

SimSTaR

Travel safely

Simulation based
Safe Transfer and
Retrieval Course



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8³⁰ Registration
Welcome & Introduction
9⁰⁰ Workshops (x45 mins each)

	Equipment & Transfer Bag (Seminar Rm 1)	Paediatric Checklists & Packaging (Seminar Rm 2)	Communication & Logistics (Seminar Rm 3)	Adult Packaging (Sim Suite)
910	A	B	C	D
1000	B	C	D	A

1045 Coffee

11⁰⁰ Workshops (continued)

	Equipment & Transfer Bag (Seminar Rm 1)	Paediatric Checklists & Packaging (Seminar Rm 2)	Communication & Logistics (Seminar Rm 3)	Adult Packaging (Sim Suite)
1110	C	D	A	B
1200	D	A	B	C

1245 Lunch

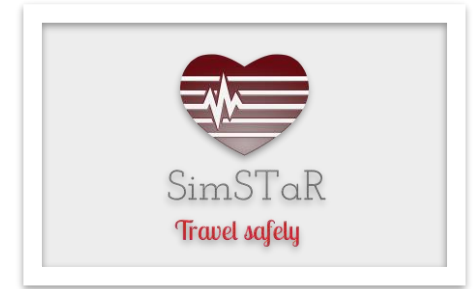
13¹⁵ Scenarios (x45 mins each)

	Scenario 1 Seminar Rm 3	Scenario 2 Sim Suite	Scenario 3 Seminar Rm 1	Scenario 4 Seminar Rm 2
1330	A	B	C	D
1420	B	C	D	A
1510	C	D	A	B
1600	D	A	B	C

1645 Feedback and Close



Course overview

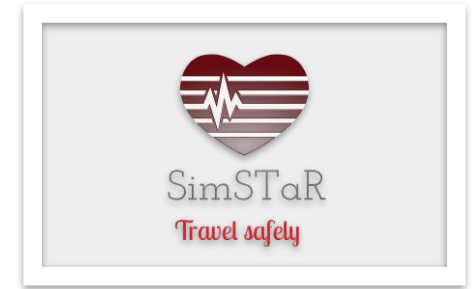


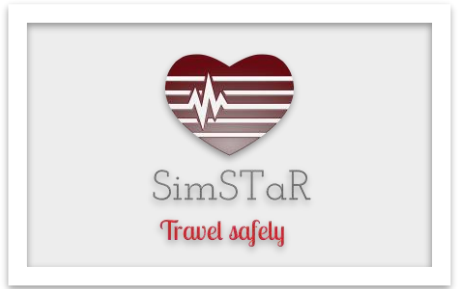
Aims

- Understand the hazards of the transfer environment
- Learn how to prepare a patient for transfer
- Know when a patient is ready for transfer
- Gain familiarity with transfer equipment
- Know what to take on a transfer
- Understand the logistics of organising a transfer

Why is this important?

- Increased pressures on NISTAR:
 - reconfiguration of services
 - more transfers
 - sicker patients
 - staffing issues
- Increased burden on local departments to perform their own transfers when NISTAR unavailable



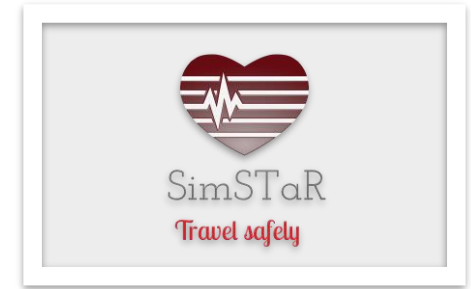


Primary
transfer

Secondary
transfer

Tertiary
transfer

Indications for Transfer



1

Upgrade of Care
requiring
specialist support
or investigation

2

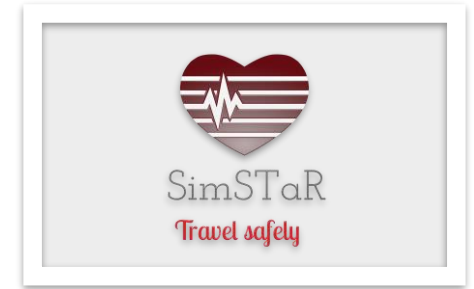
Upgrade of Care
requiring
specialist organ
support

