

# Policy Directive: compliance is mandatory

## Transfer Process – Urgent Surgery and Surgical Assessment in SA Health Services Policy Directive

**Objective file number:** eA926034  
**Document classification:** **PUBLIC-I1-A1**  
**Document developed by:** System Performance and Service Delivery  
**Approved at Portfolio**  
**Executive on:** 17/5/26 (for implementation from 1/7/16)  
**Next review due:** 1 July 2021

**Summary** *The Transfer Process – Urgent Surgery and Surgical Assessment in SA Health Services Policy Directive* establishes a streamlined, consistent process for the transfer of patients between Local Health Networks where urgent surgery or surgical assessment is required which cannot be provided at the originating hospital. Intra-LHN transfers continue to be managed via local processes.

**Keywords** Policy, Directive, Transfer Process, Urgent Surgery, Surgical Assessment, Referring Clinician, Receiving Consultant, Bed Manager, Clinically Required, Consultant Acceptance

**Policy history** Is this a new policy? *Y*  
Does this policy amend or update an existing policy? *N*  
Does this policy replace an existing policy? *N*  
If so, which policies?

**Applies to** *All SA Health Portfolio*

**Staff impacted** *All Staff, Management, Admin, Students; Volunteers*

**EPAS compatible** *NA*

**Registered with Divisional Policy** *No*

**Contact Officer**

**Policy doc reference no.** D0415

### Version control and change history

Version	Date from	Date to	Amendment
1.0	17/5/16	1/7/21	Original version



# Transfer Process – Urgent Surgery and Surgical Assessment in SA Health Services Policy Directive

INFORMAL COPY WHEN PRINTED



Government  
of South Australia

SA Health

## Document control information

Document owner	Executive Director, Operational Service Improvement and Demand Management
Contributors	Local Health Network Chief Operating Officers SA Ambulance Service Chief Operating Officer Director, Rescue Retrieval & Aviation Services, SA Ambulance Service
Document classification	For Official Use Only-I1-A1
Document location	SA Health internet – ‘policies page’
Reference	eA926034
Valid from	1 July 2016
Review date	1 July 2021

## Document history

Date	Version	Who approved New/Revised Version	Reason for Change
17/05/16	V1.0	Portfolio Executive	PE approved version.

# Transfer Process – Urgent Surgery and Surgical Assessment in SA Health Services Policy Directive

## 1. Objective

---

SA Health is committed to ensuring timely and equitable access to appropriate surgical services for all South Australians. The *Transfer Process – Urgent Surgery and Surgical Assessment in SA Health Services Policy Directive* establishes a streamlined, consistent process for the transfer of patients between Local Health Networks (LHNs) where urgent surgery or surgical assessment is required which cannot be provided at the originating hospital.

The aim is to ensure the effective and efficient management of patient transfers, centered on meeting the clinical needs of the patient and the provision of quality care. Where a Surgical Consultant at a receiving hospital has confirmed that a transfer is clinically required, the patient will be accepted and the transfer actioned. The process also provides an alternative mechanism for referring medical clinicians to seek support for the facilitation of transfer requests via the SA Ambulance Service, in circumstances where a Surgical Consultant is not able to be contacted.

## 2. Scope

---

The Policy Directive applies to all SA Health services and clinicians, in the management and transfer of patients between LHNs where the patient requires urgent (non-elective) surgery or surgical assessment, and where the required surgical procedure/assessment or post-procedure care cannot be provided at the point of referral.

Where an LHN has established local processes for the internal transfer of patients between hospitals within the LHN, the local process should be applied as relevant.

Critical Care Retrievals are not within scope of this policy and will continue to be managed under current SA Ambulance Service (SAAS) MedSTAR arrangements. Neonate retrievals will continue to be managed under the arrangements of the SA Neonatal Regional Retrieval Service.

## 3. Principles

---

The transfer of patients requiring urgent surgery/surgical assessment between LHNs is underpinned by the following principles:

- Timely access to appropriate surgical care is ensured through the establishment of clear processes for the initiation, facilitation and acceptance of urgent patient transfers.
- A coordinated, streamlined approach that minimises unnecessary delays and makes the best use of available transportation resources will underpin the provision of safe, efficient and effective patient transfers and care.
- Open communication and information sharing supports confident decision making by all parties, and ensures that patients, their families and carers are kept informed throughout the decision making and transfer process.

