WHEN?

This procedure must be followed when a medical emergency has been identified.

3. HOW?

- If a non-clinical member of staff is the first on scene of the medical emergency, the alarm must be raised, and if trained, start basic life support until clinical support arrives. Staff must review the current version of the LCRF alarm guidance.
- Upon hearing the emergency alarm all available clinical and non-clinical staff must attend. The location of the incident will be highlighted via the illuminated light outside of the room or on the control panel behind the reception desk. The non-clinical staff member must make themselves known to the clinical lead and ask, "how can I help?" before awaiting further instruction.
- A member of staff must contact the resus team by phoning 2222 and stating, "ADULT or PAEDIATRIC CARDIAC ARREST, RESEARCH FACILITY, AVONDALE UNIT" and then repeat it for clarity. This could be delegated to non-clinical staff; therefore, all staff should be aware of what needs to be said over the phone.
- non-clinical staff must hold open the entrance door to the LCRF and help guide the resus team to the LCRF.
- If there are enough clinical staff to manage the emergency situation, a non-clinical member of staff can locate themselves in specific guidance points within the trust. These guidance points are.
 - 1)at the top of the stairs on the link corridor
 - 2)on the corridor between LCRF staff entrance and LCRF entrance.
- Non-clinical staff should remain on hand to help with duties such as shutting patient doors, obtaining the privacy screen, supporting relatives and any other delegated duties that is

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within their scope of practice, this includes having the opportunity to work alongside clinical staff to deliver basic life support if adequately trained.

Training

non-clinical staff should attend Basic Life Support (BLS) training and to have read & understood the LCRF_SOP_02 Management of Medical Emergencies & LCRF SOP 04 Management of an Unwell Participant. All non-clinical staff must follow the LTHTr matrix training guidelines for BLS. There are E-learning modules and practical sessions which you can attend, please contact LCRF resus lead for further information.

4. Other Related Procedures and Documents reviewed and to be reviewed.

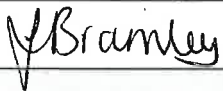


The documents listed below were reviewed in the writing of this SOP. However, as they are amended regularly, all staff should continue to review the latest versions as they are published.

| Location of document | Title of Document |
|----------------------|--|
| LTHTR Policy | Trust standard P284 - The Resuscitation Policy |
| LTHTR Policy | Trust standard P178 -Transfer of Patients Common Core Document Including Adults, Women's and Child Health RMP-C-116, |
| LCRF Document | Nurse Call Alarm Guidance |
| UK Guidelines | Resuscitation Council (UK) Guidelines |

CONSULTATION WITH STAFF AND PATIENTS

| Name | Role |
|-----------------------------------|--|
| Kelly Fielding | Resus Lead LTHTR |
| LCRF Resus Safety Group | Safety Consultation Group |
| LCRF Operational Management Board | Ratify SOP's operationally |
| Dennis Hadjiyiannakis | LCRF Medical Director |
| Jacqueline Bramley | Head of clinical research operations / LCRF Lead |
| Rebecca Wilby | Research Access Project Manager / QA Lead |

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| Lead Author: | | | |
| Name and Position | Jacqueline Bramley, LCRF Lead | | |
| Signature |  | Date | 16-10-2023 |
| Reviewed and approved by: | | | |
| Name and Position | Dr Dennis Hadjiyiannakis, On behalf of LCRF Operational Management Group | | |
| Signature |  | Date | 16-10-2023 |
| Authorised for release by: | | | |
| Name and Position | Rebecca Wilby, Research Access Project Manager / Quality Assurance Lead | | |
| Signature |  | Date | 16-10-2023 |

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