

COVER SHEET



Health
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Local Health District

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EXECUTIVE SPONSOR or EXECUTIVE CLINICAL SPONSOR	Director People and Culture
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KEY TERMS	Safety risks, offsite transportation; risk assessment; transporting patients; patient risk assessment.
SUMMARY	This procedure informs staff on the process for identifying safety risks and implementing controls when transporting patients.

COMPLIANCE WITH THIS DOCUMENT IS MANDATORY

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SESLHD PROCEDURE

Transporting of Patients - Risk Management

SESLHDPR/229

1. BACKGROUND

This procedure informs staff on the process for identifying safety related risks and implementing controls when transporting patients.

Although this procedure is designed for transportation under the control of Local Health District (LHD) workers for patients, there may be times where we are required to either assist or engage assistance from a third party for transportation purposes. Where a third party is involved, consultation is to take place about potential safety risks and workers are required to assist with sharing of relevant risk assessments and information.

NOTE – This is only for non-emergency health-related transport, emergency transportation should be undertaken by NSW Ambulance and arranged through the 000 emergency telephone service. Specific transport arrangement of Mental Health patients will need to be implemented in accordance with the [NSW Health – NSW Police Force Memorandum of Understanding 2018](#).

2. RESPONSIBILITIES

2.1 Workers will: comply with Workplace Health and Safety (WHS) and Incident Management (IM) procedures; and any workplace systems or measures put in place to protect health and safety in the work environment.

2.3 Line Managers will: implement and comply with WHS and IM procedures.

2.4 District Managers/ Service Managers will: establish and maintain WHS and IM Procedures to achieve WHS policy objectives

2.5 Chief Executive will: ensure WHS and IM procedures are in place to achieve our WHS policy objectives

For further detail, refer to:

[SESLHDPR/212 Work Health and Safety - Risk Assessment Procedure](#)

[SESLHDPR/271 Health Safety and Wellbeing Policy and Statement of Commitment](#)

3. DEFINITIONS

Refer to Appendix 1

4. PROCEDURE

There are a range of considerations that need to be assessed prior to workers agreeing to provide transport to patients. Where it has been assessed that transportation by LHD staff is not suitable for the patient's specific needs, LHD staff should advise on alternate transportation through a third party if appropriate.

The regular risk management principles apply to all department/services arranging offsite transportation of patients

- Identifying potential risks or transport considerations
- Assess risks or transport considerations against [Appendix 2- Transport Assessment Tool](#)

- Complete the [Risk Assessment](#) using the above tool
- Assess suitability of motor vehicle/s against patient needs
- Vehicle risk assessment
- Implementing controls for transportation.
- Ensure local emergency arrangements and controls are in place prior to conducting transportation.

4.1 Identifying potential risks or transport considerations

There are three broad categories of potential risks,

- Patient related risks
- Suitability of vehicle for the planned travel
- Worker availability and suitability to conduct transportation.

Patients need to be assessed on an individual basis for their suitability for each specific transport trip that is to be conducted, the collection of information may be done through the use of [Safety Risk Assessment template](#). See below Table 1, containing a list of some potential risks and considerations for transportation that may not be included in the [Safety Risk Assessment template](#).

This list is a guide only and other local considerations should also be taken into account.

Table 1. Potential risks or transport considerations
Current Medication and Medical Condition
Other medical issues i.e. motion sickness, anxiety, seizures.
Patient behaviour (level of supervision)
Infections
Patients mobility level and Aide’s required
Continence
Child Protection Arrangements
Other persons (such as spouse, children)
Transportation of equipment (Aide’s etc.)
Suitable restraints (baby capsules, booster seats.)
Service dogs and pets as therapy animals
Cultural considerations
Environmental (weather, location, access etc.)
Length of the transport (how long will the trip take)
Is client suitable should break be required for driver fatigue management
Availability of enough appropriately trained workers

Other offsite activities (excursions)

Where transportation is for the purposes of a planned excursion (such as a rehabilitation and diversionary activity) the location should be assessed for suitability and the needs of the patient/s attending or shared risk assessment can be seen at Other Offsite Activity Risk Assessment – Appendix 3. This initial assessment should ideally be conducted without patients, so staff have time to adequately assess the environmental issues.