## 4. Detail

---

### 4.1 Transfer process

The process for requesting and facilitating a patient transfer between LHNs, for all patients that require urgent surgery or surgical assessment that cannot be provided at the originating hospital, is described below. The process is also set out in the flowchart at attachment 1.

The types of transfers in scope are those where a patient requires urgent unplanned (non-elective) surgery or surgical assessment, for example a patient with a fractured neck of femur, or a patient requiring surgical assessment related to a bowel obstruction or pancreatitis.

To ensure high quality patient care it is important that the steps outlined in the process occur in a timely manner and steps may occur simultaneously to expedite urgent patient transfers.

#### **4.2 Process commencement**

The process commences when a medical clinician identifies a patient requiring urgent surgery or surgical assessment that cannot be provided at the originating hospital. The referring medical clinician should seek to initiate contact with an appropriate Surgical Consultant at a proposed receiving hospital to discuss the patient's clinical condition, via contacting the relevant hospital switchboard.

The referring medical clinician should advise the switchboard operator that they are seeking to initiate an urgent patient transfer and require a discussion with the Surgical Consultant. LHNs and hospitals must ensure that switchboard operators are made aware of the transfer process outlined in this Policy Directive, and the requirement for referring medical clinicians to have access to Surgical Consultants.

It is acknowledged that from time-to-time operational circumstances may result in a Surgical Consultant being unavailable. An LHN/hospital may allow delegation by a Surgical Consultant to a Senior Registrar or Fellow, acting under the clinical supervision of the Surgical Consultant for decision making around the clinical need for transfer requests. The Surgical Consultant retains responsibility and accountability for clinical decision making about acceptance of transfers at all times.

Where a referring medical clinician has made contact with a medical clinician at a proposed receiving hospital that does not have approved delegation (including for example a Junior Registrar or Resident), contact must be made with the appropriate Surgical Consultant via local processes.

#### **4.3 Surgical Consultant confirmation - transfer clinically required**

Where a referring medical clinician contacts a Surgical Consultant at a proposed receiving hospital and the Surgical Consultant confirms the transfer is clinically required, the transfer is approved and the patient is accepted by the Surgical Consultant.

The target timeframe for a Surgical Consultant to respond to an urgent transfer request is as soon as possible and within 40 minutes of initial contact from the referring medical clinician.

The referring medical clinician is responsible for ensuring the patient transfer is operationalised via local processes which will include notifying the patient and their family/carer about the transfer, and booking patient transport.

Patient transport can be booked through contacting SAAS by telephoning 13STAR (6) and requesting an 'urgent booking for surgical transfer/assessment'. A Nurse Retrieval Coordinator (NRC) will return the referring medical clinician call as soon as possible and within a maximum timeframe of 40 minutes.

The receiving hospital is responsible for operationalising its response for a patient accepted for transfer by a Surgical Consultant via local processes, including addressing the following:

- Securing a bed for the patient.
- Notifying the referring medical clinician of patient acceptance and transfer approval.
- Facilitating clinical handover between the referring medical clinician and accepting Surgical Consultant.

Patients deemed as clinically requiring a transfer are not to be refused transfer based on the bed state of the receiving hospital. It is the responsibility of the receiving hospital to manage its beds to accommodate the accepted patient.

Any issues in relation to bed availability and the acceptance of the patient are to be escalated to the receiving hospital Chief Operating Officer (in-hours) or the Executive On-Call (out-of-hours). Refer to attachment 2 for an LHN Executive contact list.

#### Children aged 15 years and under

Where a referring medical clinician is seeking to transfer a patient aged 15 years or under for the purpose of urgent surgery or surgical assessment, the referring medical clinician should contact the relevant Paediatric Surgical Consultant at the Women's and Children's Hospital. All clinically required urgent surgical transfers for this patient cohort will be approved by the Women's and Children's Hospital, and once approved will be communicated via local processes to the Paediatric Emergency Department.

#### **4.4 No Surgical Consultant acceptance**

Where a referring medical clinician has not received acceptance for a transfer from an appropriate Surgical Consultant the referring clinician may contact SAAS by telephoning 13STAR (6) and requesting an 'urgent booking for surgical transfer/assessment'. An NRC will return the referring clinician call as soon as possible and within a maximum timeframe of 40 minutes.

If the patient's condition deteriorates at any time and the patient requires a critical care retrieval, the referring medical clinician should seek to active the retrieval process immediately.

