

Guide to Retrievals and Bed-finding for Far West Local Health District Patients

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Far West Local Health District (LHD) maintains referral patterns preferentially to South Australia and within NSW.

At times of increased activity, South Australia may have difficulties accommodating retrieved patients (unless they require lifesaving time-urgent interventions). An alternate destination will also be identified in cases where the South Australian facility does not have the required clinical services.

In these instances, NSW destinations will need to be sourced along existing referral pathways to Western NSW LHD, Western Sydney LHD, Sydney LHD, Nepean Blue Mountains LHD and the Sydney Children's Hospitals Network (SCHN).

Referral process

Time-urgent transfer of critically ill patients

When the need for time-urgent transfer of critically ill patients in Far West LHD is identified, either the Aeromedical Control Centre (ACC), for patients aged 16yrs or over, or Newborn & Paediatric Emergency Transport Service (NETS), for patients aged under 16yrs should be immediately notified. This notification should not be delayed by waiting for further clinical information or bed-finding attempts.

The ACC and NETS have rostered critical care consultant clinicians who can give expert clinical advice and begin to arrange the logistics of early transfer. This can commence in parallel with bed-finding calls. With respect to neonatal or paediatric patients NETS will maintain contact and clinical leadership until a MEDSTAR retrieval team is on the ground and assumes care or the patient has left the Far West Hospital with the Royal Flying Doctors Service (RFDS) team. If NETS are conducting the retrieval, they remain the clinical leaders until the patient is safely handed over in the destination hospital.

The ACC or NETS will facilitate bed-finding for this group of patients (including in South Australia, which usually offers the closest-in-time tertiary hospitals). The referring clinician will usually be part of a conference call involving the ACC or NETS, along with the receiving clinician at the most likely destination.

In instances where a proposed transfer cannot be accepted, the resident jurisdiction is required to operationalise an alternative referral pathway.

To activate a transfer into South Australia, the NSW ACC or NETS Retrieval Consultant will:

- Satisfy themselves that the patient condition is critical and that time-urgent life-saving treatment is required, and not available at a closer facility
- Immediately contact their South Australian equivalent (MedSTAR SA Medical Coordinator) to provide clinical details to help facilitate choice of receiving destination
- In parallel, activate an urgent retrieval (usually via RFDS Broken Hill medical team, although may also be via a MedSTAR team)
- Provide a full clinical handover and estimated time of arrival (ETA) to relevant senior (consultant) clinicians at the destination as part of a conference call with MedSTAR and the receiving hospital
- Provide ongoing clinical advice and support to both the referring facility and the retrieval team enroute to the final destination.

Patients who are critically ill but whose transfer is not time-urgent shall have their transfer organised using the current processes.

Other patients requiring tertiary care

All patients requiring transfer and admission to a tertiary facility for ongoing treatment are initially referred to South Australia for admission. If this cannot be achieved in a timely manner referral may occur within NSW.

Patients not requiring tertiary care

Patients requiring a specialty service that is not available at Broken Hill Hospital, but that do not require tertiary care may be transferred to Western NSW LHD or another NSW LHD in the event the Royal Adelaide Hospital or another Adelaide facility is unable to assist.

The Patient Flow Unit of Western NSW LHD, known as vCare, can be contacted to facilitate an inter hospital transfer to a receiving destination in their LHD if clinically appropriate.

Referral pathways

Patients requiring tertiary care in NSW are referred according to the Policy Directives listed below:

- [Critical Care Networks and Transfer of Care \(Adults\) PD2018_011](#)
- [Interfacility Transfer process for Adult Patients requiring Specialist Care PD2011_031](#)
- [Critical Care Tertiary Referral Networks \(Paediatrics\) PD2010_030](#)

Referral pathways for Far West LHD are documented in Charts 1 to 3 at Appendix A.

Critically ill adult patients

See Chart 1

Due to proximity, critically ill adult patients in Far West LHD should be referred to the Royal Adelaide Hospital. In the event this cannot be achieved, within a clinically acceptable timeframe, the transfer will be referred to the Royal Prince Alfred Hospital via Sydney Local Health District.

Critically injured / adult trauma patients

See Chart 2

Due to proximity, time urgent adult trauma in Far West LHD should be referred to the Royal Adelaide Hospital in the first instance. In the event this cannot be achieved in a clinically acceptable timeframe, transfer will be referred to:

- Westmead Hospital (major trauma service)
- Orange Health Service (regional trauma service)
- Nepean Hospital (regional trauma service).

