

Winter in Western – Medical Officer Support District Patient Flow Transport Unit

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“I would like to acknowledge the traditional owners of the land we’re meeting on today and pay my respects to Elders past, present and future.”



Health
Western NSW
Local Health District

WNSWLHD

- Facilities in 40 geographical locations and includes 3 major referral, 4 district and 30 rural hospitals.
- Second most sparsely populated LHD - just over 1 person per sq. km.
- Presents significant challenges to the delivery of specialist medical and support services.
- 2.0% population growth over the past 5 years, 17% growth from 2006 to 2011 for the 65+ ages.
- < 1% population growth forecast from 2011 to 2016.
- Aboriginal population rises from 4% in Bathurst to 11% in Dubbo and to 27% in 'Remote' (compares with 2.5% for NSW).

WNSWLHD

- Committed to the delivery of safe, accessible and equitable service for people living in Western NSW.
- Committed to evidence based service delivery.
- Improving the patient experience
- Reduction in disparities in health outcomes between the Aboriginal population and other Australians.
- Supporting workforce in Rural and Remote.
- Living within our means.

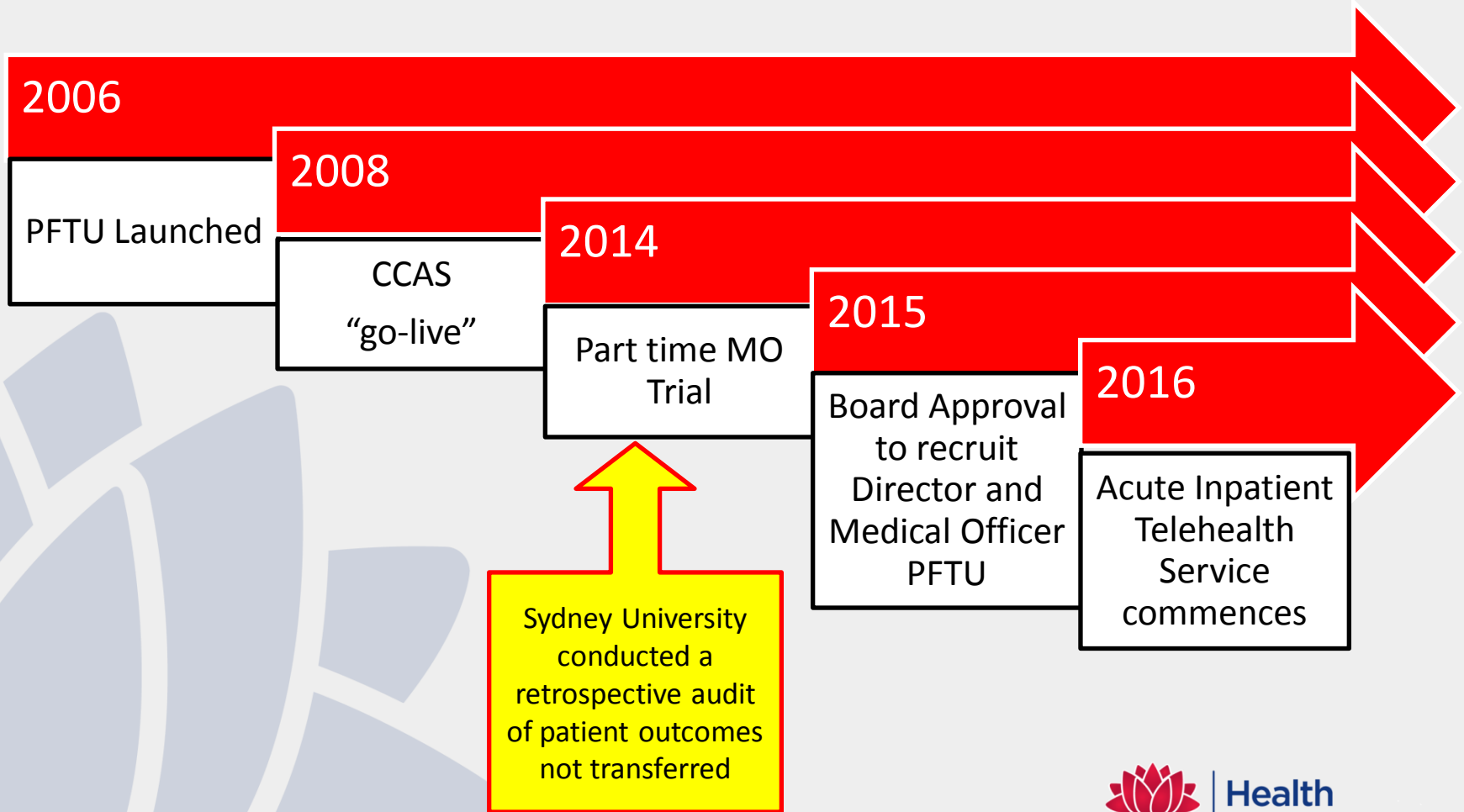


Background

- Unique NSW model encompassing Patient Flow, Patient Transport, Critical Care Advisory Service and IPTAAS.
- All services operate under one roof.
- Operational Hours 0700 -2300.
- Responsible for **all** interfacility transfers
- Coordination of transport for inpatient appointments and diagnostics
- Critically ill patients referred to CCAS for the establishment of a management plan +/- transfer.



Events



What's new 2015?

- Part time Medical Officer PFTU (0800 – 1800)
- Manage referrals to Dubbo and Bathurst Hospitals
- ‘Owned’ the event.
- Established individual management plans according to LHD pathways and best practice.
- Escalate delays – “right care, right time, right place”
- Assisted with end of life discussions and decisions.
- Assisted LHD hospitals with discharge planning.

