Justice Health and
Forensic Mental Health Network

Justice Health NSW Policy

Access to Local Public Hospitals

Issue Date: 14 October 2022

Together for
Healthier Tomorrows

Access to Local Public Hospitals

Policy Number 1.252

Policy Function Continuum of Care

Issue Date 14 October 2022

Next Review Date 14 October 2025

Risk Rating High

Summary This policy provides guidelines for utilising Local Health District (LHD) hospital emergency, inpatient and outpatient services.

Responsible Officer General Manager, Primary Care

Applies to
- ☐ Administration Centres
- ☐ Community Sites and programs
- ☒ Health Centres - Adult Correctional Centres or Police Cells
- ☒ Health Centres - Youth Justice Centres
- ☒ Long Bay Hospital
- ☐ Forensic Hospital

CM Reference POLJH/1252

Change summary
- Updated Patient Update process in JHeHS
- Updated patient flow processes

Authorised by Chair, Policy Steering Committee

Revision History

#	Issue Date	Number and Name	Change Summary
7	October 2022	1.252 Access to Local Public Hospitals	• Updated Patient Update process in JHeHS • Updated patient flow processes
6	January 2018	1.252 Access to Local Public Hospitals	• Changes to JJNSW centres and processes • Updated hyperlinks and documents • Urgent and non-urgent transfers separated • Updated telephone numbers and position titles • Change the name of the policy to better reflect the purpose of the policy i.e. Access to local public

			hospitals and to avoid confusion with Public Health Units
5	December 2013	1.252 Access to Local Public Health Services	• Policy 1.252 & 1.330 combined into one policy • Major wording and grammar changes • Title change
4	August 2010	1.252 Local Public Health Services – Outpatient and Non-Emergency Inpatient Services	• Minor wording and grammar changes
3	May 2009	1.252 Local Public Health Services – Outpatient and Non-Emergency Inpatient Services	• Title change • Minor edits • Identification of the policies around the use of local public health services
2	June 2005	1.252 Local Health Services – Use of	• Change policy number • Change to Justice Health from Corrections Health Service • Minor edits
1	September 2000	2.060 Local Health Services – Use of	• New policy

PRINT WARNING

Printed copies of this document, or parts thereof, must not be relied on as a current reference document.

Always refer to the electronic copy for the latest version.

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1. Preface

Justice Health and Forensic Mental Health Network (Justice Health NSW) is responsible for providing and co-ordinating a wide range of health services to people involved with the NSW Criminal Justice System. This policy directs Justice Health NSW staff in the management of patient transfers to public hospitals for emergency care, specialty appointments, investigations and treatment. This is an agreed procedure between the Justice Health NSW, Local Health Districts (LHDs), NSW Ambulance, NSW Police Force, Corrective Services NSW (CSNSW), private providers, and Youth Justice NSW (YJNSW).

This policy does not include arrangements with regard to the Forensic Hospital.

Patients requiring emergency admission are transferred to local hospital services (based on NSW Ambulance Matrix).

Outpatient services for adult males and females are facilitated by the Integrated Care Service (ICS) Medical Appointments Unit (MAU), Integrated Care Service (ICS), based at Long Bay Correctional Complex, Silverwater Correctional Complex and Cessnock Correctional Complex (see Justice Health NSW Policy 1.264 *Medical Appointments (External and Internal) - Referrals, Bookings and Cancellations*).

Male patients requiring non-emergency services are predominantly booked into the Prince of Wales Hospital (POWH) for scheduled appointments.

Female patients are generally booked into Westmead or Nepean Hospitals for scheduled appointments.

Adolescent patients access services via the Local Health District (LHD) as arranged by the respective health centre staff.

At rural sites; some outpatient services (e.g. imaging services) are provided by the Hospital/s / Local Health District/s (LHD) and/or private health acer providers. This should be managed by the local Nursing Unit Manager (NUM) and multidisciplinary team. The MAU can be contacted to provide support for this process.

2. Policy Content

2.1 Mandatory Requirements

In accordance with the NSW Ministry of Health (Ministry) Policy Directive PD2022_024 *Charging Arrangements for Hospitals and Other Health Services*, all adults in CSNSW centres including adolescents in Youth Justice Centres are entitled to inpatient and non-inpatient services in the New South Wales public hospital system. Patients are not charged and the referring public hospital is responsible for meeting any costs involved. Staff should refer to the Justice Health NSW Policy 1.253 *Access to Private Health Services* in relation to the use of private facilities and services.

