

Guideline

What to do in the event of an ambulance breakdown or if witnessing a road traffic collision (RTC)

1 Scope

For use within the Acute Neonatal Transfer Service for the East of England and the St. John Ambulance Service.

2 Purpose

To provide a safe, efficient and practical guide for management when the ambulance breaks down or if an RTC occurs or is witnessed during transfer.

3 Definitions

- 'Baby on board' refers to a situation where a baby is being conveyed by the ANTS team at the time of vehicle breakdown or when at the scene of an RTC.
- 'No baby on board' refers to a situation where there is no baby in the ANTS vehicle at the time of vehicle breakdown or when at the scene of an RTC.

4 Abbreviations

ANTS: Acute Neonatal Transfer Service

CRC: Central Resource Centre

RTC: Road Traffic Collision

SJA: St John Ambulance

5 Vehicle breakdown

5.1 Baby on board

- The priority is the welfare of the baby and the team.
- Stop ambulance in a safe area if possible.

- If the vehicle remains in a dangerous position which places the vehicle and staff at risk, activate the vehicle hazard lights and if necessary, blue lights to warn road users the vehicle has broken down. If it is not possible to do so, consider calling the police to help secure the area where the ambulance has broken down.

Immediately contact SJA On-Call: 020 3617 9999

Advise the following:

- Vehicle location, call sign, registration number
- Brief description of vehicle problem
- Whether the vehicle and staff are 'at risk'
- Intended destination of the vehicle and state the vehicle has a baby on board.
- A status report on the vehicle power supply to enable an expediency of help judgement to be made. This may be in the form of breakdown support or an emergency ambulance to continue the journey.
- Any necessary replacement vehicle needs to have Ferno or Paraid trolley fittings.

The doctor/nurse team stays with the baby and makes necessary calls on the transport mobile:

- Inform ANTS consultant about the incident, action taken and update of the baby's condition.
- Contact referral and receiving hospitals to inform about the delay and update of the baby's condition.
- Contact the parents to inform about the delay and condition of the baby.

Points to consider:

- Time to rescue vehicle arriving:
 - Is there sufficient gas supply to support the baby during this time?
 - Are there sufficient volumes in the infusion pumps to last?
- Warmth for the baby: incubator temperature and ambulance ambient temperature.

5.2 No baby on board

- Stop ambulance in a safe area if possible.
- If it is not possible to do so, consider calling the police to help secure the area where the ambulance has broken down.
- Contact SJA On-Call: **020 3617 9999**

- Inform the ANTS consultant.
- If team on way out to a transfer;
 - Contact ANTS office to arrange for rescue vehicle and/or to dispatch another team
 - Contact referring hospital to inform them of the delay and request a clinical update of the baby.
 - Contact the receiving hospital to inform them of the delay

5.3 Vehicle rescue/roadside repair procedure

- Driver to contact AA Breakdown on **0800 424151** to advise exact location, vehicle details and the breakdown issue.
- If a vehicle cannot be repaired at the roadside and needs to be recovered, request it is taken to: **A.G Motors, Unit C2, Atria Court, Stirling Way, Papworth Everard, Cambridge CB23 3GY**. Advise the call handler that the recovery vehicle must be capable of transporting a 5 tonne box ambulance with tail-lift.
- For roadside punctures contact ATS on **0800 280 0112** (SJA account number if requested: A00945028).

6 Witnessing RTC

- The vehicle must stop if either witnessing or arriving first on the scene at an RTC.
- Summon immediate emergency ambulance and police assistance if the incident appears to require support from these services. It is far easier to stop these services later if not required than to delay initial decision-making.
- Ensure that the ANTS ambulance is positioned safely away from oncoming traffic, but can act as a visual warning, through activation of the blue lights, to other road users of an incident. The ANTS vehicle will be carrying passengers and possibly a baby, so primary duty of care must be to those being conveyed by the ANTS ambulance.
- The ANTS driver must ensure the hi-visibility jacket is worn when attending any RTC incident. Likewise the hi-visibility tabards issued to the ANTS vehicles for medical staff must also be worn if leaving the vehicle to assist casualties involved in the RTC.
- Should the ANTS ambulance be undertaking an emergency transfer which is time-critical necessitating the team is not delayed, administer immediate first aid to casualties and summon bystanders to assist. Immediate action must follow the ABC (airway, breathing, circulation & bleeding) principles of first aid.
- Having administered immediate first aid and left the casualties in the care of bystanders or the emergency services, inform SJA On-Call: **020 3617 9999** and

advise that the ANTS vehicle is leaving the scene to continue with the neonatal emergency transfer, giving a brief description of actions taken.

- When it is safe to do so, complete an incident form and short statement which records the accident as witnessed and the immediate actions taken. Should it have been necessary to leave the scene prior to the arrival of the emergency services this should also be recorded.
- Drivers must submit a St John Ambulance incident online within 24 hours.

7 Monitoring compliance with and the effectiveness of this document

Case reviews: Each incident of vehicle breakdown and/ or witness of a RTC will be reviewed and actioned on an individual basis by the senior management team.

Exception reports following case review: To be reviewed monthly by senior management team.

Incident reports: To be reviewed quarterly by senior management team.

Equality and diversity statement

This document complies with the Cambridge University Hospitals NHS Foundation Trust service equality and diversity statement.

Disclaimer

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Document management

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