CGP 107

National Ambulance CPR Manikin Utilization & Cleaning Procedures

LINK TO POLICY

LINK TO PROCEDURES

& FORMS





National الإسعاف Ambulance الـوطـنـي

Table of Contents

1.	POLICY INTRODUCTION	3
2.	SCOPE	3
3.	ROLES AND RESPONSIBILITIES	3
4.	POLICY STATEMENT	4
4.1.	Manikin Cleaning and Maintenance	3
5.	RELEVANT LEGISLATION	4
6.	RELATED POLICIES & PROCEDURES	7
7.	FEEDBACK	7
Q	DOCUMENT CONTROL AND OWNERSHIP	7

National الإسعاف الوطـنـى Ambulance

1. POLICY INTRODUCTION

This policy gives oversight to the use of manikins in clinical education and professional development; that are needed to ensure that National Ambulance staff receive safe and high quality education from the Clinical Education Department. The overall aim is to meet international best practice standards in terms of teaching aid use, as well as ensure health and safety measures in education.

2. SCOPE

This policy applies to all Staff / Learners, Educators, and anyone else that might use the NA Manikins for education and training within NA areas of work or outside.

The purpose of this policy is to ensure that all staff involved in education, working within (or for) National Ambulance, are aware of the correct infection control methods required when facilitating learning with CPR manikins.

The manikin cleaning / disinfection event must be annotated in Manikin Utilization and Cleaning Registers (found on site at each facility) for each course it is utilized on. Further, Manikin ID Documents have been created to track individual use, maintenance & repair, disinfection (etc.) and should always be with the manikin it is intended to provide a life history of. The records will be used to assess compliance and in the quality control and audit processes. In the absence of any of the above mentioned tracking documents, the Education Manager must be notified asap. Compliance of this policy is essential to maintaining a healthy and safe learning environment.

3. ROLES AND RESPONSIBILITIES

Medical Director is responsible for development, implementation, monitoring and revision of this policy. The MD is responsible for ensuring that the NA Mission, Vision, Values and strategic objectives inform this policy and for compliance with any clinical legal and regulatory requirements.

The Education Manager is responsible for ensuring that educational activities that relate to the implementation of this policy and the compliance by all those that use these educational accessories.

Educators / / Learners / Volunteers are responsible for following this policy and maintaining compliance in all aspects (including recording of Cleaning and disinfection events)





Version 6

National الإسعاف Ambulance الـوطـنــى

4. Policy

It is both the responsibility of the education staff, and students attending training, to minimize the risks of cross contamination / transmission of infections.

To protect other participants from exposure, anyone with an infection, cuts or lesions on their mouth or hands are required to notify the instructor prior to class commencement, so that alternate arrangements can be made to limit exposure and to support the learner's needs alternatively.

All persons responsible for CPR training shall be thoroughly familiar with hygienic concepts (e.g., washing hands thoroughly before manikin contact, not eating during class to avoid contamination of manikins with food particles etc.).

Direct mouth to mouth/nose practice shall not be routinely performed on the CPR manikins, due to the potential for infection transmission. Ventilations to the manikin shall be achieved via utilization of a barrier device (eg. Pocket Mask / Face Shield) or a Bag Valve Mask (BVM).

4.1. Manikin Cleaning & Maintenance

Any use of manikins, cleaning or changing of parts of any manikin for routine maintenance must be done in consultation with the specific user manual for the manikin or manufacturers guideline.

Upon completion of the training scenario the manikin face and the inside of the mouth shall be wiped vigorously with Manikin cleaning wipes (alternatively a gauze pad moistened with either Virkon solution or with 70% alcohol (isopropanol or ethanol) can be utilized.

Manikins shall be routinely inspected for signs of physical deterioration, such as cracks or tears in plastic surfaces that could affect the cleaning process.

Hard plastic surfaces of the manikins utilized, and pocket masks must be wiped over with disinfectant solution or manikin wipes. Filters must be disposed of in the clinical waste bags, as should face shields.

Manikins which had ventilations provided to them **without filters** via pocket mask, face shield or mouth to mouth/nose must be disassembled and decontaminated. The Contaminated Manikins must be Red Tagged (available from Facilities) to avoid any further usage until they are decontaminated and made ready for use. In these instances, the manikin's airways **must** be replaced with a new set (available from facilities). Personnel conducting disinfection, cleaning and or replacement must wear protective gloves during these procedures. The brand or model of manikin being utilized should be taken into account for dismantling and decontaminating of that particular manikin as per the manufacturers recommendation.

Routine disinfection of the entire manikin is not required where no direct contact or very low risk of contamination is evident. However, routine cleaning of the head, torso, top skin, is recommended with manikin wipes or disinfection solution.

