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# MANDATORY TRAINING FOR MEDICAL GAS AND OXYGEN SAFETY THEN, NOW AND WHAT NEXT

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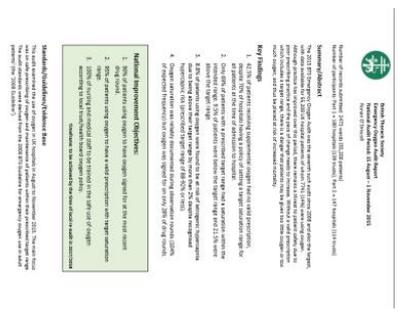
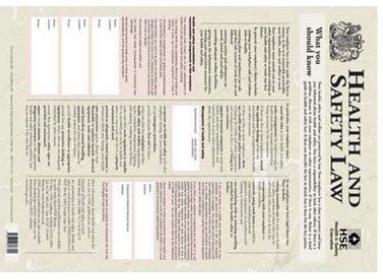
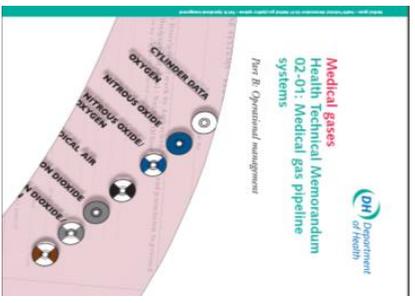
# REGULATIONS: STATUTORY/RECOMMENDATIONS

Health & Technical Memorandum HTM02-01

Health and Safety at Work at 1974

PUWER regulations 1998

BTS-2015 Audit



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# THE EXTENT OF THE PROBLEM

**Rapid Response Report NPSA2**  
**Oxygen safety in hospitals**  
 September 2009  
 Supporting information

**Warning Alert**  
**Patient Safety Alert**  
 Risk of death and failure to obtain a safe target range of oxygen in the body from oxygen cylinder  
 9 January 2018  
 Alert reference number: NPSA20180001

**Doctors are told to curb overuse of oxygen in hospitals**  
 A study highlights dangers of unprescribed therapy and calls for better training in what constitutes a safe 'target range' of oxygen in the body

**Ambulance 'EXPLODE outside Brit hospital as crews scramble to scene**  
 An ambulance has burst into flames outside a Glasgow hospital and sent crews scrambling to the scene.

**Patient Safety Notice**  
 PSN036 / November 2016  
 Reducing the risk of oxygen tubing being connected to air flowmeters

**Actions**  
 Who: All hospitals for any other sites providing NHS funded services using medical gas pipeline system (MGRFS)  
 When: To begin as soon as possible and to be completed by 4 August 2017.

**Comments**

1. Introduction
2. Scope of the guidance
3. Review of evidence of harm
  - 3.1 Incident data from Reporting and Learning System (RLS)
  - 3.2 Data from the NHS Reporting and Learning System (NHS RLS)
  - 3.3 Evidence from literature
  - 3.4 Evidence from local investigations
  - 3.5 Findings from local investigators reports
4. National guidance
5. Summary and conclusions

Appendix 1: Rationale for actions and compliance  
 Appendix 2: Resources and good practice examples  
 References

**Who**  
 NHS: All hospitals for any other sites providing NHS funded services using medical gas pipeline system (MGRFS)

**When**  
 To begin as soon as possible and to be completed by 4 August 2017.

**1. Identify a named individual who will take responsibility for coordinating the delivery of the actions required by this alert.**

**2. Implement systems to ensure human error described in this alert are all in place in all relevant clinical areas.**

**3. Establish ongoing systems of audit or equipment checks to ensure the barriers are maintained.**

**Share any learning from this alert with other NHS sites by developing good practice resources by emailing: [improvingpatient@safety@gov.uk](mailto:improvingpatient@safety@gov.uk)**

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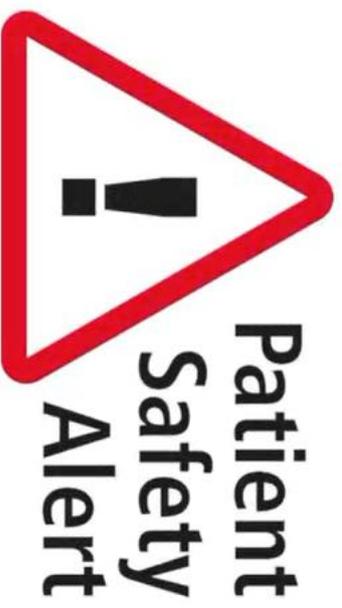
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# MYTH BUSTERS



Do you know the difference between an Oxygen or Air flowmeter?

  
*Improvement*



Reducing the risk  
of oxygen tubing  
being connected  
to air flowmeters

[Here](#)



# WHO SHOULD BE TRAINED

Any staff that use, transport or administer a medical gas should be trained.

I.E.  
Nurse  
Porter  
Medical Staff  
Paramedic  
Health Care Professional  
Health Care Assistant??  
Radiographer/Sonographer?

This list is not exhaustive, its all I could think of at the time!

# CONTENT OF THE COURSE

## Clinical Training

National Guidance on oxygen prescribing  
Monitoring Oxygen saturations How and Why  
Special Conditions  
Maintaining and stopping oxygen therapy  
Delivery Devices

## HTM02—1 Core Elements

Statutory and regulatory obligations  
What is a medical gas  
Hazards of medical gases  
Cylinder identification, management and security  
Departmental cylinder handling and operation  
Clinical use of medical gases  
Use of suction and oxygen therapy equipment

# TRAINING METHODS

Various methods are available from:

Face to Face using PowerPoint for demonstrations  
eLearning

Video

Train the Trainer

Work books and Quiz

Our Health board/Trust have utilised a  
blended learning approach:

Yr1 face to Face

Yr2 eLearning

Yr3 eLearning



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## HOW OFTEN SHOULD TRAINING BE PROVIDED

The recommendations are that training is to be provided:

General Nurse - Annual

Designated Porters - Annual

Designated Nursing Officer - every 3 years

HTM02-01 part 2

# NAMDET - MEDICAL GAS WORK STREAM

- Progress so far:
- Created a working group of Subject Matter Experts
- Contacted e4Eh to work alongside and develop a series of eLearning packages for all learning groups



- Aims:
- Develop a series of competency based training packages that will be free to all who need access and for these resources to work alongside ESR or a similar systems for recording attendance.

- [enquiries@namdet.org](mailto:enquiries@namdet.org)

# CONCLUSION

**We all know the danger associated with Medical Gas:**

- Its a drug and must be prescribed and treated as such
- Deaths have already occurred as a result of poor training and equipment over the past few decades
- Oxygen vigorously supports combustion

**Medical gas training is not very well supported in the Health**

**Boards/Trusts and everyone is doing their own thing. Standardise!**

**Consider making Medical Gas Training Mandatory in the NHS.**

**ANY QUESTIONS**

