

APPENDIX 6:

# GOOD TRANSFER PRACTICE

## TRANSFERRING FOR ESCALATION OF CARE CHECKLIST

### Who and where?

- Patient identifier
- Age, Gender and other relevant demographics
- Referring hospital
- Receiving hospital

### Transfer agreement and decisions

- Time and date of referrer /accepter interaction
- Treatment received at referring hospital
- Who assessed/treated the patient in person at referring hospital (most senior)?
- Referrer was consultant? (if not what grade of referrer)
- Acceptor was consultant? (if not what grade of acceptor)
- Urgency of transfer (ASAP, 6 hours, 24 hours, 24-48 hrs, when bed available)
- Treatment planned/expected prior to transfer at receiving hospital
- Condition of patient (vital signs, sepsis, organ dysfunction)
- Need for source control, arresting bleeding, decompressing compartments prior to sending?

### The transfer

- Distance (km)
- Time of departure from sending hospital
- Time of arrival at receiving hospital
- Mode of transport (air, sea, road – ambulance/ taxi)
- During transfer care anticipated: (Ambulance, Medical escort required Yes/No, ICU)
- During transfer care received/events managed
- Condition of patient on arrival (vital signs, sepsis, organ dysfunction)
- Was there delay associated with this transfer? If so, for how long and impact on patient

### Treatment at receiving hospital

- ICU yes/no and days in ICU
- Operation (s)
- Conditions managed (diagnoses)
- Complications
- Length of Stay
- Date of discharge
- Outcome
- Discharge destination (home/sending hospital/ rehab/ etc)

## APPENDIX 6:

### Documentation

Were all clinically relevant details documented and sent with patient?

If not, what was missing that should be provided in future?

Was a discharge summary received by referring clinician and by referring health service?

Did the discharge summary contain a clear plan of follow up and responsibilities?

Were there any stents, filters or other devices inserted that need to be removed?

If yes, did the discharge summary state who/where and when the device needs to be removed?

Date of Audit and Peer review

Issues to be raised with clinical governance at sending hospital - including whom and date informed

Issues to be raised with clinical governance at receiving hospital - including whom and date informed