



Medical Emergency Policy, Guidelines & Framework

Current Version

Service Area	Disability, Aged, Community	Version	1.2
Process Owner	Governance Lead CEO COO	Date of Issue	May 2023
Approved by	Chief Executive Officer	Review	May 2025

Modification History

Version	Date	Author	Approved by	Description of change
1.0	5/2018	Natashia Telfer	Employsure	Broaden coverage across community
1.1	5/2021	Tahla Small	CEO	Additional resources added

In conjunction with:

- ALL National Policies

Contents

Clinical Care: Medical Emergency Policy	2
Death of a Client/Participant Policy in Community Setting	4



Clinical Care: Medical Emergency Policy

POLICY STATEMENT

National is committed to providing the best possible Emergency response care for client/participants. This policy is intended to direct staff in the case of a medical emergency, including cardiac arrest.

SCOPE

This policy applies to all employees

POLICY

Employee is responsible: Assess client/participant and situation, employees must take appropriate and immediate action to minimise the risk of further injury or damage to self and client/participant and administer first aid where appropriate.

- DRSABCD is the prime consideration for everyone involved in the care and treatment of medical emergencies. All staff should be aware of the importance of Danger, Response, Airway, Breathing, Circulation and Defibrillation.

Danger to yourself: don't put yourself in danger to others:
don't allow bystanders to be exposed to danger to
the client/participant: remove the danger
from the client/participant, or the client/participant from the danger

Response use the 'shake and shout' method is the
client/participant alert? is the
client/participant drowsy or confused? is the
client/participant unconscious, but reacting?
is the client/participant unconscious with no reaction?

Send for Help

If required contact the ambulance service by dialling 000. If unsure if an ambulance is required, call 000 and they will advise. Remain calm and provide adequate information to 000. Repeat address to confirm it is correctly recorded.

Airway is the airway open and
clear?
is there noisy breathing?
are there potential obstructions such as blood or false teeth?

Breathing

look to see if the chest rises
listen for the sound of
breathing
feel, by putting your hand on the diaphragm

Circulation is there a
carotid pulse?
is it strong? is it
regular? is there
major blood loss?



Defibrillation

*If the casualty is conscious, treat the injuries or illness according to the signs and symptoms.

*If the casualty is unconscious, and breathing spontaneously, place them in the recovery position, then treat any injuries.

If the patient/client/participant is unconscious, and not breathing, then commence CPR as required (i.e. Start CPR, 30 compressions, 2 breaths).

- Apply first aid or any other directive given to you over the phone by emergency services.
- Ensure client/participant is safe and comfortable until emergency services arrive
- Employee to notify National at the most immediate convenient time
- Employee must document event accordingly and lodge "Incident and Accident form" within 24 hours of event occurring

National is responsible:

- Ensuring employees have adequate and current HLTAID003 Provide First Aid and HLTAID001 Provide Cardiopulmonary Resuscitation
- Ensure the appropriate channels are notified (case manager/primary carer etc)
- National must ensure all documentation is completed by employee and lodged with appropriate agencies. (Copies to case manager/carers/GP/insurance/NDIS/Aged Care etc)
- National Community Care will provide employees with face shield keyring for CPR

Training Requirements

All service delivery employees are required to hold a valid First Aid and CPR. Employees are required to undertake annual refresher of CPR and First Aid 3rd yearly. This is a part of the employee's contractual obligations and at the cost of the employee, not National. HLTAID001 / HLTAID002 / HLTAID003

Failure to maintain valid First Aid and CPR will result in the employee's employment being placed on hold until the required evidence is provided, as per the Training Policy.



Death of a Client/Participant Policy in Community Setting

POLICY STATEMENT

National is committed to managing the death of a client/participant in a smooth and dignified manner ensuring appropriate procedures are carried out and the employees receive support

SCOPE

This policy applies to all employees of National

POLICY

On finding a client/participant, the employee is responsible for assessing the client/participant for signs of life using basic life support principles, noting the date and exact time of the assessment. If there are any signs of life contact ACT Ambulance Service on 000. Be well versed if NDR orders are in place or alternatively be prepared to perform resuscitation.

Please note: Within any SIL Property, the care team would implement the participants Advanced Care Directive.

If present, a Registered Nurse may assess whether a client/participant is deceased (Verification of Death).

