Justice Health and
Forensic Mental Health Network

Justice Health NSW Policy

Transfer and Transport of Patients

Issue Date: 09 June 2021

Together for
Healthier Tomorrows

Transfer and Transport of Patients

Policy Number 1.395

Policy Function Continuum of Care

Issue Date 09 June 2021

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Risk Rating High

Summary This policy will ensure that the clinical needs of patients are considered and managed appropriately before, during and after transfer/transport between all facilities.

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/1395

Change summary
- Grammar
- Update of email addresses
- Update of hyperlinks
- Inclusion of definitions for Medication Chart and Patient Health Record
- Additional guidance around the sharing of Medication Charts

Authorised by Chief Executive, Justice Health and Forensic Mental Health Network

Revision History

#	Issue Date	Number and Name	Change Summary
4	June 2021	1.395 Transfer and Transport of Patients	• Grammar • Update of email addresses • Update of hyperlinks • Inclusion of definitions for Medication Chart and Patient Health Record • Additional guidance around the sharing of Medication Charts
3	August 2017	1.395 Transfer and Transport of Patients	• Changes to CSNSW vehicles and management of transfer of pregnant patients
2	December 2013	1.395 Transfer and Transport of Patients	• Policy changed to include the JH&FMHN Medication Guidelines • Medication charts procedures
1	December 2012	1.395 Transfer and Transport of Patients	• This policy is an amalgamation of the following transport/transfer policies within Clinical and Nursing Services: - 1.190 Management of Patients during Transports to and from Adult Correctional and Juvenile Justice Centres - 1.261 Medical Recommendations – Special Transport (Adults) - 1.401 Transfer to another Centre on Clinical Grounds - 1.402 Transfer between Adult Facilities - 1.405 Transfer of patients to Brewarrina, Mannus and Ivanhoe

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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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Table of Contents

1. Preface 5
2. Policy Content 5
2.1 Mandatory Requirements 5
2.2 Implementation – Roles & Responsibilities 5
3. Definitions 6
4. Procedure 6
4.1 Before Transfer – Refer to *Transfer In and Out Form (Adults)* on JHeHS 6
4.1.1 Assessment of Patients before Transfer 6
4.1.2 Management of Patient Documents before Transfer 6
4.1.3 Management of Medications before Transfer 7
4.1.4 Management of Patients on an Active Mandatory Notification before Transfer 8
4.1.5 Recommendation for Special Transport for Health needs before Transfer 8
4.1.6 Management of Pregnant Patients before Transfer 8
4.1.7 Transport of Pregnant Patients in Custody 8
4.1.8 Management of Diabetic Patients Prior to Transfer 8
4.1.9 Assessment of Patients before Transfer to Isolated Sites (Glen Innes, Mannus, Oberon and any of the Honour Houses) 9
4.1.10 Duration of Medical Certificates 9
4.1.11 Patients with a Permanent Disability or Progressive Illness 9
4.1.12 Transfer to another Centre on Clinical Grounds 9
4.2 During Transfer 10
4.2.1 Management of Adult Patients during Transfer 10
4.2.2 Management of a Young Person during Transfer 11
4.2.3 Management of Patients During transport to/from Court and/or Police Cells 12
4.3 Transfer In 12
4.4 Transport of Young People by the Community Integration Team (CIT) 13
5. Related Documents 13
Appendix 1 – Descriptions for Corrective Services NSW of the medical conditions that require special transport 15

1. Preface

Justice Health and Forensic Mental Health Network (the Network) patients are frequently transferred between Correctional Centres, Youth Justice Centres, Court and Police Cell Complexes C&PCC) for a variety of reasons.

Transport may also be provided by the Adolescent Community Integration Team (CIT) to support a young person upon release from custody to attend community health appointments.

The Network staff are responsible for ensuring that patients are transferred and transported in a manner which maintains continuity of care and patient safety. This policy outlines the responsibilities of the Network staff before, during and after transport between all facilities.

2. Policy Content

2.1 Mandatory Requirements

This policy outlines the procedures for transferring patients to another site, including making recommendations to Corrective Services NSW (CSNSW)/Private Operator/Youth Justice NSW (YJNSW) in relation to the type of vehicle to be used (special transport). A patient's transport needs may be identified during any interaction. The identification of the need for transfer on clinical grounds and special transport should be based on a comprehensive clinical assessment which must be clearly documented in the patient's Health Record. Where patients are being moved by CSNSW/Private Operator/YJNSW for operational, custodial and classification reasons, the Network staff must assess patients as required to ensure all health care needs are met when consulted by CSNSW/Private Operator/YJNSW.

