

Service Specification for Non-Emergency Transport Providers

Summary The purpose of this policy is to ensure standards for patient transport vehicles, equipment and staff are met, to provide safe service for patients using non emergency Patient Transport Services. This policy also provides information to ensure the correct non-emergency transport provider is booked to manage the patient's clinical needs.

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Service Specifications for Non-Emergency Patient Transport Providers

POLICY STATEMENT

NSW Health is committed to ensuring the highest standards of non-emergency patient transport. This Policy aims to ensure that all non-emergency patient transport providers across NSW meet consistent service specifications that support safe, timely and reliable patient transport by means of appropriate vehicles, equipment and staff.

SUMMARY OF POLICY REQUIREMENTS

Non-emergency patient transport providers assist patients who cannot use, or have difficulty using public and/or private transport, and whose clinical acuity does not require a NSW Ambulance emergency vehicle.

Non-emergency patient transport occurs primarily between NSW public health facilities by means of road or air transfer; utilising appropriately equipped vehicles or fixed-wing aircraft. Suitably trained and skilled staff support each transport booking to ensure patient safety and wellbeing.

There are various providers delivering non-emergency patient transport across NSW. All non-emergency patient transport providers must gain authorisation from the Secretary of NSW Health under Section 67E of the *Health Services Act 1997* (NSW) to undertake non-emergency patient transport in NSW.

The Policy outlines minimum service specifications for all non-emergency transport providers in NSW including; vehicle and staff specifications, patient care requirements and clinical governance and record keeping specifications.

Vehicle specifications include equipment, maintenance and communication technology requirements.

Staff specifications including required training, skills and professional registration for the type of transport booked, as well as conduct requirements aligned with NSW Health CORE values.

Patient care requirements are in accordance with patient acuity, additional health needs, preferences and comfort.

Clinical governance specifications include infection prevention, escalation protocols and handover requirements.

Record keeping specifications include patient and staff records, incident management and complaint management protocols.

Vehicles and staff allocated to non-emergency patient transport should be determined based on the patient's clinical condition and requirements during transport.

The vehicle used in non-emergency patient transport must follow minimum specifications which enable the transportation of a patient in a safe, comfortable, and clinically appropriate environment. Staff assigned to each transfer must meet the minimum training, skills and professional registration requirements related to the type of transport booked and act in a manner consistent with the NSW Health CORE values.

Clinical governance requirements are to be in place to ensure staff and patient safety. Non-emergency transport providers must also adhere to requirements for recordkeeping, incident, and complaints management which are open to audit and inspection on request to ensure compliance with the policy.

REVISION HISTORY

Version	Approved By	Amendment Notes
PD2024_008 February 2024	Deputy Secretary System Sustainability and Performance	Minor amendments to Sections 1.3, 5.1.2 and 5.2.6 to provide clarity to private providers on mental health transfers (involuntary) which may require additional approval from NSW Health.
PD2023_013 May-2023	Deputy Secretary, System Sustainability and Performance	Changes include: <ul style="list-style-type: none"> Policy name change to reflect service provided to patients Added provider definitions Added reference to fixed-wing transport and Ambulance referred transfers.
PD2018_002 January-2018	Deputy Secretary, Governance, Workforce and Corporate	Revision. Inclusion of Paramedic as specialist escort for Class B and C patients.
PD2014_013 May-2014	Deputy Secretary, Governance, Workforce and Corporate	New policy.

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1. BACKGROUND

Non-emergency patient transport is provided by a variety of transport operators to assist patients who cannot use or have difficulty using public and/or private transport, and whose acuity does not require the use of a New South Wales (NSW) Ambulance emergency vehicle.

All non-emergency patient transport operators must gain authorisation from the Secretary of NSW Health under Section 67E of the Health Services Act 1997 (NSW) to undertake non-emergency patient transport in NSW.

1.1. About this document

This document outlines the minimum service requirements for providers approved by NSW Health to support the provision of non-emergency patient transport.

The aim of these minimum service requirements is to ensure consistency across NSW so that patients are transported in a safe, timely and reliable manner by means of appropriate transport vehicles, equipment, and staff.