Upon receiving a request for an urgent transfer for surgery or surgical assessment, the NRC will initiate consideration of the transfer request by seeking advice from an appropriate hospital Surgical Consultant. To assist the NRC, the referring medical clinician should be ready to discuss all relevant patient details with the NRC as per the ISBAR principles.

In determining an appropriate Surgical Consultant to consider the transfer request, the NRC will take into consideration a range of factors including:

- All information provided by the referring medical clinician.
- Hospital capacity as shown on the inpatient and emergency department OBI dashboards.
- Known or anticipated critical care system demands.
- Geographical proximity.
- Distribution and frequency of previous transfers/retrievals.

Upon confirmation from a hospital Surgical Consultant that a transfer is clinically required, the patient will be accepted by that Surgical Consultant.

The NRC will:

- Coordinate transport for the patient transfer.
- Notify the referring medical clinician of the patient acceptance for transfer.

The referring medical clinician is responsible for notifying the patient and their family/carer about the transfer.

The receiving hospital is responsible for operationalising its response for a patient accepted for transfer by a Surgical Consultant via local processes, including addressing the following:

- Securing a bed for the patient.
- Notifying the referring medical clinician of patient acceptance and transfer approval.
- Facilitating clinical handover between the referring medical clinician and accepting Surgical Consultant.

#### 4.5 No approval for transfer

If approval for a patient transfer is not secured through the established processes for transfer for urgent surgery or surgical assessment, responsibility for the management and clinical care of the patient remains with the referring medical clinician and the originating hospital.

## 5. Roles and Responsibilities

---

**Chief Operating Officers, Local Health Networks (LHNs) and SAAS** are responsible for:

- Ensuring all staff involved in transfer processes for patients requiring urgent surgery or surgical assessment including Executives, clinicians, bed managers and other relevant administrative staff, are aware of the provisions of this Policy Directive and the endorsed transfer process.
- Ensuring transfer requests where a Surgical Consultant has provided acceptance for a patient are operationalised and not refused based on the receiving hospital bed state.
- Ensuring local monitoring occurs of compliance with this Policy Directive.

**Nurse Retrieval Coordinators, SAAS** are responsible for:

- Coordinating requests received from referring medical clinicians for urgent surgical/surgical assessment transfers, including through seeking advice and acceptance of patient transfer requests from appropriate hospital Surgical Consultants and giving consideration of all elements listed in section 4.4 of this Policy Directive.
- Communicating outcomes of transfer requests with referring medical clinicians.
- Coordination of transport logistics.
- Keeping a record of patient transfers booked under this process.

**LHN Directors/Heads of Department** are responsible for promoting the management of urgency surgical/surgical assessment transfers in accordance with this Policy Directive, and ensuring compliance occurs with the provisions of this Policy Directive.

**Referring Medical Clinicians** are responsible for:

- Identifying patients requiring urgent surgery/surgical assessment that cannot be provided at the originating hospital.
- Initiating the transfer process as outlined in this Policy Directive.
- Communicating all relevant information in relation to a patient's clinical condition with hospital Surgical Consultants and SAAS Nurse Retrieval Consultants in line with the processes established under this Policy Directive.
- Providing Surgical Consultants who accept a patient for transfer with patient handover.
- Advising the patient and their family/carer of transfer details.

**Surgical Consultants** at receiving hospitals are responsible for:

- Considering the clinical need of requests for patient transfers for urgent surgery/surgical assessment from referring medical clinicians in line with the processes established under this Policy Directive.
- Retaining overall responsibility and accountability for clinical decision making around the acceptance of transfers, in circumstances where an LHN/hospital has allowed delegation of the consideration of transfer requests by the Surgical Consultant to a Senior Registrar or Fellow acting under the clinical supervision of the Surgical Consultant.
- Escalating any issues related to bed availability that impact accepted patient transfer requests to the Chief Operating Officer or Executive On-Call for consideration.
- For transfers approved under the processes of this Policy Directive, contacting referring medical clinicians to receive patient clinical handover.

## 6. Reporting

---

SAAS will record information and data on utilisation of the process established under section 4.5 of this Policy Directive through normal data collection processes. An information report detailing the following elements will be provided to LHN and SAAS Chief Operating Officers and the Executive Director, Operational Service Improvement and Demand Management on a quarterly basis:

- Number of transfers.
- Reason for transfer.
- Originating hospital.
- Receiving hospital.
- Requests arising due to referring clinician inability to contact an appropriate hospital Consultant.
- Requests arising due to unavailability of a bed at a proposed initial receiving hospital.