3

Repatriation

4

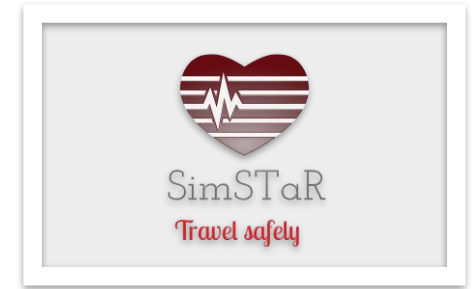
Lack of staffed
intensive care
beds in
transferring unit



Decision to transfer

- Consultant decision
- Risk of significant morbidity and mortality to patient
- Dilemma of which patient to transfer

Need to carefully weigh potential RISKS against expected BENEFITS of transfer!



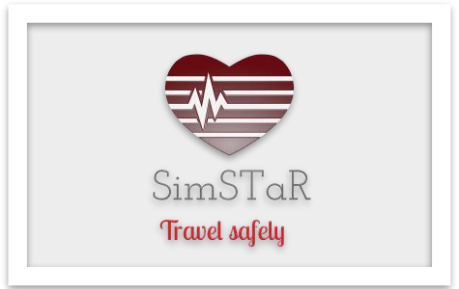
Who should go?

- 2 suitably trained, experienced staff
- Competencies dependent on patients clinical needs
- Detailed risk assessment
 - Clinical condition and level of support
 - Specific risks related to patient's condition
 - Likelihood of deterioration
 - Potential for additional therapy/monitoring
 - Duration and mode of transport

Criteria		Accompaniment
Level 0	Requires hospitalization: Needs can be met through usual ward care	Ambulance tech/paramedic
Level 1	Patient needs additional monitoring or clinical input Patient requiring critical care outreach service input Patient requiring staff with special expertise and/or additional facilities for at least one aspect of critical care delivered in a general ward environment	Ambulance tech/paramedic Nurse
Level 2	Patients needing single organ system monitoring and support	Ambulance tech/paramedic Nurse Doctor from parent team or anaes/critical care background
Level 3	Patient needing advanced respiratory monitoring and support Patient needing monitoring and support for two or more organ systems. Patient with chronic impairment of one or more organ systems sufficient to restrict daily activities who require support for an acute reversible failure of another organ system	Ambulance tech/paramedic Nurse Doctor from anaes/critical care background

Retrieval teams

- NISTAR
- HEMS
- Aeromedics
- ECMO retrieval teams



Modes of transport



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Published by
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21 Portland Place, London W1B 1PY
Telephone 020 7631 1650 Fax 020
info@aagbi.org
www.aagbi.org

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Designed f

Welsh guidelines
transfer of the c

Original March 2009.
Revision June 2016.

The Intensive Care Society

Guidelines for the transport critically ill adult (3rd Edit

Prepared on behalf of the council of the Intensive Care Society by:

Simon Whiteley
Ian Macartney
Julian Mark
Helen Barratt
Rachel Binks

Leeds Teaching Hospital NHS Trust
North Manchester General Hospital
Yorkshire Ambulance Service / Harrogate and Dist
University College London
Airedale NHS Foundation Trust



Llywodraeth Cymru
Welsh Government

The Faculty of
Intensive Care Medicine

 intensive care
society
care when it matters

Guidance On: The Transfer Of The Critically Ill Adult



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We will cover:

- Pathophysiology and hazards of transfer
- Pre-transfer stabilisation
- Special patient and paediatric considerations
- Equipment workshops
- Communication pitfalls and logistics of transfer
- Simulated Scenarios