

Governance

You are implementing a project involving medical equipment which is designed to save a life, if used correctly. Most Ambulance services will insist on proof of some form of Governance to ensure that the equipment is maintained correctly; is ready for action 99.99% of the time; meets the various liability and other requirements; and will protect the end users.



Defibrillator - Is this a make of defibrillator that can be supported by the local ambulance service? The reason for this is to be able to download clinical data after the rescue in order to complete the *duty of care*.

Cabinet - Does your cabinet, or other storage facility, meet Health and Safety requirements? Does it meet disability requirements? Does it meet other requirements for public use? Does it carry the internationally recognised defibrillator symbology? Is the storage water and dirt resistant in its end user state (ie in its place of use) – thus it must be IP65 and certified. Have you appropriate mechanisms to direct rescuers to the defibrillator site? Is it highly visible (ie Hi Visibility colour and location)? Are all components serial numbered in case of a Coroner enquiry? Is it compliant to BS standards? Is it IP certified?



Data protection – in a community or office situation, your defib will hold clinical data that can be identified to the patient. What process have you in place for data protection, or to meet Caldecott protocols? How will you transfer this data to the hospital to fulfill your 'duty of care' and yet remain data compliant?

Have you a regular checking and management system in place that is Ambulance service agreed (eg WebNos)? Ie can the Service see the records at any time to ensure them that the defibrillator is ready for use, and available in a rescue? Failure to have this in place may mean that it cannot be activated by the ambulance service.



Do you have full and comprehensive records of the defibrillator and its storage solution, where all work; maintenance; supplies and servicing is stored and available on request? This must include initial fitting of the defibrillator cabinet; records of any electrical work; safety requirements; confirmation it has been registered; and who are the staff responsible to manage the equipment, with their contact details. Can this system supply regular reports? This is stored onto the WebNos system if a CHT project.

If a locked cabinet, do the key codes match the local ambulance service requirements for standardisation? Are the locks used marine grade Stainless Steel to reduce possibility of jamming? Is the cabinet ISO9002 manufactured?

What is the activation protocol for the defibrillator? Is this recorded and process agreed with all stakeholders? Is there a mechanism in place to notify the scheme coordinators that the defib has been used? What 'downtime' has been agreed before re-commissioning? Do you have an MoU in place with the local ambulance service?



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Post use, what protocols do you have in place to not only re-commission the defibrillator, but also to let all stakeholders know the defibrillator is ready for action again?

Recommissioning checklist :

- ✓ Replacement electrodes?
- ✓ Defibrillator cleaning/sterilisation?
- ✓ Replacement ready/rescue kits?
- ✓ Tested and operational?
- ✓ Returned to cabinet?
- ✓ Cabinet tested to make sure it is functional?
- ✓ Ambulance service notified?



Do you have evidence that the cabinet used has been mounted in accordance with the requirements for Health and Safety and also meeting disability legislation? ie no more than 1.3m from ground. Are the fixing bolts strong enough so that someone can climb on, or hang from, the storage cabinet and not pull from the wall?

Notification to the ambulance services – have you registered this site and all the required information concerning this with your local ambulance service (CHT will do this automatically with partner communities)? Have you evidence this has been registered and available for activation in an emergency? (Registration on web based mapping programmes is NOT registering it to be available in an emergency, despite what claims are being made). What mechanism have you in place to amend the details when they change?

Have you undertaken community awareness programmes so that your community is fully aware of the defibrillator, why it has been positioned in the community, how to activate in an emergency, who is responsible for this, and how to undertake basic CPR and use the defibrillator? Evidence should be provided by the community, and a record kept, of a public awareness session/training for as many people as possible in the community.

Replacement equipment – what mechanism do you have in place to replace the equipment if a fault occurs, or if the equipment is stolen or damaged, or taken by the ambulance crews? How do you plan to get this back? Have you planned for replacement equipment in 10 years time?

Do you have a servicing contract in place? (CHT has servicing contracts available). Does this just cover the defibrillator or your entire project? What about insurance? – equipment theft and damage, and public liability.



✓ Do it right and save a life
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