2.2 Implementation – Roles & Responsibilities

- The Nursing Unit Manager (NUM) must establish local systems to ensure that CSNSW/Private Operator/YJNSW formally notify the Network staff of any transfers (other than an emergency) and as soon as possible (preferably 24 hours) prior to transfer. For emergency transfers please refer to Policy 1.252 *Access to Local Public Health Services.*
- The Registered Nurses/Enrolled Nurses (RN/EN) are responsible for completing the patient JUS010.000e *Transfer In and Out Form (Adults)* on JHeHS for all adult patients being transferred/received. This form is not required for adolescent patients; Adolescent Health (AH) staff must follow procedures outlined in section 3.2.2 Management of Adolescent Patients during Transfer (including transfer to an Adult site).
- Clinical staff must call NSW Ambulance to arrange to have the patient transported to the nearest hospital for any unplanned transfers, refer to Policy 1.252 *Access to Local Public Health Services*. The RN/EN must complete JUS200.085 *Request for Unplanned Transfer for HealthCare* form. In centres where there are no Network staff, CSNSW will call an ambulance.
- The Integrated Care Service (ICS) should monitor that continuity of care has occurred between sites for patients enrolled on the ICS and contact the NUM or delegate as required.

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.

Medication Chart

Refers to a paper-based (Long Stay Medication Chart, National Inpatient Medication Chart) or electronic medication order.

Patient Health Record

A hybrid record of paper-based and electronic information pertaining to the health of the patient.

4. Procedure

4.1 Before Transfer – Refer to *Transfer In and Out Form (Adults)* on JHeHS

4.1.1 Assessment of Patients before Transfer

- The RN/EN must assess and identify ongoing clinical requirements for each patient prior to their transfer to another centre/facility when aware of the transfer. The assessment may take the form of a patient interview/examination (as medically indicated) and review of the patient's Health Record and the Patient Administration System (PAS).
- For patients not on the Long Bay Correctional Complex (LBCC); the RN/EN or delegated staff member must cross reference against PAS and if the patient outstanding MAU appointments the MAU must be notified. This is to ensure that return transfers for appointments are organised.
- If there are issues regarding the transfer, the matter should be escalated to the NUM or delegate [Nurse in Charge (NIC)] to liaise with the receiving site NUM/NIC, and the Cluster Nurse Manager (CNM), or Regional Nurse Manager or if after hours, contact the After Hours Nurse Manager (AHNM) state-wide.
- If an adult patient has a disability, the NUM must ensure that placement and specialist resource needs have been discussed with the CSNSW Statewide Disability Services (SDS). Contact SDS on [redacted].

4.1.2 Management of Patient Documents before Transfer

- All volumes of the Health Record must be collated and prepared. This includes additional documents such as x-rays, medication charts (including monthly medication charts) and Opioid Agonist Treatment (OAT) documentation. Scanning of relevant documentation into JHeHS should also be completed.
- If a patient has an electronic Medication Chart it should not be printed from Justice Health electronic Health System (JHeHS). They can be accessed by the receiving facility.

- All documentation should be packed into a secure record bag and locked prior to being provided to CSNSW/Private Operator/YJNSW staff for transport with the patient. The front of the records bag must detail the patient's Master Index Number (MIN) / Client Information Management System (CIMS) and name of the receiving site.
- Health Record volumes must be dispatched to the receiving site in PAS. Clerical/administrative/Assistant in Nursing (AIN) staff should assist clinical staff with the collation and preparation of the Health Record documents and must work under the direction and supervision of an RN/EN authorising completing the JUS010.000e *Transfer In and Out Form (Adults)* on JHeHS and authorising the patient.
- Patients with particular health needs during transport or who are being transported to a Court and Police Cell Complex (C&PCC) which is not staffed by the Network staff must have a current Health Problem Notification Form (HPNF) for adults or a Health Problem Notification and Escort Form (HPNF) for adolescents completed and provided to CSNSW/Private Operator/YJNSW staff prior to transfer.
- JUS010.000e *Transfer In and Out Form (Adults)* must be completed on JHeHS along with the required tasks and the relevant COVID – 19 screening.
- An electronic progress note entry must be made in the patient's Health Record documenting the transfer between the relevant sites and actions which have been taken including the clinical handover between staff.

