**Transfer of Care & Transfer of Care Reporting System**

**Transfer of Care** is defined as the transfer of accountability and responsibility for patient care from an Ambulance Paramedic to a hospital clinician. To facilitate Transfer of Care, a clinical handover using a structured approach such as ‘IMIST AMBO’ must occur between the treating Paramedic and accepting ED clinician.

Transfer of Care is deemed complete when clinical handover has occurred and the patient has been offloaded from the ambulance stretcher and/or the care of the ambulance paramedics is no longer required.

This all started in 2008 through the Special Commission of Inquiry into Acute Services in NSW Public Hospitals. It was recommended (#80) that the Ambulance Service of NSW and Emergency Departments within NSW Health agree and jointly determine ‘off stretcher time’.

The “Transfer of Care Reporting System” (TCRS) is a centralised web based application that allows you to view your hospital’s ‘Transfer of Care’ time any time of the day or night. It matches Ambulance and ED data.

‘Transfer of Care’ time replaced ‘off stretcher’ time in April 2012 and is reported through the monthly Performance Reports. It is captured using:
- the NSW Ambulance arrival time as the start time, and
- the transfer of care between ambulance paramedics and hospital clinicians (i.e. captured electronically when a patient is moved from an ambulance treatment zone into an ED treatment zone) as the end time.

The TCRS works by using the ambulance incident number and date to match patients from the ambulance service with patients in the ED. The reason ambulance incident number is being used is because at the present point in time, date in combination with ambulance incident number is the only unique identifier of patients across both system.

The most current information in the TCRS is always for yesterday. This is because it operates via daily batched data extraction. This means that daily data is taken from both the ambulance and ED systems and matched within the Transfer of Care Reporting System once a day, this occurs at approximately 5am for the previous day.

Transfer of Care time is a whole of hospital KPI not just an ED KPI. We are measuring all priority 1, 2 & 3 ambulances most of these go to the ED but some go direct to the ward. As an interim measure we will still be using ‘Off Stretcher Time’ as the default ‘Transfer of Care Time’ for patients that go direct to ward (further work is required to extract this data from your PAS). In the TCRS there will remain some patients that are unmatched, the majority of these are the direct to ward patients.

All emergency department staff need to do is:
- Enter Ambulance incident number instead of Ambulance Case Sheet number into the ED system (full patient registration screen).
- Correct ‘unmatched patients’ & check the ‘error report’. Each hospital will decide who will be responsible for this. It is recommended that this is done on a daily basis

**Please Note:** Patient care is the priority of the Triage nurse & ED Clinicians. The incident number is set up to be entered in the full ED patient registration screen, after ambulance arrival mode has been selected. At most hospitals it is generally the ED clerical staff who will do this.

All Ambulance Paramedics need to do is:
- Legibly write ‘incident number’ on hand written case sheets & communicate “incident number” at all communication points within EDs i.e. Triage, ED Clerk, patient handover, etc.
- Still press the Off Stretcher Button on the Ambulance mobile data terminal

Log onto the Transfer of Care Reporting System
a short video, facts sheets & user guide are available after you have logged on to take you through using the system

Please contact Adam Golding for your user name & password [agold@doh.health.nsw.gov.au](mailto:agold@doh.health.nsw.gov.au)
Transfer of Care Reporting System. For Emergency Department Staff

Identifying IT systems with frontline clinicians to support patient care

In 2008 the Special Commission of Inquiry into Acute Services in NSW Public Hospitals recommended (#80) that the Ambulance Service of NSW and Emergency Departments within NSW Health agree and jointly determine ‘off stretcher time’.

Part of the governments response (Caring Together: The Action Plan for NSW) is that NSW Health will ensure that hospital staff and ambulance staff are jointly involved in the recording of off-stretcher times by building an interface between the Ambulance Service Computer Aided Dispatch and ED information systems (e.g. Cerner FirstNet) to allow agreed accurate reports to be generated.

To this extent the “Transfer of Care Reporting System” has been designed. This system matches relevant Ambulance CAD information to ED data to measure ‘Transfer of Care’ time.

Consultation has occurred across NSW Health, including the Ambulance Service of NSW, with both frontline clinicians and IT staff. This has allowed development of a computerised system that has minimal impact on staff.

‘Transfer of Care’ time is measured using the ASNSW Ambulance arrival time as the start time and the transfer of care between ambulance paramedics and hospital clinicians (i.e. captured electronically when a patient is moved from an ambulance treatment zone into an ED treatment zone) as the end time.

**Phase 1** requires staff to enter Ambulance “Incident Number” instead of Ambulance “Case Sheet Number” into your ED system (full patient registration screen). Incident number is used to match data in the system.

**Phase 2** requires staff to commence using the Transfer of Care Reporting System prior to it going live in April 2012. This system allows you to view your hospitals ‘Transfer of Care’ time anytime of the day or night.

**Phase 1 & 2** are now well underway, in preparation for go live in April 2012.

‘Transfer of Care’ time will replace ‘Off Stretcher Time’ as of April 2012

### What’s changing & what isn’t changing?

**New** – ‘Off Stretcher time’ will now be ‘Transfer of Care’ to better reflect the clinical interaction between ambulance paramedics and hospital staff

**New** – Entry of ambulance ‘Incident number’ instead of ‘case sheet number’ into the full ED patient registration screen (5 digit number)

**New** – Ambulance Incident number will be on the ambulance status board, although the old ‘OST’ measure will remain on the ambulance status board.

**New** – online application “Transfer of Care Reporting System” that matches Ambulance data to ED data. To produce ToC reports. These reports will be available daily.

**Eventually** – Paramedics will have “motion tablets” that record & transfer information in real time

**Everything else remains the same**

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To this extent the “Transfer of Care Reporting System” has been designed. This system matches relevant Ambulance CAD information to ED data to measure ‘Transfer of Care’ time.

Consultation has occurred across NSW Health, including the NSW Ambulance, with both frontline clinicians and IT staff. This has allowed development of a computerised system that has minimal impact on staff.

‘Transfer of Care’ time is measured using the ASNSW Ambulance arrival time as the start time and the transfer of care between hospital clinicians and ambulance paramedics as the end time. Transfer of Care is deemed complete when clinical handover has occurred and the patient has been offloaded from the ambulance stretcher and/or the care of the ambulance paramedics is no longer required.

Paramedics are required to legibly write ‘incident number’ on all hand written case sheets & communicate “incident number” at all communication points within EDs i.e. Triage, ED Clerk, patient handover, etc.

Paramedics are still required to press the Off Stretcher Button on the ambulance mobile data terminal.

Phase 1 for ED Staff requires ED staff to enter Ambulance “Incident Number” instead of Ambulance “Case Sheet Number” into their ED system. Incident number is used to match data in the system.

As of 1st April 2012 ‘Transfer of Care’ time has replaced ‘Off Stretcher Time’ for all NSW Health reports.

What’s different?
‘Off Stretcher time’ KPI for hospitals is now ‘Transfer of Care’. This better reflects the clinical interaction between ambulance paramedics and hospital staff and is reported monthly as part of the NSW Health Performance Reports.

New – Communications of Ambulance ‘Incident number’ to ED staff (5 digit number)
New – Ambulance Incident number will be on the ambulance status board, although the old ‘OST’ measure will remain on the ambulance status board.
New – online application “Transfer of Care Reporting System” that matches Ambulance data to ED data. Both hospital and Ambulance staff will be able to access the ‘Transfer of Care’ information, anytime of the day or night.
Eventually – Paramedics will have “motion tablets” that record & transfer information in real time

Everything else remains the same