

# Emergency Services

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## Module overview

Please note: This module must be read in conjunction with the Fundamentals of the Framework (including the glossary and acronym list), the Preamble to Children's Services and the Children's Emergency Services module.

Emergency services are the front door of the health facility and, for many people, form their primary contact with the health care system, providing an important interface between the community and the health facility.<sup>1</sup> Emergency services are responsible for the reception, triage, initial assessment, stabilisation and management of patients of all age groups presenting with acute and urgent aspects of illness and injury.<sup>2</sup>

The role and level of function of a hospital-based emergency service depends on various factors, including the type of facility in which it is located, geographical location, location in the public or private sector, and the place of the facility within a health system network.<sup>3</sup> The level of emergency service provided will also vary depending on availability of support services, staffing expertise, physical design, activity and acuity. Rapid access to operating rooms, intensive care and coronary care units (if present) is highly desirable to minimise transfer times of critically ill patients.<sup>4</sup>

Emergency departments are not stand-alone facilities. To provide safe and effective service delivery, emergency departments rely on a suite of support services from both within and external to the service. The scope of the Framework does not permit the inclusion of all services necessary to support the adequate function of emergency departments. Therefore, this module concentrates on those support services that have a direct impact on the ability of emergency departments to deliver safe and high-quality care, and ensure patient flow.

The term *emergency department* is generally used to describe facilities ranging from high-level departments with emergency medicine specialists and trainees employed 24 hours a day, through to rooms in small rural and remote hospitals staffed by rostered local general practitioners and generalist nursing staff.<sup>5</sup> For the purposes of this module, Level 1 to Level 3 services will be referred to as *emergency care centres*, while higher level services will be known as emergency departments.

The use of the term *emergency department* to describe such a broad range of settings can lead to misunderstandings of service capabilities and delivery. A hospital-based emergency service must have amenities and functions greater than the minimum standard for Rural Emergency Service role delineation to be considered an emergency department.<sup>3</sup>

Children have specific needs in health services—please refer to the relevant children's services modules.

## Service networks

In addition to the requirements outlined in the Fundamentals of the Framework, specific service network requirements include:

- each emergency service is supported by Queensland Health and Smart Service Queensland Health Contact Centre – 13HEALTH (134325)
- documented processes for all non-admitted patients to be sent to a nominated primary health care medical practitioner.

## Service requirements

In addition to the requirements outlined in the Fundamentals of the Framework, specific service requirements include:

- must have a dedicated clinical and management information system, which records both presentation details and recognised clinical indicators (refer to the Australian College of Emergency Medicine's [ACEM] Policy on Standard Terminology)
- the amount and type of space required for individual emergency units is dependent on a combination of activity, acuity and access to inpatient beds and alternative services<sup>4</sup>
- risk management strategies are developed, implemented and evaluated by qualified and registered health professionals in consultation with higher level health services where possible, and in accordance with established algorithms for specific clinical services
- documented processes guide assessment and management of mental health clients, which includes suicide risk and relevant referrals
- formal quality improvement programs include review of morbidity, mortality and recognised emergency medicine clinical indicators
- quality improvement data are submitted to a recognised facility quality program such as the Australian Council on Healthcare Standards (ACHS) Evaluation and Quality Improvement Program (EQulP).<sup>6</sup>

## Workforce requirements

In addition to the requirements outlined in the Fundamentals of the Framework, specific workforce requirements include:

- where possible, medical, nursing and allied health staff are provided with the opportunity to participate in a variety of identified emergency courses, which may include:
  - Advanced Life Support
  - Acute and Complex Medical Emergencies
  - Clinical Rural Skills Enhancement
  - Early Management of Severe Trauma Course
  - Emergency Crisis Resource Management
  - Emergency Events Management
  - Emergency Technical Skills Course for Doctors
  - Pre-Hospital Trauma Life Support
  - Trauma Nursing Core Course
  - Trauma Nursing Program
  - Advanced Paediatric Life Support Course
  - Emergency Nurses Paediatric Course
  - Paediatric Emergency Crisis Resource Management
  - Paediatric Life Support.

**Note:** There is no one model of emergency services staffing that will suit all needs due to the wide variability of roles and work practices between services.<sup>7</sup> Staffing numbers are dependent on throughput, casemix and capacity. Standards and guidelines from the ACEM<sup>3,7</sup> detail desired staffing requirements for the delivery of emergency services and should be taken into consideration.

## Level 1 Emergency Service

### Service description

A Level 1 service, also known as a Level 1 emergency care centre, is primarily a nurse-run clinic with a registered nurse available 24 hours for emergency presentations and 24-hour access to a registered medical practitioner.