4.2 Risk Assessment Tool

To assist with determining if transport can be provided through the LHD, the Transport Assessment template has been developed as a guide – Appendix 2 Transport Assessment Template.

How to use:

- Step 1 - Identify the most serious consideration (either from the list or from other sources)
- Step 2 - Use assessment section to determine the level of seriousness for the Consideration
- Step 3 - Based on the seriousness you can determine the Risk Level and Safety Actions
- Step 4 – Fill in the Risk Assessment Template.

Example – A child under the age of 7 years requires transportation, for which a fitted child restraint is mandatory. If the department does not have a child restraint for their car then the following would be assessed as:

- 1. Consideration = Suitable restraints
- 2. Assessment = Significant safety issue exists
- 3. Safety Action = Fitting of new/hired restraints, risk level is YELLOW when action is implemented.

Managers and staff are to consult on identified risks and transport considerations and agreement is to be reached on the most appropriate transport available using the Transport Assessment Tool. In some cases the manager may need to assist staff with engaging third parties for assistance.

4.3 Vehicle risk assessment

The vehicles used by workers for transportation of patients should be assessed prior to purchasing to determine the limitations and suitability for specific patient transportation needs. This information about specific car makes and models should be shared locally with other departments/services.

4.4 Controls for transportation

To assist in the process of planning and conduction transportation, there are a range of considerations included in this procedure however there may be additional local issues and patient needs to consider.

Medication and Medical Condition (including infections)

The types of medication and current medical condition of a patient may determine or limit the types of transport arrangements that can be made for the patient. Arrangements must be made to ensure access to any specific medications that the patient may be required to uses during or whilst in our care, before transport begins.

Where staff are aware of a patient having a current infection and plan to use LHD vehicle to transport the patient, it may be advisable to use disposable car seat covers to reduce cleaning. The staff members will be responsible for cleaning the vehicle as per infection control guidelines immediately after the transportation is complete (before vehicle is returned to the fleet or pool). Refer to infection control services for further advice.

In cases where the LHD vehicle is not fitted with appropriate equipment on board (i.e. heart monitors, oxygen) these patients should be transported through NSW Ambulance Transport.

Contenance

Where an issue with continence exists with a patient, consideration should be given to fitting fresh garments and disposable car seat covers.

Transporting others

LHD staff will need to assess on an individual case bases if transportation of others is provided as they must accompany the patient for the whole trip. Where LHD staff are unsure they should seek advice from their manager, as other arrangements may be more suitable for the significant other/s.

Some considerations to help determine if transportation is to be approved:

Consideration/Issue	Examples
Will transportation of significant other/s with/without patient have an adverse effect on the patient?	Dementia patient Threatening significant other
Can patient be separate from significant other/s?	Mother with a number of children
Availability of more than one motor vehicle?	More than 4 persons to be transported (including LHD staff)

Child restraints

It is a legal requirement to have correctly installed child restraints and seats for person under the age of 7 years. NSW RTA website is a useful resource for current information about fitting and appropriate restraints. One potential risk is the location of child restraints such as baby capsules in vehicles with manufacturer fitted side impact airbags: [Transport for NSW Centre for Road Safety](#)

In accordance with [SESLHDPD/285 Motor Vehicle Policy](#) Section - Work Health and Safety, the following will be adhered to:

- Cargo barriers

All station wagons are to be fitted with steel cargo safety barriers or barriers that comply with Standard AS/NZS 4034-2008.

- Equipment transportation

All equipment being transported with a patient must be secured so it cannot move during travel or be used to harm the people in the vehicle. Purchasing and installing purpose built equipment brackets is one thing that should be considered if regularly transporting specific equipment i.e. sharps containers, medical gas cylinders, wheelchairs.