4.1.3 Management of Medications before Transfer

- Medication charts, OAT forms, and the health management plan must be photocopied before patient transfer. The copies must be securely retained in the dispatching site's Health Centre (location to be determined by the NUM) for seven days following which they must be shredded by the clerical/administrative/AIN staff. This is to ensure the availability of this information while the record is in transit.
- If a patient has an electronic Medication Chart it should not be printed from Justice Health electronic Health System (JHeHS). They can be accessed by the receiving facility.
- Where possible medication charts which are due to expire soon after transfer should have a clinical review and be re-charted prior to transfer.
- Patients enrolled in the Self-Medication Program and Sachet Pack Program must have their medications transferred in a secure record bag. Ensure that the medication fridge is also checked if the patient's medication is stored in the fridge. Transfer of refrigerated items must be properly packed. Refer to the *How to Guide - Packing Coolers Strive-for-5-guidelines*.
- Patients who are prescribed Patient Own Medication (including Highly Specialised Drugs) or have Release Medications prepared must have all medication transferred with the Health Record in a locked record bag. Ensure that the medication fridge is also checked if the patient's medication is stored in the fridge. Transfer of refrigerated items must be properly packed. Refer to How to Pack a Cooler (Esky).
- Patients who are prescribed medications that are not routinely available at the receiving site (phone call in advance to ascertain as required) must have their

medications packed and transported in a locked record bag – refer to 6.049 *Medication Guidelines*.

- The Network Pharmacy Department must be contacted regarding patients who are prescribed clozapine, in accordance with the Management of Patients on Clozapine Manual. For further information refer to 6.049 *Medication Guidelines* and 6.053 *Guidelines for the Management of Patients on Clozapine*.

4.1.4 Management of Patients on an Active Mandatory Notification before Transfer

- The Mandatory Notification paperwork must be scanned into the patient's Health Record and the appropriate clinical PAS Alerts must be active.
- The receiving site NUM or delegate must be contacted by the dispatching site NUM or delegate as soon as possible prior to the patient's transfer to provide advance notification.

4.1.5 Recommendation for Special Transport for Health needs before Transfer

- Recommendations for special transport must be based on a clinical assessment which must only be undertaken by a Medical Officer (MO), NUM, Nurse Practitioner (NP), or Registered Midwife (RM).
- The JUS200.035 *Medical Certificate: Consideration for Special Transport* form must be completed and forwarded to the Executive Director Clinical Operations for consideration and approval.
- The approved signed certificate (including description of the medical needs of the patient for special transport, refer to Appendix 1) must also be provided to the CSNSW/Private Operator/YJNSW escort staff.

4.1.6 Management of Pregnant Patients before Transfer

- During the first 20 weeks of pregnancy, the attending MO or Midwife must decide of the most appropriate method of transport for each pregnant patient. Pregnant patients can be transported, forward facing in trucks up to 20 weeks (unless a MO or RM recommends otherwise).
- CSNSW/Private Operator/YJNSW should use this mode of transport regardless of the length of the trip and geographical location. The transport mode is subject to review at each subsequent medical appointment.

4.1.7 Transport of Pregnant Patients in Custody

- Transport arrangements must be suitable for the individual pregnant patient. For patients who are 20 weeks pregnant onwards, treating staff must complete a special transport requirement alert that is entered on PAS. Air transport may be restricted after 36 weeks pregnant; this restriction and alternatives are considered in conjunction with the MO and Midwife.

4.1.8 Management of Diabetic Patients Prior to Transfer

- All diabetic patients must be risk assessed for suitability to manage their blood glucose level (BGL) monitoring and medications during transfer.
- Patient education must be provided to patients on the equipment and medication provided.

- A record must be maintained of equipment and medication provided and must be documented in the patient's Health Record.