The service is capable of providing limited treatment for minor injuries and illnesses, basic resuscitation and limited stabilisation prior to transfer. There is no access to inpatient services at this level. However, short, inpatient-style service to children may be provided (for example, intravenous rehydration of a child or intravenous delivery of antibiotics and subsequent observation of a child for up to 4 hours). This level service may provide ongoing observation for up to 8 hours in consultation with a higher level service. Services that do not provide a 24-hour service (i.e. primary care centres) are not regarded as emergency care centres.

### Service requirements

As per module overview, plus:

- documented processes with another health facility to review and report on all x-rays
- equipment to provide initial resuscitation measures for both adults and children.

### Workforce requirements

As per module overview, plus:

#### Medical

- registered medical practitioner available 24 hours
- access—24 hours—to a registered medical practitioner with credentials in critical care (intensive care or emergency)

#### Nursing

- registered nurse with relevant clinical knowledge, demonstrated evidence of ongoing clinical competency and experience appropriate to the service being provided available 24 hours
- access to a registered nurse with or working towards Rural and Isolated Practice Registered Nurse (RIPRN) accreditation

#### Allied health

- limited medication service by a pharmacist (or an approved registered nurse)

#### Other

- Aboriginal and Torres Strait Islander health worker available 24 hours.

**Support service requirements**

A Level 1 service requires:

Service	On-site	Accessible
intensive care		4
medical imaging		1
medication		1
pathology		2

## Level 2 Emergency Service

### Service description

A Level 2 service, also known as a Level 2 emergency care centre, has on-site, 24-hour access to nursing staff and triage of all presentations. This level service is capable of providing treatment for all minor injuries and illnesses and limited treatment of acute illnesses and injuries. This service provides basic resuscitation and limited stabilization, including short-term assisted ventilation prior to transfer to a higher level service.

### Service requirements

Refer to Level 1 service for details.

### Workforce requirements

As per Level 1, plus:

#### Medical

- registered medical practitioner available on-site within 30 minutes in normal circumstances—24 hours

#### Nursing

- access to a registered nurse who is competent in providing adult advanced life support and paediatric life support
- access—24 hours—to a registered nurse who has successfully completed the Emergency Triage Education Kit (ETEK)

#### Allied health

- access to a pharmacist (or an approved registered nurse) on weekdays for medication services
- access to allied health professionals, as required

#### Other

- access to patient support staff and security personnel.

### Support service requirements

A Level 2 service requires:

Service	On-site	Accessible
intensive care		4
medical		2
medical imaging		1
medication		2
pathology		2
surgical		2

## Level 3 Emergency Service

### Service description

A Level 3 service, also known as a Level 3 emergency care centre, provides on-site, 24-hour access to designated emergency nursing staff and triage of all presentations. This level service is capable of providing initial treatment and care for all presentations, and advanced resuscitation and stabilisation, including short-term assisted ventilation prior to transfer to a higher-level service. This service has the ability to assist in the care of minor trauma and enable the rapid transfer of major trauma.

### Service requirements

As per Level 2, plus:

- access to a pathway for direct admission of children to a paediatric inpatient unit.

### Workforce requirements

As per Level 2, plus:

#### Medical

- designated registered medical practitioner in charge of the service
- designated medical officer available 24 hours to enact a *Care and Treatment Order for a Child*
- registered medical practitioner who is competent in providing advanced adult life support and paediatric life support (or may be competent in advanced paediatric life support) on-site or available within 30 minutes in normal circumstances—24 hours
- all registered medical practitioners providing emergency care must provide evidence of training in, or progression towards training in, the assessment and management of critically ill patients

#### Nursing

- designated clinical nurse/nurse manager (however titled) in charge of service with relevant clinical knowledge, demonstrated evidence of ongoing clinical competency and relevant clinical experience appropriate to the service being provided
- a registered nurse who is competent in providing advanced adult life support—on-site 24 hours
- registered nurse with successful completion of ETEK available on-site 24 hours

#### Allied health

- as per Level 2 service

#### Other

- as per Level 2 service.

## Support service requirements

A Level 3 service requires:

Service	On-site	Accessible
anaesthetic	3	
intensive care		4
medical		3
medical imaging		1
medication	3	
mental health (relevant section/s)		4
pathology		3
surgical		3

## Level 4 Emergency Service

### Service description

A Level 4 emergency department provides a 24-hour service, which includes triage by qualified emergency staff and advanced care for all presentations. Depending on the medical staffing, a Level 4 service may be recognised as an emergency department under ACEM standards.<sup>2</sup> This level service has the ability to provide high-quality trauma care to medium and minor level trauma patients and is capable of stabilising trauma patients until transfer. A Level 4 service may provide a short-stay unit or equivalent functional area.

