

#### Additional Hazard or Information Sheet

## **Bariatric (Heavy) Patients**

#### **Document Overview**

# Initial information to both inform and assist Incident Commanders in dealing with this subject matter:

Incidents where there is a need to move or assist in the movement of bariatric patients.

#### 1 Hazards

- $\hfill\square$  Collapse of structure due to the load imposed by the rescue actions
- Manual handling
- $\hfill\square$  Arduous working conditions
- Biohazards
- □ Sharps/needles
- $\hfill\square$  Ground conditions leading to slips, trips and falls
- Exposure to traumatic circumstances
- Intimidation/violence from members of public/affected person
- □ Contact with animals/insects
- Falls from height

#### 2 Actions

- □ Liaise with healthcare professionals if they are already in attendance
- DRA to include manual handling assessment
- Determine what resources are required
- □ Minimum number of personnel in the risk area, (e.g. load, dignity, space)
- $\hfill\square$  Establish and maintain cordons
- $\hfill\square$  Clear and designated access routes
- □ Avoidance routes/areas
- Utilise specialist FRS shoring/lifting equipment if available
- □ Assign a Safety Observer to monitor for signs of collapse

#### **3** Further considerations

- Rotation of crews
- Working at height procedures
- $\hfill\square$  Isolation of services
- □ Hygiene procedures
- □ Hazmat/decontamination procedures
- Hot debrief
- $\hfill\square$  Critical incident stress management
- Post exposure reporting

Health surveillance

#### 4 Supporting information

A bariatric patient is deemed to be a large or heavy person creating a manual handling risk. The term is generally adopted to refer to persons who require specialist manoeuvring strategies. Bariatric patients may have some of the following health issues:

- 1. High blood pressure
- 2. Heart disease
- 3. High cholesterol and blood lipids (LDL)
- 4. Type 2 diabetes
- 5. Sleep apnoea
- 6. Osteoarthritis
- 7. Asthma and bronchitis
- 8. Gastroesophageal reflux (GERD)
- 9. Urinary stress incontinence

Under normal circumstances Fire Control will not mobilise personnel to a bariatric rescue without a request for assistance from a healthcare professional such as a doctor, or ambulance personnel. They can, however, mobilise at their discretion if they feel the situation is life threatening.

The Fire and Rescue Service has no statutory responsibility to attend incidents to move or assist in the movement of bariatric persons. Whilst the Fire and Rescue Service will always attempt to assist people who are in distress, due care is necessary to ensure that personnel attending incidents are not subject to unreasonable risk. In undertaking any activity, the risks must be correctly assessed and any equipment employed must be fit for purpose.

Personnel should only attempt to move a bariatric patient where there is a significant threat to patient health. This will be decided by the healthcare professionals and/or Incident Commander. The healthcare professional will always remain responsible for the clinical needs of the patient.

It is important to note that a floor in a normal domestic house can be expected to take a load of approximately 150kg per m<sup>2</sup>. Whilst dealing with a bariatric patient an officer in charge should consider that with the added load of ambulance personnel, fire personnel, equipment and furniture, the potential load can quickly increase and specialist shoring equipment may be required.



### **Document References**

#### **1. Technical References**

None

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