Planned maintenance should include washing with a warm soapy solution, and then rinsed with a clean damp cloth. Manikin wash events to be planned by the Education Department, as this may involve the manikins being (out of use) disassembled and all external and internal surfaces cleaned with necessary parts being replaced when necessary.





Version 6

National الإسعاف الوطني Ambulance

All cleaning, disinfection and repair events must be annotated on the Manikin ID Documents as well as the facility register. Non-compliance in any part of the policy will be subject to management review and intervention.

5. RELEVANT LEGISLATION

International, federal or local legislation and circulars relevant to this Policy. Full detail on this legislation can be found in QHP109 Legal Register.

Co	de, Name of Legislation	Jurisdiction
-	JAMA, June 1996, Vol 255, No 41, Cleaning of CPR Manikins	Journal of the American Medical Association
-	Instructor's Manual for Basic Life Support American Heart Association, 2015	American Heart Association
-	AHA Training Memo (April 23, 2012). Equipment Decontamination Guidelines for CPR training	American Heart Association
-	Cardiopulmonary Resuscitation— Potential Danger of Cross-Infection	Journal of the American Medical Association
-	Cleaning disinfecting and sterilizing self-contained self-rescuer Mouthpiece assemblies used in Hands-on training	USA Department of interior
-	Hygiene solutions for BLS	Laerdal helping save lives website
-	Prestan Professional Manikins	Prestant Products,LLC
-	Care and Cleaning Recommendations	Prestant Products,LLC
-	Soar J, Mancini ME, Bhanji F, Billi JE, Dennett J, Finn J, Ma MHM,	Prestant Products,LLC
	Perkins GD, Rodgers DL, Hazinski MF, Jacobs I, Morley PT, on behalf of	
	the Education, Implementation, and Teams Chapter Collaborators. Part	
	12: Education, implementation, and teams: 2010 International	
	Consensus on Cardiopulmonary Resuscitation and Emergency	
	Cardiovascular Care Science with Treatment Recommendations.	
	Resuscitation 2010;81:e288–e330.	



Appendix 2

KEY POINTS

- Education staff / instructors to ensure manikins are cleaned and prepared appropriately for CPR training.
- Education staff / instructors to pair students up with manikins, to minimize possibility of infection transmission.
- Airways to be changed if ventilation of manikin is provided with risk of contamination.
- Students to inform educators/ instructors of acute or chronic infections or open sores to their hands face or mouths.
- Use manufactures guidelines for disinfection or replacement of parts.



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6. RELATED POLICIES AND FORMS

List related policies and procedures to the created/updated policy.

Policy & Procedure /Form

7. FEEDBACK

Any feedback or suggestions for improvement to this Policy, Processes or Procedures can be submitted to ghse@nationalambulance.ae

8. DOCUMENT CONTROL AND OWNERSHIP

A review and update of this document will take place as necessary, when changes occur that identify the need to revise this Policy such as changes in roles and responsibilities, release of new legislative or technical guidance, or identification of a new policy area.

This document ownership for editing is identified as:

Medical Director (MD)

This controlled document is managed / overseen by [Procurement and Tendering Committee and/or Audit and Risk Management Committee and/or HR and Compensation Committee].

Change Brief

Version No.	Date	Changes	
1	October 2013	New Policy	
2	April 2016	Combining CGP106 and CGP 107 and manufacturers guidelines for infection prevention control. 1. Typo errors, it was highlighted that we need to use the American English Spelling for the Policy Document and corrections was done accordingly. 2. The 3 Monthly Washing Period of Manikins was removed and was replaced by the Education Department scheduling a cleaning day and the Education Managers discretion. This was because it would be a technical issue with Dismantling & Reassembling the Manikins as well as the units being out of action for the duration of the exercise. 3. I have also Loaded the Cleaning & Disinfection Record Form onto N Drive so that Educators/Facilitators can access and record	





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3	August 2016	 The Policy was made simpler and more practical to ensure better compliance. Diagrams of specific models of manikins was removed as there are multiple models now being used at NA. The Course Registers have now been adapted to ensure better records for compliance, quality control and audit processes. The policy now focuses on basic principles of infection control and compliance oppose to bureaucratic processes. 	
4	October 2016	Induction, Scope, Roles & responsibilities added for Policy Standard Compliance also Manufacturers recommendations on maintenance statement added	
5	November 2017	Changes in line with better infection control measure and tracking of individual units as recognized by best practice standards.	
6	November 2019	Policy due for review Medical Director Terminology Delete "Field Training Officer & Mentors"that could make thorough cleaning" to be changed to "that could affect the cleaning process.	

Review & Approval:	Date:	

Dr. Ayman Ahmad

Medical Director