### Service requirements

A Level 4 service requires:

- a purpose-designed area with separate resuscitation facilities
- short-term assisted ventilation capacity
- invasive monitoring capacity.

### Workforce requirements

A Level 4 service requires:

#### Medical

- lead clinician responsible for clinical governance of the service who is, preferably, a Fellow of the Australasian College for Emergency Medicine (FACEM), or a registered medical specialist with credentials in emergency medicine with oversight provided by a FACEM
- at least one additional registered medical practitioner with credentials in emergency medicine to support the department director
- one FACEM or registered medical specialist with credentials and/or extensive experience in emergency medicine, or a senior registered medical practitioner with credentials and/or extensive experience in emergency medicine, on-site 8 hours a day, 7 days a week
- one registered medical practitioner with experience in emergency medicine exclusively rostered to the unit 24 hours
- immediate, 24-hour access to a second registered medical practitioner
- where relevant, designated short-stay unit medical staff, in addition to emergency service medical staff

#### Nursing

- designated senior registered nurse or nurse manager (however titled) in charge of each shift
- minimum of two registered nurses with experience in emergency medicine present in the department at all times
- one of the two or more registered nurses is a dedicated triage nurse 24 hours
- access to a registered nurse who is competent in providing advanced life support—on-site 24 hours a day
- registered nurse with successful completion of ETEK available on-site 24 hours

- access to additional registered nurses within the facility, as required
- where relevant, designated short-stay unit nursing staff in addition to emergency service nursing staff

### Allied health

- access to allied health professionals, as required
- access to a specialised clinical social worker or health practitioner with competencies in case management and counselling, as required

### Other

- as per Level 2 service.

## Support service requirements

A Level 4 service requires:

Service	On-site	Accessible
anaesthetic	4	
cardiac (cardiac care unit)		4
cardiac (cardiac diagnostic and interventional)		4
intensive care	4	
medical	4	
medical imaging	4	
medication	4	
mental health (relevant section/s)		4
pathology		4
surgical	4	

## Level 5 Emergency Service

### Service description

A Level 5 service, also known as a Level 5 emergency department, provides comprehensive trauma care and stabilisation of all trauma patients until transfer. A Level 5 emergency department should provide a short-stay unit/area to define patient diagnosis and determine continued hospitalisation or discharge plan and destination for acutely ill patients, if required.<sup>7</sup>

### Service requirements

As per Level 4, plus:

- a structured nursing education program
- evidence of all senior registered nurses progressing towards an emergency qualification.

### Workforce requirements

As per Level 4, plus:

#### Medical

- a minimum 0.5 full-time equivalent designated lead clinician with responsibility for clinical governance of the service, who is a FACEM and is a registered medical specialist with credentials in emergency medicine on-site
- at least one FACEM or registered medical specialist with credentials in emergency medicine or senior registered medical practitioner with credentials in emergency medicine on-site 16 hours a day, 7 days a week
- at least one FACEM or registered medical specialist with credentials in emergency medicine or senior registered medical practitioner with credentials in emergency medicine available for the remaining 8 hours a day, 7 days a week
- in addition to the above, at least three registered medical practitioners exclusively rostered to the department 16 hours a day, 7 days a week, and at least one registered medical practitioner exclusively rostered to the department for the remaining 8 hours a day, 7 days a week, with immediate, 24-hour access to additional registered medical practitioners, as required
- where relevant, there must be designated short-stay unit medical staff directly responsible for the short-stay unit, in addition to emergency service medical staff

#### Nursing

- designated nurse manager (however titled) with or working towards management and/or postgraduate qualifications in emergency nursing who has relevant clinical nursing experience commensurate with the position
- designated senior registered nurse/nurse manager in charge of each shift with relevant clinical knowledge, demonstrated evidence of ongoing clinical competency and relevant clinical experience appropriate to the service being provided
- registered nurse competent in providing advanced life support on-site 24 hours
- at least three experienced registered nurses present in the department at all times with access to additional acute care registered nurses, as required

- where relevant, there must be designated short-stay unit nursing staff, in addition to emergency service nursing staff

### Allied health

- as per Level 4 service

### Other

- as per Level 2 service.

