From: Stevenson, Pat (Health)
Sent: Thursday, 25 January 2024 5:50 PM
To: Portfolio Committee 2
Cc: Lemmer, Paul (Health)
Subject: RE: Inquiry into the equity, accessibility and appropriate delivery of outpatient and community mental health care in New South Wales – Post-hearing responses – 17 November 2023
Attachments: PRO-279 Solo Responder Safety - INTRANET.pdf

OFFICIAL

Hi Gerard, in relation to the reports mentioned in the transcript on page 3 and 4 although the data in those reports has been referenced both in Pauls transcript and my reply to the supplementary questions I must advise that SAAS is unable to supply the actual reports due to confidentiality concerns within the data and reports.

In relation to the conversation on page 6 and 7 I have attached the SAAS Solo responder Safety Procedure for inclusion in the report.

Regards,

Pat Stevenson ASM
A/Executive Director Metropolitan Operations

SA Ambulance Service
Government of South Australia

Interim Procedure
Solo Responder Safety

Objective File Number:	*Admin use only*
Document developed by:	Metropolitan Operations
Approval Committee:	Service Delivery Committee (SDC)
Next review due:	December 2018

Summary: The purpose of this procedure is to outline safeguards which are in place and can be utilised to enhance solo responder safety.

Key Word Search: Solo Responder, SPRInt, Safety

Procedure History:

Is this a new Procedure?	Yes ☒	No ☐
Does this Procedure amend or update an existing Procedure?	Yes ☐	No ☒
Does this Procedure replace an existing Procedure?	Yes ☐	No ☒

Applies to: Single Responders. (For the purpose of this procedure, 'single responders' may include: SPRint, Extended Care Paramedics (ECP's), Single ICP responders, Rescue Paramedics, Community responders(with single or multiple crew members), single crew ambulance response, Operations Managers (OM's), Clinical Support Officers (CSO's), Regional Team Leaders (RTL's), Metropolitan Team Leaders).

Emergency Operations Centre.

Staff impacted: Single Responders
Emergency Operations Centre.

Version control and change history

High level summary of changes to the document

Version	Date from	Review Date	Amendment
INTERIM	26/06/2018	26/12/2018	Original version

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Document control information

Document owner:	Operations Manager, Metropolitan North West
Contributors: (name and role title)	Operations Manager, Metropolitan North West Operations Manager, Metropolitan South East Operations Manager, External Recruitment A/Director Rescue, Retrieval and Aviation Services A/Director Service Performance and Improvement WHS Representative (SPRInt) Clinical Team Leader, SPRInt

Document history

Author, endorser and approval details to be added for each version change

Date	Author (name and position title)	Version
29/05/2018	Paul Lemmer, Operations Manager Metro North West	Interim

Endorsements

Date	Endorsed by (name and position title)	Version
29/05/2018	Service Delivery Committee	Interim

Approvals

Date	Approved by (name and position title)	Version
25/06/2018	Lee Brooks, Director of Operations (Metropolitan)	Interim

**Interim procedures (if required immediately) can be approved by Executive Director but must have full committee and Executive review within 6 months of release

Interim Procedure
Solo Responder Safety

1.   Purpose

The purpose of this procedure is to outline the risk management approach which is to be taken for the identification and management of hazards and risks associated with responding to an incident as a solo responder.

This procedure supports SA Ambulance Service's commitment to the provision of a safe working environment through the provision of a comprehensive and robust deployment, communication and response system.

2.   Roles and Responsibilities

Managers /Team Leaders
- Exercise due diligence to ensure staff are familiar with and comply with the intent of this procedure.
- Ensure safe working procedures are developed and maintained for identified areas of risk.
- Regularly review solo responder processes and communication systems to ensure their effectiveness.

Emergency Operations Centre:
- Exercise due diligence to protect health, safety and welfare of all single responders.
- Attempt to ascertain any potential hazards and communicate to solo responders.
- Ensure the effective implementation of the operational aspects for the deployment of solo responders.

