



Compact, manoeuvrable and safe transport for children and teenagers at busy trauma centre Children's ED

Easy to use, easy to clean and also reliable – all key requirements in a pressured hospital environment

The Bristol Royal Hospital for Children (BRHC) provides a service for Bristol children and a referral service for specialist care for families across the South West – in fact it is the only paediatric major trauma centre in South West England. It is part of the University Hospitals Bristol and Weston NHS Foundation Trust (UHBW), which includes eight other hospitals and is located next to the Bristol Royal Infirmary in the city centre.

With its origins in the Hospital for Sick Children on St Michael's Hill founded in 1866 – BRHC has seen many changes and developments in its long history. The current building – specially designed to be as child-friendly as possible – opened on 22 April 2001, bringing inpatient children's services into one building.

Usability, safety and reliability are key requirements for equipment in any area of the hospital – and none more acutely than the Emergency Department, which has some 48,000 child and teenage patients coming through its doors every year.



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DEDICATED PATIENT TRANSPORT STRETCHER

Whether they are walk-ins, or are brought in by ambulance or helicopter – young patients arriving at BRHC's Emergency Department will almost certainly take the next stage of their journey on a dedicated QA3 Emergency Stretcher, designed and built by British designer and manufacturer of clinical equipment Anetic Aid.



From arriving, through Triage to Scanners, X-ray and other diagnostics and then on to Treatment or Observation and even Recovery, the stretcher has side rails which can be fitted with child print covers to reflect the sympathetic environment as much as possible, as well as practical necessities like fitted transfusion poles and a cylinder trough for oxygen etc. Optional extras include a full suite of accessories for radiographers, including a Carrier Tray and Wallace Support for X-ray cassettes.

Part of the protocol for teams coming on shift are checks to ensure everything is in working order – brakes, side rails, gas assisted back lift etc. – and also the integrity of the pressure care mattress to make sure there are no rips or tears, or residues of matter such as blood etc.

Talking about their day-to-day use of the QA3, Senior Staff Nurse Kim Willcocks and members of her team, Staff Nurses Katy Walding, Evie Butler and Mary Vu and Trainee Nursing Associate Libbi Perkins all reflected on the manoeuvrability of the trolley 'I really like the steering mechanism – it's easy and you can move the trolley on your own,' said Katy.

There were also comments about the ease of fitting through narrower doorways – particularly those leading to the helipad on the adjacent Royal Bristol Infirmary where young patients can be flown in by the air ambulance at least a couple of times a week.



Generally, there tend to be more injury cases in the summer (because of youngsters playing outside and getting adventurous), while in winter they are perhaps more likely to present with illnesses.

Another important factor for Emergency Transport is weight capacity: the QA3's ability to carry up to 320kg means that, when necessary, a parent can be on the trolley with their child to comfort them. *'When a little one has something wrong, the last thing they want is to be put on a trolley, but if mum or dad can be on it with them, it's fine.'*

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