- Long Distance Travel and Fatigue/Driver Management

Where the travel is scheduled to take longer than two hours, consideration must be given to how driver breaks will affect the patient and their suitability to be managed during rest breaks.

Consideration must also be given to the patient's ability to handle long trips and the types of breaks they may require, i.e. is their suitable toilet facilities available for the patient's needs.

- First Aid Kits

The vehicle must be equipped with a First aid Kit, (paragraph 5.4.14) this may be a useful resource in a medical related emergency.

- Motor Vehicle Accidents

If a Motor Vehicle Accident occurs please refer to the policy for further instructions.

Local escort and staffing arrangements

Services/departments should establish local escorting arrangements based on current clinical policies and other specific patient needs. To ensure adequate staffing is available before undertaking transportation, where possible the following is to be addressed by local arrangements -

- Pre-planning for additional staff to be available
- Staff involved in transportation have appropriate training to the specific needs of the patient (i.e. managing difficult behaviours, use of lifting equipment)
- Vehicle availability is pre-arranged.

Assistance animals

Where possible, assistance animals will be transported with patients and where this is not possible through uses of LHD vehicles other arrangements are to be made by workers.

For transportation animals provided by Assistance Dogs Australia and Guide Dogs NSW/ACT, will have an introduction card issued by the organisation to verify that they are an assistance animal. For safety of the animal and vehicle occupants, these dogs are trained to lie down on the floor in the front passenger seat area. For more information see contact details for organisations *4.6 Other Information, Resources*.

Where an animal does not meet the specific definition (i.e. accredited, trained animal that assists a person with a disability) we will not be able to provide transportation however may be able to provide assistance with making arrangements for care of the animal. *See 4.6 Other Information, Resources*.

Medical and Confidential Records

It is the responsibility of worker to ensure all records are stored and secured so that this information is not easily accessible by others being transported.

4.5 Emergency strategies / Procedures

Workers must remember that their personal safety is the priority to the organisation and although we have a duty of care to our patients we must be mindful not to place ourselves in a position of harm or high risk. In cases where a life or property threatening, time critical emergency situations occurs workers must immediately dial **000** or from a mobile if there is no service/coverage **112** for police, fire or ambulance for assistance.

Should a patient during transportation flee from care, staff must not give chase where they place themselves in a position of harm or leave other patients unattended, they are to immediately dial **000** or from a mobile if there is no service/coverage **112** for police assistance.

Where identified communication black spots are known (i.e. Mobile, two way radio) alternate communication options must be put in place.

4.6 Other Information, Resources

At times there may be a need to have quick access to specific information and contact numbers in the planning and management of patient transportation. Some of these are provided below in **Table 2**

Table 2. Assistance Organisations		
Organisation	Services	Contact details
Patient Transport Services (PTS)	Non-critical patient transportation	1300 233 500
Guide Dogs NSW/ACT	Provide assistance and trained dogs to people who are blind or partially sighted.	https://www.guidedogs.com.au Ph. - 02 9412 9300
Assistance Dogs Australia	Provide assistance and trained dogs to people with physical disabilities	http://www.assistance dogs.org.au Ph. - 1800 688 364
Transport for NSW Centre for Road Safety	Authorised Restraint Fitting Stations	http://roadsafety.transport.nsw.gov.au/cgi-bin/index.cgi?action=a_uthrestraintfitting.form
Disability Council of NSW	Information on disability services	http://www.disabilitycouncil.nsw.gov.au Ph. - 02 8879 9100
Police Assistance Line	Reporting of accidents (nonemergency)	131 444

5. EDUCATION AND TRAINING

All managers must ensure that workers involved in provision of transportation of patients, receive information, instruction and training with regards to local emergency procedures, mock emergencies should be conducted at least annually. This education and any necessary training must be incorporated into the induction process and formal performance review for new and existing staff. Training records are to be kept and maintained by the Manager.

