

Service Priorities and Programmes Electronic Presentations

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"Be ready for action, prepare for the worst" - Providing a Safe Environment to Patients

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Introduction

Patient's safety is of top priority in the course of healthcare delivery. As more than 600 number of in- and outpatient attendance exist in our Physiotherapy (PT) Department (the Department), patients with hidden cardiovascular risks may develop serious cardiac events during the course of PT interventions. Sudden cardiac arrest is one of the leading causes of death in Hong Kong. Early interventions, include cardiopulmonary resuscitation (CPR) +/- defibrillation, are required before the patient deteriorates to serious untoward outcomes. Hence, readiness and integrity of emergency-trolley and defibrillator and competent staff in handling of emergency situation are crucial.

Objectives

To enforce the emergency trolley and defibrillator's full compliance with the standards as stipulated by the Department of Quality and Safety (Q&S); and to ensure staff competency when handling emergency situations.

Methodology

Designated staff would be responsible for the regular maintenance and checking of the emergency-trolley and defibrillator. Clinical audit on readiness of emergency-trolley and related facilities would be performed by Q&S. Audit report was sent back to the PT Department afterwards. For the drill, it was conducted annually by Certified Basic (BLS) and Advanced Life Support (ALS) Instructors. Participants involved all staff members. CPR procedure would be revised through watching video, performing live demonstration and practising on Manikin Training Model. Basic operation of the defibrillator was taught. The hospital resuscitation protocols were revised so that each participant was familiar with the procedure and understood his/her role when handling emergency situations. Attendance record of all participants was kept and list of valid BLS and ALS holders would be updated annually.

Result

The Department fully compiled with the standards as stipulated, which included availability of staff training record and maintenance record for defibrillator and emergency-trolley, and staff competency on using defibrillator. From 2008 to 2012, a total of 645 staff participated the drill. 61% were professional staff and 39% were supporting staff. Return-demonstration on each step was satisfactory and all staff members understood their roles and responsibility when handling emergency situations. Conclusion It is our responsibility to provide a safe environment to patients. "Be ready for action, prepare for the worst" is our motto. These exercises not only have enhanced staff competency in handling emergency situations but also increased the alertness of staff to identify patients at risk.