

Rural and Remote Emergency Services Standardisation: Emergency Response Packs

Queensland Health Guideline

1. Purpose

To provide best practice recommendations for standardisation of an Emergency response packs (ERP) in rural and remote health care facilities in Queensland with Emergency Services assessed as level 1 or level 2 services (or adapted for use by higher level facilities in Queensland and interstate jurisdictions on advice of local health services) under the *Clinical Services Capability Framework for public and licensed private health facilities v3.2 (2014)*.

With a mobile workforce, standardisation promotes consistency of evidence based practice and benefits patient outcomes and safety

This guideline augments first responder's capability to provide emergency first responder intervention and transfer of person(s) requiring emergency services beyond the doors of a level 1 or 2 facility

2. Scope

This guideline is intended for use by level 1 or 2 facilities in rural and remote communities without a fully staffed and resourced Queensland Ambulance Service

This guideline provides information for all Queensland Health employees (permanent, temporary and casual) and all organisations and individuals acting as its agents (including Visiting Medical Officers and other partners, contractors, consultants and volunteers) working in rural and remote health care facilities throughout Queensland which may be required to provide, or assist with first emergency response in the event of an acute incident beyond the health facility

The Rural and Remote Emergency Services Standardisation suite of guidelines do not address specific training requirements for the safe and competent use of equipment, consumables or medicines. It is the responsibility of the Hospital and Health Service (HHS) to address this where appropriate

For consistency, the ERP follows the *Rural and Remote Emergency Services Standardisation Guideline - Resuscitation trolley* content configuration of airway, breathing and circulation format along with procedural kits for advanced and interventional treatments

3. Related documents

- Rural and Remote Emergency Services Standardisation guideline - Emergency Equipment
- Rural and Remote Emergency Services Standardisation guideline - Resuscitation Trolley
- Rural and Remote Emergency Services Standardisation guideline - Emergency Procedural Kits
- Rural and Remote Emergency Services Standardisation guideline - Emergency Response Packs
- Checklist - Resuscitation trolley contents
- Checklist - Emergency procedural kits contents
- Checklist - Emergency response pack contents
- Ordering forms - Resuscitation trolley
- Ordering forms - Emergency procedural kits
- Ordering forms - Emergency response packs
- All above available from [the Office of Rural and Remote Health](#)

4. Emergency response pack requirements

4.1. Emergency first response capability

- 4.1.1. A Service Level Agreement (SLA) between the governing Queensland Health HHS and Queensland Ambulance Service (QAS) will determine emergency first response capability of a rural and remote community and assign responsibility for:
- an appropriate Emergency Response Vehicle or Health Based Ambulance (HBA)
 - vehicle **equipment** and **consumables**
 - vehicle garaging and maintenance
 - training needs of clinicians and staff to operate and monitor vehicle, equipment and consumables
- 4.1.2. Staff are encouraged to access their local QAS/HHS SLA via their Quality, Service and Risk Unit, but **generally**, in locations where QAS provide a HBA:
- QAS is responsible for the vehicle, vehicle **equipment** (eg stretcher) and maintenance and training of their function and use
 - the HHS is responsible for restocking and maintaining vehicle **consumables** (according to **Appendix A. Emergency response pack for rural and remote facilities: Basic contents**), and undertaking vehicle and equipment maintenance checks
- 4.1.3. In locations without a QAS provided HBA, staff will utilise an appropriate HHS supplied Emergency Response Vehicle, along with the ERPs according to **Appendix A. Emergency response pack for rural and remote facilities: Basic contents**, to respond to an acute incident beyond the doors of the facility
- 4.1.4. To ensure the safety of staff responding to an emergency, a workplace health and safety plan should be developed, maintained and monitored

4.2. Emergency Response Packs use

- 4.2.1. Clinicians responding to an emergency incident outside of the facility will take the ERP
- 4.2.2. Clinicians responding to a pre-hospital emergency incident or performing an inter-facility transfer should, if able, determine prior to leaving:
- the nature of the emergency incident
 - if an emergency procedural kit(s) will assist responding to the incident or support the inter-facility transfer
 - if other emergency equipment or consumables will assist responding to the pre-hospital incident or support the inter-facility transfer e.g. the Imminent birthing and obstetric kit
- 4.2.3. If a clinician determines that an emergency procedural kit(s) or other emergency equipment and consumables will assist in responding to the pre-hospital emergency incident, the clinician should take the ERPs and:
- the appropriate emergency procedural kit(s)
 - other emergency equipment with consumables and