Staff
- Maintain an active role in the hazard management process, including dynamic risk assessments.
- Follow safe work practises, including communication processes related to solo response.

3. Procedure Details

3.1.   Emergency Operations Centre (EOC)

3.1.1   Emergency Medical Dispatch Support Officer (EMDSO)

As part of the normal call taking process the EMDSO will attempt to obtain any pertinent information relating to potential scene hazards. Should any information be received that identifies a potential Work Health and Safety risk to responding staff, this information will be communicated to the Emergency Medical Dispatcher (EMD) immediately via event remarks to ensure that the responding staff can be informed.

3.1.2   Emergency Medical Dispatcher (EMD)

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An EMD may elect to respond a solo responder to an event either in a first response role as part of a multi-resource response, as a secondary response to assist with the management of a case or as a solo responder with no subsequent response pre-determined.

Any hazards identified in the remarks field will be verbalised by the EMD to the solo responder upon dispatch. Any updates to the case relating to either clinical deterioration or scene safety will also be verbalised to the solo responder whilst enroute. The MDT must not be relied upon for means of communication to the solo responder; GRN Radio is the preferred method of communication.

Solo responders should not be tasked by an EMD to attend any of the following unless appropriate risk mitigation strategies have already been implemented (i.e. SAPol, ambulance crew, security or other health professionals already on scene or rendezvous (RV) instigated):

- Assaults (including domestic violence) or other violence related incidents where the assailant is still on scene or confirmation of this cannot be obtained.
- Patients or callers affected by drugs or alcohol where the patient or others are exhibiting challenging, violent or aggressive behaviours.
- Mental health patients who display unpredictable behaviours or responses.
- Addresses identified through the High Risk Addresses Procedure PRO-273 as either a HRA1 or HRA2.
- Any other incident the EMD, the State Duty Manager or the single responder themselves has reasonable belief is dangerous or inappropriate

Should dynamic risk assessment identify a potential risk to responding staff then it would be appropriate to continue past the incident location to an identified RV point.

3.2. Rendezvous (RV) Point

The need for a RV may be identified by either EOC or the attending clinician. The decision to not attend the scene of an incident or to attend the RV is at the discretion of the single responder, supported by a dynamic risk assessment. The EMD will provide all available information to support decision making.

A decision to not enter or withdraw from a tasking/ situation/ site or premises or to not treat a patient where the Solo responder has genuine concern for their health, safety and welfare is considered an acceptable reason. It is essential that rationale be well documented on the patient care record.

RV locations will be identified by the EMD and established at locations in close proximity to the incident location but not in direct sight. The establishment of an RV will be relayed to all responding resources and any other agencies involved in response to the incident.

3.3. SACAD Alarms

SACAD has a unit alarm with a default setting of 30 minutes from the time a crew arrives on the scene and is used by EOC as a reminder to check on the crew welfare

if no contact has been made with EOC. In regards to solo responders this alarm has a default setting of ten minutes

In the case of SPRInt crews and solo responders where they have responded to an event with no sit rep within this 10 minutes a welfare check will be conducted by the EMD.

If the scene is of concern due to details received in regards to the case the default setting can be overridden to enable alerts at shorter intervals. This can be repeated as many times as the situation requires.

3.4. Solo Response

3.4.1. Remote and Isolated Response

Community and single responders who travel long distances (i.e. over one hour journey) in rural remote areas as part of their routine work duties, must at the start and finish of their journey and/or when they are dispatched to an event and upon their arrival at the scene, contact the EOC. This can be done via GRN radio, mobile phone or satellite phone.

This alerts the EMD that a single responder is travelling in an isolated area and allows them to periodically monitor the Automatic Vehicle Location (AVL) to confirm their progress is as expected for the journey.

