

260422 DAY SOUTHPORT OPCEN BRIEF



QUEENSLAND AMBULANCE SERVICE  
OPERATIONS BRIEF V2.11.2



SOUTHPORT

SHIFT:	DAY	26/04/2022
OCS:		[REDACTED]
OCS (AFTERNOON):		[REDACTED]
CDS:		[REDACTED]
SENIOR OPS SUPER(S):	GOL: SOS [REDACTED] 0600-1800 & SOS [REDACTED] 1400-2400/EA	
	MST: [REDACTED] 1400-2400 +EA / [REDACTED]	
	WTM: [REDACTED] 1200-2400 +EA	



Shift Report (Any issues/items of interest for noting that do not fit into another category or require further elaboration)									
Entry	Time	Acute/PTS	Issue	Action/Case Information	Entered By	Incident	Unit	LASN	Station/OpCen
1	07:30	ACUTE	██████ involved in minor RTC enroute to GCUH	██████ tc of GCUH with CCP and patient onboard. Person involved followed crew to hospital to swap detail. GOL SOS advised and supervisor to meet crew at GCUH	OCS	████████████████		GOL	COL
2	17:00		<b>Southport OpCen Response Area</b> 85 Active cases 7 Pending cases - longest 1hr43 000 calls - 545 GOS - 94.9	Information Only	OCS	N/A	N/A	GOL	Southport OpCen
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RTI RELEASE

HOSPITAL STATUS LOG

Hospital	Status/ Escalation Level	Date Initiated	Time Initiated	Date Changed	Time Changed	Time On Status	Initiated By	Action/Outcome
THH	Redirection	26/04/22	11:48					Continuing redirection - Review 2200

Were there any Significant Operational Incidents/Issues (M.C.I.s, QAS vehicle accidents, cases incidents involving QPS / QFRS)?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

Were there any Significant Patient Care/Clinical Issues (high acuity cases)?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

Cardiac Arrest – How many out of hospital cardiac arrests were attended and were they transported with ROSC?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By
	GOL		10:12	[REDACTED] DIB. Pt arrested with QAS crew	Response: ACP, OIC, CCP Sitrep: CPR in progress Outcome: Pt tx code 1 to GCUH	CDS
	GOL		13:20	[REDACTED] passed out. Call progressed to CPR in progress	Response: ACP, CCP, HARU Sitrep: CPR in progress --> ROSC Outcome:	CDS
	MST		16:34	[REDACTED] Pt unconscious, not breathing	Response: 2 x ACP, CCP, OIC Sitrep: ROSC achieved, HARU required. Outcome: Pt tx code 1 to LCH	CDS

Were there any activations of First Responder Groups/Honorary Station personnel and were there any issues associated with this?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

Did QAS assist/Was QAS Assisted by any other jurisdictions? i.e. NSW/PNG/NT etc.						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

RTI Release



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**How many cases were upgraded or downgraded during the shift?**

LASN	Incident	Coded	Altered To	Reason for Alteration?	Callback Conducted?	Outcome

RTI Release

Staffing Issues (Late Log Ons/ Late Shift Starts)									
Officer(s)	Unit	Station / OpCen	LASN	Shift Start	Logged On / Started Shift	Early / Late by	Authorised By?	Reason Needed or Given / Operational Impact	Entered By



Paramedic Occupational Violence Incident									
Incident	Time	Officer(s) Involved	LASN	Station	Incident Information	Type of Occupational Violence	Description	Notifications OS, SOS, PSDU, OCM	Entered By
OPS Notified (YES/NO)	Time QPS Notified	Attending Supervisor	Peer Support / Priority One Activation	Caution Note Accuracy	Further Caution Note Actions Required	Call Back Actions Taken (If Applicable)	OCS Emailed CAD Report and Audio Files to OCM	Dot Point Summary Sent to OCM (If Appropriate)	
Comments (Essential Additional Information)									

Paramedic Occupational Violence Incident									
Incident	Time	Officer(s) Involved	LASN	Station	Incident Information	Type of Occupational Violence	Description	Notifications OS, SOS, PSDU, OCM	Entered By
OPS Notified (YES/NO)	Time QPS Notified	Attending Supervisor	Peer Support / Priority One Activation	Caution Note Accuracy	Further Caution Note Actions Required	Call Back Actions Taken (If Applicable)	OCS Emailed CAD Report and Audio Files to OCM	Dot Point Summary Sent to OCM (If Appropriate)	
Comments (Essential Additional Information)									

RTI Release

PEER SUPPORT ACTIVATIONS										
Time	Incident	Officer/s Involved	LASN	Station/OpCen	ID Number(s)	Incident Information	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By
16:32			MST				ROSC departing code 1 to LCH	PSO to follow up	MST SOS advised	OCS

WORKPLACE HEALTH & SAFETY (Not Relating to Paramedic Occupational Violence)										
Time	Incident	Officer/s Involved	LASN	Station/OpCen	ID Number(s)	Incident Information	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By

REPORTABLE FATIGUE SCORES (>5)										
Time	Shift	Officer	LASN	Station/OpCen	ID Number	Fatigue Score	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By

COMPLAINTS								
Time	LASN	Complainant's Name	Phone Number	Description	Action Taken/Reported To	Further Action Required	Summary	Entered By

FALSE CALLS								
Time	LASN	Incident	Callers Phone No	Callers Name As per CLI	Address of Caller As Per CLI	Incident Address	Stated Problem/Incident	Entered By

Aeromedical Response Requests (Notification / Activation / Escalation Matrix)											
Time	Incident	MPDS Determinant	Code	Primary/ IFT	Approved Yes/No	Provide details on all requests	Enter the reason given for declining/deviation of the aeromedical resource	Requesting Supervisor	SOS	Escalation Process Enacted	SOS Escalation Comments

RTI Release

<b>Were any PTS cases required to be handed over to Acute and was there any impact on Acute?</b>					
<b>Incident</b>	<b>LASN</b>	<b>Coding</b>	<b>Time</b>	<b>Reason</b>	<b>Operational Impact</b>

RTI Release

**3rd Party Trip Information**

Authorisation No.	LASN	Officer Name(s)	From	To	Reason	Company	Company Auth No.	Quoted Cost	Entered By

RTI RELEASE



# QUEENSLAND AMBULANCE SERVICE OPERATIONS BRIEF V2.11.2



SOUTHPORT

SHIFT: NIGHT

26/04/2022

OCS:

OCS (AFTERNOON):

CDS:

SENIOR OPS SUPER(S):

GOL: SOS [redacted] 1400-2400/EA & OS [redacted] 800-0600

MST: SOS [redacted] 1400-2400/EA & OS [redacted] 1800-0600

WTM: SOS [redacted] 1200-2400/EA



Shift Report (Any Issues/items of interest for noting that do not fit into another category or require further elaboration)									
Entry	Time	Acute/PTS	Issue	Action/Case Information	Entered By	Incident	Unit	LASN	Station/OpCen
1	18:40	ACUTE	Southport OpCen Response Area: - 71 active cases - 12 pending (longest pending 3.5)	CDS/OCS completing regular call-backs & creating clinical plans as required	OCS	N/A	N/A	ALL	ALL
2	20:16	ACUTE	Emergency Duress' activated via P2	Officer advised of accidental activation. SOCC notified	OCS			GOL	PIMP
3	20:20		Private vehicle struck outside Southport Ambulance stn by reversing vehicle, minor damage sustained to front bumper	SOS notified & will investigate further	OCS	N/A	N/A	N/A	N/A
4	20:50	ACUTE	As requested by SOS all 10 hour crew's paged asking if they would like to extend their shift due to current acute workload	Information only	OCS	N/A	N/A	WTM	ALL
5	21:05		GOS 94.9% - Calls taken 682	Workload and meal breaks being closely monitored	OCS	N/A	N/A	OPCENS	OpCen
6	23:23	ACUTE	<b>NORTH IPSWICH - (1C) Vehicle</b> unable to be started due to ?battery issue, pt. on board	assigned as code 2 B/U to assist with tx. SOS notified. UPDATE: Vehicle able to be started after going through emergency start process. stood down. Nil negative outcome to pt. condition	OCS			WTM	IPS
7	05:15		GOS 100% - Calls taken 61	Workload and meal breaks being closely monitored	OCS	N/A	N/A	OPCENS	OpCen
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16									





Were there any Significant Operational Incidents/Issues (M.C.I.s, QAS vehicle accidents, cases incidents involving QPS / QFRS)?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By
	MST		21:05	<p>█ CPR in progress initiated by bystanders post single vehicle into tree</p>	<p>RESPONSE: 2.5 ACP crew's, CCP &amp; OS</p> <p>SITREP:</p> <p>█</p> <p>█</p> <p>█</p> <p>█</p> <p>OUTCOME: 2x pt.'s txed to PAH code 2</p>	OCS
	WTM		02:42	<p>█ - As per QFES: House fire</p>	<p>RESPONSE: 3x ACP crew's, CCP &amp; SOS. SOCC notified</p> <p>SITREP:</p> <p>█</p> <p>█</p> <p>█</p> <p>█</p> <p>█</p> <p>█</p> <p>█</p> <p>█</p> <p>OUTCOME:</p> <p>█ tx 1x █ &amp; 1x I █ to IGH</p> <p>█ tx 2x pts to IGH</p> <p>All remaining pts will be txed via private means to IGH &amp; QCH. IGH notified of update</p>	OCS

Were there any Significant Patient Care/Clinical Issues (high acuity cases)?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By
	GOL		20:59	- Welfare check generated by PVH:	RESPONSE: ACP crew & CCP SITREP: OUTCOME: Pt txed to GCUH code 2 GCS6, CCP following	OCS

Cardiac Arrest – How many out of hospital cardiac arrests were attended and were they transported with ROSC?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By
	GOL		23:24	CPR in progress post	RESPONSE: 1.5 ACP crew's, CCP & HARU SITREP: OUTCOME: Pt txed code 1 to GCHRB with HARU on board. CCP clear	OCS

Were there any activations of First Responder Groups/Honorary Station personnel and were there any issues associated with this?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

Did QAS assist/Was QAS Assisted by any other jurisdictions? i.e. NSW/PNG/NT etc.						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By