4.3. Emergency response packs choice and layout

- 4.3.1. Hospital and Health Services are encouraged to utilise the [standardised emergency response physical packs](#)
- 4.3.2. The ERPs should be easily accessed by all staff in a designated emergency area or Emergency Response Vehicle
- 4.3.3. The ERPs should be configured with clearly labelled pockets as follows:

| Bag name | Pocket labels an colour |
|----------------------------|-------------------------|
| Emergency Response Pack 1. | Airway |
| | Breathing |
| Emergency Response Pack 2. | Intravenous |
| | Circulation |
| | Eye |
| | Miscellaneous |
| Emergency Response Pack 3. | Medicines |
| | Diagnostic |

4.3.4. It is the responsibility of each Hospital and Health Service to:

- a) determine compliance or alteration to the ERPs taking into consideration fiscal impacts of items e.g. disposable items versus items requiring sterilisation
- b) determine quality and safety auditing, procedures and policies should ERP contents be added or split from the main pack
- c) monitor Occupational Health and Safety (OHS) weight, size or handling concerns as determined by the Quality, Safety and Risk Unit

4.3.5. Facility managers should document all local standardised ERP alterations or concerns in accordance with agreed Hospital and Health Service processes

4.3.6. The contents and layout of the ERP should be established, maintained and restocked immediately after use as per the **Appendix A. Emergency response pack for rural and remote facilities: Basic contents**

4.4. Quality assurance and maintenance

4.4.1. All contents contained within the ERP are supported by evidence based best practice at time of signed approval

4.4.2. At the discretion of the Hospital and Health Service, local inclusion, exclusion or alteration of emergency procedural kit contents according to **Appendix A. Emergency response pack for rural and remote facilities: Basic contents** is acceptable:

- a) after consultation with and approval by the local HHS Director of Medical Services **and**
- b) after consultation with and approval by the local HHS Quality, Safety and Risk unit **and**
- c) the HHS deems a facility is safely supported by a readily accessible nearby emergency department **or**
- d) if listed items vary according to local HHS Standing Offer Arrangements (SOA) **or**
- e) the item serves the same purpose as the one being altered **or**
- f) if supply shortages requires the HHS to source alternative options

4.4.3. At the discretion of the HHS facility clinical manager a single use locking tag system can be used to secure each ERP pocket. The locking tag system:

- a) provides a tamper proof indicator to support less frequent checking of ERP contents
- b) alerts clinicians to tampering of ERP contents
- c) choice is at the discretion of the governing HHS
- d) should be easily identifiable with a serial number
- e) should be easily removed in the event of an emergency
- f) should be checked daily to ensure tag is intact

- 4.4.4. ERP checking requirements:
- a) The facility clinical manager should assign responsibility to an appropriate clinician for checking, maintaining and stocking all ERP contents
 - b) The clinician assigned responsibility should check ERP contents against the **Emergency response pack checklist**:
 - i. daily for packs without locking tag systems
 - ii. monthly for packs with locking tag systems
 - iii. immediately after responding to an acute incident beyond the facility doors
 - c) Checking ERP contents less than the above requirements should trigger a documented risk assessment
 - d) If equipment or consumables are not present or within date, then replace immediately
 - e) The signature of the person conducting the checking verifies items are present and within expiry dates, locking tags are unbroken, and equipment or consumables are charged, functioning, intact and calibrated to manufacturers specifications
- 4.4.5. ERP audit requirements:
- a) The facility manager should conduct 6 monthly audits of the **Emergency response pack checklist** for compliance. Any anomalies:
 - i. should be addressed and a risk assessment undertaken
 - ii. requires audits to be undertaken monthly for a minimum of 3 months or until compliance has been restored, regardless of locking tag system
 - b) The ERP contents must be consistent with the **Appendix A. Emergency response pack for rural and remote facilities: Basic contents**
- 4.4.6. The HHS Quality, Safety and Risk Unit should document routine scheduled audits of the emergency procedural kits at all rural and remote facilities under its jurisdiction