Non-time urgent major trauma is referred to the Royal Adelaide Hospital in the first instance. In the event this cannot be achieved in a clinically acceptable timeframe, the transfer will be referred to Westmead Hospital (major trauma service).

Non-time urgent moderate or minor trauma is referred to either:

- Orange Health Service (regional trauma service)
- Nepean Hospital (regional trauma service).

Note: for critically injured adult patients, Far West LHD has a split critical care and trauma referral network, where critical care patients are networked with Royal Prince Alfred Hospital and trauma patients with Westmead Hospital.

Critically ill or injured paediatric patients

See Chart 3

Due to proximity, children requiring critical care in Far West LHD are referred to the Adelaide Women's and Children's Hospital and neonates are referred to Sydney's Royal Prince Alfred Hospital Neonatal Intensive Care Unit. For paediatric patients of all ages requiring services not available in South Australia, NETS will advise on referral to one of the SCHN hospitals in Sydney.

In the event that transfer to South Australia cannot be achieved within a clinically acceptable timeframe, the transfer will be referred to one of the SCHN hospitals in Sydney.

Escalation points

Time urgent clinical escalation

For time urgent transfers, where there are concerns about the timely transfer of patients requiring urgent care the NSW Retrieval Consultant should be contacted via ACC or NETS.

The NSW Retrieval Consultant will escalate the issue to:

- The designated contact in South Australia Health (Executive Director, Health Services Programs) or
- The Executive Director, Aeromedical Control Centre or the NETS State Director (if the matter is unable to be resolved).

If still unresolved, further escalation should be to the Ministry of Health Executive on call on 0459 897 716.

Non-time urgent clinical escalation

For non-time urgent transfers, when assistance is required due to unreasonable delays in retrieval and/or inability to accept at receiving hospitals in South Australia or subsequent inability to accept patients by NSW hospitals, the Far West LHD Director of Medical Services (DMS) must be contacted.

The Far West LHD DMS will escalate the issue to the Far West LHD Chief Executive, who should first raise the issue with the Chief Executive at the receiving health district or network.

If still unresolved, further escalation should be to the NSW Ministry of Health Executive on call on 0459 897 716.

Fixed Wing operations

Once a transfer destination is confirmed, the Far West LHD should contact the ACC to arrange the transfer of patients to and from the Far West LHD. For paediatric patients NETS will coordinate this step.

Where a patient transfer is required from Far West LHD to a Sydney Hospital a staged transfer from Dubbo should be considered to allow the Broken Hill aircraft to return to its geographic response area within the shortest possible time.

Indicative flight times are:

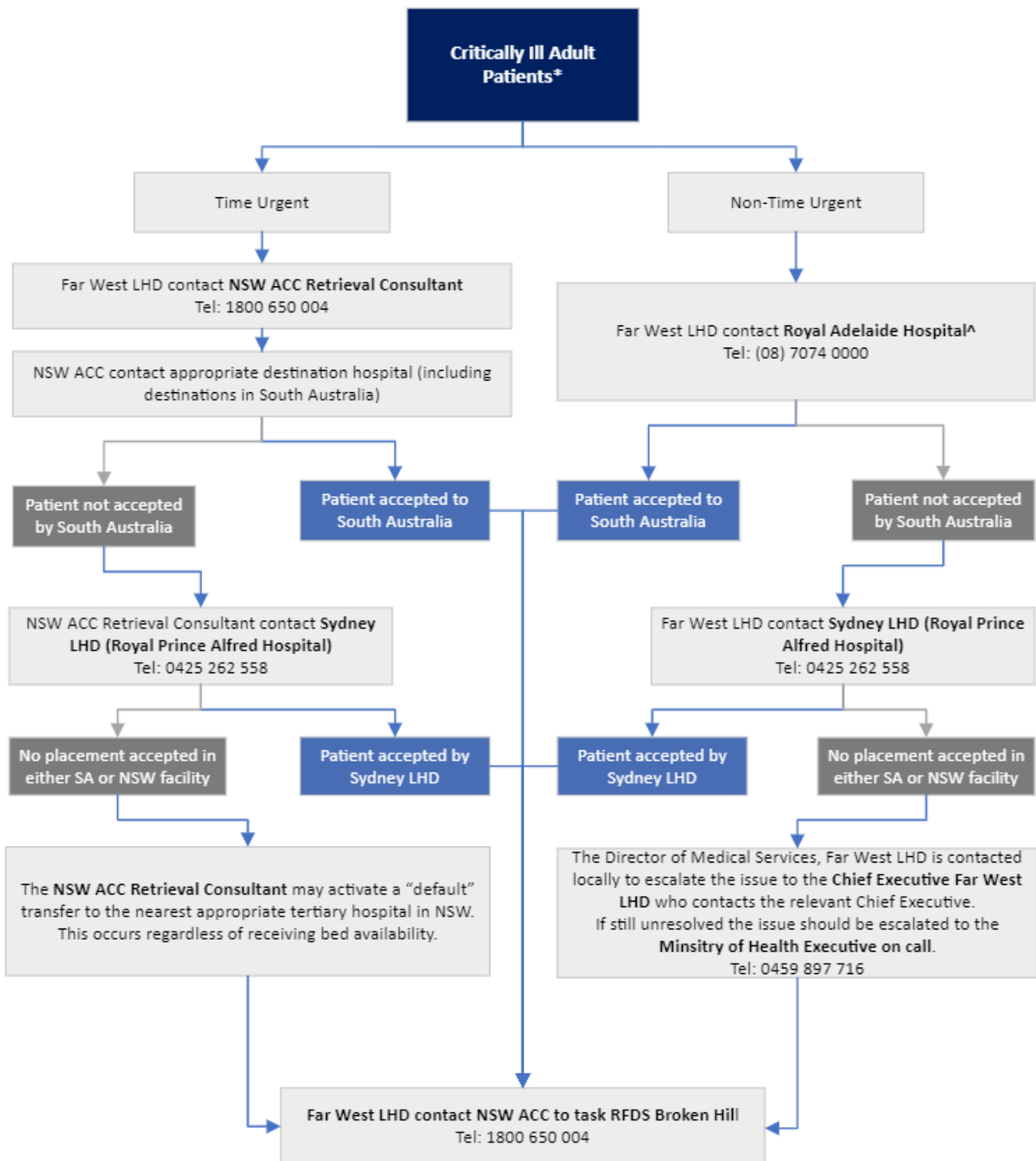
Sector	KingAir B200 flight time (minutes)
Sydney to Dubbo (SY-DU)	60
Sydney to Broken Hill (SY-BH)	135
Sydney to Adelaide (SY-AD)	150
Broken Hill to Orange (BH-ORG)	100
Broken Hill to Dubbo (BH-DU)	90
Broken Hill to Adelaide (BH-AD)	60
Adelaide to Dubbo (AD-DU)	130

Relevant phone numbers

Organisation	Contact
NSW Aeromedical Control Centre	NSW Adult State Retrieval Consultant 1800 650 004
NSW Newborn & Paediatric Transport Service (NETS)	Paediatric and Neonatal State Retrieval Consultant 1300 36 2500
NSW Ministry of Health	Executive On call 0459 897 716
Nepean Blue Mountains LHD – Nepean Hospital	Clinical Coordination HUB 0437 320 151
Sydney Children’s Hospital Network	Patient Flow Manager, Children’s Hospital Westmead Contact via switch: (02) 9845 0000
Sydney LHD – Royal Prince Alfred Hospital	Royal Prince Alfred Bed Manager 0425 262 558
Western NSW LHD vCare	Western NSW LHD Patient Flow 1800 492 227
Western Sydney LHD – Westmead Hospital	Westmead Hospital, Trauma Consultant on Call Contact via switch: (02) 8890 5555
South Australia Health	Executive Director, Health Services Programs, South Australia Health 0488 548 021
Royal Adelaide Hospital	Contact via switch: (08) 7074 0000
Adelaide Women’s and Children’s Hospital	Contact via switch: (08) 8161 7000