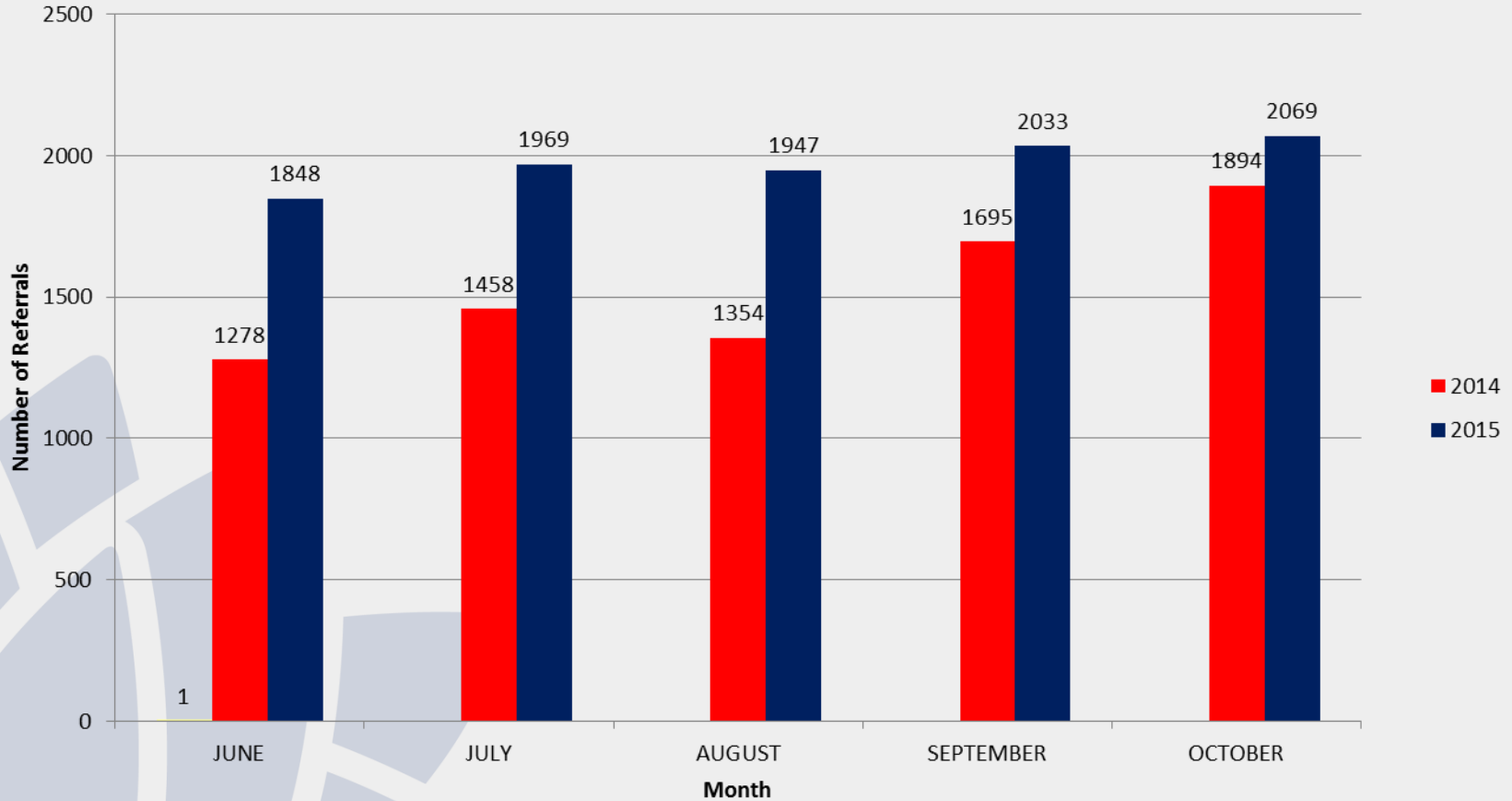


What's new 2015? Cont..

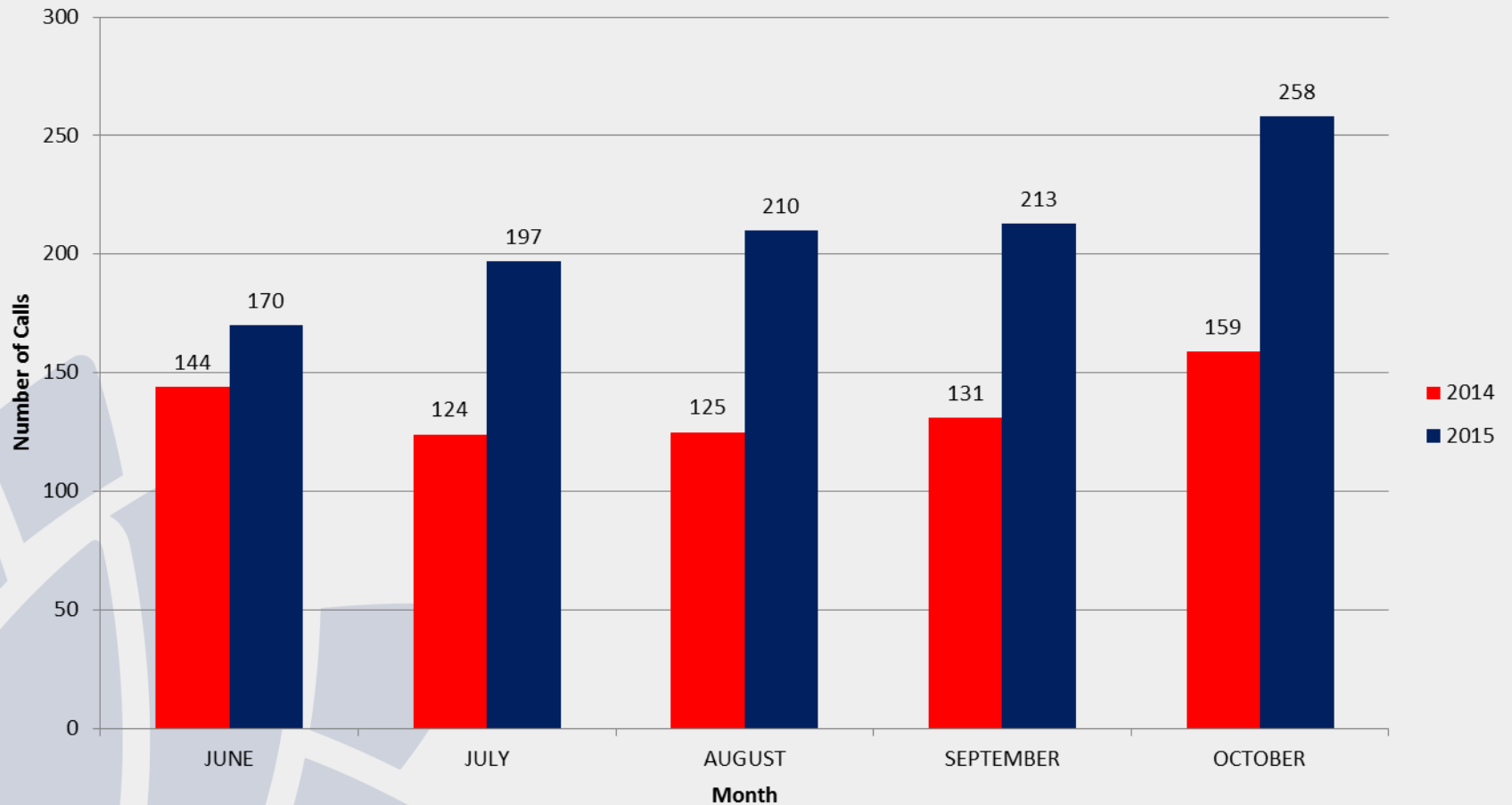
- Worked with Transport Coordinators, GP's and VMOs re inpatient diagnostics and appointments.
- Worked with GP Practices and Residential Aged Care facilities to minimise presentations to EDs.
- Support critically ill patients awaiting retrieval.
- Assisted GP to manage ED presentations.