4.5. Medicine compliance

- 4.5.1. Facility managers must ensure medicines kept in an emergency room complies with the Medicines and Poisons (Medicines) Regulation 2021 which requires:
- a) all Schedule 8 (S8) Controlled medicines, unless in the personal possession of an authorised clinician, be stored in an S8 safe and
 - b) all Schedule 4 (S4) Restricted medicines:
 - i. are secure from public access and
 - ii. signage indicates restricted public access to the area and
 - iii. all staff actively monitor the approved restriction
- 4.5.2. To comply with state legislation any ERP pocket containing S4 medicines must be secured with a single use locking tag system. The locking tag system:
- a) will alert clinicians to any tampering of pockets
 - b) choice is at the discretion of the governing HHS
 - c) should be easily identifiable with a serial number
 - d) should be easily removed in the event of an emergency
 - e) should be checked daily, with serial numbers recorded next to the clinician signature
- 4.5.3. Where clinicians have scope (e.g. IHW, RN, RIPRN, ATSIHP, MID) to use medicines, facility managers should ensure clinicians satisfy their responsibilities to maintain skills, competencies and/or credentialing to enable:
- a) safe quality use of medicines and
 - b) safe and thorough assessment skills

4.6. Safe emergency equipment use

- 4.6.1. Where staff are expected to safely operate emergency equipment for patient monitoring and support, the HHS should provide and document:
- routine scheduled calibration of emergency equipment to manufacturers specifications
 - routine scheduled testing of emergency equipment for functionality
 - routine scheduled maintenance of staff skills, competencies and/or credentialing
 - where applicable, a “C” class manual drivers licence and driver training by QAS (or an equivalent credentialed provider) to ensure the assigned staff member can drive and operate an Emergency Response Vehicle

5. Consultation

- The initiative to standardise emergency equipment in rural and remote facilities was developed by an expert Project Reference Group to satisfy coroners recommendations following patient safety incidents
- The review of this document sought expert advice from a Reference Group with broad experience in rural and remote environments, retrieval medicine and supporting rural networks consisting of representatives from:
 - Australasian College for Emergency Medicine (ACEM)
 - Australian College of Rural and Remote Medicine (ACRRM)
 - Cairns and Hinterland Hospital and Health Services (CHHHS)
 - Central Queensland Hospital and Health Service (CQHHS)
 - Darling Downs Hospital and Health Services (DDHHS)
 - Metro North Hospital and Health Service (MNHHS)
 - Metro South Hospital and Health Service (MSHHS)
 - North West Hospital and Health Service (NWHHS)
 - Queensland Ambulance Service (QAS)
 - Retrieval Services Queensland (RSQ) and RSQ Telehealth
 - Royal Flying Doctor Service, Queensland Section (RFDS)
 - South West Hospital and Health Service (SWHHS)
 - Torres and Cape Hospital and Health Service (TCHHS)
 - Townsville Hospital and Health Services (THHS)
 - West Moreton Hospital and Health Services (WMHHS)
 - Wide Bay Hospital and Health Services (WBHHS)

6. Key references and resources

- [The Primary Clinical Care Manual \(PCCM\)](#) is the principle reference document for all acute presentations in rural and remote facilities
- [ANZCOR algorithms and flowcharts](#) to print out and made available in with kits, trolley or ERP
- [Children's Health Queensland resuscitation and MET resources](#)
- [Queensland Health Paediatric Emergency Care](#)
- [Maternity and Neonatal Clinical Guidelines](#)
- [The Australian Resuscitation Council suite of emergency protocols](#)
- [Queensland Emergency Department Strategic Advisory Panel \(QEDSAP\) resources](#)
- [Resuscitation Medicine Safety \(ReMS\)](#)
- [Safer Ventilation in Emergency \(SaVE\)](#)
- Main [PROV-ED](#) website
 - [PROV-ED Standardised and Safe Intubation Package \(SSIP\)](#)

- PROV-ED Resuscitation Medication Safety (ReMS)
- PROV-ED RESUMENU
- [Plaster template resources](#) to print and place in Dislocations and fracture kit
- [RSQ Bariatric Sizing Chart asset summary](#)
- [CREDD guideline](#)
- [Clinical Services Capability Framework Version 3.2 \(2014\)](#)
- [Medicines and Poisons \(Medicines\) Regulation 2021](#)