Appendix A: Far West LHD Referral Pathway Flow Charts

Chart 1: Critically Ill Adult Patients

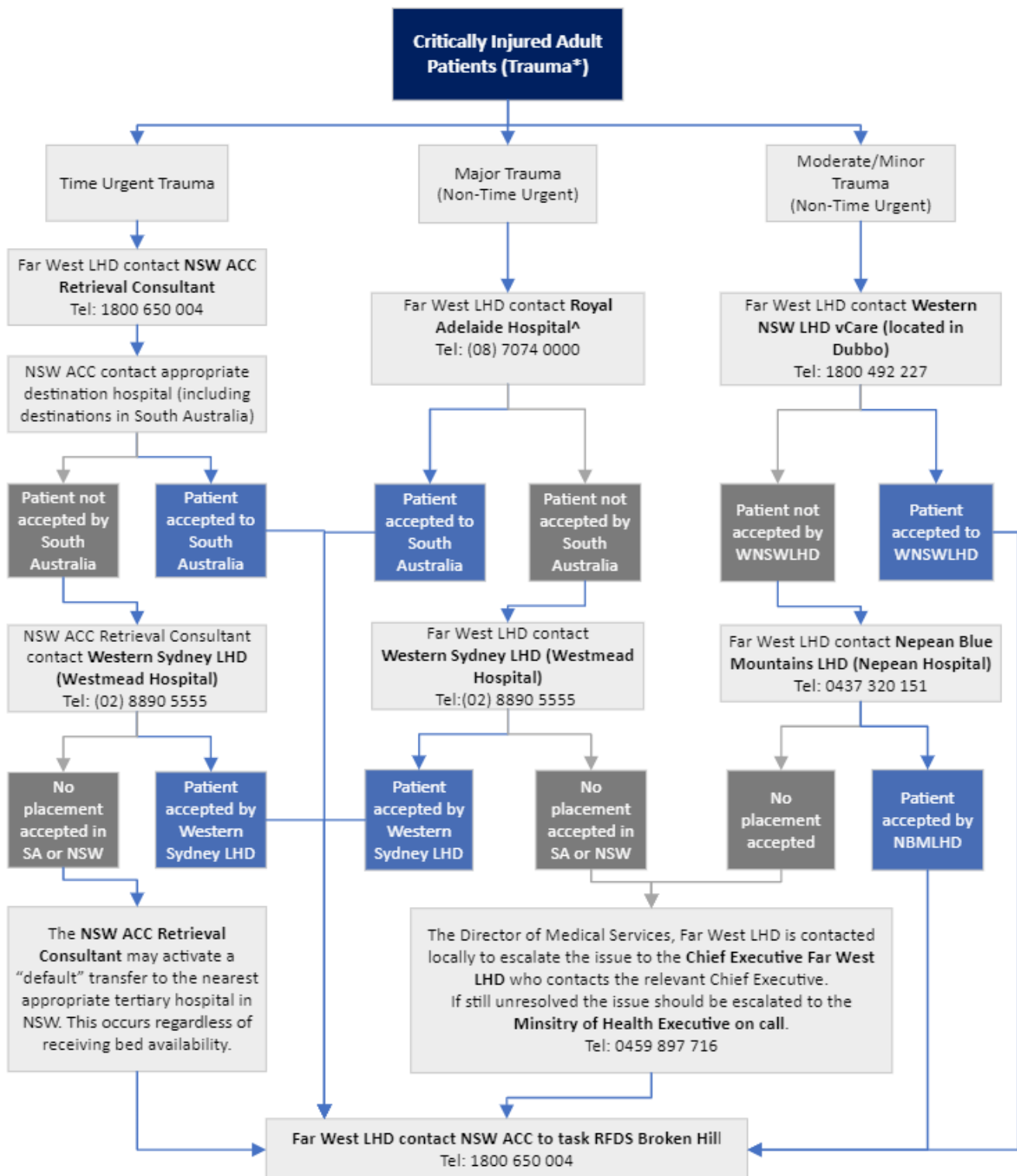


*The policy also refers to "critically injured patients" following this pathway. Far West LHD has a split referral network where critical care patients follow the pathway above, while trauma patients from the Far West LHD follow the alternate referral process outlined in Chart 2

[^]Due to proximity, referral occurs to South Australia in the first instance. If transfer is unable to be achieved in a clinically acceptable timeframe, alternate destinations within NSW will be sourced.