The clinical procedure for verifying death is as follows:

- i. No palpable carotid pulse, and
- ii. No heart sounds heard for 2 minutes, and
- iii. No breath sounds heard for 2 minutes, and iv. Fixed and dilated pupils, and
- v. No response to centralised stimulus, and
- vi. No motor (withdrawal) response or facial grimace in response to painful stimulus.

From: Emergency Care Institute, National for Clinical Innovation (website accessed 2018).

The treating Medical Officer / General Practitioner may only issue a Medical Certificate of Cause of Death.

If the person is deceased on arrival at their home, call 131 444 to notify the Australian Federal Police who have legislative responsibility for deaths in the community.

- Notify the person responsible according to written instructions. If the person responsible intends to visit or wish to assist with Last Offices, inform the staff accordingly.
- Performance of Last Offices must not be commenced before official determination of life extinct, and permission is provided by Next of Kin/Person Responsible.
- Put air-conditioning on to cool room.



- Cultural and religious care preferences should be carried out as recorded in the client/participant's care record.
- Employee to notify National at the most immediate convenient time
- Employee must document event accordingly and lodge "Incident and Accident form" within 24 hours of event occurring, being sure to document date, time, how the situation was discovered, who was present at the time, action taken, outcome and signature and designation on report.

If the death is unexpected (i.e. not following a period of illness, palliative care services), or the client/participant's medical practitioner is not able to complete the Death Certificate for any reason, a coroner's enquiry may be required.

- The body of the deceased client/participant is not to be moved.
- Notify National.
- The death must be reported immediately to the local police force as above.
- A police officer will visit and request formal identification of the body, person details about the deceased person and the name, address and contact number of The Person Responsible.
- In the case of suicide, attempted suicide, or life-threatening self-inflicted injury, staff must take care to retain all possible evidence including the implement used to cause death or injury.
- Police ID (including the name, rank and station) shall be documented on the "Incident and Accident form" along with the case identification – the "P" number.

National Management is responsible for:

- Reporting the death to the appropriate agencies (see Mandatory Reporting Policy), family and employees
- NDIS Participant PRODA Notification must be lodged within 24hours of client death.
- Offering counselling services to employees and family at no cost to the employee
- Ensuring all National mandatory documentation, an Incident and Accident form is completed and submitted to the appropriate channels

Employee Reporting Requirements:

- Employee to contact NCC when appropriate to do so and advise Category 1 incident intake personnel will give further instructions.
- Complete incident form within 24 hours and provide a written statement of events.
- Employee may be required to attend police station to provide statement the day of reporting incident in line with employee duty of care. Management team member to attend with employee for support.

CONTACTS:

National Contacts

Clinical Coordinator **0429 599 548**

NCC On-Call **0401 439 798**

Lisa Walker **0413 955 956**

ACT Police

6256 7777 OR 131 444



NDIS Commission

National is required to record and manage all incidents that happen in the delivery of NDIS supports and services in their internal incident management systems and notify the NDIS Quality and Safeguards Commission of reportable incidents. A Death of a client/participant would be categorised as a compulsory reporting mandate. See Mandatory Reporting – NDIS Policy.

ACT Care & Protection Services

The ACT Care & Protection Service is to be notified of any serious incident reporting such as claims of abuse, the death of, or serious injury to a child/youth participant.

- Centralised Intake Service: 6207 6956
- Mandated Reporters: 1300 556 728 / childprotection@act.gov.au
- General Public after Hours: 1300 556 729
- Crisis Service: 1300 556 729

Canberra Grief Centre

canberragriefcentre.com.au 0409 966
515 / 0401 344 577

Lifeline

www.lifeline.org.au
131 114

Beyond Blue

www.beyondblue.org.au
6287 8066

RELEVANT LEGISLATION AND REFERENCES

Coroners Act 1997
Health Records (Privacy and Access) Act 1997
Human Rights Act 2004
Human Rights Commission Act 2005
National Disability Insurance Scheme Act 2013
Disability Services Act 1991
Disability Services Regulation 2014

Work Health & Safety Act 2011
Health Professionals Act 2004
Territory Records Act 2002
Information Privacy Act 2014
Official Visitor Act 2012
Working with Vulnerable People Act 2011

Emergency Care Institute, Agency for Clinical Innovation, End of Life Resources, accessed from <https://www.aci.health.nsw.gov.au/networks/eci/clinical/clinical-resources/clinical-tools/end-of-life/end-oflife-resources> on 6 May 2018. www.ndiscommission.gov.au