



VEHICLE BASED RESPONSE BAGS

Standard Operating Procedure

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1 Introduction

- 1.1 The Trust is committed to doing all that is reasonably practicable to reduce the risk of injury to its staff, particularly through manual handling of response bags.
- 1.2 This procedure has been developed following a review of provision of response bags within the trust and supports the management of risk associated with such bags. It replaces those previously issued in relation to provision and use of response bags and is provided to ensure that all operational staff are fully conversant with the appropriate use and storage of Vehicle Based Bags for the effective delivery of care and treatment of all patients.

2 Aim

- 2.1 To provide the best possible solution that balances manual handling, clinical, medicines and patient safety risks, in order to protect its staff and the public.

3 Objectives

- 3.1 To provide a consistent and safe response to patients
- 3.2 To reduce the risk associated with manual handling of response bags
- 3.3 To prevent response bags being overstocked and increasing weight
- 3.4 To provide a standard layout and content list regionally

4 Definition

4.1 First Response Bag

Response Bag containing equipment for the management of life threatening emergencies

4.2 ALS Bag

Advanced Life Support Bag

4.3 Response bags

Both First Response bag and ALS bag

4.4 EOC

Emergency Operations Centre

4.5 RRV

Rapid Response Vehicle

5 Accountabilities and Responsibilities

- 5.1 The **Trust Board** is responsible for ensuring adequate finance and resources are available for the provision of appropriate bags, equipment and consumables.
- 5.2 The **Operational Management Team** are responsible for:
 - 5.2.1 Approving the contents of clinical equipment provided in response to incidents
 - 5.2.2 Agreeing the expected 'minimum response' to be taken to a patient, in order to ensure patient safety (E.g. contents of first response bag / defibrillator)
 - 5.2.3 Monitoring clinical effectiveness of this procedure
- 5.3 The **Health, Safety and Risk Committee** are responsible for:
 - 5.3.1 Reviewing and approving risk assessments and proposed actions in relation to response bags, particularly manual handling / ergonomic issues.
 - 5.3.2 Monitoring the health and safety effectiveness of this procedure
- 5.4 The **Emergency Services Director** is responsible for:
 - 5.4.1 Ensuring the effective implementation and communication of this procedure.
 - 5.4.2 Ensuring random contents / weight checks take place by Trust Managers and where bags are found to be overstocked / overweight appropriate action is taken.
 - 5.4.3 Ensuring this procedure is reviewed and amended appropriately.
- 5.5 All **Area Managers and Ambulance Support Officers** are responsible for:
 - 5.5.1 Supporting the implementation, management and monitoring of this procedure
 - 5.5.2 Ensuring random contents / weight checks are undertaken and where bags are found to be overstocked / overweight appropriate action is taken
 - 5.5.3 Ensuring all staff within their area of responsibility are aware of this procedure and have completed an acknowledgement of procedure

receipt form (See Appendix 5). Records should be held centrally for each Division.

5.5.4 Ensuring they maintain a local record of optional shoulder straps provided to staff.

5.6 All **Emergency Staff** are responsible for:

5.6.1 Ensuring that they operate in accordance with this procedure.

5.6.2 Complying with the content of the agreed content list and ensuring agreed levels are not exceeded (Overstocking places individual staff and colleagues at increased risk of injury).

5.6.3 Applying safe handling techniques at all times in accordance with training.

6 A Standardised Approach

6.1 The Trust intends to ensure response bags are regionally standardised in order to:

6.1.1 Reduce stress to staff by ensuring a standard approach and layout of bags

6.1.2 Ensure resilience in response to major incidents

6.1.3 Provide continuity in approaches to clinical care to its patients

6.1.4 Manage its assets effectively, providing a system that can rapidly respond to product / medicine recalls

6.1.5 Ensure compliance with legislative and regulatory requirements for management of medicines

6.3 All bags will be stocked in accordance with [the latest version of the load lists](#). The itemised list provides a maximum stock level.

6.4 Contents and Weights

6.4.1 It is imperative that the kit list is strictly adhered to at all times in order to ensure risks to staff and patients are minimised.

Providing the kit list is strictly adhered to, the weight of each bag when fully kitted is:

- First response bag – no more than 10.5 - 11 kg
- ALS bag – no more than 6 - 7 kg

7 Provision and Use of Response Bags

7.1 All Ambulances and Rapid Response Vehicles (including Officer Lease Cars) will be provided with both First Response and ALS bags.

7.2 Minimum First Response – The First Response Bag

7.2.1 It is the responsibility of individual clinicians to ensure that every patient has the equipment available for the management of life threatening conditions. The trust considers the first response bag and a defibrillator/shock box being the minimum equipment required in such circumstances.