6. AUDIT

Procedures will be audited during the periodical Health Safety and Wellbeing Audit Program.

7. REFERENCES

External

- [Work Health and Safety Act 2011 No 10](#)
- [Work Health and Safety Regulation 2017](#)
- [Code of Practice - Managing the Work Environment and Facilities](#)

Internal

- [SESLHDPR/212 Work Health and Safety - Risk Assessment Procedure](#)
- [SESLHDPR/285 Motor Vehicle Policy](#)
- [Other Offsite Activity Safety Checklist](#)
- [F129 - Department Training Register](#)

9. REVISION AND APPROVAL HISTORY

Date	Revision No.	Author and Approval
May 2010	DRAFT	SESLHD Network Safety and Injury Management Services WHS Committees
September 2010	1	Approved by Director, Workforce Development
March 2011	2	Troy Williams, WHS Officer, Area Workforce Safety & Injury Management Service. Amended to reflect change to Local Health Network.
November 2012	3	Changes for Compliance with new WHS Act and Regulations. Approved by Sharon Litchfield, Director Workforce Services
August 2017	4	Desktop Revision and Links Update - John Parkinson, WHS Consultant
October 2017	4	Updates endorsed by Executive Sponsor
August 2021	5	Minor review: Links update – Natasha Tonkin Safety Culture and Wellbeing Coordinator. Change of title from Work Health and Safety - Offsite Transportation of Patients Procedure to Transporting of Patients – Risk Management
December 2021	5	Approved by Executive Sponsor and processed by SESLHD Policy.

Appendix 1 - Definitions

1.1 Assistance animal: For the purposes of this, an assistance animal is a dog or other animal:

- a) accredited under a law of a State or Territory that provides for the accreditation of animals trained to assist a persons with a disability to alleviate the effect of the disability; or
- (b) accredited by an animal training organisation prescribed by the regulations for the purposes of this paragraph; or (c) trained:
 - (i) to assist a person with a disability to alleviate the effect of the disability; and,
 - (ii) to meet standards of hygiene and behaviour that are appropriate for an animal in a public place.

[Disability Discrimination Act 1992](#)

1.2 Contact Person: refers to nominated contact person/position that is the contact for emergencies relating the staff member's safety while working alone and/or in isolation.

1.3 Line Manager: refers to the supervisor in a Service i.e. Team Leader, Nursing Unit Manager, Department Manager, persons acting in a supervisor's role.

1.4 Others: A person of significant importance to the patient. These may include but not limited to, relatives, children of patient, mentor, de-facto or life partners.

1.5 Third Parties or other PCBU's: Services that are involved in the health and welfare of the client, may include but not limited to departments within LHD, NSW Police, NSW Ambulance, Department of Community Services and other health community support services/parties.

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APPENDIX 2 - TRANSPORT ASSESSMENT TOOL to be used in conjunction with [Risk Assessment Matrix](#)

Note - Risk assessment tool and colouring system has been developed in accordance with NSW Health Risk Management Matrix

How to use:

Step 1 - Identify the most serious Consideration (either from the list or from other sources) Step 2 - Use Assessment section to determine the level of seriousness for the consideration. Step 3 - Based on the seriousness you can determine the Risk Level and Safety Actions.

Impact on Service/ Department:

Serious - Unable to put appropriate controls in place to provide service.

Significant - Requires complex planning of controls to provide service

Potential - Requires minimal controls to provide service

Considerations should include (but not limited to):

Medication and Medical Condition	Patient behaviour (level of supervision)	Other persons (such as spouse, children)	Infections
Child Protection Arrangements	Patients mobility level and Aide's required	Suitable restraints (baby capsules, booster seats.)	Cultural considerations
Service dogs and pets as therapy animals	Environmental (weather, location, access etc.)	Transportation of equipment (Aide's etc.)	Continence
Length of Trip	Driver fatigue management		