RTI Release



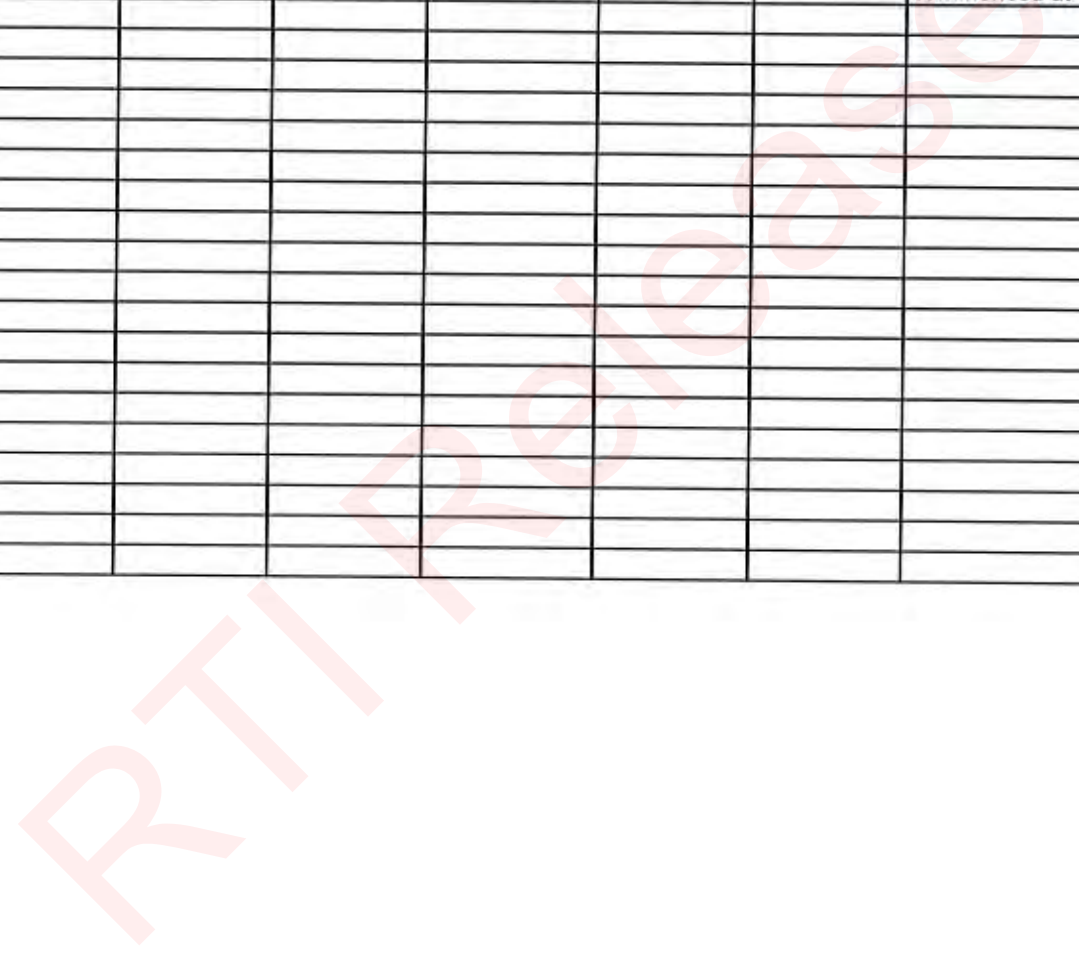
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**How many cases were upgraded or downgraded during the shift?**

LASN	Incident	Coded	Altered To	Reason for Alteration?	Callback Conducted?	Outcome

RTI Release

Staffing Issues (Late Log Ons/ Late Shift Starts)									
Officer(s)	Unit	Station / OpCen	LASN	Shift Start	Logged On / Started Shift	Early / Late by	Authorised By?	Reason Needed or Given / Operational Impact	Entered By
		HVL	GOL	18:00	18:15	00:15		Nil reason given	OCS
		BEE	MST	18:00	18:15	00:15		Running late for shift due to traffic	OCS
		SPF	WTM	18:00	18:25	00:25		Running late for shift due to traffic	OCS
		SOU	GOL	18:00	18:45	00:45		Officer advised that _____ hought _____ shift commenced at 1900	OCS



Paramedic Occupational Violence Incident									
Incident	Time	Officer(s) Involved	LASN	Station	Incident Information	Type of Occupational Violence	Description	Notifications OS, SOS, PSDU, OCM	Entered By
QPS Notified (YES/NO)	Time QPS Notified	Attending Supervisor	Peer Support / Priority One Activation	Caution Note Accuracy	Further Caution Note Actions Required	Call Back Actions Taken (If Applicable)	OCS Emailed CAD Report and Audio Files to OCM	Dot Point Summary Sent to OCM (If Appropriate)	
Comments (Essential Additional Information)									

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Comments (Essential Additional Information)									

RTI Release



PEER SUPPORT ACTIVATIONS										
Time	Incident	Officer/s Involved	LASN	Station/OpCen	ID Number(s)	Incident Information	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By
16:49			GOL	BUR		RED2C: GCUH to GCHRB palliative care requiring end of life support	SOS requested PSO activation of officer	Peer support officer	SOS Peer support officer	OCS

WORKPLACE HEALTH & SAFETY (Not Relating to Paramedic Occupational Violence)										
Time	Incident	Officer/s Involved	LASN	Station/OpCen	ID Number(s)	Incident Information	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By
18:52			MST	YAR		EIGHT MILE PLAINS: SOB	Crew cleared QEH at 2002 EOS at 2115 (19F). Nil BFD time applicable	N/A	N/A	OCS
Unknown	Unknown		WTM	ROSE		Officer advised unknown cause or timeframe	Officer advised to complete SHE report. terminating shift early	OIC	SOS	OCS

REPORTABLE FATIGUE SCORES (>5)										
Time	Shift	Officer	LASN	Station/OpCen	ID Number	Fatigue Score	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By

<b>COMPLAINTS</b>								
Time	LASN	Complainant's Name	Phone Number	Description	Action Taken/Reported To	Further Action Required	Summary	Entered By

<b>FALSE CALLS</b>								
Time	LASN	Incident	Callers Phone No	Callers Name As per CLI	Address of Caller As Per CLI	Incident Address	Stated Problem/Incident	Entered By

Aeromedical Response Requests (Notification / Activation / Escalation Matrix)											
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RTI Release

Were any PTS cases required to be handed over to Acute and was there any impact on Acute?					
Incident	LASN	Coding	Time	Reason	Operational Impact

RTI Release

3rd Party Trip Information

Authorisation No.	LASN	Officer Name(s)	From	To	Reason	Company	Company Auth No.	Quoted Cost	Entered By

RTI RELEASE

**Were any PTS cases required to be handed over to Acute and was there any impact on Acute?**

Incident	LASN	Coding	Time	Reason	Operational Impact



RTI Release

3rd Party Trip Information

Authorisation No.	LASN	Officer Name(s)	From	To	Reason	Company	Company Auth No.	Quoted Cost	Entered By
SOU - [REDACTED]	GOL		SOU	GCUH	Split crew	13CABS	[REDACTED]	\$13-\$17	OCS



# 290422 DAY SOUTHPORT OPCEN BRIEF

	<h2>QUEENSLAND AMBULANCE SERVICE OPERATIONS BRIEF V2.11.2</h2>	 Queensland Government
<b>SOUTHPORT</b>		
<b>SHIFT:</b>	<b>DAY</b>	29/04/2022
<b>OCS:</b>	[Redacted]	
<b>OCS (AFTERNOON):</b>	[Redacted]	
<b>CDS:</b>	[Redacted] (Deployment) / [Redacted] (Clinical)	
<b>SENIOR OPS SUPER(S):</b>	GOL: [Redacted] 06-18, [Redacted] 06-18, [Redacted] 14-00	
	MST: [Redacted] 06-18, [Redacted] 14-00	
	WTM: [Redacted] 06-18, [Redacted] 14-00	





Shift Report (Any Issues/items of interest for noting that do not fit into another category or require further elaboration)									
Entry	Time	Acute/PTS	Issue	Action/Case Information	Entered By	Incident	Unit	LASN	Station/OpCen
1	10:10		Active cases SOC - code 1 x 42, code 2 x 8. Pending cases - code 1 x 5, code 2 x 11, code 3 x 1, code 4 x 1.		OCS				
2	10:15		204 x 000 answered, GOS 97.1		OCS				
3	11:35		CAD Consoles 9308 amd 9301 (PA608 and PA601) froze	Details including servers given to FSG . 1145 9315 (PA615) froze, FSG given the details.	OCS				
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### HOSPITAL STATUS LOG

Hospital	Status/ Escalation Level	Date Initiated	Time Initiated	Date Changed	Time Changed	Time On Status	Initiated By	Action/Outcome
THH	Redirection	25/04/22	10:20					Review 1000/ 2100

Were there any Significant Operational Incidents/Issues (M.C.I.s, QAS vehicle accidents, cases incidents involving QPS / QFRS)?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By
	GOL		00:00	5 vehicle (incl. 2 trucks) RTC on northbound on ramp	<p>RESPONSE: 2 x ACPH crew, OS, SITREP:</p> <p>OUTCOME: 601583 - tx 2 pts Code 1 to GCUH;</p>	CDS
	WTM		08:11	involved in a minor MVA , crew advise no injuries.	Action - SOS and QPS advised, SOS and QPS on scene . , Outcome Crew back in service completing paperwork	OCS
	BEE		14:25	Crew on the way to a code 1 involved in a minor Traffic Accident.	Action - OIC advised the crew did not tell the dispatcher, crew advised they were delayed getting to scene by traffic. CCP is primary on the case. SOS and OIC aware of the incident. Outcome - Minor damage to a window only	OCS

Were there any Significant Patient Care/Clinical Issues (high acuity cases)?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

[REDACTED]	MST	[REDACTED]	06:51	[REDACTED] fallen down stairs at [REDACTED] [REDACTED]	<p><b>RESPONSE:</b> 2 x ACPII crew, 1 x CCP POD, HARU.</p> <p><b>SITREP:</b> [REDACTED]</p> <p>[REDACTED]</p> <p><b>OUTCOME:</b> 1 pt tx Code 1 to PAH with CCP on board - RV with HARU - RSI, Pt GCS 5, dilated pupil, hypotensive, bradycardic.</p>	CDS [REDACTED]
[REDACTED]	GOL	[REDACTED]	09:48	[REDACTED] - Pt located in cardiology practice post [REDACTED]	<p><b>ROBINA:</b> [REDACTED] Pt located in cardiology practice [REDACTED]</p>	CDS [REDACTED]
[REDACTED]	MST	[REDACTED]	11:08	[REDACTED] fall >3mtrs [REDACTED]	<p><b>RESPONSE:</b> 1 x ACPII crew, 1 x CCP POD, HARU.</p> <p>[REDACTED]</p> <p><b>OUTCOME:</b> 1 pt tx Code 2 to PAH</p>	CDS [REDACTED]

[REDACTED]	GOL	[REDACTED]	15:22	[REDACTED] fall head strike, unconscious.	<p><b>RESPONSE:</b> 1 x ACPIL crew, 1 x CCP CSO, HARU.</p> <p>[REDACTED]</p> <p><b>OUTCOME:</b> 1 pt tx Code 2 to GCHRB</p>	CDS [REDACTED]
[REDACTED]	WTM	[REDACTED]	15:49	[REDACTED] stabbed [REDACTED]	<p><b>RESPONSE:</b> 1 x ACPIL crew, 1 x CCP POD, HARU.</p> <p>[REDACTED]</p> <p><b>OUTCOME:</b> 1 pt tx Code 1 to PAH, RV with HARU enroute</p>	CDS [REDACTED]

**Cardiac Arrest – How many out of hospital cardiac arrests were attended and were they transported with ROSC?**

Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By
[REDACTED]	GOL	[REDACTED]	08:24	[REDACTED] cardiac arrest	<p><b>RESPONSE:</b> 2 x ACPIL crew, 1 x CCP POD, HARU, SOS</p> <p>[REDACTED]</p> <p><b>OUTCOME:</b> [REDACTED] tx Code 1 to GCUH</p>	CDS [REDACTED]
[REDACTED]	GOL	[REDACTED]	09:29	[REDACTED] unconscious [REDACTED] - CPR in progress	<p><b>RESPONSE:</b> 1 x ACPIL crew, HARU, OIC</p> <p><b>SITREP:</b> [REDACTED]</p> <p>[REDACTED]</p> <p><b>OUTCOME:</b> Signal 4 - QPS to attend.</p>	CDS [REDACTED]


Were there any activations of First Responder Groups/Honorary Station personnel and were there any issues associated with this?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

Did QAS assist/Was QAS Assisted by any other jurisdictions? I.e. NSW/PNG/NT etc.						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

RTI Released



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**How many cases were upgraded or downgraded during the shift?**

LASN	Incident	Coded	Altered To	Reason for Alteration?	Callback Conducted?	Outcome