7.2.2 The contents of the first response bag, is based on ensuring the initial management of life-threatening conditions, including:

- Cardiac/Respiratory Arrest
- Choking
- Anaphylaxis
- Asthma
- Cardiac conditions (including chest pain, LVF and bradycardia)
- Overdose, particularly opiate
- Hypoglycaemia
- Blood loss

This list is not exhaustive.

7.3 ALS Bag

7.3.1 The ALS contains advanced airway, advanced resuscitation drugs, fluids and IO kit.

7.4 Solo Workers

7.4.1 Solo workers are classed as:

- Single Staffed Ambulances
- Rapid Response Vehicles
- Managers (utilising lease cars)

7.4.2 Staff who are working as solo's will be expected to follow the minimum response as per 7.2

7.4.3 It is the decision of the individual solo practitioner if they wish to also carry the ALS bag.

7.4.4 The ALS bag must be taken to the patient by a solo responder who is backing up (under emergency conditions) another solo

responder already on scene, unless the solo responder on scene has informed the EOC that the ALS bag is not required.

7.5 Doubled Crewed Ambulances

7.5.1 Double crewed ambulances including RRV's when more than one member of staff is on the RRV (E.g. including a Paramedic student).

7.5.2 Staff who are working as double staffed crews will be expected to follow the minimum response as per 7.2

7.5.3 It is the practitioner's clinical decision (considering information received) if they choose to take the ALS bag to the patient.

7.6 Where it is identified that individual staff would benefit for the provision of the optional shoulder strap this should be requested through line management through submission of an Incident report form (ER 54). They will record the provision of the strap on the 'manager's assessment' of the ER 54 and maintain a local record of straps issued.

8 Handling Response Bag Guidance

8.1.1 Handling a response bag is an everyday activity of operational emergency staff. The trust is making every effort to reduce the risks associated with responder bag provision.

8.1.2 Staff should be constantly aware of the principles of safe handling of bags. Application of the principles of safe handling is an integral part of ambulance operations, for which training is provided to all staff.

8.1.3 Individual support and guidance on safe handling of inanimate loads, including response bags, can be provided by the Training and Education Team, through requests to your line manager. This supplements Manual Handling training that will have already been provided. Employees have responsibility for managing their own health and safety and should seek additional training assistance if required.

8.2 Preventing Injury From Responder Bags

8.2.1 Development of musculo-skeletal complaints are often not always solely attributed to related to work-related incidents in isolation.

8.2.2 The principles of maintaining good posture and safe handling techniques should be applied throughout everyday activities in order to reduce risks of injury. Normal 'wear and tear', posture and injuries, such as those received during falls can later contribute to the development of injury.

- 8.2.3** Nevertheless, the nature of ambulance work inevitably involves elements of manual handling requiring further ongoing needs to apply techniques safely.

8.3 Principles of Safer Handling

8.3.1 Principles of safer handling include;

- Complete dynamic risk assessments based on TILE principles (Task, Individual, Load and Environment)
 - Maintain a stable base with feet apart and leading foot in direction of travel
 - Maintain the natural curves of your spine
 - Avoid twisting
 - Keep close to the load
 - Bend knees and hips
 - Ensure you have a good hold of the bag
 - Keep elbows tucked in
- Keep abdominal muscles tight

8.3.2 When moving;

- Raise your head as you move, keeping shoulders relaxed
- Undertake smooth movements

8.3.3 Maintain posture:

- Attempt to maintain an upright position
- Avoid hunching shoulders
- Use strong thigh and buttock muscles to avoid bending your back

8.4 Reducing The Risks

8.4.1 To reduce the risks of handling responder bags include:

Task

- Avoid carrying on one shoulder, particularly when handling over distance this will affect posture, balance and stability
- Avoid twisting whilst handling – move your feet if turning
- When using the bag avoid stretching to reach contents
- When in confined spaces / on floor attempt to slide the bag rather than lift it
- Do not swing the bag in order to position the bag on your shoulder, particularly whilst removing the bag from a car – apply correct handling techniques
- Do not snatch / jerk the bag in order to move it

- Consider transporting the responder bag on the stretcher trolley, if this is likely to be taken directly to the scene (E.g. attending an incident a distance from the vehicle e.g. shopping centre)
- Share equipment carried to an incident with a colleague, if possible
- Share the handling and carrying of responder bags with a colleague throughout the day if working as a 2 person crew