4.1.9 Assessment of Patients before Transfer to Isolated Sites (Glen Innes, Mannus, Oberon and any of the Honour Houses)

- A list of patients who are being considered for transfer to these sites are to be provided to the local NUM or delegate on the Inmates for Transfer to a Remote/Isolated Site form by CSNSW/Private Operator.
- The NUM must ensure that there is a local process in place to ensure this list is received.
- The NUM/or delegate must ensure that a review of the patient's Health Record, PAS and JHeHS is undertaken.
- The NUM/NP or delegate should interview each patient and detail any reasons for exclusion to transfer to an isolated site discussed with the patient along with any review date identified. CSNSW/Private Operator must be notified and advised of an outcome and a review date where applicable.
- Where there is a patient dispute regarding classification the patient should be advised to discuss this with CSNSW/Private Operator.
- Where the Network staff are concerned about the appropriateness of a patient transfer to their site, the NUM/CNM/Regional NM or the AHNM (as appropriate) should be contacted.

4.1.10 Duration of Medical Certificates

- Medical Certificates recommending special transport are valid for a maximum of two months.
- The certificate must be reviewed by the NUM or MO prior to the expiration date to ensure that recommendations are made based on the patient's current clinical condition.
- The NUM or delegate must monitor current patient Medical Certificates and ensure renewal as required.

4.1.11 Patients with a Permanent Disability or Progressive Illness

- Patients with a permanent disability or progressive illness which affects their mobility must have a PAS Alert applied.
- The section of the form JUS200.035 *Medical Certificate: Consideration for Special Transport* endorsed by a MO and must be brought to the attention of the local CSNSW Manager of Security and sent to the Network Director Nursing and Midwifery Services (NDONMS) Note: some patients may already have a CSNSW Disability Notification Certificate in place in the Offender Information Management System (OIMS). Therefore the RN/EN must check with CSNSW/Private Operator before completing this section of the form.

4.1.12 Transfer to another Centre on Clinical Grounds

- The movement of patients on clinical grounds must be to ensure that the patient receives optimal and ongoing care which cannot be facilitated at the current site and not for any other reason.
- A Multidisciplinary Case Conference must be convened between the local Health Centre/Ward and receiving Health Centre/Ward. The relevant Clinical Director should also be informed of each case conference. The outcome of the case conference discussion must be documented in the patient's Health Record. The relevant Care Coordinator must also be included in the case conference for patients enrolled in the ICS.
- The Cluster Nurse Manager must be contacted to endorse the recommendations – refer to Policy 1.075 *Clinical Handover*.
- Where appropriate, a referral to the CSNSW SDS must be generated for assistance in planning longer term placement needs. Email: [redacted] or phone [redacted].
- The Network staff at the transferring site must also contact the receiving site and provide a comprehensive patient handover prior to the patient leaving. The verbal handover must be documented in the Health Record.
- The need for special transport and/or recommendations for specific management during transfer must be communicated to CSNSW/Private Operator/YJNSW via a current Health Problem Notification Form (HPNF) on PAS.
- The NUM or delegate must liaise with the Manager of Security/Governor as required.

4.2 During Transfer

4.2.1 Management of Adult Patients during Transfer

- The Network staff must ensure that CSNSW/Private Operator staff are provided with a current HPNF if required to safely manage the patient during transport.
- From the Court Preposition List provided to the Health Centre by CSNSW, the Network staff must check to see if a patient is required to stay overnight to attend court at the Police Cells. If a patient is staying overnight at the Police Cells, the NUM or delegate must send the Medication Chart and check if the medication the patient is prescribed is available at the Police Cells. If the medication is not available, an adequate supply of medication(s), for the duration the patient will be away, will need to be sent via CSNSW transport staff (provide advice to transport staff) to give to the RN at the receiving Police Cells. The NUM or delegate must provide a Clinical Handover to the RN at the receiving Police Cells and update the patients' Health Record.
- For patients staying overnight at another Health Centre to attend court, refer to Policy 1.075 *Clinical Handover*.
- Prescribed medications (and advice to the transport staff) must be arranged for the period of time the patient will be away.
- Network staff who have concerns about a patient's clinical condition or care during prolonged periods away must contact the Court Escort and Security Unit (CESU) (Phone [redacted]) or the Regional Escort Unit to discuss arrangements for

ongoing care. This may include arranging access to necessary additional medications, expedited return from escort, unfit for court certification, return from court or transfer to a local hospital.