2.2 Implementation – Roles and Responsibilities

All clinical staff must abide by the procedures set out in this policy.

3. Definitions

Must

Indicates a mandatory action to be complied with.

Should

Indicates a recommended action to be complied with unless there are sound reasons for taking a different course of action.

4. Procedure Content

4.1 Hospital Transfers

4.1.1 Emergency/Urgent Transfer to Hospital

Emergency/Urgent Transfer to Hospital are facilitated by the individual Health Correctional Centre/Long Bay Hospital and sent to the closest Emergency Department. The assessment and management of a patient's emergency response must be documented on JUS060.009 *Emergency Response Form*.

1. the original (White copy) is scanned and uploaded into the patients' Health Record in JHeHS (Emergency Response / Observation and Assessment);
2. (Pink copy) is sent with the patient to hospital with NSW Ambulance; and
3. (Yellow copy) is sent to the Nursing Unit Manager (NUM) for review.

The decision to transfer a patient to hospital in an emergency must be made by:

- Nurse on site; or
- Medical Officer (MO); or
- The Custodial Officer, CSNSW or Duty Manager, YJNSW when a nurse is not available on-site and following consultation with the After Hours Nurse Manager (AHNM) state-wide.

The Nurse on-site must contact the MO onsite or call the Remote After-Hours Offsite Medical Service (ROAMS) to discuss after the patient has been sent.

The inability to contact a MO/AHNM must not delay transfer to hospital.

4.1.2 Non-Urgent Transfer to Hospital

Determination of the need for non-urgent transfer to hospital must be based on a thorough clinical assessment. The clinical assessment must include a comprehensive history and physical examination, including basic observations. Complete the Clinical Summary Transfer to External Hospital form in JHeHS.

The Nurse must contact:

- A Medical Officer on-site if available; or
- The Remote Medical After Hours Service (ROAMS) - [redacted] (24 hours per day); or

- Nurse Manager Operations, Access and Demand Management (NMOADM) if ROAMS is not contactable. The NMOADM can be contacted on [redacted] – Option1 (AHNM).
- The Admitting Medical Officer at the Emergency Department/Hospital (please contact through the Hospital switchboard)

[For Oral Health Emergencies (business hours) - Please contact the Operations Manager Primary Care [redacted] *who will contact the Clinical Director Oral Health for advice if required. For after-hours oral health emergencies, the ROAMs GP (Option 2) should be contacted].*

The inability to contact a Medical Officer must not delay transfer to hospital if the patient's condition deteriorates.

4.1.3 Notification and Documentation

The NMOADM/AHNM must be informed of the patient transfer/admission.

Complete the Clinical Summary Transfer to external Hospital form in JHeHS and email the [redacted] including the following information:

- Date
- Time
- Patient Name (First Name and Surname)
- MIN / CIMS Number
- Health/Correctional Centre

If a patient is admitted to a public hospital it is the responsibility of the referring Health/Correctional Centre's NUM or delegate to contact the hospital Ward/Unit (daily) to receive a clinical handover. Please Note: Shift by shift (three per day) updates must occur for patients admitted to an Intensive Care/Critical Care, High Dependency or Coronary Care Unit.

If a patient is transferred from a rural hospital to a Sydney Metropolitan tertiary referral hospital for ongoing care; the Medical Unit at Long Bay Hospital (MU-LBH) will take over the daily updates.

To facilitate the transfer and support CSNSW/YJNSW with arranging appropriate and timely transport/escort, the following forms are to be completed and provided:

Copy of the Long Stay Medication Chart (LSMC) or National Inpatient Medication Chart / NSW subcutaneous insulin chart – Long Bay Hospital

Copy of the SAGO Chart

JUS200.085 *Request for Unplanned Transfer for Healthcare*

CNS590 *Information for NSW Health hospital staff delivering care to a custodial patient*

JUS200.060 *Adolescent Health Attendance at External Appointments (YJNSW)*

JUS200.301 *Referral to Emergency Department Following an Allegation of Sexual Assault*

Please Note: CSNSW/YJNSW/private providers recognise that where the Justice Health NSW staff recommends emergency transfer to the hospital, it is their responsibility to ensure that this occurs.

Justice Health NSW staff must note that CSNSW/private provider policies require that a valid movement order be raised before a patient can be transferred to hospital. Justice Health NSW staff must liaise with the Manager of Security (MOS) or delegate or Duty Manager, YJNSW or delegate to ensure that this occurs within a timeframe appropriate to the patient's clinical need.