The information report will also detail any instances where a request for transfer was received by the NRC from a referring medical clinician, where the NRC was not able to contact the referring medical clinician to commence the process within the target timeframe of 40 minutes. An explanation will be included for the reason for the delay, and any actions taken to investigate or remedy the issue to ensure future avoidable delays are prevented.

All referring medical clinicians providing care to patients, for whom an urgent surgical/surgical assessment transfer has been requested, should report any issues encountered in accessing a transfer that impact on patient quality of care through the Safety Learning System (SLS).

## 7. EPAS

---

Not applicable.

## 8. Exemption

---

Not applicable.

## 9. Associated Policy Directives / Policy Guidelines

---

Not applicable.

## 10. References, Resources & Related Documents

---

Not applicable.











## 11. Other

---

Not applicable.



## 12. National Safety & Quality Health Service Standards

									
<a href="#">National Standard 1</a> <a href="#">Governance for Safety and Quality in Health Care</a>	<a href="#">National Standard 2</a> <a href="#">Partnering with Consumers</a>	<a href="#">National Standard 3</a> <a href="#">Preventing &amp; Controlling Healthcare associated infections</a>	<a href="#">National Standard 4</a> <a href="#">Medication Safety</a>	<a href="#">National Standard 5</a> <a href="#">Patient Identification &amp; Procedure Matching</a>	<a href="#">National Standard 6</a> <a href="#">Clinical Handover</a>	<a href="#">National Standard 7</a> <a href="#">Blood and Blood Products</a>	<a href="#">National Standard 8</a> <a href="#">Preventing &amp; Managing Pressure Injuries</a>	<a href="#">National Standard 9</a> <a href="#">Recognising &amp; Responding to Clinical Deterioration</a>	<a href="#">National Standard 10</a> <a href="#">Preventing Falls &amp; Harm from Falls</a>
<input checked="" type="checkbox"/>									

## 13. Risk Management

LHNs and SAAS are responsible for establishing local guidelines and procedures to support this Policy Directive which ensure a valid risk management approach to the coordination of urgent patient transfers.

## 14. Evaluation

Effectiveness of the transfer process established under this Policy Directive will be reviewed by LHN and SAAS Chief Operating Officers and the Executive Director, Service Performance on a quarterly basis.

## 15. Attachments

- **Attachment 1:** Transfer process – Urgent Surgery and Surgical Assessment in SA Health Services Flowchart.
- **Attachment 2:** Local Health Network Executive Contact List.