- If the patient is transferred temporarily to the care of NSW Police Force (e.g. attend a distant court attendance) the NUM or delegate must ensure that the NSW Police staff are provided with the Health Centre and AHNM contact details for advice as required and should also be advised that in an emergency the patient must be taken to the nearest hospital. These arrangements should be made between the site staff.
- Each time a patient travels to court, the RN/EN must review and update the HPNF as required. If a patient becomes unfit for court attendance on medical grounds, a JUS200.000 *Medical Certificate: Non-Attendance at Court* must be completed.

4.2.2 Management of a Young Person during Transfer

- YJNSW Centre Manager/delegate will advise AH staff in advance of all pending escorts through the provision of a list provided on a daily basis. The NUM must ensure that local procedures are in place to receive advance escort notices.
- In circumstances where AH staff initiate the transport of the young person (e.g. for an external medical appointment), nursing staff must advise the YJNSW Centre Manager or Assistant Manager of any transport requirements – e.g. time, date, location, special vehicle needs etc.
- When a young person is transferred for any reason, nursing staff must:
  - Ensure that a HPNF is completed for every young person with an identified health issue. Relevant signs or symptoms must be written in lay terms. Refer to Policy 1.235 *Health Problem Notification and Escort Form (Adolescents)* for additional information.
  - Administer any required medication prior to transport.
  - If the young person requires medication during transport or a RN/EN is unavailable to administer the medication before transport.
  - Nursing staff must prepare the medication and a JUS130.455 *Adolescent Health - After Hours Medication* form on the evening or morning before the young person will be transported and provide clear instructions with the medication to the transport team.
  - Where possible, nursing staff should discuss the patient with the escort staff and provide them with advice and guidance regarding any required medication administration.
- YJNSW Escort staff will collect the HPNF, medications and relevant JUS130.455 *Adolescent Health - After Hours Medication* form prior to escort.
- Upon return from escort, comments or developments in relation to the young person's health concerns must be made via a verbal report (or written report) to AH staff from the transport/court/Police staff who had custody of the patient.
- Handover information must be recorded in the patient's Health Record by AH staff on the patient's return and acted upon as appropriate.

- If the patient is absent for more than 24 hours and AH staff have concerns about his/her clinical condition or care the YJNSW Court Logistics Unit (Phone [redacted]) must be contacted.
- Should an adolescent patient be transferred to an adult site the NUM or delegate must inform the receiving site well in advance of the patient's transfer and discuss the patient's ongoing health care needs. The receiving centre must create new PAS entries in the adult PAS facility as appropriate.

4.2.3 Management of Patients During transport to/from Court and/or Police Cells

- The transferring RN/EN must ensure that continuity of care is maintained for patients who are being transferred to/from Court or Police cells for any reason. Refer to Policy 1.111 *Court and Police Cell Complexes (Adults) Healthcare Responsibilities* for further details.
- Priority transfer to an appropriate correctional centre due to clinical reasons must also be requested by the Police Cells NUM or delegate for any patients who have significant/acute health issues.
- All relevant COVID – 19 screening must be completed by the Network of CSNSW staff

4.3 Transfer In

- All relevant COVID – 19 screening must be completed by the RN/EN
- All patients must be assessed in person by an RN/EN when they are transferred into a centre/facility within 24 hours.
- The RN/EN must review the patient's Health Record and PAS activity. Appropriate arrangements must be made to ensure ongoing health and disability needs are met in the receiving site and that specialised necessary equipment is available.
- Patients who arrive in a site which is not currently staffed by the Network must be reviewed as soon as possible (but within 24 hours) after arrival. In sites where nursing staff do not attend every day, a review must occur on the next working day. An appointment must be scheduled in PAS to ensure this occurs.
- The JUS010.000e *Transfer In and Out Form (Adults)* and associated tasks must be completed within JHeHS, including cross-checking the transfer in information against the transfer out information.
- An entry must be made in the eProgress Notes to document transfer between specified sites and the result of the patient interview and examination/assessment as appropriate.
- If the patient's Health Record is not available when the patient arrives at the receiving site, staff must contact the dispatching site and request faxed copies of medication charts, OAT Charts, recent eProgress Notes and Health Management Plan. A copy of the HPNF should be obtained from PAS. If the patient has an electronic Medication Chart, there should be no faxing.
- Faxed copies of medication charts received from the C&PCC and must be filed in the Health Record after they are no longer required for reference. The copies must not be used for treatment at any site other than the C&PCC. New medication charts must be

initiated as necessary. If the patient has an electronic Medication Chart, there should be no faxing.