7. Document approval details

7.1. Document custodian

7.1.1. The Office of Rural and Remote Health Clinical Support Unit

7.2. Approval officer

7.2.1. Frank Grainer, Assistant Director of Nursing Office of Rural and Remote Health

7.3. Dates

7.3.1. Approved 5th Feb 2025

7.3.2. Next review Feb 2027

8. Version control

| Version No. | Date | Modified by | Amendments | Approved by |
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| 2024_v1.0_draft | 16/7/24 | Sean Booth | Prep for RRESS Ref Grp | NA |
| 2024_v1.1_draft | 25/11/24 | Sean Booth | with amendments from previous RRESS changes | NA |
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| 2024_v2.0_APPROVED | 12/12/24 | Sean Booth | For DDG approval | ADON-ORRH |
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| 2025_v3.0_final | 5/2/24 | Sean Booth | APPROVED | ADON-ORRH |

Appendix A. Emergency response pack for rural and remote facilities: Basic contents

| BLUE POCKET - AIRWAY | |
|--|--|
| Cannula 14G 50 mm x 3 | For chest decompression. Must be standard cannula without blood control tech |
| Cotton ribbon 1 cm x 1 m | |
| Guedel airway size 000 x 1 | |
| Guedel airway size 00 x 1 | |
| Guedel airway size 0 x 1 | |
| Guedel airway size 1 x 1 | |
| Guedel airway size 2 x 1 | |
| Guedel airway size 3 x 1 | |
| Guedel airway size 4 x 1 | |
| Guedel airway size 5 x 1 | |
| Supraglottic airway size 1 x 1 | Uncuffed second generation device preferred e.g. I-Gel |
| Supraglottic airway size 2 x 1 | |
| Supraglottic airway size 3 x 1 | |
| Supraglottic airway size 4 x 1 | |
| Supraglottic airway size 5 x 1 | |
| Lubricating gel sachet x 2 | |
| Luer lock syringe 20 mL x 1 | |
| Luer lock syringe 10 mL x 1 | |
| Magills forceps adult x 1 | |
| Magills forceps paed x 1 | |
| Nasopharyngeal airway size 3 mm x 1 | |
| Nasopharyngeal airway size 4 mm x 1 | |
| Nasopharyngeal airway size 5 mm x 1 | |
| Nasopharyngeal airway size 6 mm x 1 | |
| Nasopharyngeal airway size 7 mm x 2 | |
| Nasopharyngeal airway size 8 mm x 1 | |
| GREEN POCKET - BREATHING | |
| Bag valve mask self-inflating with PEEP valve paediatric x 1 | |
| Bag valve mask self-inflating with PEEP valve adult x 1 | |
| Mask paediatric non re-breather x 1 | |
| Mask adult non re-breather x 1 | |
| Mask paediatric nebuliser x 1 | |
| Mask adult nebuliser x 1 | |
| Nebuliser chamber x 2 | |
| O2 tubing x 1 | |
| Oxygen cylinder size C x 1 | With regulator attached e.g. BOC inhalo |
| Soft neck collar large x 1 | |
| Soft neck collar medium x 1 | |
| Soft neck collar small x 1 | |

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|--|---|
| Suction unit x 1 | Attached to oxygen cylinder OR Q-VAC hand system |
| Suction tubing x 1 | |
| Yankauer sucker adult x 1 | |
| Yankauer sucker paediatric x 1 | |
| Suction catheter size 6 x 1 | |
| Suction catheter size 10 x 1 | |
| Suction catheter size 14 x 1 | |
| RED POCKET - INTRAVENOUS | |
| Adhesive tape 2.5 cm x 1 | |
| Alcohol swabs (Alcowipes®) 2% chlorhexidine gluconate 70% alcohol x 10 | |
| Armboard infant x 2 | |
| Bandage cohesive 5 cm x 1 | |
| Blood pump IV giving set x 2 | |
| Blue pads (Blueys) x 4 | |
| Cannula IV retractable 14 g x 2 | |
| Cannula IV retractable 16 g x 2 | |
| Cannula IV retractable 18 g x 2 | |
| Cannula IV retractable 20 g x 2 | |
| Cannula IV retractable 22 g x 2 | Must be standard cannula without blood control tech |
| Cannula IV retractable 24 g x 2 | |
| Extension tubing x 2 | |
| Gauze squares 5 cm x 5 cm packet x 2 | |
| Injection site connector (bungs) x 5 | BD Smartsite |
| IV dressing x 4 | |
| Needle 21 G x 2 | |
| Needle 23 G x 2 | |
| Needle blunt drawing-up x 2 | |
| Sodium chloride 0.9% 10mL (OR PosiFlush) x 4 | |
| Syringe 3ml x 2 | |
| Syringe 5ml x 2 | |
| Syringe 10ml x 5 | |
| Tourniquet x 2 | |
| RED POCKET - CIRCULATION | |
| Bandage elastic heavy crepe 7.5 cm x 3 | |
| Bandage elastic heavy crepe 10 cm x 3 | |
| Bandage elastic heavy crepe 15cm x 3 | |
| Bandage triangular x 1 | |
| Combine dressing 20 cm x 10 cm x 3 | |
| Combine dressing 10 cm x 10 cm x 3 | |
| Gauze swabs 7.5 mm x 7.5 mm packet x 5 | |
| Haemostatic dressing x 3 | |
| Plastic cling film | |

