



Transfer of Care in the Emergency Department for Patients Arriving by Ambulance

1. Purpose

This policy applies to all employees (including contracted medical practitioners, contractors, consultants and volunteers). It describes principles of management for transfer of care and extended transfer of care of patients in the emergency department (ED) who arrive by ambulance.

2. Policy

“Transfer of care” refers to the time interval commencing at the time an ambulance arrives at hospital to the conclusion of a structured clinical handover and offloading of the patient from the ambulance stretcher and/or when the ambulance crew are no longer required.¹

In Western Australia, the Department of Health Emergency Services Agreement describes ‘Extended Transfer of Care’ (ETOC) as transfer of care greater than 30 minutes post arrival.²

In country WA, with limited patient transport resources, minimising ETOC is a key strategy to maintain access to emergency services and optimising use of patient transport capacity. We always aim to avoid ETOC.

Strategies to be considered include:

- ensuring early notification of inbound emergency patients who require rapid intervention and stabilisation upon arrival at the ED by the patient transport provider
- review treat and return bookings to reduce unnecessary activity and or admissions to the ED.

On those occasions when ETOC occurs in a WACHS health service, our response will include active management to optimise patient flow as well as continuing to provide high quality and timely health care to patients affected.

Care of patients on arrival by ambulance to a WACHS facility

Patients should be taken out of the ambulance and brought into the facility for triage as soon as practically possible. Triage for this category of patients should be prioritised by hospital staff and never delayed.

Care of patients awaiting transfer of care

WACHS EDs assume clinical governance for patient care on arrival at a WACHS facility.

WACHS staff have the same responsibility to triage, care for and respond to patients waiting with ambulance crew for transfer of care as they do for patients in the waiting room of the ED. Care requirements are described in the WACHS [Patient Assessment and Management in the Emergency Department Policy](#) and the WACHS [Triage Procedure](#).

Extended transfer of care (ETOC)

When ETOC occurs (i.e., if the care of the patient is unable to be handed over to WACHS ED staff within 30 minutes):

- Joint care and monitoring of the patient by ED staff and ambulance crew will continue until handover is completed.
- The ambulance crew must be specifically informed which ED staff member is involved with the joint care and how to contact them for escalation of patient concerns.
- The WACHS [Patient Assessment and Management in the Emergency Department Policy](#) and [Triage Procedure](#) should be used to guide management, including requirements for monitoring using WACHS documentation designed to support recognition and response to clinical deterioration.
- ED senior staff should notify the site operations manager or equivalent 'Executive on Call' as soon as practical. The operations manager is accountable for ensuring that every reasonable action is taken to support offloading and clinical handover of the patient affected by ETOC as quickly as possible and that patient safety is maintained while this is occurring.
- The operations manager or equivalent 'Executive on Call' will contact the WACHS Duty Operations Manager to provide an update and request any other relevant support for actions in response to ETOC

The WACHS Operations Hub ensures that there is a process for the ambulance provider to notify the Duty Operations Manager of any episodes of ETOC to support situational awareness and response.

3. Roles and Responsibilities

Operations managers are responsible for operationalising the requirements of this policy, with particular focus on ensuring:

- ED and hospital processes support the ability to maintain triage principles and process to all patients in the ED including those waiting with ambulance crew
- situational awareness and proactive management of patient flow is maintained at all times
- care is provided as appropriate and possible to all patients including those in the waiting room and in the care of ambulance crews
- active management and collaboration across site / region of patient flow is needed when ETOC occurs, including consideration as relevant of the following:
 - considering urgent workforce requirements
 - expediting transfer of appropriate patients from ED to home or ward
 - expediting clinically appropriate inpatient discharges.

Operations Hub is responsible for operationalising reliable notification of occasions of ETOC by the patient transport provider and supporting the site management in their appropriate response.

All staff are required to work within policies and guidelines to make sure that WACHS is a safe, equitable and positive place to be.

4. Monitoring and Evaluation

4.1 Monitoring

Monitoring of this policy is to be carried out by the Operations Hub in liaison with operations managers). This should include auditing a sample of cases to identify whether notification of ETOC occurred as agreed, and the quality of the local and organisational response following ETOC occurrences.