RTI Release



Staffing Issues (Late Log Ons/ Late Shift Starts)									
Officer(s)	Unit	Station / OpCen	LASN	Shift Start	Logged On / Started Shift	Early / Late by	Authorised By?	Reason Needed or Given / Operational Impact	Entered By

RTI RELEASE

Paramedic Occupational Violence Incident									
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Comments (Essential Additional Information)									

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Comments (Essential Additional Information)									

RTI Release

**PEER SUPPORT ACTIVATIONS**

Time	Incident	Officer/s Involved	LASN	Station/ OpCen	ID Number(s)	Incident Information	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By
08:24			GOL			cardiac arrest	RESPONSE: 2 x ACP/it crew, 1 x CCP POD, HARU, SOS SITREP: [REDACTED]	PSO to follow up with the crews		

**WORKPLACE HEALTH & SAFETY (Not Relating to Paramedic Occupational Violence)**

Time	Incident	Officer/s Involved	LASN	Station/ OpCen	ID Number(s)	Incident Information	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By

**REPORTABLE FATIGUE SCORES (>5)**

Time	Shift	Officer	LASN	Station/ OpCen	ID Number	Fatigue Score	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By

COMPLAINTS								
Time	LASN	Complainant's Name	Phone Number	Description	Action Taken/Reported To	Further Action Required	Summary	Entered By

FALSE CALLS								
Time	LASN	Incident	Callers Phone No	Callers Name As per CLI	Address of Caller As Per CLI	Incident Address	Stated Problem/Incident	Entered By

Aeromedical Response Requests (Notification / Activation / Escalation Matrix)											
Time	Incident	MPDS Determinant	Code	Primary/ IFT	Approved Yes/No	Provide details on all requests	Enter the reason given for declining/deviation of the aeromedical resource	Requesting Supervisor	SOS	Escalation Process Enacted	SOS Escalation Comments

RTI Release

Were any PTS cases required to be handed over to Acute and was there any impact on Acute?					
Incident	LASN	Coding	Time	Reason	Operational Impact



RTI Release

3rd Party Trip Information

Authorisation No.	LASN	Officer Name(s)	From	To	Reason	Company	Company Auth No.	Quoted Cost	Entered By
SOU	GOL		QAS COM	GCUH	staff movement	13CABS		\$38 - \$48	OCS

RTI RELEASED

### 290422 NIGHT SOUTHPORT OPCEN BRIEF

	<h2>QUEENSLAND AMBULANCE SERVICE OPERATIONS BRIEF V2.11.2</h2>	 <b>Queensland Government</b>
	<b>SOUTHPORT</b>	
<b>SHIFT:</b>	<b>NIGHT</b>	<b>29/04/2022</b>
<b>OCS:</b>		
<b>OCS (AFTERNOON):</b>		
<b>CDS:</b>		
<b>SENIOR OPS SUPER(S):</b>	<b>GOL:</b> [redacted] EA, [redacted] 14-00, OS TBA	
	<b>MST:</b> [redacted] EA, [redacted] 14-00, OS [redacted] 18-06	
	<b>WTM:</b> [redacted] EA, [redacted] 14-00	





Shift Report (Any issues/items of interest for noting that do not fit into another category or require further elaboration)									
Entry	Time	Acute/PTS	Issue	Action/Case Information	Entered By	Incident	Unit	LASN	Station/OpCen
1	18:40	ACUTE	Southport Operations Centre Response Area: Active Cases: 41 Code 1's - 28 Code 2's Pending Cases: 6 Code 1's - 23 Code 2's 000 Tally: 574 GOS: 90.8	Emergency Rule In Place					SOU
2	05:20	ACUTE	Southport Operations Centre Response Area: Active Cases: 16 Code 1's - 4 Code 2's Pending Cases: 5 Code 1's - 36 Code 2's 000 Tally: 175 GOS: 94 %	Emergency Rule In Place					SOU
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Were there any Significant Operational Incidents/Issues (M.C.I.s, QAS vehicle accidents, cases incidents involving QPS / QFRS)?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

Were there any Significant Patient Care/Clinical Issues (high acuity cases)?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By
	MST		18:42	stab wound	ACTION : ACP crew / HARU / POD / OS  OUTCOME : Code 1 to PAH HARU on board	CDS
	MST		23:05	Cardiac Arrest	ACTION : ACP crew / HARU / POD / OS CCP SR : CPR in progress OUTCOME : Code 1 to PAH HARU on board, QPS requested LS	CDS

Cardiac Arrest – How many out of hospital cardiac arrests were attended and were they transported with ROSC?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

Were there any activations of First Responder Groups/Honorary Station personnel and were there any issues associated with this?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

Did QAS assist/Was QAS Assisted by any other jurisdictions? i.e. NSW/PNG/NT etc.						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

RTI Release



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**How many cases were upgraded or downgraded during the shift?**

LASN	Incident	Coded	Altered To	Reason for Alteration?	Callback Conducted?	Outcome

RTI Release

Staffing Issues (Late Log Ons/ Late Shift Starts)									
Officer(s)	Unit	Station / OpCen	LASN	Shift Start	Logged On / Started Shift	Early / Late by	Authorised By?	Reason Needed or Given / Operational Impact	Entered By

Paramedic Occupational Violence Incident									
Incident	Time	Officer(s) Involved	LASN	Station	Incident Information	Type of Occupational Violence	Description	Notifications OS, SOS, PSDU, OCM	Entered By
QPS Notified (YES/NO)	Time QPS Notified	Attending Supervisor	Peer Support / Priority One Activation	Caution Note Accuracy	Further Caution Note Actions Required	Call Back Actions Taken (If Applicable)	OCS Emailed CAD Report and Audio Files to OCM	Dot Point Summary Sent to OCM (If Appropriate)	
Comments (Essential Additional Information)									

Paramedic Occupational Violence Incident									
Incident	Time	Officer(s) Involved	LASN	Station	Incident Information	Type of Occupational Violence	Description	Notifications OS, SOS, PSDU, OCM	Entered By
QPS Notified (YES/NO)	Time QPS Notified	Attending Supervisor	Peer Support / Priority One Activation	Caution Note Accuracy	Further Caution Note Actions Required	Call Back Actions Taken (If Applicable)	OCS Emailed CAD Report and Audio Files to OCM	Dot Point Summary Sent to OCM (If Appropriate)	
Comments (Essential Additional Information)									

RTI Release



PEER SUPPORT ACTIVATIONS										
Time	Incident	Officer/s Involved	LASN	Station/OpCen	ID Number(s)	Incident Information	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By
23:04			MST	Various	Various	Choking CPR In Progress	Patient transported hot to hospital	PS	SOS	

WORKPLACE HEALTH & SAFETY (Not Relating to Paramedic Occupational Violence)										
Time	Incident	Officer/s Involved	LASN	Station/OpCen	ID Number(s)	Incident Information	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By
01:10			MST	JIM		Late Case	NIL- FYI			
01:25	Various		MST	BEE		Officer was assisting with ramping at LCH	NIL- FYI	NI		

REPORTABLE FATIGUE SCORES (>5)										
Time	Shift	Officer	LASN	Station/OpCen	ID Number	Fatigue Score	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By

COMPLAINTS								
Time	LASN	Complainant's Name	Phone Number	Description	Action Taken/Reported To	Further Action Required	Summary	Entered By

FALSE CALLS								
Time	LASN	Incident	Callers Phone No	Callers Name As per CLI	Address of Caller As Per CLI	Incident Address	Stated Problem/Incident	Entered By

<b>Aeromedical Response Requests (Notification / Activation / Escalation Matrix)</b>											
Time	Incident	MPDS Determinant	Code	Primary/ IFT	Approved Yes/No	Provide details on all requests	Enter the reason given for declining/deviation of the aeromedical resource	Requesting Supervisor	SOS	Escalation Process Enacted	SOS Escalation Comments

RTI Release

Were any PTS cases required to be handed over to Acute and was there any impact on Acute?

Incident	LASN	Coding	Time	Reason	Operational Impact



RTI Release

3rd Party Trip Information

Authorisation No.	LASN	Officer Name(s)	From	To	Reason	Company	Company Auth No.	Quoted Cost	Entered By
SOU - [REDACTED]	GOL	[REDACTED]	MERM Station	SOU Station	End of Shift	13CABS	[REDACTED]		[REDACTED]

RTI RELEASED

### 300422 DAY SOUTHPORT OPCEN BRIEF

	<b>QUEENSLAND AMBULANCE SERVICE OPERATIONS BRIEF V2.11.2</b>		
	<b>SOUTHPORT</b>		
SHIFT:	DAY	30/04/2022	
OCS:		[REDACTED]	
OCS (AFTERNOON):		[REDACTED]	
CDS:		[REDACTED]	
SENIOR OPS SUPER(S):	GOL:	[REDACTED] >1400 / [REDACTED]	14-24
	MST:	[REDACTED] 14-00 +EA	[REDACTED]
	WTM:	[REDACTED] EA, [REDACTED]	[REDACTED]



Shift Report (Any issues/items of interest for noting that do not fit into another category or require further elaboration)									
Entry	Time	Acute/PTS	Issue	Action/Case Information	Entered By	Incident	Unit	LASN	Station/OpCen
1	07:27	ACUTE	Gos 93.1 with 226 calls presented	Information only	OCS				
2	11:30	ACUTE	37 Active code 1's 18 Active code 2's 24 Pending code 2's longest 9hrs32mins	CDS's performing call backs	OCS				
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									
16									

RTI RELEASE





<b>Were there any Significant Operational Incidents/Issues (M.C.I.s, QAS vehicle accidents, cases incidents involving QPS / QFRS)?</b>						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

<b>Were there any Significant Patient Care/Clinical Issues (high acuity cases)?</b>						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

<b>Cardiac Arrest – How many out of hospital cardiac arrests were attended and were they transported with ROSC?</b>						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By
	MST		13:08	Cardiac Arrest	Response- ACP, CCP Sitrep- CPR in progress Sitrep 2- ROSC Outcome- Tx to LCH	CDS

<b>Were there any activations of First Responder Groups/Honorary Station personnel and were there any issues associated with this?</b>						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By
	GOL		09:18	Unwell, feeling faint	Response- ACP Sitrep- Stable Outcome- Tx to GCP	CDS

<b>Did QAS assist/Was QAS Assisted by any other jurisdictions? i.e. NSW/PNG/NT etc.</b>						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By


RTI Release



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**How many cases were upgraded or downgraded during the shift?**

LASN	Incident	Coded	Altered To	Reason for Alteration?	Callback Conducted?	Outcome

RTI Release

Staffing Issues (Late Log Ons/ Late Shift Starts)									
Officer(s)	Unit	Station / OpCen	LASN	Shift Start	Logged On / Started Shift	Early / Late by	Authorised By?	Reason Needed or Given / Operational Impact	Entered By

RTI RELEASE

Paramedic Occupational Violence Incident									
Incident	Time	Officer(s) Involved	LASN	Station	Incident Information	Type of Occupational Violence	Description	Notifications OS, SOS, PSDU, OCM	Entered By
QPS Notified (YES/NO)	Time QPS Notified	Attending Supervisor	Peer Support / Priority One Activation	Caution Note Accuracy	Further Caution Note Actions Required	Call Back Actions Taken (If Applicable)	OCS Emailed CAD Report and Audio Files to OCM	Dot Point Summary Sent to OCM (If Appropriate)	
Comments (Essential Additional Information)									

Paramedic Occupational Violence Incident									
Incident	Time	Officer(s) Involved	LASN	Station	Incident Information	Type of Occupational Violence	Description	Notifications OS, SOS, PSDU, OCM	Entered By
QPS Notified (YES/NO)	Time QPS Notified	Attending Supervisor	Peer Support / Priority One Activation	Caution Note Accuracy	Further Caution Note Actions Required	Call Back Actions Taken (If Applicable)	OCS Emailed CAD Report and Audio Files to OCM	Dot Point Summary Sent to OCM (If Appropriate)	
Comments (Essential Additional Information)									

