



POAC ST JOHN PATHWAY GUIDELINES

TRANSPORTING PATIENTS TO GP OR ACCIDENT AND MEDICAL CLINIC

Introduction

Many patients requiring immediate medical care are suitable to be transported to their own GP or an Accident and Medical Clinic by ambulance personnel. Often such patients are transported to an ED because the patient is concerned about cost. Under the Primary Options for Acute Care (POAC) scheme within Auckland, such patients may be transported to their GP or an Accident and Medical Clinic, with no additional cost to the patient being incurred. This scheme enables paramedics to determine what is the most effective and efficient way to meet health care needs. This document outlines guidelines on the referral and transport of patients to their GP or Accident and Medical Clinics under the POAC scheme.

Referral criteria for Ambulance transport

Patients are potentially suitable for transport to their GP or Accident and Medical Clinic, provided all of the following criteria are met:

- They require transport to a medical facility* and
- They are status three or four and
- Their expected healthcare requirements could be safely provided by their GP or in an Accident and Medical Clinic and
- They are unlikely to be referred on to hospital and
- The transport time to the General Practice or Accident and Medical Clinic is such that it is reasonable to transport the patient there.
- The patient is fully informed

Referral criteria for patient self transport

Where the patient has own transport and can safely make their own way to a medical facility **and** requires urgent medical care (defined as within four hours) they may self transport. The ambulance crew should indicate on the patient record form that POAC has been initiated, document the time patient was left and leave the patient with two copies of the PRF.

The patient **must** be advised to take the PRF with them and to attend within **FOUR HOURS** of the time documented on the form. POAC funding will only apply if the patient presents within four hours of the time documented.

Clinical guidelines

The clinical problem that the patient has must be able to be reasonably and safely managed in a general practice or an Accident and Medical Clinic. This requires clinical judgement. The following is a list of examples clinical conditions and clinical criteria that indicate that the patient is <u>not</u> suitable for transport to a GP or an Accident and Medical Clinic:

- GCS less than 15, unless this is normal for the patient.
- Suspected stroke (including sudden onset of headache) or transient ischaemic attack.
- Behavioural disturbance, including intoxication.
- Suspected myocardial ischemia or acute coronary syndrome.
- Tachydysrhythmia or bradydysrhythmia.

- Receiving oxygen (other than home oxygen) for a specific indication described within the Ambulance Clinical Procedures and Guidelines.
- Requiring repeated nebulised bronchodilator with no improvement following initial therapy.
- Requiring opiate pain relief with an anticipated ongoing requirement for further opiate.
- Abdominal pain. This requires clinical judgement noting that it may be appropriate for a patient to see a GP if they have normal vital signs and are not in severe pain.
- Compound fractures.
- Displaced fractures.
- Joint dislocations other than finger joint or patella dislocations and recurrent shoulder dislocations. Note
 that some patients with recurrent shoulder dislocations know that their shoulder is very difficult to relocate
 and such patients should be transported to an Emergency Department.
- Requiring cervical spine immobilisation.
- Loss of consciousness following trauma.
- Gastrointestinal bleeding.
- Poisoning. Note that children with ingestion of poisons that are known to be non-harmful (such as shampoo) may be suitable.
- Lacerations in children under the age of five years. This is because many of these children will require some
 form of sedation to facilitate closure of the wound. If the wound is minor and likely to be able to be closed
 with simple dressings then the patient may be suitable.

Transporting patients to their own General Practice

If the patient is suitable to be managed by a GP, their own General Practice should be considered as the first option provided the patient can identify them. Prior contact with the practice is essential and ambulance personnel should speak directly to a doctor or nurse to discuss the patient. If the practice accepts the patient a brief handover should be given. Suspected fractures that would require an x-ray must not be transported to a GP's surgery (unless there are x-ray and plastering facilities available).

Transporting patients to an Accident and Medical Clinic

The patient should be transported to the nearest POAC accredited Accident and Medical Clinic. No prior contact with a doctor or nurse is required, but if the patient is complex, consideration should be given to discussing the patient with a triage nurse or doctor at the clinic prior to transport, provided a phone is available. A list of the accredited clinics and their opening times is attached as Appendix 1.

Note that clinic staff has the right to ask ambulance personnel to immediately transport the patient to an Emergency Department, if they do not think it is appropriate or safe for the patient to be treated at the clinic.

Explanation to the patient and/or caregivers

The following must be explained to the patient and/or caregivers prior to transport:

- Ambulance personnel are recommending the patient is transported to a medical facility
- Ambulance personnel are recommending the patient is transported to their GP or an Accident and Medical Clinic, rather than being transported to a hospital ED
- The patient is responsible for the bill associated with this ambulance transport (if it is not covered by ACC)
- Any expenses that would normally be charged to the patient from the General Practice or Accident and Medical Clinic for this visit will be paid for them under the POAC scheme
- If during this visit, they are referred to hospital by the doctor and for clinical reasons require an ambulance for safe transfer, the cost of this will be paid for them under the POAC scheme