8.4.2 Individual

- Ensure application of correct safe handling techniques at all times
- Select the most suitable option for carrying the bag, based on individual preference / comfort and the presenting circumstances (e.g. proximity of the incident / route to travel)
- Ensure the straps are correctly positioned and not twisted to avoid bruising
- Notify your manager if you are pregnant (in accordance with trust policy)
- Consider adjusting straps, if required, when wearing additional clothing / protection e.g. Hi-visibility jackets

8.4.3 Load

- Maintain contents of the bag in accordance with trust procedures
- Ensure contents are securely located and in the correct area to maintain correct distribution of weight
- Visually inspect for defects to reduce the likelihood of injury occurring as a result of damage
- Ensure straps are adjusted prior to use to suit the wearer / handler
- Keep the bag and straps clean – a natural reaction is keep things that are dirty away from us which is against safe handling principles
- Ensure the bag and its contents are secure before handling to prevent contents falling and changing weight distribution

8.4.4 Environment

- Clear obstacles in your path - Ask members of the public/bystanders to open doors for you
- Pay attention to your posture, particularly when working in confined spaces
- Consider the most appropriate carrying option when walking up steps / slopes / ramps
- Where circumstances permit use an available lift, rather than stairs

- Be aware of environments with slip, trip and fall hazards, as risks are increased when handling loads
- Where practicable ensure routes are well illuminated

8.4.5 Helping Yourself

- Ensure you maintain the expected level of fitness
- Avoid excess weight as it exerts a constant forward pull on your lower back and increases 'wear and tear' on joints
- If you feel that you have not received an adequate level of training in manual handling techniques:
- Request additional training from your line manager
- Take every opportunity to discuss manual handling techniques with Mentors, Clinical Development Officers or during formal training / CPD sessions

9 Maintaining serviceability of response bags

9.1 All staff are responsible for taking reasonable care of response bags.

9.2 Defects in equipment should be reported promptly to through line management processes.

9.3 Infection Prevention and Control

9.3.1 Bags should be cleaned in accordance with WMAS Trust Infection Prevention and Control procedures.

9.3.2 Where bags are considered heavily contaminated they should be disposed of as clinical waste and replaced.

10 Monitoring and effectiveness of this procedure

10.1 The effectiveness of this procedure will be monitored through incident reporting systems.

10.2 Clinical effectiveness and Health and Safety risk management will be monitored by the appropriate trust committee as described in 5.2 and 5.3

11 References and Bibliography

Manual Handling Operations Regulations 1992 (MHRO) (as amended 2002)
WMAS Safer Handling Policy
The Guide to Handling of People – Version 5

Appendix 1: Layout of First Response Bag

External Front View (Refer to Appendix 6 for full contents list)



Internal View – Back of Bag (Refer to Appendix 6 for full contents list)



Internal View – Centre Board (Contents side faces front of bag)

(Refer to Appendix 6 for full contents list)



Internal View - Back of Centre Board – BLANK



Internal View – Inside Front of Bag (Refer to Appendix 6 for full contents list)



Appendix 2: Layout of Advanced Life Support Bag

External View (refer to Appendix 6 for full contents list)



Outer pocket
Advanced Airway
(Blue)

Internal View – Inside of Bag (refer to Appendix 6 for full contents list)

Normal Saline
Pre-filled
syringes

iGels

Fluids



Cardiac
Arrest Drugs

IV
Paracetamol
1 x Giving Set

Appendix 3: Handling, Comfort and Safety

Options for handling



Top handle
(located approximately 55cm from floor level)

Side handle
(located approximately 38cm from floor level)

Shoulder strap (optional)
(If not in use ensure located in strap pocket)



Backpack straps
(With adjustable straps – Once adjusted – ensure excess from straps are folded and restrained)

Making adjustments for comfort and safety



Adjustment is provided by pulling the straps downwards, as per normal buckle principles. They are loosened in the normal manner, as per buckle use

There will always be risks associated with handling

- Be aware of the potential of straps and handles catching on furniture



Where provided the shoulder strap should be stowed in its strap pocket provided, if the handler selects not to use it



Shoulder straps, once adjusted, should have excess strapping bound together to prevent 'trailing' straps

Appendix 4: Guidance for Handling Response Bags

Handling responder bags

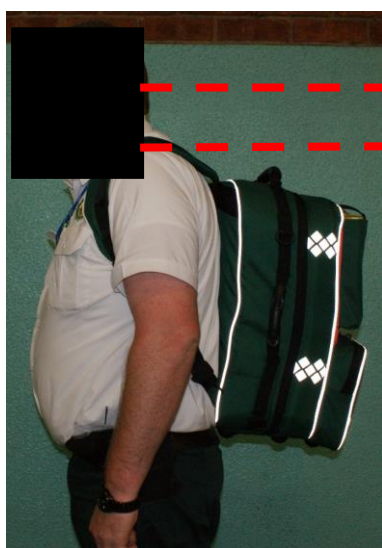
Using as a backpack

There are advantages to using the bag as a backpack, as it allows the weight to be located to the body's centre and frees the hands for other tasks such as carrying the defibrillator / opening and closing doors.