**PEER SUPPORT ACTIVATIONS**

Time	Incident	Officer/s Involved	LASN	Station/ OpCen	ID Number(s)	Incident Information	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By

**WORKPLACE HEALTH & SAFETY (Not Relating to Paramedic Occupational Violence)**

Time	Incident	Officer/s Involved	LASN	Station/ OpCen	ID Number(s)	Incident Information	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By

**REPORTABLE FATIGUE SCORES (>5)**

Time	Shift	Officer	LASN	Station/ OpCen	ID Number	Fatigue Score	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By
06:43	EA		GOL	MTT		16	Stood down - BFD>1643		SOCC - SOS	OCS
06:43	EA		GOL	MTT		18	Stood down - BFD>1643		SOCC - SOS	OCS

COMPLAINTS								
Time	LASN	Complainant's Name	Phone Number	Description	Action Taken/Reported To	Further Action Required	Summary	Entered By



FALSE CALLS								
Time	LASN	Incident	Callers Phone No	Callers Name As per CLI	Address of Caller As Per CLI	Incident Address	Stated Problem/Incident	Entered By
12:16	WTM			N/A	N/A		has fallen off a chair	OCS



Aeromedical Response Requests (Notification / Activation / Escalation Matrix)											
Time	Incident	MPDS Determinant	Code	Primary/ IFT	Approved Yes/No	Provide details on all requests	Enter the reason given for declining/deviation of the aeromedical resource	Requesting Supervisor	SOS	Escalation Process Enacted	SOS Escalation Comments

RTI Release

### 300422 NIGHT SOUTHPORT OPCEN BRIEF

	<b>QUEENSLAND AMBULANCE SERVICE OPERATIONS BRIEF V2.11.2</b>	 <b>Queensland Government</b>
	<b>SOUTHPORT</b>	
<b>SHIFT:</b>	<b>NIGHT</b>	<b>30/04/2022</b>
<b>OCS:</b>	[REDACTED]	
<b>OCS (AFTERNOON):</b>	[REDACTED]	
<b>CDS:</b>	[REDACTED] (Deployment) / [REDACTED] (Clinical)	
<b>SENIOR OPS SUPER(S):</b>	GOL: [REDACTED] 1400-0000 + EA, OS [REDACTED] 18-06)	
	MST: [REDACTED] EA [REDACTED] 14-00, OS [REDACTED] (18-06)	
	WTM: [REDACTED] EA, [REDACTED] 14-00	



Shift Report (Any issues/items of interest for noting that do not fit into another category or require further elaboration)									
Entry	Time	Acute/PTS	Issue	Action/Case Information	Entered By	Incident	Unit	LASN	Station/OpCen
1	23:55		766 x 000 calls taken, GOS 89.5		OCS				
2	05:15								
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									
16									



Were there any Significant Operational Incidents/Issues (M.C.I.s, QAS vehicle accidents, cases incidents involving QPS / QFRS)?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By
	WTM		04:49		Response - CCP , ACP crew. Sitrep - Deceased	OCS

Were there any Significant Patient Care/Clinical Issues (high acuity cases)?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By
	WMT		16:04	bush walker, fall v	<p>RESPONSE: 1 x ACP II crew, SOS. SITREP: 1) - Crew entered with SES and QFES, pt is located 40mins walk in daylight.</p> <p>OUTCOME: 1 pt tx Code 2 to IGH</p>	CDS
	GOL		17:43	LOC head injury with	<p>RESPONSE: 1 x ACP II crew, 1 x CCP POD.</p> <p>OUTCOME: 1 pt tx Code 2 to GCUH</p>	CDS

	GOL		18:56	stab wounds x 2	RESPONSE: 1 x ACPH crew, 1 x CCP POD.	CDS

Cardiac Arrest – How many out of hospital cardiac arrests were attended and were they transported with ROSC?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

Were there any activations of First Responder Groups/Honorary Station personnel and were there any issues associated with this?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

Did QAS assist/Was QAS Assisted by any other jurisdictions? I.e. NSW/PNG/NT etc.						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By



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**How many cases were upgraded or downgraded during the shift?**

LASN	Incident	Coded	Altered To	Reason for Alteration?	Callback Conducted?	Outcome

RTI Release



Staffing Issues (Late Log Ons/ Late Shift Starts)									
Officer(s)	Unit	Station / OpCen	LASN	Shift Start	Logged On / Started Shift	Early / Late by	Authorised By?	Reason Needed or Given / Operational Impact	Entered By

Paramedic Occupational Violence Incident									
Incident	Time	Officer(s) Involved	LASN	Station	Incident Information	Type of Occupational Violence	Description	Notifications <i>OS, SOS, PSDU, OCM</i>	Entered By
QPS Notified (YES/NO)	Time QPS Notified	Attending Supervisor	Peer Support / Priority One Activation	Caution Note Accuracy	Further Caution Note Actions Required	Call Back Actions Taken (If Applicable)	OCS Emailed CAD Report and Audio Files to OCM	Dot Point Summary Sent to OCM (If Appropriate)	
Comments (Essential Additional Information)									

Paramedic Occupational Violence Incident									
Incident	Time	Officer(s) Involved	LASN	Station	Incident Information	Type of Occupational Violence	Description	Notifications <i>OS, SOS, PSDU, OCM</i>	Entered By
QPS Notified (YES/NO)	Time QPS Notified	Attending Supervisor	Peer Support / Priority One Activation	Caution Note Accuracy	Further Caution Note Actions Required	Call Back Actions Taken (If Applicable)	OCS Emailed CAD Report and Audio Files to OCM	Dot Point Summary Sent to OCM (If Appropriate)	
Comments (Essential Additional Information)									

**PEER SUPPORT ACTIVATIONS**

Time	Incident	Officer/s Involved	LASN	Station/ OpCen	ID Number(s)	Incident Information	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By

**WORKPLACE HEALTH & SAFETY (Not Relating to Paramedic Occupational Violence)**

Time	Incident	Officer/s Involved	LASN	Station/ OpCen	ID Number(s)	Incident Information	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By

**REPORTABLE FATIGUE SCORES (>5)**

Time	Shift	Officer	LASN	Station/ OpCen	ID Number	Fatigue Score	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By

RTI REQUEST

COMPLAINTS								
Time	LASN	Complainant's Name	Phone Number	Description	Action Taken/Reported To	Further Action Required	Summary	Entered By

FALSE CALLS								
Time	LASN	Incident	Callers Phone No	Callers Name As per CLI	Address of Caller As Per CLI	Incident Address	Stated Problem/Incident	Entered By
17:51	WTM						Fall not alert	OCS

<b>Aeromedical Response Requests (Notification / Activation / Escalation Matrix)</b>											
Time	Incident	MPDS Determinant	Code	Primary/ IFT	Approved Yes/No	Provide details on all requests	Enter the reason given for declining/deviation of the aeromedical resource	Requesting Supervisor	SOS	Escalation Process Enacted	SOS Escalation Comments

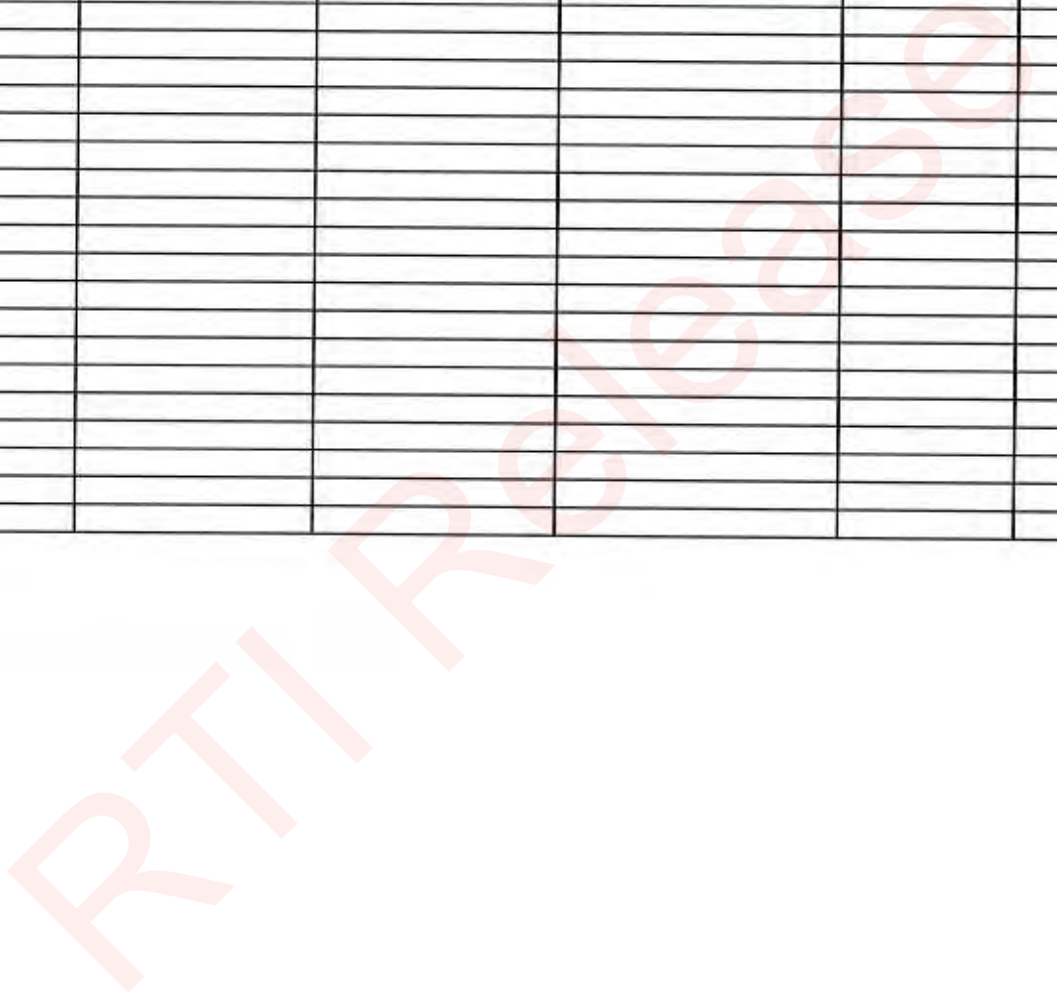
RTI Release

Were any PTS cases required to be handed over to Acute and was there any impact on Acute?					
Incident	LASN	Coding	Time	Reason	Operational Impact











RTI Release

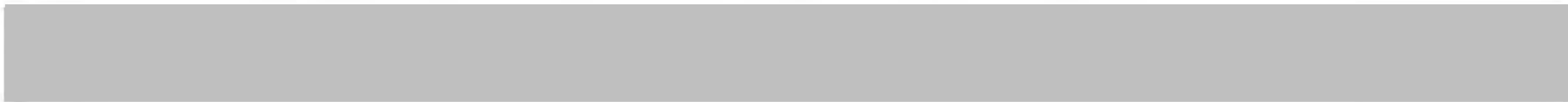
**3rd Party Trip Information**

Authorisation No.	LASN	Officer Name(s)	From	To	Reason	Company	Company Auth No.	Quoted Cost	Entered By
SOU - [REDACTED]	GOL	[REDACTED]	GCP	QAS MER	Staff Movement	13CABS	[REDACTED]	\$34-\$43	OCS
SOU - [REDACTED]	GOL	[REDACTED]	QAS MUD	GCUH	Staff Movement	13CABS	[REDACTED]	\$40-\$50	OCS



