COLLEGE STATEMENT ON INFLUENZA A(H1N1)

ISSUED 30 OCTOBER 2009

Care of the Critically Ill patient from Swine Flu:

The College would like to offer guidance to practitioners who may need to update their skills in view of being redeployed to other areas in exceptional circumstances. The Health Professions Council state ‘Each registrant is responsible for ensuring that they only undertake tasks where they are confident they can do so safely and effectively and to ensure that any actions are appropriate in the circumstances’.

http://www.hpc-uk.org/mediaandevents/statements/swineflu/

Any patient with 2009 Influenza A(H1N1) infection can present with critical illness and experience symptoms for approximately four days before entering the hospital, but worsen rapidly and require care in the ICU within one or two days. The Chief Medical Officer has indicated that the management of a swine flu pandemic will be to stop non urgent surgery and re-deploy staff from these areas.

ODPs are well placed with the skills they have and base line knowledge to contribute to the care of the critically ill patient. The staff group who maybe best placed would be those practitioners who work within the recovery and anaesthetic areas. The rationale for this is due to the skill set that can be most useful to the patients presenting with swine flu symptoms complications. The skills that may need to be updated in preparation for re-deployment to care for patients include:

- Monitoring equipment – critically ill patients, temperature devices (tympanic), urine output etc
- Infusion devices – essential to be aware of the ones used in the ICU of your organisation
- Ventilators – familiarising and updating on the various types available and used in critical care. Ancillary equipment used with ventilators may require updating and awareness of manufacturer’s guidelines
- Awareness of the designated areas planned for the pandemic plan – understanding the environment; access to equipment; communication and protocols.
Full awareness of the Infection Control protocol during the exceptional circumstances is paramount to ensure minimal harm and risk to self and others. Practitioners have a duty to raise concerns with their employer if they are unable to access this information.

Reporting mechanisms, communication with families/carers

Procedures to be followed following life extinct

There is also a protection device that the Health and Safety executive have given guidance on facemasks – information is available from:


Complications of Swine flu:

Complications of Swine flu include respiratory failure and pneumonia and worsen certain conditions such as asthma, diabetes, and heart disease.

- Other complications also include bronchitis, tonsillitis, otitis media, septic shock, meningitis, and encephalitis.
- Swine flu can also lead to death in patients who develop serious complications.
- Patients with chronic heart disease, kidney disease, liver disease, neurological disorders, suppressed immune systems, and diabetes are at higher risk for developing serious complications.

As you can see many of the above would require critical care and the need for practitioners to be aware of patient groups who are already on medication for existing conditions. See Adverse Drug Reaction sheet from the MHRA (attached)

Swine flu can also cause serious complications in children under the age of five, adults over the age of sixty-five, and women who are pregnant.

College advice and guidance for Student ODPs regarding supervision in practice during exceptional circumstances:

During a pandemic where staff are re-deployed and unable to give appropriate supervision modifications to the students schedule should be sought.
Students should remain on their programme whenever possible but, where contingency plans are activated, the action taken should not disadvantage them. It is paramount that students must be provided with an appropriate level of supervision depending on their stage of training and the care they are providing.

Should a practice area be involved in a pandemic it would be advisable for students to be given time to study and this would be arranged and agreed with the Higher Education Institute. Students should not be disadvantaged and that the time out should be considered valuable learning towards their programme of study. Practice time in light of the CODP hours in practice should be modified to ensure students achieve and have the correct practice hours for the overall programme.

It would be unacceptable for students to be temporarily removed from the programme and utilised as healthcare assistants. Should the student wish to work in a voluntary capacity as a healthcare assistant in their own time, or apply for a role as such, they have the right to do so as a member of the general public, but this should not impact or replace their planned study time.

Students should not be pressurised to undertake any such role, nor should they be disadvantaged by the exceptional circumstances.

Useful websites and guidance for further information:

- [www.g](http://www.gpa.org.uk)
- [www.hpa.org.uk](http://www.hpa.org.uk)
- [http://www.hpc-uk.org/mediaandevents/statements/swineflu/](http://www.hpc-uk.org/mediaandevents/statements/swineflu/)


NHS Choices website - Pandemic Flu

Guidance on use of prophylaxis in the treatment phase of the H1N1v pandemic. Health Protection Agency (7th July 2009)

Ref - Position Statement – CODP Swine Flu Advice to Operating Department Practitioners October 2009