## Support service requirements

A Level 5 service requires:

Service	On-site	Accessible
anaesthetic	5	
cardiac (cardiac care unit)	5	
cardiac (cardiac diagnostic and interventional)	5	
cardiac (cardiac medicine)	5	
intensive care	5	
medical	5	
medical imaging	5	
medication	5	
mental health (relevant section/s)		5
nuclear medicine		4
pathology	4	
surgical	5	

## Level 6 Emergency Service

### Service description

A Level 6 service, also known as a Level 6 emergency department, provides initial treatment and advanced care for all emergency presentations, and the full spectrum of trauma care for all critically ill and injured patients. This service has established documented processes and collaborative partnerships between the emergency department and integrated mental health services.

### Service requirements

As per Level 5 service.

### Workforce requirements

As per Level 5, plus:

#### Medical

- one full-time equivalent medical director/chair who is a FACEM and is a registered medical specialist with credentials in emergency medicine
- at least two FACEMs on-site during the day and one FACEM on-site during the evening, to provide 16 hours of cover a day, 7 days a week, commensurate with workload
- one FACEM accessible for the remaining 8 hours a day, 7 days a week
- sufficient registered medical specialists with credentials in emergency medicine to provide two FACEM shifts (day and evening) per weekend on a 1:4 weekend rotation
- at least one ACEM advanced training registrar on-site 24 hours
- one additional advanced training registrar on-site during the day and evening Monday to Friday to provide at least 16 hours of cover
- in addition to the FACEM, no fewer than five registered medical practitioners exclusively rostered to the department 24 hours

#### Nursing

- dedicated clinical nurse leader (however titled) with qualifications in emergency nursing
- at least six experienced registered nurses present in the unit at all times
- dedicated nurse leader (however titled) of critical care

#### Allied health

- specialised clinical social worker or health practitioner with competencies in case management and counselling on-site 16 hours a day during the week
- access to designated short-stay unit physiotherapist and occupational therapist and other allied health staff

#### Other

- as per Level 2 service.

## Support service requirements

A Level 6 service requires:

Service	On-site	Accessible
anaesthetic	5	
cardiac (cardiac care unit)	5	
cardiac (cardiac diagnostic and interventional)	5	
cardiac (cardiac medicine)	5	
cardiac (cardiac surgery)		6
intensive care	6	
medical	5	
medical imaging	5	
medication	5	
mental health (relevant section/s)	5	
nuclear medicine	5	
pathology	5	
surgical	5	

## Legislation, regulations and legislative standards

Refer to the Fundamentals of the Framework for details.

## Non-legislative standards, guidelines, benchmarks, policies and frameworks

In addition to what is outlined in the Fundamentals of the Framework, the following are relevant to emergency services:

- Australasian College for Emergency Medicine. All relevant emergency clinical guidelines and benchmarks. [www.acem.org.au/](http://www.acem.org.au/)
- Australasian College for Emergency Medicine. Guidelines on quality and safety. ACEM; nd. [www.acem.org.au](http://www.acem.org.au)
- Australian and New Zealand College of Anaesthetists, Joint Faculty of Intensive Care Medicine, Australasian College for Emergency Medicine. Minimum Standards for Intrahospital Transport of Critically Ill Patients. ANZCA, JFICM, ACEM; 2003. [www.acem.org.au/media/policies\\_and\\_guidelines/min\\_stand\\_intrahosp\\_crit\\_ill.pdf](http://www.acem.org.au/media/policies_and_guidelines/min_stand_intrahosp_crit_ill.pdf)
- Australian and New Zealand College of Anaesthetists. Professional Standard PS9: Guidelines on Sedation and/or Analgesia for Diagnostic and Interventional Medical or Surgical Procedures. ANZCA; 2008.
- Australian College of Critical Care Nurses. ACCCN Resuscitation Position Statement (2006): Adult and Paediatric Resuscitation by Nurses. ACCCN; 2006. [www.acccn.com.au/images/stories/downloads/adult\\_\\_paediatric\\_resus.pdf](http://www.acccn.com.au/images/stories/downloads/adult__paediatric_resus.pdf)
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- Royal Australasian College of Surgeons. Trauma Verification: Model Resource Criteria for Level I, II, III & IV Trauma Services in Australasia. RACS; 2009.
- The Australian Council on Healthcare Standards. Emergency Medicine Indicators. [www.achs.org.au](http://www.achs.org.au)

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[www.acem.org.au/media/policies\\_and\\_guidelines/S12\\_Role\\_delineation\\_formatted\\_August\\_2004.pdf](http://www.acem.org.au/media/policies_and_guidelines/S12_Role_delineation_formatted_August_2004.pdf)
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