010522 DAY SOUTHPORT OPCEN BRIEF

	<b>QUEENSLAND AMBULANCE SERVICE OPERATIONS BRIEF V2.11.2</b>		
	<b>SOUTHPORT</b>		
<b>SHIFT:</b>	<u>DAY</u>		<u>1/05/2022</u>
<b>OCS:</b>			
<b>OCS (AFTERNOON):</b>			
<b>CDS:</b>			
<b>SENIOR OPS SUPER(S):</b>			
<b>GOL:</b>		14-24 +EA / 	
<b>MST:</b>		+EA / 	14-00 / 
<b>WTM:</b>		14-00 +EA	





Shift Report (Any issues/items of interest for noting that do not fit into another category or require further elaboration)									
Entry	Time	Acute/PTS	Issue	Action/Case Information	Entered By	Incident	Unit	LASN	Station/OpCen
1	08:00	ACUTE	Emergency Rule Deactivated	EMD advised escalated and peak demand script to be utilised	OCS				
2	08:52	ACUTE	Gos 89% with 165 calls presented	Information only	OCS				
3	08:53	ACUTE	15 Code 1's active 24 Code 2's active 1 Pending code 1 8 Pending code 2's longest 1hr 53mins	CDS's performing call backs	OCS				
4	16:10	ACUTE	Gos 91.3% with 452 calls presented	Information only	OCS				
5	16:11	ACUTE	36 Active code 1's 28 Active code 2's 1 Pending code 2	CDS's performing call backs	OCS				
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									
16									

HOSPITAL STATUS LOG								
Hospital	Status/ Escalation Level	Date Initiated	Time Initiated	Date Changed	Time Changed	Time On Status	Initiated By	Action/Outcome

<b>Were there any Significant Operational Incidents/Issues (M.C.I.s, QAS vehicle accidents, cases incidents involving QPS / QFRS)?</b>						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By
	WTM		04:49	(continued over from night brief)	Response - CCP , ACP crew. Sitrep - Deceased Outcome - Signal 4 - QPS required.	CDS

<b>Were there any Significant Patient Care/Clinical Issues (high acuity cases)?</b>						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By
	WTM		07:38	hit guard rail	Response - ACP crews x 2, CCP, HARU, SOS Outcome - Tx 1 Pt Code 1 to PAH, HARU & CCP onboard.	CDS
	MST			into eye	Response - ACP crew, CCP, HARU Outcome - Tx 1 Pt to PAH	CDS

<b>Cardiac Arrest – How many out of hospital cardiac arrests were attended and were they transported with ROSC?</b>						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By
	GOL		09:18	- ?Deceased, details unknown	Response - ACP crew, CCP, OS Sitrep - Signal 4, ROLE form being completed. Outcome - QPS on scene	CDS
	WTM		10:19		Response - ACP crews x 2, CCP, SOS Sitrep - Stand down all crews, Signal 4. Outcome - QPS on scene.	

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**Were there any activations of First Responder Groups/Honorary Station personnel and were there any issues associated with this?**

Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

**Did QAS assist/Was QAS Assisted by any other jurisdictions? i.e. NSW/PNG/NT etc.**

Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By



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**How many cases were upgraded or downgraded during the shift?**

LASN	Incident	Coded	Altered To	Reason for Alteration?	Callback Conducted?	Outcome

RTI Release

Staffing Issues (Late Log Ons/ Late Shift Starts)									
Officer(s)	Unit	Station / OpCen	LASN	Shift Start	Logged On / Started Shift	Early / Late by	Authorised By?	Reason Needed or Given / Operational Impact	Entered By
		BEA	MST	11:00				Traffic	OCS
		RBK	WTM	07:00	07:40	00:40		Nil reason provided	OCS
		RBK	WTM	12:00	22:00	10:00		Traffic	OCS

Paramedic Occupational Violence Incident									
Incident	Time	Officer(s) Involved	LASN	Station	Incident Information	Type of Occupational Violence	Description	Notifications <i>OS, SOS, PSDU, OCM</i>	Entered By
QPS Notified (RESNO)	Time QPS Notified	Attending Supervisor	Peer Support / Priority One Activation	Caution Note Accuracy	Further Caution Note Actions Required	Call Back Actions Taken (If Applicable)	OCM Emailed CAD Report and Audio Files to OCM	Dot Point Summary Sent to OCM (If Appropriate)	
Comments (Essential Additional Information)									

Paramedic Occupational Violence Incident									
Incident	Time	Officer(s) Involved	LASN	Station	Incident Information	Type of Occupational Violence	Description	Notifications <i>OS, SOS, PSDU, OCM</i>	Entered By
QPS Notified (RESNO)	Time QPS Notified	Attending Supervisor	Peer Support / Priority One Activation	Caution Note Accuracy	Further Caution Note Actions Required	Call Back Actions Taken (If Applicable)	OCM Emailed CAD Report and Audio Files to OCM	Dot Point Summary Sent to OCM (If Appropriate)	
Comments (Essential Additional Information)									



PEER SUPPORT ACTIVATIONS										
Time	Incident	Officer/s Involved	LASN	Station/OpCen	ID Number(s)	Incident Information	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By

WORKPLACE HEALTH & SAFETY (Not Relating to Paramedic Occupational Violence)										
Time	Incident	Officer/s Involved	LASN	Station/OpCen	ID Number(s)	Incident Information	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By
09:10			MST	BEA		UPPER MOUNT GRAVATT -	Tx to QEH cleared at 0753 EOS 0910 (07F) BFD 1910 shift 1900-0700	Welfare check		OCS

REPORTABLE FATIGUE SCORES (>5)										
Time	Shift	Officer	LASN	Station/OpCen	ID Number	Fatigue Score	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By

COMPLAINTS								
Time	LASN	Complainant's Name	Phone Number	Description	Action Taken/Reported To	Further Action Required	Summary	Entered By

FALSE CALLS								
Time	LASN	Incident	Callers Phone No	Callers Name As per CLI	Address of Caller As Per CLI	Incident Address	Stated Problem/Incident	Entered By

Aeromedical Response Requests (Notification / Activation / Escalation Matrix)											
Time	Incident	MPDS Determinant	Code	Primary/ IFT	Approved Yes/No	Provide details on all requests	Enter the reason given for declining/deviation of the aeromedical resource	Requesting Supervisor	SOS	Escalation Process Enacted	SOS Escalation Comments

RTI Release

Were any PTS cases required to be handed over to Acute and was there any impact on Acute?					
Incident	LASN	Coding	Time	Reason	Operational Impact



RTI Release

3rd Party Trip Information

Authorisation No.	LASN	Officer Name(s)	From	To	Reason	Company	Company Auth No.	Quoted Cost	Entered By
SOU -	WTM	[Redacted]	SPF	IPS	Split crew	13CABS	[Redacted]	\$40-\$50	OCS

RTI RELEASE

# 010522 NIGHT SOUTHPORT OPCEN BRIEF

	<h2>QUEENSLAND AMBULANCE SERVICE OPERATIONS BRIEF V2.11.2</h2>	 Queensland Government
	<b>SOUTHPORT</b>	
<b>SHIFT:</b>	NIGHT	1/05/2022
<b>OCS:</b>	[REDACTED]	
<b>OCS (AFTERNOON):</b>	[REDACTED]	
<b>CDS:</b>	[REDACTED] 18-24 / [REDACTED] 2400-0600	
<b>SENIOR OPS SUPER(S):</b>	<b>GOL:</b> [REDACTED] 14-24 +EA / [REDACTED]	
	<b>MST:</b> [REDACTED] 14-00 / [REDACTED] EA / [REDACTED]	
	<b>WTM:</b> [REDACTED] 14-00 +EA	



Shift Report (Any issues/items of interest for noting that do not fit into another category or require further elaboration)									
Entry	Time	Acute/PTS	Issue	Action/Case Information	Entered By	Incident	Unit	LASN	Station/OpCen
1	17:45		All CAD consoles had 20second freeze with conection centre warning popup.	FSG advise they were working in the back end of the system and that was expected , the work was to stop further freezes overnight.	OCS				
2	00:59		721 x 000 calls taken GOS 91.1		OCS				
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									
16									

HOSPITAL STATUS LOG								
Hospital	Status/ Escalation Level	Date Initiated	Time Initiated	Date Changed	Time Changed	Time On Status	Initiated By	Action/Outcome
ANH	Redirection	1/05/22	19:15					
THH	Redirection	25/04/22	10:20					Review 1100 02/05/22



Were there any Significant Operational Incidents/Issues (M.C.I.s, QAS vehicle accidents, cases incidents involving QPS / QFRS)?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

Were there any Significant Patient Care/Clinical Issues (high acuity cases)?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By
	GOL		23:53		Response - ACP crew, CCP, HARU and SOS, QPS attached. Outcome - Pt refused treatment and transport and was left with QPS	OCS

Cardiac Arrest – How many out of hospital cardiac arrests were attended and were they transported with ROSC?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

Were there any activations of First Responder Groups/Honorary Station personnel and were there any issues associated with this?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

Did QAS assist/Was QAS Assisted by any other jurisdictions? i.e. NSW/PNG/NT etc.						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By


RTI Release



[Back To Main Page](#)**How many cases were upgraded or downgraded during the shift?**

LASN	Incident	Coded	Altered To	Reason for Alteration?	Callback Conducted?	Outcome

RTI Release

Staffing Issues (Late Log Ons/ Late Shift Starts)									
Officer(s)	Unit	Station / OpCen	LASN	Shift Start	Logged On / Started Shift	Early / Late by	Authorised By?	Reason Needed or Given / Operational Impact	Entered By

Paramedic Occupational Violence Incident									
Incident	Time	Officer(s) Involved	LASN	Station	Incident Information	Type of Occupational Violence	Description	Notifications <i>OS, SOS, PSDU, OCM</i>	Entered By
nil	04:45		WTM	IPS	Officer was doing paperwork at	Physical Violence	patient attempting to abscond rubbed up and down the Officer	SOS advised 0515	OCS
<b>QPS Notified (YES/NO)</b>	<b>Time QPS Notified</b>	<b>Attending Supervisor</b>	<b>Peer Support / Priority One Activation</b>	<b>Caution Note Accuracy</b>	<b>Further Caution Note Actions Required</b>	<b>Call Back Actions Taken (If Applicable)</b>	<b>OCs Emailed CAD Report and Audio Files to OCM</b>	<b>Dot Point Summary Sent to OCM (If Appropriate)</b>	
NO			PEER SUPPORT		Nil				
Comments (Essential Additional Information)									

Paramedic Occupational Violence Incident									
Incident	Time	Officer(s) Involved	LASN	Station	Incident Information	Type of Occupational Violence	Description	Notifications <i>OS, SOS, PSDU, OCM</i>	Entered By
<b>QPS Notified (YES/NO)</b>	<b>Time QPS Notified</b>	<b>Attending Supervisor</b>	<b>Peer Support / Priority One Activation</b>	<b>Caution Note Accuracy</b>	<b>Further Caution Note Actions Required</b>	<b>Call Back Actions Taken (If Applicable)</b>	<b>OCs Emailed CAD Report and Audio Files to OCM</b>	<b>Dot Point Summary Sent to OCM (If Appropriate)</b>	
Comments (Essential Additional Information)									

PEER SUPPORT ACTIVATIONS										
Time	Incident	Officer/s Involved	LASN	Station/OpCen	ID Number(s)	Incident Information	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By
04:02			MST			unconscious covered in vomit	Crew and CCP dispatched	PSO to follow up with crews	OS	OCS
05:10	nil		WTM			IGH - Officer was doing paperwork in the hallway rubbed up against intentionally	Officer will complete a SHE report	PSO to follow up with the Officer		OCS