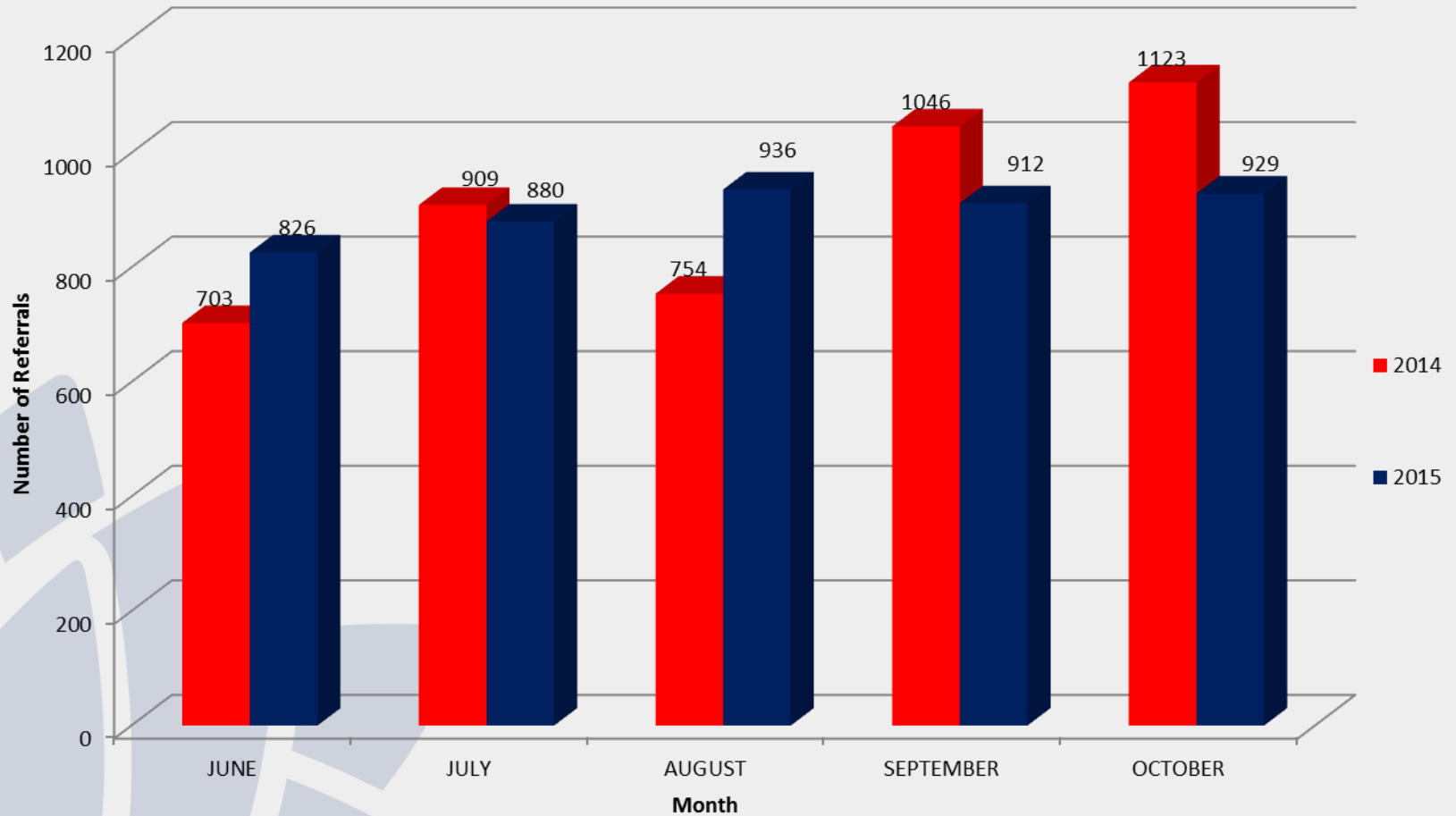
No of Patient Flow Referrals



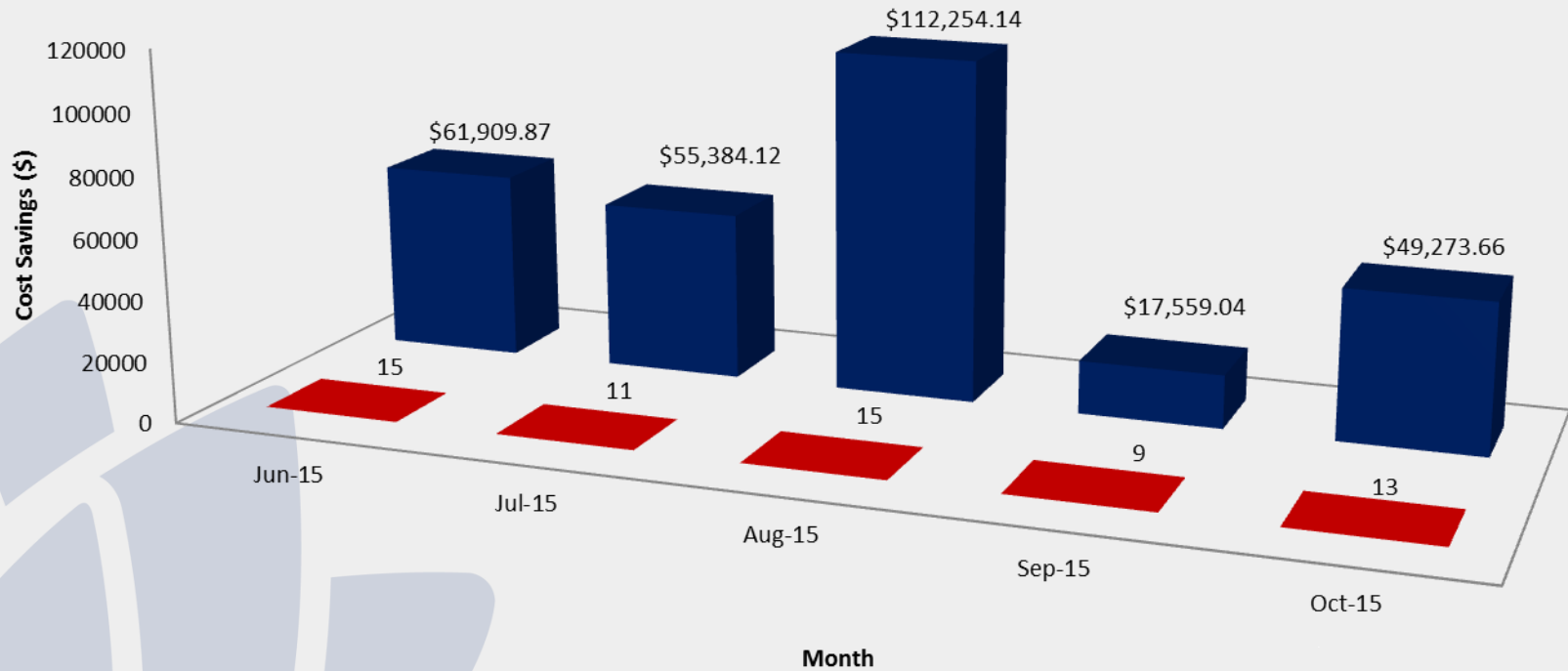
No of Advice Calls



Referral to Major Rural Referrals



Medical Officer Interventions



■ Number of Medical Days ■ Cost Savings



Where to from here?

- Clinical Director PFTU – 10 hrs per week.
- Oversee Governance, Quality and Safety
- Work with Remote Medical Consultation Service
- Medical Officer rostered - 7 days per week.
- 0.5 FTE registrar.
- Admission to facilities in absence of GPs.
- Acute Inpatient Telehealth Service development.
- Further development of business processes.



Thankyou

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