Where a Justice Health NSW staff member experiences difficulties in transferring a patient, they must contact the NUM/Cluster/Regional Nurse Manager (business hours) or AHNM (after hours) immediately.

4.2 Non-Inpatient Services

For any adult outpatient appointment, a referral must be made on Patient Administration System (PAS) and a signed copy of the PAS Referral from must be sent to the MAU, ICS who will arrange the appointment as per Justice Health NSW Policy 1.264 *Medical Appointments (External and Internal) - Referrals, Bookings and Cancellations*.

The Adolescent Health Detention Centre will arrange appointments for adolescent patients and create a referral on PAS.

Currently, the majority of outpatient or specialty services are delivered for Justice Health NSW at Prince of Wales Hospital (POWH). The Regional Nurse Manager is responsible for establishing appropriate referral partnerships with hospital's/LHD's or local health service provider. Referrals must be made on Patient Administration System (PAS) and a signed copy of the PAS Referral form must be completed for access to all local services.

4.2.1 Triaging and Referring Patients

Adult patients must be triaged by the referring MO to determine the clinical priority/urgency category which will then be triaged by the specialist team at POWH. If the referring MO has clinical concerns about an appointment date (timeframe) that has been provided by POWH, they should contact the specialty team at POWH directly. The MAU is not responsible for negotiating with a specialty team to change appointment dates because of clinical urgency. The MO making the referral to a specialist must provide the following information:

- Urgency of the referral;
- Ascertain the expected waiting time for the appointment type that is required. Expected waiting times are available by contacting the MAU; and
- Consider the patient's Earliest Release Date (ERD). This may be a factor in determining whether the patient may be released prior to the appointment.

If the patient does not require an urgent appointment and the waiting time exceeds the expected time in custody, it is the responsibility of the NUM (or delegate of the NUM) of the Health/Correctional Centre to ensure that adequate discharge planning has occurred, that the patient has been referred for an appointment in the community, and the patient has been provided with the details of the appointment prior to their release.

All patients that are waiting for a specialty appointment must be monitored by Health/Correctional Centre staff to ensure that there is no change in the priority/urgency category for the appointment. It is the responsibility of the NUM to monitor the appointment status in PAS. Any changes in the patient's health condition must be escalated to the on-site Medical Officer or ROAMS MO for review of the priority/urgency category.

Patients awaiting elective procedures/interventions will be prioritised by the hospital/LHD on their clinical priority/urgency. Once the MAU is informed by the hospital of the prospective date of the surgical/medical procedure/intervention; MAU will inform the NUM of the Health Correctional Centre/inpatient facility by the JHFMHN-HC email. Although patients may be informed of the expected waiting times, for security reasons; patients must not be informed of the date for surgical/medical procedure/intervention.

If a patient is on a hospital waiting list and is due for release prior to the date, the patient should be given the option of remaining on that waiting list. In this instance; the patient is to be informed of the date of surgery and contact information for the relevant hospital following release from custody. On release from custody, the patient may confirm if they wish to remain on the waiting list and change of address information. Patients also have the option of seeking further treatment via their own GP on release.

For rural sites and adolescent patients, the NUM in collaboration with the multidisciplinary team (Medicine, (including Psychiatry), Nursing and Allied Health) will manage outpatient referrals.

4.2.2 Transport to Sydney from Rural Correctional Centres / Youth Justice Centres

When patients are being transported from rural centres to Sydney for an appointment; the dispatching health centre must ensure that the patient has been assessed as fit for the length of travel and if necessary arrange with CSNSW / YJNSW / private providers for the travel to be broken down into appropriate and manageable lengths. To arrange for special transport complete JUS200.035 *Medical Certificate Consideration For Special Transport* form.

Adolescent patients are rarely transferred to Sydney from rural YJNSW Centres for medical appointments. If transport is necessary, the health centre must contact the NMAH during business hours. The NUM will liaise with the Transport Unit, YJNSW and develop an appropriate transportation plan. JUS200.060 *Adolescent Health Attendance at External Appointments* must be completed to develop an appropriate transportation plan. The Health Problem Notification and Escort Form (HPNEF) is used to provide advice and recommendations regarding a young person's clinical status to YJNSW when special transport and / or recommendations for specific management during transfer is required.