WORKPLACE HEALTH & SAFETY (Not Relating to Paramedic Occupational Violence)										
Time	Incident	Officer/s Involved	LASN	Station/OpCen	ID Number(s)	Incident Information	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By

REPORTABLE FATIGUE SCORES (>5)										
Time	Shift	Officer	LASN	Station/OpCen	ID Number	Fatigue Score	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By

COMPLAINTS								
Time	LASN	Complainant's Name	Phone Number	Description	Action Taken/Reported To	Further Action Required	Summary	Entered By

FALSE CALLS								
Time	LASN	Incident	Callers Phone No	Callers Name As per CLI	Address of Caller As Per CLI	Incident Address	Stated Problem/Incident	Entered By



Aeromedical Response Requests (Notification / Activation / Escalation Matrix)											
Time	Incident	MPDS Determinant	Code	Primary/ IFT	Approved Yes/No	Provide details on all requests	Enter the reason given for declining/deviation of the aeromedical resource	Requesting Supervisor	SOS	Escalation Process Enacted	SOS Escalation Comments

RTI Release



**Were any PTS cases required to be handed over to Acute and was there any impact on Acute?**

Incident	LASN	Coding	Time	Reason	Operational Impact

RTI Release



020522 DAY SOUTHPORT OPCEN BRIEF

	<b>QUEENSLAND AMBULANCE SERVICE OPERATIONS BRIEF V2.11.2</b>		 <b>Queensland Government</b>
	<b>SOUTHPORT</b>		
<b>SHIFT:</b>	<b>DAY</b>	2/05/2022	
<b>OCS:</b>		[REDACTED]	
<b>OCS (AFTERNOON):</b>		[REDACTED]	
<b>CDS:</b>		[REDACTED]	
<b>SENIOR OPS SUPER(S):</b>	<b>GOL:</b>	[REDACTED] +EA / [REDACTED] 12-24 / [REDACTED]	
	<b>MST:</b>	[REDACTED] 06-16 + EA / [REDACTED] 14-24	
	<b>WTM:</b>	[REDACTED] 06-18 + EA / [REDACTED] 12-24	



Shift Report (Any issues/items of interest for noting that do not fit into another category or require further elaboration)									
Entry	Time	Acute/PTS	Issue	Action/Case Information	Entered By	Incident	Unit	LASN	Station/OpGen
1	11:00		<b>SouportOpce</b> Response Area Pending: 3 cases Active : 63 000 calls presented: 242 GOS 94.4%	CDS conducting calls back where required. OCS monitoring 000 calls and EMD breaks	OCS				SOU
2	14:00		<b>SouportOpce</b> Response Area Pending: 3 cases Active : 105 cases 000 calls presented: 350 GOS 95.3%	CDS conducting calls back where required. OCS monitoring 000 calls and EMD breaks	OCS				SOU
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									
16									



Were there any Significant Operational Incidents/Issues (M.C.I.s, QAS vehicle accidents, cases incidents involving QPS / QFRS)?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

Were there any Significant Patient Care/Clinical Issues (high acuity cases)?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By
	MST		13:20	Ped v car		CDS
	GOL			complaining of injury to head, ? Inhaled water	pts stable tx code 2	CDS

Cardiac Arrest – How many out of hospital cardiac arrests were attended and were they transported with ROSC?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

Were there any activations of First Responder Groups/Honorary Station personnel and were there any issues associated with this?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

Did QAS assist/Was QAS Assisted by any other jurisdictions? i.e. NSW/PNG/NT etc.						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By


RTI Release





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**How many cases were upgraded or downgraded during the shift?**

LASN	Incident	Coded	Altered To	Reason for Alteration?	Callback Conducted?	Outcome

RTI Release

<b>Staffing Issues (Late Log Ons/ Late Shift Starts)</b>									
<b>Officer(s)</b>	<b>Unit</b>	<b>Station / OpCen</b>	<b>LASN</b>	<b>Shift Start</b>	<b>Logged On / Started Shift</b>	<b>Early / Late by</b>	<b>Authorised By?</b>	<b>Reason Needed or Given / Operational Impact</b>	<b>Entered By</b>

Paramedic Occupational Violence Incident									
Incident	Time	Officer(s) Involved	LASN	Station	Incident Information	Type of Occupational Violence	Description	Notifications <i>OS, SOS, PSDU, OCM</i>	Entered By
QPS Notified (YES/NO)	Time QPS Notified	Attending Supervisor	Peer Support / Priority One Activation	Caution Note Accuracy	Further Caution Note Actions Required	Call Back Actions Taken (If Applicable)	OCM Emailed CAD Report and Audio Files to OCM	Dot Point Summary Sent to OCM (If Appropriate)	
Comments (Essential Additional Information)									

Paramedic Occupational Violence Incident									
Incident	Time	Officer(s) Involved	LASN	Station	Incident Information	Type of Occupational Violence	Description	Notifications <i>OS, SOS, PSDU, OCM</i>	Entered By
QPS Notified (YES/NO)	Time QPS Notified	Attending Supervisor	Peer Support / Priority One Activation	Caution Note Accuracy	Further Caution Note Actions Required	Call Back Actions Taken (If Applicable)	OCM Emailed CAD Report and Audio Files to OCM	Dot Point Summary Sent to OCM (If Appropriate)	
Comments (Essential Additional Information)									

RTI Release

**PEER SUPPORT ACTIVATIONS**

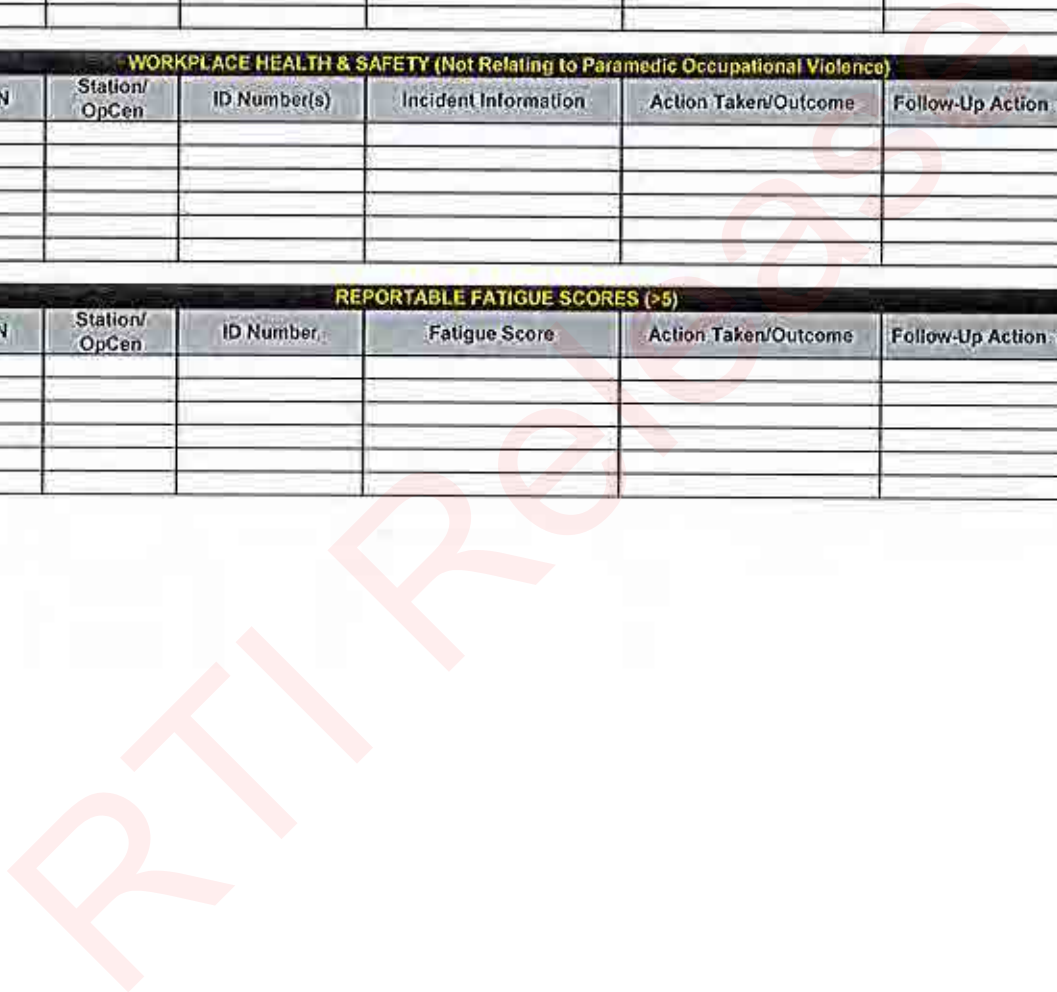
Time	Incident	Officer/s Involved	LASN	Station/ OpCen	ID Number(s)	Incident Information	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By

**WORKPLACE HEALTH & SAFETY (Not Relating to Paramedic Occupational Violence)**

Time	Incident	Officer/s Involved	LASN	Station/ OpCen	ID Number(s)	Incident Information	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By

**REPORTABLE FATIGUE SCORES (>5)**

Time	Shift	Officer	LASN	Station/ OpCen	ID Number	Fatigue Score	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By



COMPLAINTS								
Time	LASN	Complainant's Name	Phone Number	Description	Action Taken/Reported To	Further Action Required	Summary	Entered By

FALSE CALLS								
Time	LASN	Incident	Callers Phone No	Callers Name As per CLI	Address of Caller As Per CLI	Incident Address	Stated Problem/Incident	Entered By

Aeromedical Response Requests (Notification / Activation / Escalation Matrix)											
Time	Incident	MPDS Determinant	Code	Primary/ IFT	Approved Yes/No	Provide details on all requests	Enter the reason given for declining/deviation of the aeromedical resource	Requesting Supervisor	SOS	Escalation Process Enacted	SOS Escalation Comments
16:40	[REDACTED]	07c03e	1B	PRIMARY	Yes	HIT BY PROJECTILE FROM FIRE [REDACTED]		CDS [REDACTED]	[REDACTED]		

RTI Release

**Were any PTS cases required to be handed over to Acute and was there any impact on Acute?**

Incident	LASN	Coding	Time	Reason	Operational Impact

RTI Release





020522 NIGHT SOUTHPORT OPCEN BRIEF



QUEENSLAND AMBULANCE SERVICE  
OPERATIONS BRIEF V2.11.2



SOUTHPORT

SHIFT: NIGHT

2/05/2022

OCS: [REDACTED]  
OCS (AFTERNOON): [REDACTED]  
CDS: [REDACTED] 18-24 / [REDACTED] 24-0600  
SENIOR OPS SUPER(S):  
GOL: [REDACTED] 12-24 / [REDACTED] EA / [REDACTED]  
MST: [REDACTED] EA / M [REDACTED]  
WTM: [REDACTED] EA



Shift Report (Any issues/items of interest for noting that do not fit into another category or require further elaboration)									
Entry	Time	Acute/PTS	Issue	Action/Case Information	Entered By	Incident	Unit	LASN	Station/OpGen
1	18:30	ACUTE	Gos 95.5% with 525 calls answered	Information only	OCS				
2	18:31	ACUTE	36 Active code 1's 30 Active code 2's 1 Pending code 1 2 Pending code 2's longest 4hrs 22mins	CDS's performing call backs	OCS				
3	03:01	ACUTE	Gos 90.7% with 47 calls answered	Information only	OCS				
4	03:02	ACUTE	13 Active code 1's 8 Active code 2's 3 Pending code 2's longest 5hrs 30mins	CDS's performing call backs	OCS				
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									
16									

HOSPITAL STATUS LOG								
Hospital	Status/ Escalation Level	Date Initiated	Time Initiated	Date Changed	Time Changed	Time On Status	Initiated By	Action/Outcome

Were there any Significant Operational Incidents/Issues (M.C.I.s, QAS vehicle accidents, cases incidents involving QPS / QFRS)?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By
	MST		20:48	Crash/ Taser deployed, injured	Response- ACP x2 SOS Notified Sitrep- 2 Pt both being assessed , Both GCS15 Outcome- Tx to St Andrews & Tx to LCH	CDS
	MST		21:50	Shed Fire	Response- ACP SOS Notified Sitrep- 2 x QFES in BA, Nil Occupants Outcome- QAS SNR	CDS

Were there any Significant Patient Care/Clinical Issues (high acuity cases)?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

Cardiac Arrest – How many out of hospital cardiac arrests were attended and were they transported with ROSC?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

Were there any activations of First Responder Groups/Honorary Station personnel and were there any issues associated with this?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

Did QAS assist/Was QAS Assisted by any other jurisdictions? I.e. NSW/PNG/NT etc.

Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

RTI Release



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**How many cases were upgraded or downgraded during the shift?**

LASN	Incident	Coded	Altered To	Reason for Alteration?	Callback Conducted?	Outcome

RTI Release



**Staffing Issues (Late Log Ons/ Late Shift Starts)**

Officer(s)	Unit	Station / OpCen	LASN	Shift Start	Logged On / Started Shift	Early / Late by	Authorised By?	Reason Needed or Given / Operational Impact	Entered By

RTI RELEASE

Paramedic Occupational Violence Incident									
Incident	Time	Officer(s) Involved	LASN	Station	Incident Information	Type of Occupational Violence	Description	Notifications OS, SOS, PSDU, OCM	Entered By
QPS Notified (YES/NO)	Time QPS Notified	Attending Supervisor	Peer Support / Priority One Activation	Caution Note Accuracy	Further Caution Note Actions Required	Call Back Actions Taken (If Applicable)	OCS Emailed CAD Report and Audio Files to OCM	Dot Point Summary Sent to OCM (If Appropriate)	
Comments (Essential Additional Information)									

Paramedic Occupational Violence Incident									
Incident	Time	Officer(s) Involved	LASN	Station	Incident Information	Type of Occupational Violence	Description	Notifications OS, SOS, PSDU, OCM	Entered By
QPS Notified (YES/NO)	Time QPS Notified	Attending Supervisor	Peer Support / Priority One Activation	Caution Note Accuracy	Further Caution Note Actions Required	Call Back Actions Taken (If Applicable)	OCS Emailed CAD Report and Audio Files to OCM	Dot Point Summary Sent to OCM (If Appropriate)	
Comments (Essential Additional Information)									

**PEER SUPPORT ACTIVATIONS**

Time	Incident	Officer/s Involved	LASN	Station/ OpCen	ID Number(s)	Incident Information	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By

**WORKPLACE HEALTH & SAFETY (Not Relating to Paramedic Occupational Violence)**

Time	Incident	Officer/s Involved	LASN	Station/ OpCen	ID Number(s)	Incident Information	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By
17.48			MST	BEE		Alarm activation on the floor	Tx to LCH cleared at 1951 EOS 2020 (19F) BFD 0620 shift 0600-1800	Welfare check	OC -	OCS
19.26			WTM	RBK		Dislocated shoulder	Tx to IGH cleared at 2126 EOS 2200 (19F) BFD 0800 shift 0700-1900	Welfare check	OC -	OCS
20.32			WTM	RBK		Back and hip pain unable to move	Tx to IGH cleared at 2355 EOS 0032 (22F) Nil BFD	Welfare check	OC -	OCS
22.01			GOL	SOU			Tx to GCUH cleared at 0044 EOS 0100 (24F) BFD 0100 shift 1000-2200	Welfare check	OS -	OCS

**REPORTABLE FATIGUE SCORES (>5)**

Time	Shift	Officer	LASN	Station/ OpCen	ID Number	Fatigue Score	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By

COMPLAINTS								
Time	LASN	Complainant's Name	Phone Number	Description	Action Taken/Reported To	Further Action Required	Summary	Entered By

FALSE CALLS								
Time	LASN	Incident	Callers Phone No	Callers Name As per CLI	Address of Caller As Per CLi	Incident Address	Stated Problem/Incident	Entered By

Aeromedical Response Requests (Notification / Activation / Escalation Matrix)											
Time	Incident	MPDS Determinant	Code	Primary/ IFT	Approved Yes/No	Provide details on all requests	Enter the reason given for declining/deviation of the aeromedical resource	Requesting Supervisor	SOS	Escalation Process Enacted	SOS Escalation Comments

RTI Release

Were any PTS cases required to be handed over to Acute and was there any impact on Acute?



Incident	LASN	Coding	Time	Reason	Operational Impact

RTI Release

**3rd Party Trip Information**

Authorisation No.	LASN	Officer Name(s)	From	To	Reason	Company	Company Auth No.	Quoted Cost	Entered By
SOU	GOL		GCHRB	MER	Terminating OT	13CABS		\$20-\$26	OCS

030522 DAY SOUTHPORT OPCEN BRIEF

	<b>QUEENSLAND AMBULANCE SERVICE OPERATIONS BRIEF V2.11.2</b>	 <b>Queensland Government</b>
	<b>SOUTHPORT</b>	
<b>SHIFT:</b>	<b>DAY</b>	<b>3/05/2022</b>
<b>OCS:</b>		
<b>OCS (AFTERNOON):</b>		
<b>CDS:</b>		0800-2000
<b>SENIOR OPS SUPER(S):</b>	<b>GOL:</b>	12-24 +EA /
	<b>MST:</b>	16-16 / 14-24 + ea
	<b>WTM:</b>	06-18 / 12-24 + EA





Shift Report (Any Issues/Items of interest for noting that do not fit into another category or require further elaboration)									
Entry	Time	Acute/PTS	Issue	Action/Case Information	Entered By	Incident	Unit	LASN	Station/OpCen
1	09:30	ACUTE	SEQ escalated to MODERATE	Information only	OCS			OPCENS	
2									
3									
4									
5									
6									
7									
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9									
10									
11									
12									
13									
14									
15									
16									

**HOSPITAL STATUS LOG**

Hospital	Status/ Escalation Level	Date Initiated	Time Initiated	Date Changed	Time Changed	Time On Status	Initiated By	Action/Outcome

<b>Were there any Significant Operational Incidents/Issues (M.C.I.s, QAS vehicle accidents, cases incidents involving QPS / QFRS)?</b>						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

<b>Were there any Significant Patient Care/Clinical Issues (high acuity cases)?</b>						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

<b>Cardiac Arrest – How many out of hospital cardiac arrests were attended and were they transported with ROSC?</b>						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

<b>Were there any activations of First Responder Groups/Honorary Station personnel and were there any issues associated with this?</b>						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

<b>Did QAS assist/Was QAS Assisted by any other jurisdictions? i.e. NSW/PNG/NT etc.</b>						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By



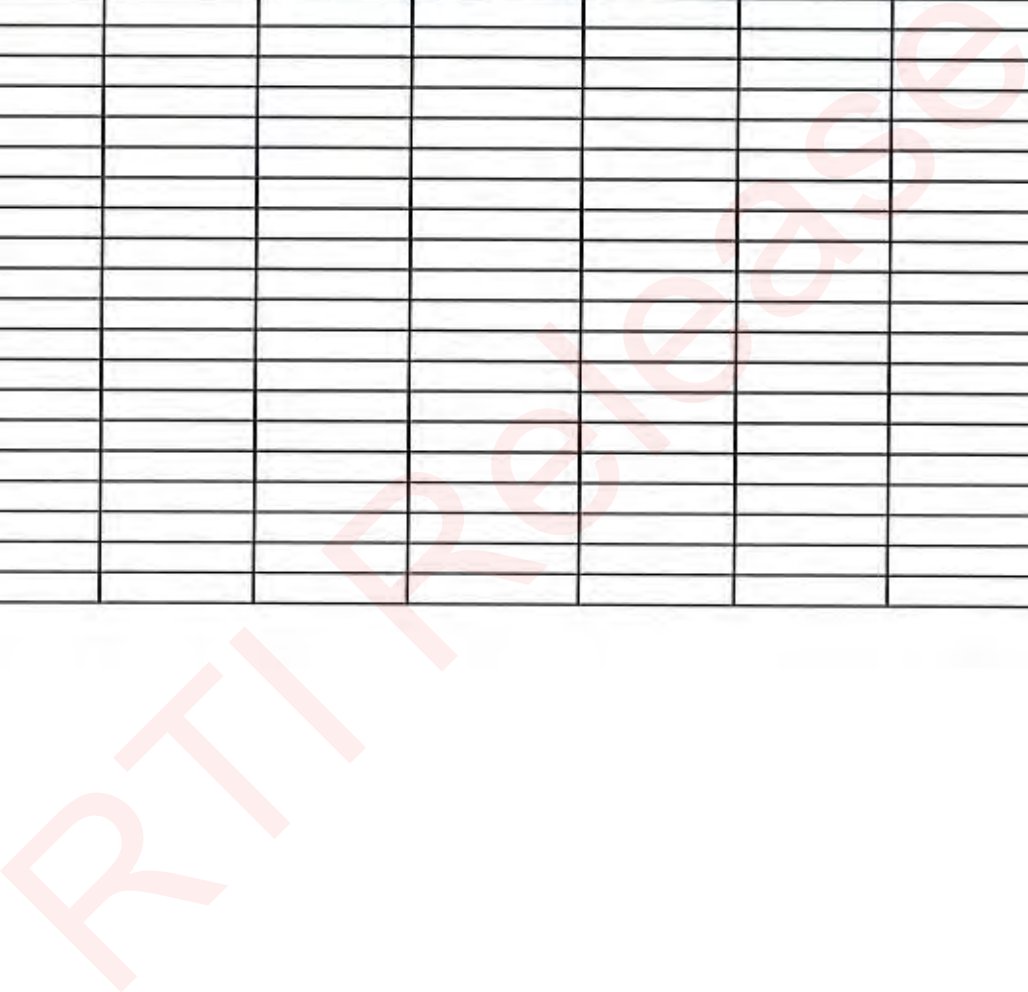
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**How many cases were upgraded or downgraded during the shift?**

LASN	Incident	Coded	Altered To	Reason for Alteration?	Callback Conducted?	Outcome

RTI Release

Staffing Issues (Late Log Ons/ Late Shift Starts)									
Officer(s)	Unit	Station / OpCen	LASN	Shift Start	Logged On / Started Shift	Early / Late by	Authorised By?	Reason Needed or Given / Operational Impact	Entered By



Paramedic Occupational Violence Incident									
Incident	Time	Officer(s) Involved	LASN	Station	Incident Information	Type of Occupational Violence	Description	Notifications OS, SOS, PSDU, OCM	Entered By
QPS Notified (YES/NO)	Time QPS Notified	Attending Supervisor	Peer Support / Priority One Activation	Caution Note Accuracy	Further Caution Note Actions Required	Call Back Actions Taken (If Applicable)	OCS Emailed CAD Report and Audio Files to OCM	Dot Point Summary Sent to OCM (If Appropriate)	
Comments (Essential Additional Information)									

Paramedic Occupational Violence Incident									
Incident	Time	Officer(s) Involved	LASN	Station	Incident Information	Type of Occupational Violence	Description	Notifications OS, SOS, PSDU, OCM	Entered By
QPS Notified (YES/NO)	Time QPS Notified	Attending Supervisor	Peer Support / Priority One Activation	Caution Note Accuracy	Further Caution Note Actions Required	Call Back Actions Taken (If Applicable)	OCS Emailed CAD Report and Audio Files to OCM	Dot Point Summary Sent to OCM (If Appropriate)	
Comments (Essential Additional Information)									