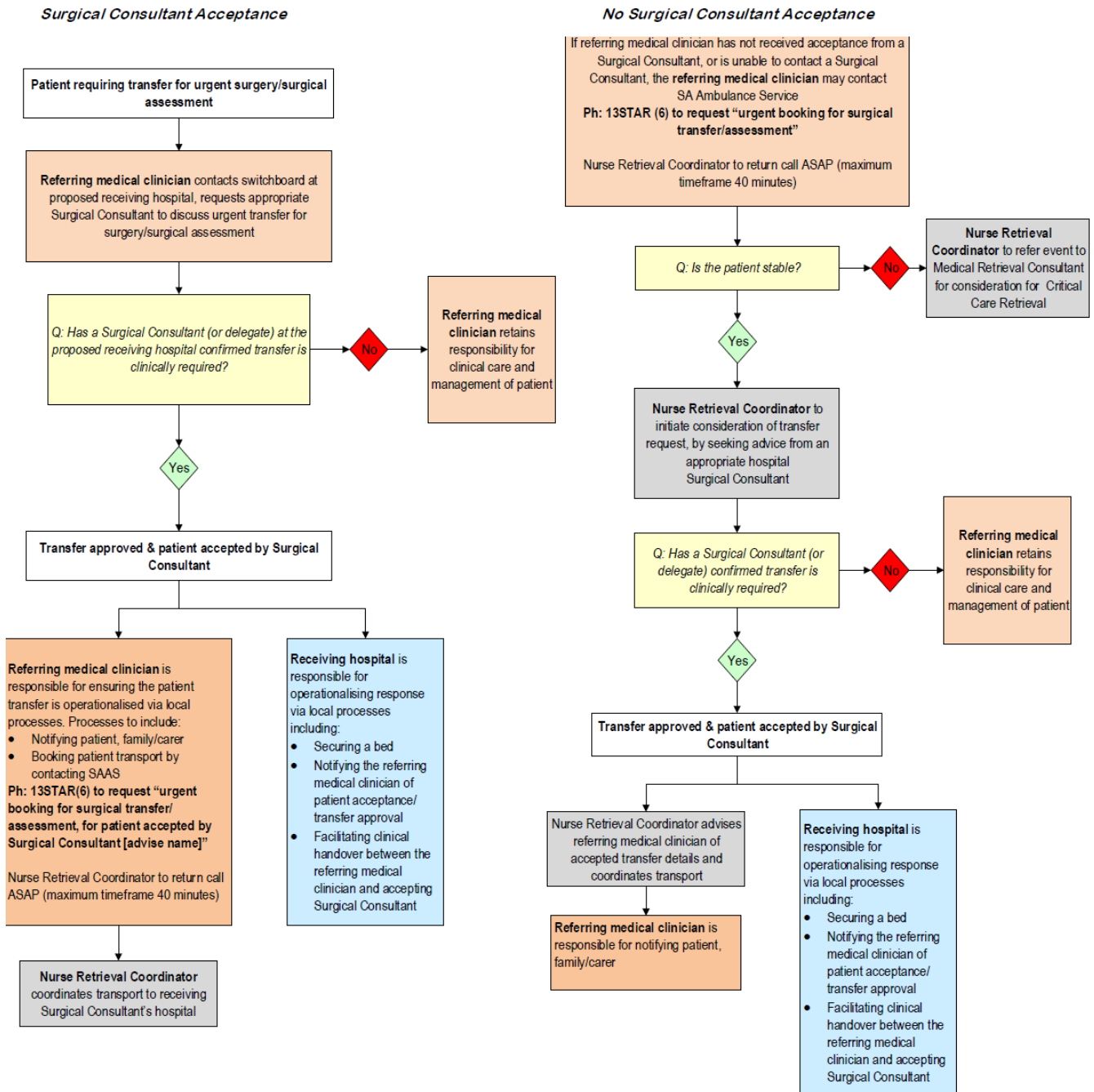
## 16. Definitions

**Retrieval** means the circumstances where a patient requires time critical emergency treatment (for example trauma patients). For these patients, the process will be managed according to the current SAAS retrieval arrangements.

**Transfer for Urgent Surgery from Country Process** means the urgent transportation of patients from referring services located in country regions to South Australian metropolitan public hospitals.

**Urgent Transfer** means the circumstances where a patient requires urgent transfer that does not require a time critical retrieval. For these patients, the process will be immediately commenced to collect the patient from the country facility. This may mean that the steps outlined this Policy Directive may not occur in a sequential order and, for example, collection of the patient may commence before a determination has been made about the metropolitan receiving hospital.

Transfer Process – Urgent Surgery & Surgical Assessment in SA Health Services



Patients accepted by a Surgical Consultant for clinically required transfer are not to be refused transfer based on the receiving hospital bed state

\*Note: Critical Care Retrievals are not within scope & will continue to be managed under current SA Ambulance Service MedSTAR arrangements. Neonate retrievals will continue to be managed under the arrangements of the SA Neonatal Regional Retrieval Service.

## Local Health Network Executive Contact List

Hospital	In Hours			Out of Hours	
	Role	Phone	Mobile	Role	Phone
Royal Adelaide Hospital	Chief Operating Officer	8222 0808	0475 941 922	Executive On-Call	8222 4000
Queen Elizabeth Hospital	Chief Operating Officer			Executive On-Call	8222 6000
Flinders Medical Centre	Chief Operating Officer	8204 5513	0419 365 596	Executive On-Call	8204 5511
Noarlunga Hospital	Chief Operating Officer			Executive On-Call	8384 9222
Lyell McEwin Hospital	Chief Operating Officer	8182 9230	0478 301 837	Executive On-Call	8182 9000
Modbury Hospital	Chief Operating Officer			Executive On-Call	8182 2000
Women's and Children's Hospital	Chief Operating Officer	8161 8257	0407 474 884	Executive On-Call	8161 7000
SA Ambulance Service	Nurse Retrieval Consultant	13STAR (6)		Nurse Retrieval Consultant	13STAR (6)

INFORMAL COPY