The use of both shoulder straps keeps the weight of the bag centred and avoids stress from the pendulum motion of swinging a bag.

Straps should be adjusted so that the backpack remains close to the body. The higher the bag is located up the back, the less loading / strain will be placed on the back (See figure 2)

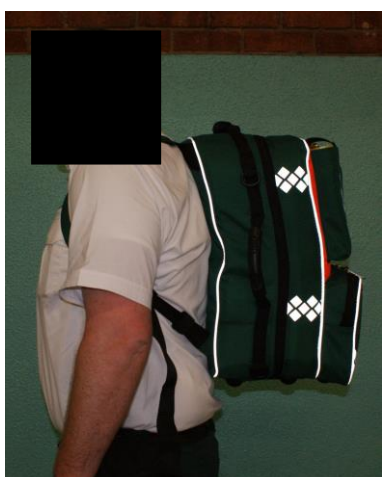
Figure 1



POOR PRACTICE

The bag has not been adjusted adequately. Therefore, not achieving reduced loading on the spine - Handler is leaning forward to compensate.

Figure 2



GOOD PRACTICE

The bag is located higher up the back, with less loading / strain on the spine

Figure 3



CAUTION

The adjustment straps should be adjusted equally to prevent unequal loading of the bag on the spine, causing twisting of spine

Putting the bag on as a backpack

Where possible place the bag on a surface at a suitable height to wear it as a backpack.

Although not ideal, the rear of a car / side step of a vehicle is a preferable height to floor level, as lifting and turning is more likely to cause injury from lifting and twisting.

Figure 4



Alignment of the spine is central

Allows arms to slide through and place on both shoulders

Figure 5

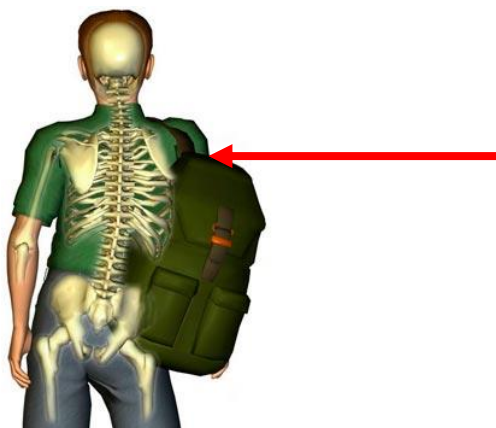


This position allows a good use of thigh muscles to power the lift

Avoiding the

or strap

Figure 6



CAUTION

A backpack being carried by one strap can cause disproportionate shift of loading in the spine, leading to neck and muscle spasm, as well as low back pain

Figure 7



Avoid swinging the bag as this involves twisting and can strain the shoulder

Avoid lateral twisting as movement causes compression strains

Slinging the bag over one shoulder leads to physical compensation due to lack of balance, as well as putting more weight on one shoulder

Potential risk of strain to lower arm muscles and further twisting of back and strain on shoulder

Figure 8



Lifting outside of the handlers 'base' can result in potential instability when lifting with an increasing the risk of loss of balance

Procedure

Acknowledgement of Procedural Receipt Form

I confirm that I have read and understood the following Standard Operating Procedure (SOP)

SOP Name: Management of Vehicle Based Response Bags.
Date: 13th December 2011 (date will vary according to each division)
Version no. Two f

I understand the requirements within this procedure for:

- Managing bags in accordance with the agreed contents list
- Ensuring that I do not overstock response bags
- Handling response bags by application of safe handling techniques received during training and with further guidance provided
- Maintaining and storing any personal issue optional shoulder strap
- My requirement to ensure that I keep up to date with subsequent changes to the version of this SOP or contents list of bags (As communicated through normal Trust procedures)

I have been provided with a copy of the WMAS First Response Bag and Advanced Life Support contents list

I have had the opportunity to clarify the instructions with my Line Manager.

Shoulder strap issued Yes / No Date: _____

Print Name (employee) _____

Station _____

Signed _____

Dated _____

Please refer to Trust intranet for 'live' copies of this SOP and contents lists.

Copies must be retained by Operational Managers