Health Service Directive

Retrieval Services Queensland - Use by Hospital and Health Services

Purpose
The purpose of this Health Service Directive is to ensure all Hospital and Health Service facilities with an inpatient capability:

- use Retrieval Services Queensland (RSQ) for the clinical coordination of all aeromedical retrieval and transport when utilising providers with statewide contracts held by the Department of Health (the Department);
- provide payment for the cost of aeromedical asset/s used for any public and private patient retrieval or transport clinically coordinated by RSQ under the Department’s statewide contracts and;
- who are the receiving Hospital and Health Service, will accept the transferred patient for emergent treatment as determined by RSQ when an emergent or time critical transfer is required.

Scope
This Health Service Directive applies to all Hospital and Health Services and applies to public and private patients.

Principles

- Safety and consistency – retrieval services are coordinated and delivered with a focus on consistent quality patient care through standardised statewide procedures (including credentialing, education and training).
- Equity – retrieval services are provided in a way to promote equitable patient access to emergency specialist care.
- Efficiency – a user-pays arrangement for aeromedical ambulance retrieval and emergency interfacility patient transport, irrespective of mode (costs for RSQ clinical coordination and retrieval medical staff provided by RSQ is not covered by Hospital and Health Services).
- Cohesive – whole of government service coordination, integration and governance in the delivery of aeromedical retrieval and emergency interfacility patient transport services across multiple providers and partners.
Outcomes

Hospital and Health Services shall:

- use RSQ for the clinical coordination of all aeromedical (fixed and rotary wing) ambulance transport services from facilities with an inpatient capability, whether for retrieval or emergency inter-facility transport, where stretcher and clinical interventions are required;
- pay the aeromedical and associated costs of the transport of a patient, once RSQ has accepted its referral and the asset is tasked;
- accept a transferred patient for emergent treatment as determined by RSQ; and
- follow agreed local health service advice and referral patterns.

RSQ shall ensure:

- single, statewide access to a consistent and integrated clinical coordination capability and delivery of statewide retrieval and transport services;
- sick and injured patients receive consistent, quality-governed, specialist led care during aeromedical retrieval and transport;
- optimal responsiveness and effective and efficient utilisation of aeromedical clinical and aviation resources across the state, including disaster management and mass casualty responses; and
- the provision of an integrated statewide clinical governance system for patient aeromedical and emergency interfacility transport.

Mandatory requirements

Hospital and Health Services must;

- engage RSQ to clinically coordinate all:
  - patient aeromedical retrieval and aeromedical interfacility transports, where stretcher capability and active clinical management/interventions may be required;
  - emergency paediatric, neonatal and high risk obstetric road interfacility patient transfers requiring a specialist retrieval team; and
- adhere to statewide clinical and operational standards for road interfacility patient transport not coordinated by RSQ, but requiring a Hospital and Health Service clinical escort.

Related or governing legislation, policy and agreements

- Hospital and Health Boards Act 2011
Supporting documents

- Protocol Health Service Directive - Protocol for Road Inter-Hospital Transfer (IHT) of critically ill patients (QH: HSDPTL-025-5:2015)
- Retrieval Services Queensland Standard Operating Procedures (QHEPs)
- Patient Access and Flow Guidelines (HHS procedures)

Business area contact

Retrieval Services Queensland.

Review

This Health Service Directive will be reviewed at least every three years.

Date of last review: 13 November 2018

Supersedes: QH-HSD-005:2014

Approval and Implementation

Directive Custodian

Chief Health Officer and Deputy Director-General, Prevention Division.

Approval by Chief Executive

Director-General, Department of Health.

Approval date: 12 December 2018

Issued under section 47 of the Hospital and Health Boards Act 2011

Version Control

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Minor updates resulting from review and Statewide consultation.