Foundation

Questions about the Foundation Standard?
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FOUNDATION STANDARD 11.6 – RESIDUAL CURRENT DEVICES (RCDs)

Electrical safety scenarios in general practice

General practitioner consultation rooms		
Scenario	**Outcome**	**Comment**
1. **Manual**, **non-electric** examination bed in place. Procedures using battery-operated equipment or devices (for example, battery-operated smear light).	No Body Protected Area needed.	Patient is not connected to mains power.
2. **Electric** examination bed in place. General manual examinations as part of consultation.	No Body Protected Area needed. All electric beds must have a 10 mA Type 1 medical grade RCD installed.	› A licensed electrician should install the medical grade 10 mA Type 1 RCD where needed. › The practice should test it in-house at least every six months using the test function, arrange annual testing by an electrician using appropriate test equipment, and keep records.
3. **Electric** examination bed in place. Procedures involving an unwell patient and/or any procedure that involves fluids, for example dressings, or where any other medical device connects the patient to mains power, for example, ECG, spirometry, or nebulisers, if not battery operated.	A certified Body Protected Area is needed.	› The patient is connected to mains power. › Risk is higher because the patient is unwell, body fluids may be present, and other equipment may also connect the patient to mains power.
4. **Electric** examination bed in place. Procedures such as minor skin surgery.	A certified Body Protected Area is needed.	› The patient is connected to mains power. › Risk is higher because body fluids may be present.

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Treatment rooms: nurses' stations, nurse treatment rooms, other spaces where treatment is provided to patients.		
Scenario	**Outcome**	**Comment**
5. **Manual, non-electric** examination bed in place. Procedures such as smears, ECGs, dressings, and IV treatment undertaken.	A certified Body Protected Area is needed if mains powered equipment connects to the patient; for example, if an ECG is used through a PC or laptop that is plugged into mains power during patient use.	Check what equipment the practice uses during treatment. If any equipment connects the patient to mains power, a Body Protected Area is needed.
6. **Manual, non-electric** examination bed in place. Procedures such as smears, ECGs, dressings, and IV treatment undertaken with all devices being **solely battery operated** (not able to be plugged in for use).	No Body Protected Area needed.	Patients are not connected to mains supply.
7. **Manual, non-electric** examination bed in place. Battery-operated ECG or other device that **can also be plugged into mains power during use**.	A certified Body Protected Area is preferred. If that is not in place, the minimum is a 10 mA Type 1 medical grade RCD and risk mitigation.	To reduce risk, any dual battery or mains operated equipment should have a sign such as: "Unplug me before connecting to the patient" and should have a 10 mA Type 1 medical grade RCD installed.
8. **Electric** examination bed in place. Procedures such as smears, ECGs, dressings, and IV treatment undertaken.	A certified Body Protected Area is needed.	The patient is receiving treatment and is connected to mains power through the electric bed.
9. **Electric** examination bed in place. Battery-operated ECG or other device but can also be plugged into mains power during use.	A certified Body Protected Area is needed.	The patient is receiving treatment and is connected to mains power through the electric bed.
10. **Manual, non-electrical** examination bed in place. ECG machine or other electrical device plugged into mains supply with a 10 mA in-line medical-grade RCD (no battery option).	A certified body protected area is needed.	The patient is receiving treatment and is connected to mains power.

Other situations		
Scenario	**Outcome**	**Comment**
11. Older premises › **Electric** examination beds used in several rooms including the treatment room. › No Body Protected Area; upgrade is difficult and costly.	Review how each room is used and whether a certified Body Protected Area is needed. If it is needed, the practice must acknowledge the requirement, have a documented transition plan, and put interim risk mitigation in place.	Refer to the guidance for details about the transition plan and interim risk mitigation.
12. Practice is planning to relocate › Existing building is unsuitable for converting to certified Body Protected Areas. › Uses mains-powered equipment on patients using 10 mA Type 1 medical grade RCD installed sockets.	The practice needs a transition plan with timelines and risk mitigation in place until relocation occurs.	Refer to the guidance for details about the transition plan and interim risk mitigation.
13. Outreach or marae setting › Portable equipment used off-site. › No certified Body Protected Area in the outreach venue.	A risk-based approach is needed. The practice should show how electrical risk is reduced in the outreach setting, what equipment is used, whether it is battery operated or mains powered, and what advice has been obtained.	Refer to the guidance for details.