- The RN/EN must check that all required medication has been received and stored appropriately, taking particular care to ensure that the cold chain is maintained for refrigerated items. If medications are required, these must be sourced via the Pharmacy Department staff or AHNM must be contacted as necessary for advice as appropriate. If medications cannot be sourced or administered the GP or ROAMS must be contacted and documented in Health Record.
- The receiving site RN/EN must account for all equipment and medications including BGL devices, insulin pens, and insulin pen needles and sharp containers. Any discrepancies must be reported to CSNSW/YJNSW/Private Operator immediately.
- An updated HPNF must be completed if indicated.
- PAS must be checked and updated to ensure all clinical alerts are up to date.
- All Health Record volumes must be electronically updated in PAS to reflect receipt by the receiving site.
- Outstanding referrals, waiting list entries and appointments must be checked on PAS and rescheduled to the receiving site.
- A medical hold must be arranged by the NUM or delegate for patients with a local outpatient appointment within two weeks of arrival at the destination. Refer to policy 1.263 *Medical Holds*.

4.4 Transport of Young People by the Community Integration Team (CIT)

Transport can be provided by the CIT to assist young people to attend initial or follow up appointments following release from custody. This may be from their home or from the Youth Justice Community office. Transport will be provided as a last resort only, as it is the responsibility of the supervising Youth Justice Case Worker or parent/carer to arrange on-going transport to appointments.

The CIT must adhere to policy 5.110 *Work Health and Safety* in regard to transporting young people in a Network vehicle. The transport process is set out in The Community Integration Team (CIT) Operational Guidelines and as per local YJNSW policy.

A risk assessment must be conducted by using the JUS060.460e *CIT Transporting Patients* self-print form. The form must be completed on the initial transport and should be considered for use for subsequent transports where clinicians consider it appropriate to reassess the risk of a young person.

5. Related Documents

Legislations	*Nil*
Justice Health NSW Policies, Guidelines and Procedures	1.075 *Clinical Handover* 1.111 *Court and Police Cell Complexes (Adults) Healthcare Responsibilities*

	1.235 *Health Problem Notification and Escort Form (Adolescents)* 1.252 *Access to Local Public Health Services* 1.263 *Medical Holds* 5.110 *Work Health and Safety* 6.049 *Medication Guidelines* 6.053 *Guidelines for the Management of Patients on Clozapine*.
Justice Health NSW Forms	JUS010.000e *Transfer In and Out Form (Adults)* JUS060.030 *Remote Site Assessment Criteria Checklist* JUS060.460e *CIT Transporting Patients* JUS130.455 *Adolescent Health - After Hours Medication* JUS200.000 *Medical Certificate: Non-Attendance at Court* JUS200.035 *Medical Certificate: Consideration for Special Transport* JUS200.085 *Request for Unplanned Transfer for HealthCare*
NSW Health Policy Directives and Guidelines	PD2019_020 *Clinical Handover*
Other documents and resources	*How to Guide - Packing Coolers Strive-for-5-guidelines* Offender Management and Programs, CSNSW – Inmate Classification and Placement Section 23 *Transfer of Inmates*

Appendix 1 – Descriptions for Corrective Services NSW of the medical conditions that require special transport

Descriptions of the medical needs of the patient for special transport assist with the selection of vehicles by Corrective Services NSW.

The range and function of vehicles that may be used to transport patients is not static and selection by name of a vehicle by the Network the Network staff may not be the most suitable vehicle available to meet the special transport needs.

Recommended vehicle type is better requested by describing the health condition that precludes use of the vehicles that would be usually used.

Information that will assist the selection of the most suitable should include:

- Pregnant: recommend van or car and enter expected date of birth (Due Date)
- Bariatric Van
- Wheelchair accessible van
- Mobility disabled requires assistance to access vehicle
- Space to accommodate out-stretched limb; unable to bend leg
- Ergonomic seat: requires support for injury/ pain management
- Claustrophobia requires van or car is not enclosed: access to window or access to window in an individual compartment
- Medical condition that may require diversion to a hospital during transport for emergency treatment
- Medical condition that requires frequent access to toilet facilities
- Forward facing seat; motion sickness/ mental state results in confusion/disorientation