RTI Release

**PEER SUPPORT ACTIVATIONS**

Time	Incident	Officer/s Involved	LASN	Station/OpCen	ID Number(s)	Incident Information	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By

**WORKPLACE HEALTH & SAFETY (Not Relating to Paramedic Occupational Violence)**

Time	Incident	Officer/s Involved	LASN	Station/OpCen	ID Number(s)	Incident Information	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By
08:18			MST	MUN		Crew received late case and transported up to PAH	Welfare check done on crew crew logged off 0818 for a 0600 finish crew on days off now.	Nil	OC	OCS
09:00			WTM	IPS		CCP ack up required on case. CCP transported to PAH with crew. Late case	Welfare check done on crew	Crew BFD >	OC	OCS

**REPORTABLE FATIGUE SCORES (>5)**

Time	Shift	Officer	LASN	Station/OpCen	ID Number	Fatigue Score	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By



COMPLAINTS								
Time	LASN	Complainant's Name	Phone Number	Description	Action Taken/Reported To	Further Action Required	Summary	Entered By

FALSE CALLS								
Time	LASN	Incident	Callers Phone No	Callers Name As per CLI	Address of Caller As Per CLI	Incident Address	Stated Problem/Incident	Entered By
06:08	WTM	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]	suicidal	CDS DM
06:31	WTM						suicidal	CDS DM
08:58	WTM						suicidal	CDS DM
12:56	WTM						suicidal	CDS DM
13:01	WTM						suicidal	CDS DM
13:40	WTM						of fall, leg injury	CDS DM

Aeromedical Response Requests (Notification / Activation / Escalation Matrix)											
Time	Incident	MPDS Determinant	Code	Primary/ IFT	Approved Yes/No	Provide details on all requests	Enter the reason given for declining/deviation of the aeromedical resource	Requesting Supervisor	SOS	Escalation Process Enacted	SOS Escalation Comments

RTI Release

**Were any PTS cases required to be handed over to Acute and was there any impact on Acute?**

Incident	LASN	Coding	Time	Reason	Operational Impact



RTI Release

3rd Party Trip Information

Authorisation No.	LASN	Officer Name(s)	From	To	Reason	Company	Company Auth No.	Quoted Cost	Entered By
SOU - [REDACTED]	GOL	[REDACTED]	QAS COL	GCHRB	Meet up with partner for shift	13CABS	[REDACTED]	\$53	OCS



030522 NIGHT SOUTHPORT OPCEN BRIEF

	<b>QUEENSLAND AMBULANCE SERVICE OPERATIONS BRIEF V2.11.2</b>	 <b>Queensland Government</b>
	<b>SOUTHPORT</b>	
<b>SHIFT:</b>	<b>NIGHT</b>	<b>3/05/2022</b>
<b>OCS:</b>	[REDACTED]	
<b>OCS (AFTERNOON):</b>		
<b>CDS:</b>	[REDACTED]	
<b>SENIOR OPS SUPER(S):</b>		
	<b>GOL:</b> [REDACTED] 14-24 +EA / [REDACTED]	
	<b>MST:</b> [REDACTED] 14-24 +EA / [REDACTED]	
	<b>WTM:</b> [REDACTED] 12-24 +EA	



Shift Report (Any issues/items of interest for noting that do not fit into another category or require further elaboration)									
Entry	Time	Acute/PTS	Issue	Action/Case Information	Entered By	Incident	Unit	LASN	Station/OpCen
1	19:12	ACUTE	Gos 88.8% with 643 call presented	Information only	OCS				
2	19:13	ACUTE	43 Active code 1's 37 Active code 2's 2 Pending code 1's 12 Pending code 2's longest 2hrs 43 mins	CDS's performing call backs	OCS				
3	18:35	ACUTE	Veh has reversed into a parked car - unable to mobilise	[REDACTED] vomiting DIB Family elected to tx pt via private means	OCS	[REDACTED]		GOL	HVL
4	20:15	ACUTE	Emergency Rule Enacted	EMD's advised	OCS				
5	03:16	ACUTE	Gos 75% with 69 calls answered	Information only	OCS				
6	03:17	ACUTE	20 Active code 1's 8 Active code 2's 1 Pending code 1 15mins 16 Pending code 2's longest 8hrs 59mins	CDS performing call backs	OCS				
7									
8									
9									
10									
11									
12									
13									
14									
15									
16									

HOSPITAL STATUS LOG								
Hospital	Status/ Escalation Level	Date Initiated	Time Initiated	Date Changed	Time Changed	Time On Status	Initiated By	Action/Outcome
THH	Redirection	3/05/22	18:30	4/05/22	04:30	10:00		Off redirection @0430
GPH	Redirection	3/05/22	01:30					

Were there any Significant Operational Incidents/Issues (M.C.I.s, QAS vehicle accidents, cases incidents involving QPS / QFRS)?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

Were there any Significant Patient Care/Clinical Issues (high acuity cases)?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By
	MST		23:31	- Sedan vs Bike	Response - ACP crew, CCP, HARU, SOS Outcome - Signal 4. QPS on scene	CDS
	WTM		01:20	- Rollover 2 x PTs	Response - ACP crews x2, CCP, HARU Sitrep - Outcome - Tx 2 PTs to IGH. Male pt sedated CCP on board.	CDS

Cardiac Arrest – How many out of hospital cardiac arrests were attended and were they transported with ROSC?						
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By
	MST		15:54	Shallow Breathing	Response - ACP crews x2. CCP Outcome - Signal 4. GP contacted to issue death certificate.	CDS
	MST		19:12	Passed out	Response - ACP crews x2, CCP, HARU Outcome - Signal 4. QPS attached	CDS



	MST			[REDACTED] Agonal Ineffective Breathing. Slumped not responsive.	Response - ACP crews x2, CCP Sitrep - Signal 4, QPS required Outcome - Signal 4	CDS
	MST		01:03	[REDACTED] Difficulty Breathing	Response - ACP crews x2, CCP, OS Sitrep - VF Arrest, request 2nd crew. Heightened scene requesting QPS & SOS Outcome - Signal 4, completing ROLE Form	CDS
	GOL		04:27	[REDACTED] Unresponsive Aspirated	Response - ACP crews x2, CCP Sitrep - Signal 4 Outcome - Signal 4, completing ROLE Form	CDS

**Were there any activations of First Responder Groups/Honorary Station personnel and were there any issues associated with this?**

Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By

**Did QAS assist/Was QAS Assisted by any other jurisdictions? i.e. NSW/PNG/NT etc.**

Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By



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**How many cases were upgraded or downgraded during the shift?**

LASN	Incident	Coded	Altered To	Reason for Alteration?	Callback Conducted?	Outcome

RTI Release

**Staffing Issues (Late Log Ons/ Late Shift Starts)**

Officer(s)	Unit	Station / OpCen	LASN	Shift Start	Logged On / Started Shift	Early / Late by	Authorised By?	Reason Needed or Given / Operational Impact	Entered By

RTI RELEASE

Paramedic Occupational Violence Incident									
Incident	Time	Officer(s) Involved	LASN	Station	Incident Information	Type of Occupational Violence	Description	Notifications OS, SOS, PSDU, OCM	Entered By
OPS Notified (YES/NO)	Time OPS Notified	Attending Supervisor	Peer Support / Priority One Activation	Caution Note Accuracy	Further Caution Note Actions Required	Call Back Actions Taken (If Applicable)	OCS Emailed CAD Report and Audio Files to OCM	Dot Point Summary Sent to OCM (If Appropriate)	
Comments (Essential Additional Information)									

Paramedic Occupational Violence Incident									
Incident	Time	Officer(s) Involved	LASN	Station	Incident Information	Type of Occupational Violence	Description	Notifications OS, SOS, PSDU, OCM	Entered By
OPS Notified (YES/NO)	Time OPS Notified	Attending Supervisor	Peer Support / Priority One Activation	Caution Note Accuracy	Further Caution Note Actions Required	Call Back Actions Taken (If Applicable)	OCS Emailed CAD Report and Audio Files to OCM	Dot Point Summary Sent to OCM (If Appropriate)	
Comments (Essential Additional Information)									

RTI Release

**PEER SUPPORT ACTIVATIONS**

Time	Incident	Officer/s Involved	LASN	Station/OpCen	ID Number(s)	Incident Information	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By
19:24			GOL	OpCen			GCS 15 stable pt visible marks Tx to GCUH	PSO to follow up with EMD	PSO	OCS
23:32			MST	BEE NATHAN CCP		motorcyclist into parked truck and trailer CPR in progress performed by QPS injury	Pt deceased	PSO to follow up with officers	PSO	OCS
01:03			MST	WOD POD MUN WOD MST OS		can't really breathe	CPR in progress VF arrest no lights on in house QFES and QPS attached Heightened situation Pt deceased	PSO to follow up with officers	PSO	OCS

**WORKPLACE HEALTH & SAFETY (Not Relating to Paramedic Occupational Violence)**

Time	Incident	Officer/s Involved	LASN	Station/OpCen	ID Number(s)	Incident Information	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By
15:19			MST	WOD		assessment	Tx to LCH cleared at 2024 EOS 2115 (19F) BFD 0715 shift 0700-1900	Welfare check	OC - Day	OCS
17:21			WTM	ROS		covid positive with chest pain	Tx to IGH cleared at 2120 EOS 2316 (21F) BFD 0916 shift 0900-2100	Welfare check	OC - Day	OCS

**REPORTABLE FATIGUE SCORES (>5)**

Time	Shift	Officer	LASN	Station/OpCen	ID Number	Fatigue Score	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By
12:03	EA		WTM	LAI		15	Stood down	Not on shift 04/05/22	SOS Nugent	OCS

<b>COMPLAINTS</b>								
Time	LASN	Complainant's Name	Phone Number	Description	Action Taken/Reported To	Further Action Required	Summary	Entered By

<b>FALSE CALLS</b>								
Time	LASN	Incident	Callers Phone No	Callers Name As per CLI	Address of Caller As Per CLI	Incident Address	Stated Problem/Incident	Entered By

Aeromedical Response Requests (Notification / Activation / Escalation Matrix)											
Time	Incident	MPDS Determinant	Code	Primary/ IFT	Approved Yes/No	Provide details on all requests	Enter the reason given for declining/deviation of the aeromedical resource	Requesting Supervisor	SOS	Escalation Process Enacted	SOS Escalation Comments

RTI Release



Were any PTS cases required to be handed over to Acute and was there any impact on Acute?					
Incident	LASN	Coding	Time	Reason	Operational Impact

RTI Release

3rd Party Trip Information

Authorisation No.	LASN	Officer Name(s)	From	To	Reason	Company	Company Auth No.	Quoted Cost	Entered By
SOU - [REDACTED]	GOL	[REDACTED]	NER	GCUH	Split crew	13CABS	[REDACTED]		OCS
SOU - [REDACTED]	MST	[REDACTED]	LCH	MUN	Terminating shift	13CABS	[REDACTED]		OCS
SOU - [REDACTED]	GOL	[REDACTED]	GCHRB	PIM	Split crew	13CABS	[REDACTED]		OCS
SOU - [REDACTED]	WTM	[REDACTED]	QCH	IPS	Hospital transfer with Dr	13CABS	[REDACTED]		OCS
SOU - [REDACTED]	GOL	[REDACTED]	GCHRB	MER	Split crew	13CABS	[REDACTED]		OCS

RTI RELEASED