Refer to PD2018_011 NSW Critical Care Tertiary Referral Networks and Transfer of Care (ADULTS) for further information

Chart 2: Critically Injured Adult Patients (Trauma)

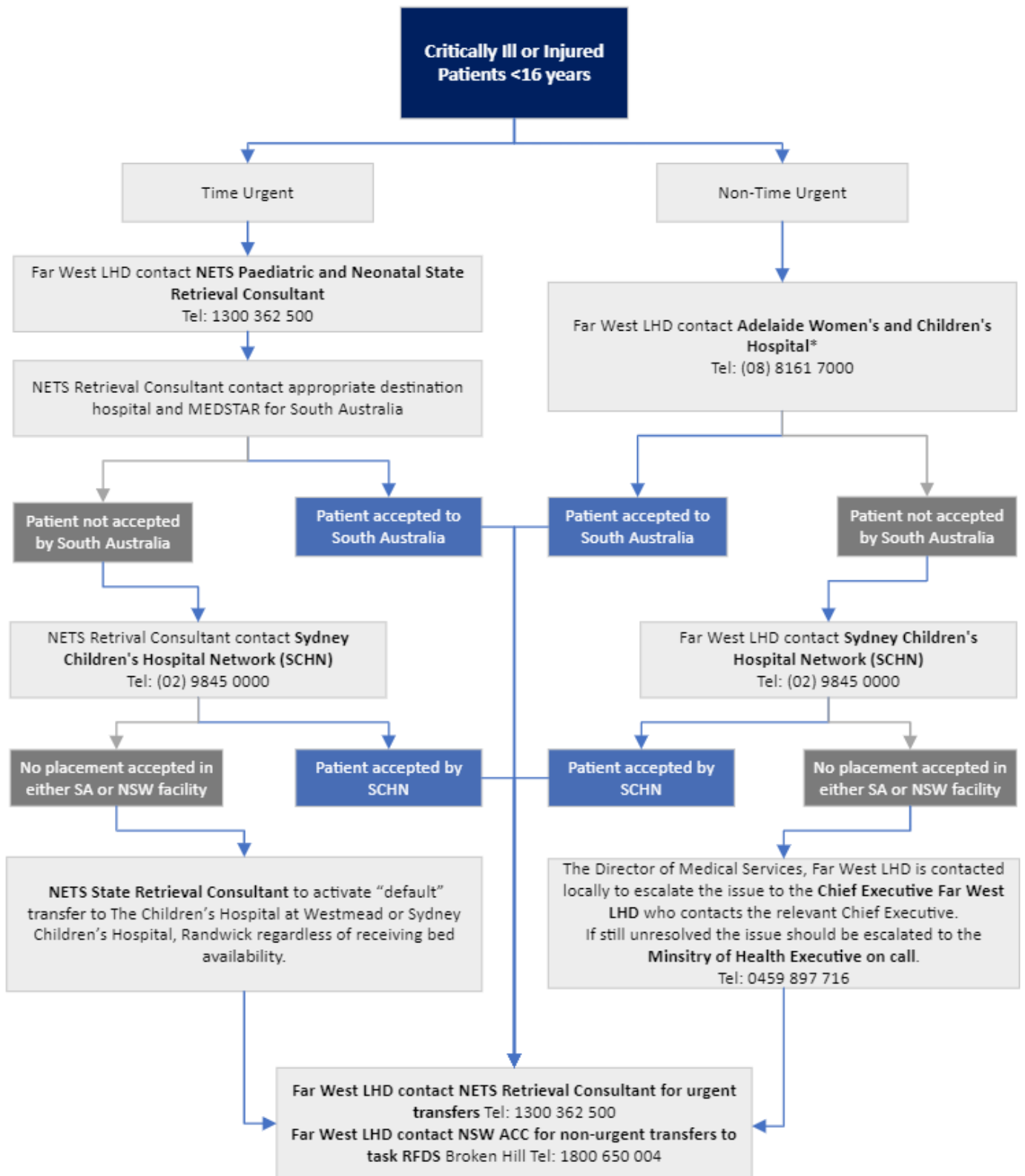


*This is the process for all Trauma patients. Critical care patients from the Far West LHD follow the pathways outlined in Chart 1.

[^]Due to proximity, referral occurs to South Australia in the first instance. If transfer is unable to be achieved in a clinically acceptable timeframe, alternate destinations within NSW will be sourced.

Refer to PD2018_011 NSW Critical Care Tertiary Referral Networks and Transfer of Care (ADULTS) and NSW Trauma Networks (https://aci.health.nsw.gov.au/networks/institute-of-trauma-and-injury-management/clinical/trauma_system/nsw_trauma_system/nsw_trauma_networks) for further information

Chart 3: Critically Ill or Injured Paediatric Patients



**Due to proximity, referral occurs to South Australia in the first instance. If transfer is unable to be achieved in a clinically acceptable timeframe, alternate destinations within NSW will be sourced.*

Refer to PD2010_030 Critical Care Tertiary Referral Networks (Paediatrics) for further information