

To: All Operational Staff

Date: February 2022

Document number: OI 216

## **Replacing essential faulty equipment whilst attending a patient**

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This operational instruction follows a serious incident regarding a faulty pulse oximeter. If it was working, the patient would likely have been conveyed rather than discharged on scene. The crew were unable to fully assess the patient as per the Covid risk assessment tool but didn't feel that replacing a minor piece of equipment was feasible and didn't feel empowered to ask for a replacement. You must request replacement equipment if it is vital to you undertaking a full patient assessment and informing an appropriate clinical decision.

### **Supporting you – What to do if a piece of equipment becomes faulty when treating a patient:**

There is a possibility that when treating a patient, a piece of equipment may develop a fault. If this should happen, and a piece of equipment becomes unusable during a patient assessment/treatment, then all reasonable steps must be taken to ensure that it does not compromise patient care or staff safety.

## OPS INSTRUCTION

Replacing essential faulty equipment whilst attending a patient, continued

If it is safe for the patient and clinician to continue delivering effective care with alternative appropriate equipment and an informed clinical decision is made, then treatment and assessment should continue. The crew should consider contacting Clinical Advice Line for support on this decision.

If they are unable to deliver effective and safe care to the patient without the faulty equipment, a member of the crew should be tasked by the lead clinician to contact the control centre and request one of the following:

1. That a LOM arranges the dispatch of replacement equipment to the incident by the quickest means possible ensuring minimal delay to patient care
2. A LOM/Manager is dispatched to deliver a spare piece of equipment to replace the faulty one
3. An additional resource is dispatched if it is unlikely the LOM will have access to replacement equipment or the response to the incident would be deemed excessive long.

Patient and staff safety should not be compromised, and consideration should be given to whether it is in the best interest of the patient to wait for replacement equipment or whether to transport to the nearest and most appropriate receiving destination

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**Authorised by:** ODSG 22/02/2022

**Review date:** Feb 2023