2. Assessment	Risk level	3. Safety Actions
A serious safety issue exists in workers providing transportation. <i>For example the patient/client:</i> bariatric lifting equipment not available, physical aggression against an individual or persons including LHD workers, very difficult access to location, Additional other workers required for Child Protection reasons, lack of additional appropriately trained workers being available.	HIGH	Service provision is to be provided by third party. LHD workers will assist with making arrangements and provide staff assistance where possible.
A significant safety issue exists in workers providing transportation. <i>For example the patient/client :</i> has 4 or more significant others that have to be transported at the same time, child restraints are not available and need to be arranged/hired, assistance required from additional staff due to patient needs <i>i.e.</i> - manual handling, behaviour or mobility issues	MEDIUM	Transport can be provided by LHD workers once additional controls are in place. I.e. use of alternate vehicle or multiple vehicles, fitting of new restraints, additional staff for assistance (i.e. mobility).
No safety issue or potential safety issue exists in providing transportation. <i>For example the patient/client:</i> will have difficulty in accessing the normal vehicle used by the department/service, alternate vehicle used to safety transport patient and their mobility aides, child restraints required.	LOW	Transport can be provided by LHD workers once minimal controls are in place. I.e. use of alternate vehicle, fitting of existing restraints, pick up from alternate location.

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APPENDIX 3

RISK ASSESSMENT - OTHER ACTIVITY

This is a minimum requirement which is designed to help worker assess and prepare for the safety when conducting other off-site visits. It should be consistently used for monitoring safety risks.

Date :	Location/Venue :			
Address :		Contact number :		
Name and Signature:		Date form completed :		
Current known risk level associated with providing this Visit/Service – Refer to Offsite Risk Assessment Tool	Red <input type="checkbox"/>	Orange <input type="checkbox"/>	Yellow <input type="checkbox"/>	Green <input type="checkbox"/>

1. Agreement to participate in visit

1.1 Are there any known safety issues in relating to this offsite visit or location?	Y	N	N/A
Note: What controls are in place to help manage any identified risks?	<i>List below</i>		
1.2 Has the client/management of venue been advised of their rights and responsibilities towards safety of SESLHD Worker (such as) : <ul style="list-style-type: none"> • Meeting worker as per any prearranged plans (i.e. foyer, access gate) • Firearms/other weapons locked away and out of view • Request that persons do not smoke around SESLHD Worker. 	Y	N	N/A
Safety controls (includes security and any other risks) :			

2. Pre-visit

2.1 Has approval been given by the worker Manager and are arrangements in place to communicate with Contact Person?	Y	N	N/A
2.2 Is equipment in good working order: Vehicle (including adequate amount of fuel) Mobile phone (charged and working)	Y	N	N/A
2.3 Will the premises be easy to identify e.g. a visible number, lighting?	Y	N	N/A
2.4 Are there any special entry or security instructions e.g. boom gates, intercoms?	Y	N	N/A
2.5 Is free parking available and close to where you will be visiting?	Y	N	N/A
Access and equipment Notes :			

3. During visit.

3.1 Is there mobile phone reception in the area? (check before leaving vehicle)	Y	N	N/A
3.2 Is vehicle parked in a well-lit area?	Y	N	N/A
3.3 Is vehicle secured and no valuables in sight to public?	Y	N	N/A
3.4 Identified on arrival or during visit any slip, trips, falls hazards	Y	N	N/A
3.5 Identified on arrival or during visit any security or other safety issues	Y	N	N/A

4. Post visit

4.1. Has Contact Person been notified that the visit is completed and safety status?	Y	N	N/A
4.2. Have any injuries or safety issues from the visit been reported to Contact Person?	Y	N	N/A
4.3. Do any safety risks from the visit need to be controlled before future visits to same clients/location? If YES, you must record details BELOW	Y	N	N/A
4.4. Has the safety assessment been updated to reflect new / current safety risks?	Y	N	N/A
Post visit safety notes (includes safety issues identified during visit) –			