- If there is any concern for the safety of the single responder at any point, the EMD must attempt to make contact with the staff member to check their welfare.
- If there is no response, the EMD dispatcher will initiate actions as per the SAAS 'GRN Duress Alarm and Code 51 Activation' procedure (PRO-166).

Any single responder travelling outside the GRN and mobile phone service areas must verbalise their travel plans with EOC prior to departure, with an estimated time of return.

3.4.2. Operational Response

Single responders can be dispatched by the EOC to events with or without further ambulance resources being dispatched to the same event.

Where there are safety concerns based on the available information, prior local knowledge, or on approach to the scene, the single responder can seek risk management tactics to be implemented prior to attending the incident location. The single responder must advise the EOC of this decision as soon as possible and notate rationale on the PCR with the associated dispatch details and consider Client Review Form (CRF) submission to relevant OM.

3.4.3. At Scene (treat, transfer, handover)

- All staff and particularly single responders must complete a dynamic risk assessment to assess scene safety prior to entering and ensure they continue to monitor their environment.
- Should anything change e.g. a new person arrives on scene, there is a noted change in the patient' behaviour, or anyone on scene begins to exhibit red flag indicators a further risk assessment must be undertaken.
- The EOC must be kept informed, so that appropriate resources can be dispatched and staff welfare can be monitored. GRN contact with EOC must be maintained at all times.
- Where there is limited or unreliable GRN coverage, the fleet mobile phone or in remote areas the fleet satellite phone, or Personal Location Beacon (PLB) should be available (on person) at all times.
- Single responders will triage the patient and commence treatment as required.
- If the single responder is first on scene or the only resource dispatched, they must notify the EMD at the earliest opportunity whether further resources are, or are not, required.
- Where a single responder has not made contact with EOC within 10 minutes of arrival at scene the EMD will carry out a welfare check. If there is no response, the EMD will initiate actions as per the SAAS 'GRN Duress Alarm and Code 51 Activation' procedure (PRO-166).

3.4.4. Duress Alarms and Code 51 Activations

Operational staff requiring assistance in an emergency response environment may activate either a GRN alarm or Code 51 activation as per the 'GRN Duress Alarm and Code 51 Activation' Procedure (PRO–166).

The use of the duress alarm or Code 51 activation must be confined to instances where SAAS personnel are in situations where they are in imminent danger and/or are unable to safely withdraw from a threat.

Examples may include (but are not limited to):
- Physical assault, with or without weapons
- Wilful entrapment of staff by an aggressor
- Verbal threats with imminent potential of escalation to physical assault

If there is any concern for the safety of the single responder at any point, the EMD must attempt to make contact with the staff member to check their welfare. If there is no response, the EMD dispatcher will initiate actions as per the SAAS 'GRN Duress Alarm and Code 51 Activation' procedure (PRO-166).

3.4.5. No GRN Access

- Staff under duress who do not have access to a GRN radio must make contact with the police directly by using a phone and dialling triple-zero (000) and asking for police.

- Advise SAPol you are calling as an ambulance staff member requesting urgent assistance. Provide necessary location and incident details.
- Staff must then advise the SDM of their situation as soon as safely possible by phoning 1300 886 268.
- Normal processes will then apply for the SDM and EOC in ensuring SAPol activation, staff welfare, notification to line managers (or other) and incident investigation.

3.5. Driver and Vehicle Security

3.5.1 Automatic Vehicle Locator (AVL) and Mobile Data Terminal (MDT) Functions

SAAS operational vehicles are fitted with AVL to ensure the EOC is able to locate a vehicle when duress alarm or Code 51 activation occurs. The vehicles MDT must be switched on for the AVL to operate.

The MDT provides the AVL functionality on almost all vehicles. If the MDT is not powered on the EOC will not be able to locate vehicle in an emergency.

Where a vehicle has an AVL unit but is not fitted with an MDT unit, staff must ensure they have logged in with the EOC via the GRN.