It is important that health staff consider any concerns adult patients may have about transfer that may result in the patient refusing to travel and / or attend the appointment. To avoid unnecessary late cancellations of appointments, health centre staff must discuss with the patient the procedures involved in attending an appointment and complete the pre-appointment appointment checklist one week before the appointment. It is important that the patient understands that they will be transferred from their Correctional Centre of classification to Long Bay Correctional Complex and may have to remain there during the appointment/follow-up process. Refer to the Justice Health NSW Policy 1.264 *Medical Appointments (External and Internal) - Referrals, Bookings and Cancellations*.

4.3 Inpatient Services (NSW Health)

Justice Health NSW MOs do not routinely refer patients for inpatient services. Justice Health NSW patients access these services following Emergency Department presentation.

4.3.1 Discharge (from Hospital) Planning

Health Centre NUMs must work with the hospital/LHD treating team/s to develop the discharge plan in including the Estimated Date of Discharge (EDD) with the NUM of the Health/Correctional Centre.

Discharge options include:

- Returning Correctional Centre
- Referral/Acceptance and Inter Hospital Transfer to the Medical Unit at Long Bay Hospital (MU-LBH)

4.3.2 NSW Health – Inter Hospital Transfer (IHT)

NSW Health Inter-Hospital Transfer is made by the treating specialty team (Senior Medical Clinician) in consultation with Justice Health NSW and private providers. The NMOADM will support this process with the hospital(s)/LHD, Patient Flow Unit and treating team/s. The decision to transfer and the determination of the clinical urgency (medically agreed timeframe) of the Inter Inter-Hospital Transfer (IHT) must be made through discussion between the referring Medical Officer (MO) and the accepting MO, in alignment with the Ministry of Health (Ministry) PD2025_002 *Adult Critical and Specialist Care Inter-Hospital Transfer*.

4.3.3 Procedure Following Transfer/Discharge from Hospital

All patients must be reviewed by a Registered Nurse within 24 hours following discharge from hospital to the Health/Correctional/Detention Centre.

Follow-up must be arranged by Justice Health NSW staff. Where the hospital discharge plan or MO clinical review indicates that outpatient follow up is required; a referral must be made on Patient Administration System (PAS) and a signed copy of the PAS Referral from must be sent to the Medical Appointments Unit (MAU), Integrated Care Service (ICS) who will arrange the appointment as per Justice Health NSW Policy 1.264 *Medical Appointments (External and Internal) - Referrals, Bookings and Cancellations*.

4.3.4 Transfer to the Medical Unit at Long Bay Hospital (MU-LBH)

MU-LBH receives adult patients from the public hospital system who require greater intensity of multidisciplinary team care than is available in their centre of classification.

Please Note: Acutely deteriorating patients must not be transferred to the MU-LBH.

For all transfers to the MU-LBH; refer to Justice Health NSW Policy 1.037 *Admission Policy – (Aged Care Unit / Medical Unit) Long Bay Hospital (Referral, Admission and Assessment)*.

When the patient is ready for transfer from the MU-LBH to a Correctional Centre of classification; the NUM must provide comprehensive clinical handover to the receiving NUM of the Health/Correctional Centre to provide continuity of care.

4.4 Deaths in External Hospitals

Refer to Justice Health NSW Policy 1.120 *Management of a Death*.

5. Related Documents

Legislations	*Nil*
Justice Health NSW Policies, Guidelines and Procedures	1.037 *Admission Policy – (Aged Care Unit / Medical Unit) Long Bay Hospital (Referral, Admission and Assessment)* 1.120 *Management of a Death* 1.141 *Release Planning and Transfer of Care Policy – Adult to External Providers* 1.253 *Access to Private Health Services* 1.262 *Medical and Nursing Certificates (Adults)* 1.264 *Medical Appointments (External and Internal) - Referrals, Bookings and Cancellations*
Justice Health NSW Forms	CNS590 *Information for NSW Health hospital staff delivering care to a custodial patient* JUS060.009 *Emergency Response Form* JUS200.035 *Medical Certificate Consideration For Special Transport* JUS200.060 *Adolescent Health Attendance at External Appointments (YJNSW)* JUS200.085 *Request for Unplanned Transfer for Healthcare* JUS200.301 *Referral to Emergency Department Following an Allegation of Sexual Assault*
NSW Health Policy Directives and Guidelines	PD2022_024 *Charging Arrangements for Hospitals and Other Health Services* PD2025_002 *Adult Critical and Specialist Care Inter-Hospital Transfer.* PD2025_036 *Planned Surgery Access*
Other documents and resources	