



# Scottish Ambulance Service

## Inter-hospital transfer Booking Guide

November 2020

# Inter-hospital transfer booking guide



## Contents

This booking guide has been split into the various sections below to help with acuity, staffing and resources available:

1. Overview of transfer response categories
2. To book an emergency “Now” transfer
3. For an ambulance in One Hour or Within 4 Hours
4. For a remote and rural inter-hospital transfer
5. Different staff grades and capabilities
6. Vehicle and escort options
7. Safety Netting

## 1. Responses to inter-hospital transfer requests

We will provide a number of different responses to requests from healthcare professionals dependent on the needs of the patient. This includes:

**N**ow

**O**ne or two hours

**W**ithin 4 hours

- **Now Response:** The response will be aligned to our emergency clinical response model and prioritised in the same way as 999 calls across the purple, red, amber and yellow response categories. Will require a conveying resource, paramedic crew and blue light response. A **Now** transfer request would be appropriate in those rare situations where a facility is unable to provide immediate life-saving clinical intervention such as resuscitation or in the case of a declared obstetric emergency and requires the clinical assistance of the ambulance service in addition to a transporting resource OR where the clinical condition of the patient requires a time critical transfer for further treatment and management at the destination facility. Equivalent to Inter-facility transfer (**IFT**) **category 1 or 2** of Intensive Care Society guidelines on transfer of critically ill adults. <https://www.ics.ac.uk/ICS/ICS/GuidelinesAndStandards/ICSGuidelines.aspx>
- **One or Two Hour Response:** A conveying resource and escort, appropriate to patient need, driving under normal road conditions. A **One or two-hour** response would be appropriate for patients who do not require immediate life or limb saving interventions but do require an increase in their level of clinical care within 1-2 hours. This level of response may include mental health crisis transfers or those solely for the purpose of creating a critical care bed.

Equivalent to Inter-facility transfer **(IFT) category 3** of Intensive Care Society guidelines on transfer of critically ill adults.

- **Within Four Hour Response:** A conveying resource and escort, appropriate to patient need, driving under normal road conditions. **Within** 4-hour response is for all other patients who do not fit the above definitions and require urgent transport for ongoing care but do not need to be managed as an emergency. Patients being transferred to inpatient wards for ongoing management or for elective and semi elective procedures or investigations would be included in this group.

Equivalent to Inter-facility transfer **(IFT) category 3** of Intensive Care Society guidelines on transfer of critically ill adults.

- Scheduled response – same day or in future: A conveying resource and escort, appropriate to patient need, driving under normal road conditions. Repatriations or step-down transfers/discharges to non-hospital facilities and outpatient appointments, these types of transfer are not included in the Intensive Care Society Framework.

## 2. How to book an ambulance needed **NOW**

**RING 0333 3990111**

### What you must provide:

- Telephone number (direct line, not switchboard for re-contact)
- Patient pickup location
- Details of any escorts/equipment travelling

### You will be asked:

- Is the patient breathing?
- Is the patient conscious?
- Approximate patient weight?
- Reason for transfer?

## 3. How to book an ambulance needed in up to **One or two hours, or Within four hours**

**RING 0345 6023999**

### What you must provide:

- Patient pickup location
- Telephone number (direct line, not switchboard for re-contact)
- What is the reason for the admission or transfer?
- Does the patient require any active intervention i.e. oxygen, ECG monitoring etc. or is this for transport only?
- Does the patient have any known infection control issues?
- Approximate weight for the patient

#### **4. How to book an ambulance from a geographically remote location**

For ambulance response to geographically remote locations where air ambulance resource or ScotSTAR retrieval team escort may be appropriate, contact the Specialist Services Desk (SSD) in the first instance on **03333 990 222**.

The SSD may facilitate a conference call with a retrieval consultant to help determine the most appropriate transport platform and escort.

#### **5. Our staff**

We employ over 5,000 highly skilled staff, and are helped by over 1,500 volunteers working in roles such as Community First Responders and volunteer car drivers.

We have a range of different skilled roles including:

**Ambulance Care Assistants** can drive a range of ambulance vehicles and provide safe and comfortable transport of walking, chair and stretcher patients, ensuring their dignity and respect is maintained. Ambulance Care Assistants can provide basic first aid and administer up to 6L/min of oxygen.

**Ambulance technicians** provide treatment and transportation for all acuities of patients. Technicians have completed the Diploma in Emergency Care Support at SCQF level 6 and perform a full range of monitoring and assessment skills for patients including all baseline observations, 3 and 12 lead ECG diagnostics and monitoring and blood glucose monitoring. Technicians can also administer a range of oral, buccal and IM drugs.

**Paramedics** are registered healthcare professionals with a Diploma of Higher Education in Paramedic Practice at SCQF level 8. From 2021 all new entry paramedics will be degree educated. Paramedics can perform the same monitoring and assessment skills as technicians, however also have the ability to undertake cannulation (venous and intraosseous), intubation, needle thoracentesis, needle cricothyroidotomy. Paramedics can also administer a wider range of medications i.e. atropine, morphine and diazepam.

#### **6. Transporting resources – staff and vehicles**

We have a range of resources which can respond to your request for transport depending on the needs of the patient.

- **Patient Transport Service (PTS)** is staffed by Ambulance Care Assistants with a range of vehicles that can accommodate patients on stretchers, seated patients and patients in wheelchairs. The vehicles can accommodate multiple patients at the same time.
- **Urgent Tier** vehicles are staffed by an Ambulance Technician and Ambulance Care Assistant will full emergency driving capability should it be required. Urgent tiers are fully equipped ambulances and are targeted towards our one hour, up to two hour and inter-hospital transfer requests however have the ability to respond and transport under emergency conditions if required.
- **Accident and Emergency Ambulances** are staffed by Paramedics and Ambulance Technicians and are fully equipped to attend to the full range of pre-hospital patients.

**NOW** responses will always be attended by emergency vehicles.

**NOW** responses will likely be attended by urgent tier vehicles.

**NOW** responses will either be attended by PTS or urgent tier vehicles.

## 7. Safety netting

On occasions where we are unable to attend the patient in the timescale requested due to geographical or demand implications we will safety net all patients from within our control rooms.

For any **NOW** response patients, one of our clinicians will call back and undertake a full clinical triage after 45 minutes. This may result in the response level staying the same or being elevated.

For **NOW**, or **NOW** response levels, our call handlers will undertake welfare calls at hourly intervals if we are unable to make the initial response time. If, in the unlikely event we are unable to attend within 3 hours, a clinician will undertake a full clinical triage.

We will never knowingly re-categorise a patient lower than that booked of the booking HCP, we will always strive to contact the booking HCP for professional to professional discussion. **Please help by ensuring we have a direct telephone number on which to reach the ordering clinician.**