

Optimising Responses to Emergency Situations in the Cardiac Catheterisation Laboratory

INTRODUCTION

Since the last progress report in March 2015, training has continued on a monthly basis. Training has included two types of scenario:

- Multiple complications, to develop teams' ability to manage complex, fast paced emergencies, including following processes, such as the emergency blood protocol.
- Slower paced scenarios, such as anaphylaxis, which included periods of teaching, to help staff understand the processes and roles/priorities of staff called to assist (eg. anaesthetists)

A further, larger scale exercise is still being planned; to simulate a pregnant inpatient, awaiting a cardiology procedure, who needs an emergency delivery. The planning process highlighted that trust paediatric cardiologists lack the skills to deliver a baby and so the scenario was postponed to allow the medical staff to attend courses at Chelsea and Westminster hospital. Once this is complete, planning will restart to coordinate the various wards, departments and medical staff at the Brompton and Chelsea and Westminster Hospital.

FEEDBACK

Question	Ave Score/5
How would you rate the session overall?	4.5
Did you enjoy it?	4.7
Did you learn something about your role in an emergency?	4.4
Are you more confident in managing an emergency	4.4
Do you think this will improve teamwork?	4.6
Do you think we should run it regularly? (1/0)	1

n=38 responses

OUTPUTS

- 6 training sessions have been run since March 2015, covering cardiology complications in interventional, paediatric and electrophysiology.
 - (There is no training day in August or December and training was cancelled in October due mandatory staff attendance at a lecture)
- 82 staff members have attended training (several more than once)

PROJECT END

The PSC funding has allowed the Trust to purchase the equipment needed to deliver simulation training indefinitely and the project manager has ensured that the training now has a dedicated slot, for which service managers release staff and there is a committed pool of consultant cardiologists who provide the medical input. This means that the training will continue indefinitely, with the ambition to train all cath lab staff at least once per year.