4.2 Evaluation

Evaluation of this policy is to be coordinated by the Operations Hub in liaison with operations managers.

5. Compliance

Failure to comply with this policy may constitute a breach of the WA Health Code of Conduct (Code). The Code is part of the [Integrity Policy Framework](#) issued pursuant to Section 26 of the [Health Services Act 2016](#) and is binding on all WACHS staff which for this purpose includes trainees, students, volunteers, researchers, contractors for service (including all visiting health professionals and agency staff) and persons delivering training or education within WACHS.

WACHS staff are reminded that compliance with all policies and procedures is mandatory.

6. References

1. New South Wales Government Department of Health [internet] [Transfer of care](#) 2020 [Accessed 30 October 2023]
2. Yang P. [Standing Committee on Public Administration - Delivery of Ambulance Services in Western Australia: Critical Condition](#). Perth (AU): Legislative Council Western Australia (41st Parliament); May 2022. 192 p. Report No.:37 [Accessed 30 October 2023]
3. New South Wales Government Department of Health Policy Directive [Internet] [Triage of Patients in NSW Emergency Departments](#). Sydney; (AU); 2013 [Accessed 30 October 2023]
4. Australasian College for Emergency Medicine, [Position Statement on Ambulance Ramping \(S347\)](#). West Melbourne (AU); June 2019. [Accessed 30 October 2023]
5. Government of Western Australian Department of Health, WA Country Health Service (WACHS). [WACHS Assessment and Management in the Emergency Department Policy](#). Perth (AU) 2023 [Accessed 30 October 2023]
6. Government of Western Australia, Department of Health. [Clinical Handover Policy](#) – MP 0095/19 [Accessed 20 July 2023]
7. Australian Commission on Safety and Quality in Health Care [Internet] [Responding to Acute Deterioration Standard](#). Sydney (AU); 2021. [Accessed 30 October 2023]
8. Government of Western Australian Department of Health, WA Country Health Service (WACHS). [WACHS Triage Procedure](#). Perth (AU) 2023 [Accessed 30 October 2023]

7. Definitions

Term	Definition
Ambulance crew	All ambulance staff including paramedic, medic, patient transport officer, transport nurse, emergency medical technician and/or volunteer ambulance officer
Clinical Handover	An explicit exchange of information about a patient between health care staff whenever accountability and responsibility for that patient's care transfers from one health care provider to the other ⁶
Transfer of care	The time interval commencing at the time an ambulance arrives at hospital to the conclusion of a structured clinical handover and offloading of the patient from the ambulance stretcher and/or when the ambulance crew are no longer required ¹
Transfer of care, Extended	Transfer of care greater than 30 minutes ²

8. Document Summary

Coverage	WACHS wide
Audience	All employees (including contracted medical practitioners, contractors, consultants and volunteers)
Records Management	Health Record Management Policy
Related Legislation	<ul style="list-style-type: none"> • Health Practitioner Regulation National Law (WA) Act 2010 • Health Services Act 2016 (WA)
Related Mandatory Policies / Frameworks	<ul style="list-style-type: none"> • Clinical Handover Policy MP 0095/18 • Recognising and Responding to Acute Deterioration Policy MP 0171/22 • Clinical Governance Safety and Quality Framework.
Related WACHS Policy Documents	<ul style="list-style-type: none"> • Patient Assessment and Management in the Emergency Department Policy • Recognising and Responding to Acute Deterioration Policy • Triage Procedure
Other Related Documents	Nil
Related Forms	Nil
Related Training Packages	Nil
Aboriginal Health Impact Statement Declaration (ISD)	ISD Record ID: 2437
National Safety and Quality Health Service (NSQHS) Standards	1.01, 1.06, 6.03, 6.04b, 6.04c, 8.03, 8.04, 8.06 – 8.11, 8.13
Aged Care Quality Standards	3(a), 3(d), 3(e)
National Standards for Mental Health Services	Nil

9. Document Control

Version	Published date	Current from	Summary of changes
1.00	20 November 2023	20 November 2023	New Policy

10. Approval

Policy Owner	Executive Director Operations Hub
Co-approver	Executive Director Clinical Excellence
Contact	Director Operations Hub
Business Unit	Operations Hub and Command Centre
EDRMS #	ED-CO-22-377845

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