PAEDIATRIC EMERGENCY TRANSPORT

How it can be integrated with the PICU and Paediatric Emergency Departments

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Integration

- No transport service operates in a vacuum
- Hospital as a whole
- Regional or national health system as a whole
- Administrators and controllers of funding
- Responsibility
- Equal opportunity
Competing interests

- Territorial behaviour
- Interest in own career
- Own clinical interests
- Group behaviour
- Goodwill
Varieties of PET service

- Free – standing: PETS alone
- Free – standing: PETS + NETS
- Attached to a PICU
- Attached to a PED
- Attached jointly to a PICU and a PED
Free – standing PETS

• Autonomy
  • Funding and fund-raising
  • Staff
  • Protocols
  • Transport – related equipment and methods
• More than one hospital
  • Neutrality
• Disconnection
  • Communication
  • Staff rotation
Combined NETS and PETS service

Scale
- Experience
- Training
- Outreach
- Backup services
- Research

Convergence of methods

Intensive care focus
What PETS functions can be integrated with PICU or PED?

- Staffing: rotation
- Staff education
- Triage + bed-finding
- Telemedicine
- Advice service
- Outreach teaching
- Prevention role: advocacy
- Location
- Administrative services
Staffing

- Rotation
- Latest ideas and techniques
- Wider experience
- Attract staff
- Senior and junior
- Awareness of concerns and problems
- Large pool of accredited staff
Staff education

- Shared
- Separate but available
- Coordination of timetables
- Individual conditions
- General
- Mortality and morbidity
- Radiology review
- Ethics
Outreach education

- Coordination
  - Avoid conflicting ideas
  - Avoid duplication and wasted effort
- Face – to – face
  - More sessions
  - Greater range of expertise
  - Wider audience over wider area
- Teleconference sessions
Triage

- PED
  - Experience
  - Face – to – face
  - Wide range of illness
- Telephone triage
  - More severely ill
  - Senior transport staff
Telemedicine

Static: e-mail
  ● X – rays
  ● CT
  ● ECG
  ● Digital image of rash

Webcam
  ● Neurology
  ● Respiratory signs
  ● Trauma
  ● Physiological observations

Privacy
  ● De-identify
Bed finding

- Several paediatric hospitals
- Central co-ordination
- Reporting: website
  - Availability
  - Demand
Telephone Advice Service

- PEDs
  - Parents
  - Community doctors + health care workers
- PETS
  - Severely ill
  - Assessment + resuscitation
  - Paediatricians, community doctors
- Cross-over
- Co-ordination
- Central triage point
- Telephone conference
Factors against co-ordination with PICU

- Specialization of PICUs
  - Cardiac
  - Neurosurgical
  - Trauma
- Very high volume PETS
  - Less-ill children
Factors against co-ordination with Paediatric Emergency Department

- Special needs
  - ECMO
- Special PICU interests
- Tertiary transports
- ? Combined NETS / PETS service
SUMMARY

- Health delivery as a whole
- Co-ordination with PICU and PED
- Co-ordination of bed-finding
- Triage
- Staff rotation
- Staff education
- Outreach education
DISCUSSION