3.5.2 Personal Location Beacons (PLB)

Vast areas of outback South Australia are not serviced by GRN or the mobile phone network. Subsequently there is no AVL tracking of SAAS staff as the SAAS AVL system relies on connection with the mobile phone network.

Due to the level of risk associated with the ineffective communication to staff working remotely, SAAS identified and implemented PLB in vehicles in remote areas

The 'GME Accusat Pocket Pro + MT 410G' has been supplied by SAAS Technical Services and when activated will be detected within minutes, indicating a position to within a search radius down to 120 metres or less.

The following 'hierarchy' of use for communications equipment must always be followed by crews working in remote areas:
1. SAAS GRN radio
2. SAAS mobile phone
3. SAAS satellite phone
4. SAAS issued PLB

The Personal Location Beacons should be activated by the Solo responder in the following circumstances:

- A SAAS staff member has become unwell or is injured requiring urgent medical attention and all the standard SAAS communications equipment is either non-functional or out of range or

- A SAAS staff member believes they are in imminent danger, are unable to remove themselves from the situation and all the standard SAAS communications equipment is either non-functional or out of range or

- A SAAS fleet has become disabled and it is unlikely that another vehicle will be in the area in the next 12 hours and all the standard SAAS communications equipment is either non-functional or out of range.

3.6.   Training and Orientation

SA Ambulance is responsible for the induction, orientation and training of all staff, including safe work procedures for working remotely and/or in isolation.

All operational staff members must undertake the operational safety training program as part of their operational training and induction.

On arrival at any location and especially if they arrive prior to completion of the call taking process, staff must undertake a dynamic risk assessment as part of the through the windshield scene assessment.

4.   Appendices

Nil

5.   Risks

Determine the Rating: **Rating:** Moderate

Risk Matrix

Risk:

There is an increased risk of harm to clinicians responding to cases when working in a solo responder capacity.

6. Legislation and Standards

SA Work Health and Safety Act, 2012
SA Work Health and Safety Regulations, 2012

7. National Safety and Quality Health Service Standards

Standard 1 Governance for Safety and Quality in Health Service Organisations	Standard 2 Partnering with Consumers	Standard 3 Preventing & Controlling Healthcare associated infections	Standard 4 Medication Safety	Standard 5 Patient Identification & Procedure Matching	Standard 6 Clinical Handover	Standard 7 Blood and Blood Products	Standard 8 Preventing & Managing Pressure Injuries	Standard 9 Recognising & Responding to Clinical Deterioration	Standard 10 Preventing Falls & Harm from Falls
✓	☐	☐	☐	☐	☐	☐	☐	☐	☐

8. Definitions and Acronyms

AVL – Automatic Vehicle Location
CRF – Client Review Form
CSO – Clinical Support Officer
ECP – Extended Care Paramedic
EOC – Emergency Operations Centre
EMD – Emergency Medical Dispatcher
EMDSO – Emergency Medical Dispatch Support Officer
GRN – Government Mobile Network
HRA1 – High Risk Address 1
HRA2 – High Risk Address 2
MDT – Mobile Data Terminal
OM – Operations Manager
PCR – Patient Care Report
PLB – Personal Locator Beacon
RTL – Regional Team Leader
SAPol – South Australia Police
SDM – State Duty Manager
SPRint – Single Paramedic Response and Intervention

9. SA Health Policy Directives / Procedures and external references and best practice procedures

Doc. Ref. Number	Document Title or Information Source
DO355	Remote or Isolated Work Safety
GD025	Communication Systems for Remote or Isolated Work (WHS) Policy Guideline

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10. **SA Ambulance Service associated documents – SAAS Policies/ Procedures/ Guidelines / Forms**

Policy and Information Centre – SharePoint Intranet

Doc. Ref. Number	Document Title or Information Source
PRO-166	GRN Duress Alarm and Code 51 Activation
PRO-273	High Risk Addresses