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|---|--|
| Pressure immobilisation bandage x 5 | For snakebites |
| Sharps container small x 1 | |
| Tourniquet rapid application arterial x 2 | |
| GREEN POCKET - MEDICINES | |
| Fentanyl 100 microg/2 mL x 2 | Kept together in controlled S8 safe labelled FOR EMERGENCY RESPONSE PACK USE ONLY |
| Morphine 10 mg/mL injection x 5 | |
| Ketamine 200 mg/2 mL injection x 2 | |
| Midazolam 5 mg/mL x 5 | |
| Adrenaline 1:1000 1 mg/mL x 10 | |
| Adrenaline 1:10,000 1 mg/10 mL x 5 | |
| Amiodarone 150 mg/3 mL x 2 | |
| Atropine 600 microg/mL x 2 | |
| Aspirin 300 mg dispersible tablet (1 sleeve) x 8 | |
| Ceftriaxone 2 g vial x 2 | For sepsis/meningitis |
| Glucagon 1 mg injection x 1 | |
| Glucose gel 40% 15 g tube x 2 | |
| Glucose 5% 100 mL bag x 1 | For amiodarone infusion |
| Glucose 10% 500 mL bag x 1 | |
| Glucose 50% 50 mL vial x 1 | |
| Glyceryl trinitrate tablets 600 microg bottle x 1 | Or GTN spray |
| Intranasal Mucosal Atomization Device (MAD) x 1 | |
| Metoclopramide 10 mg/2 mL x 2 | |
| Methoxyflurane (Penthrox) 3 mL bottle x 2 | |
| Inhaler (green whistle for above) x 2 | |
| Naloxone hydrochloride 0.4 mg/mL ampoule x 4 | |
| Ondansetron 4 mg x 4 wafers | |
| Salbutamol 5 mg/2.5 mL nebule for inhalation x 5 | |
| Sodium chloride 0.9% 10 mL x 10 | |
| Sodium chloride 0.9% 100 mL bag x 2 | |
| Syringe luerlock 50 mL x 1 | To reconstitute ceftriaxone for sepsis/meningitis |
| Tranexamic acid 1000 mg/10 mL x 1 | |
| YELLOW POCKET - DIAGNOSTIC | |
| Combined blood glucose and ketone monitor x 1 | |
| Blood glucose monitor strips bottle x 1 | |
| Ketone monitor strips bottle x 1 | |
| NIBP cuff child size x 1 | |
| NIBP cuff small adult size x 1 | |
| NIBP cuff adult size x 1 | |
| NIBP cuff large adult size x 1 | |
| NIBP cuff adult thigh size x 1 | |
| Pen torch disposable x 1 | |
| Pulse oximeter x 1 | |

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|-------------------------------------|--|
| Sphygmomanometer manual x 1 | |
| Stethoscope x 1 | |
| Tongue depressors x 4 | |
| Thermometer x 1 | |
| GREEN POCKET - EYE | |
| Eyepad packet x 2 | |
| Eye shield x 2 | |
| Giving set IV x 1 | |
| Micropore roll x 1 | |
| Morgan Lens x 2 | |
| Oxybuprocaine minims x 2 | Stored in fridge in packet labelled FOR EMERGENCY RESPONSE PACK USE ONLY |
| Sodium Chloride 0.9% 500 mL x 2 | |
| GREEN POCKET - MISCELLANEOUS | |
| Antiseptic hand cleanser x 1 | |
| Emesis bag x 1 | |
| Goggles x 2 | |
| Gloves medium x 2 | |
| Gloves large x 2 | |
| Forceps (artery) sterile x 2 | |
| Pen and notepad x 1 | |
| Trauma shears x 1 | |
| Scissors (plain) sterile x 1 | |
| Space blanket x 2 | |
| Yellow clinical waste bag x 1 | |