1.2. Key definitions

Non-Emergency Transport Providers	
Patient Transport Service (PTS)	Principle public service provider operated by HealthShare NSW (HSNSW), providing non-emergency transfers to patients in scope for transport.
Private Operators	Private operators, approved by NSW Health to facilitate non-emergency patient transport in the private market in accordance with the conditions specified in their consent.
PTS Partner Providers	Private service providers sub-contracted and managed by PTS. These providers are appointed through the NSW Government tender process.
Regional Transport Satellites	Transport managed by Local Health Districts (LHDs) who utilise HSNSW booking and scheduling system.
NSW Ambulance (NSWA)	Delivers mobile health services and providing high quality clinical care, rescue and retrieval services to those people of NSW with emergency and medical health needs. NSWA provides transport for Class A patients and may provide non-emergency patient transport, subject to capacity/availability.

Staff Classifications

Enrolled Nurse (EN)	An Enrolled Nurse is a professional in the field of Nursing who is registered with AHPRA (without limitations or conditions on
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	medication administration) and practices under the Nursing and Midwifery Board of Australia (Division 2).
Motor Vehicle Driver (MVD)	<p>A Motor Vehicle Driver is an employee who has successfully completed the necessary and relevant training and work experience as determined by the employer.</p> <p>This category of employee is predominately responsible for driving the patient transport vehicle.</p>
Paramedic	A Paramedic is a professional in the field of Paramedicine who is registered with Australian Health Practitioner Regulation Authority (AHPRA) and practices under the Paramedicine Board of Australia.
Patient Transport Officer (PTO)	A Patient Transport Officer is an employee who has successfully completed the necessary and relevant training and work experience, as determined by the employer, to become a Patient Transport Officer and who is appointed to an approved Patient Transport Officer position.
Registered Nurse (RN)	A Registered Nurse is a professional in the field of Nursing who is registered with AHPRA and practice under the Nursing and Midwifery Board of Australia (Division 1).
Trainee Patient Transport Officer (T-PTO)	A Trainee Patient Transport Officer is an employee who is undertaking the necessary and relevant training and work experience to become a Patient Transport Officer and who is appointed to an approved Trainee Patient Transport Officer position.

Transport Classes

Class A	Life threatening emergencies, unstable patients and patients who require a time critical transport by the NSW Ambulance Service, Newborn Emergency paediatric Transport Service (NETS) or LHD approved medical retrieval services.
Class B – Class D	People who require transport to, or from, a health facility such as a hospital, rehabilitation unit or aged care facility. Patient must be “Between the Flags” based on requirements outlined in ‘PD2020_018 Recognition and Management of Patients who are Deteriorating’.
Class E	Self-caring and low acuity patients who would generally utilise taxis, community transport and private vehicles.

1.3. Legal and legislative framework

All NSW non-emergency transport operators must adhere to the specifications outlined in the policy directive.

Any NSW health entity seeking to engage a private provider of non-emergency transport, must ensure the third-party provider meet the requirements of this policy.

The Policy Directive complies with the obligations under the following NSW Government and NSW Health Cluster policies and guidelines.

All non-emergency transport operator staff must adhere to the Standards, Policies, Guidelines and Legislation listed within the below reference list.

Applicable Australian Standards

Title
AS/NZS 4535:1999, Ambulance Restraint Systems
National Safety and Quality Health Service (NSQHS) Standards
Poisons Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) 2022

Legal and legislation documents

Title
Privacy Act 1988 (Cth)
Therapeutic Goods Act 1989 (Cth)
Poisons and Therapeutic Goods Act 1966 (NSW)
Poisons and Therapeutic Goods Regulation 2008 (NSW)
Health Records and Information Privacy Act 2002 (NSW)
Privacy and Personal Information Protection Act 1998 (NSW)
Mental Health Act 2007 (NSW)
Health Services Act 1997 (NSW)
Crimes Act 1900 (NSW)
Drug misuse and Trafficking Act 1985 (NSW)
Work Health and Safety Act 2011 (NSW)

2. NON-EMERGENCY TRANSPORT PROVIDERS

This policy applies to transport providers who can provide non-emergency patient transport services across NSW. These transport providers are made up of PTS, PTS Partner Providers, Private Operators, Regional Transport Satellites and NSW Ambulance.

2.1. NSW Health Non-Emergency Transports

PTS is responsible for providing non-emergency patient transport between public hospitals and health facilities in greater metropolitan Sydney and parts of regional and rural NSW. The service is also responsible for the coordination of non-emergency fixed wing transport in NSW Health. PTS Partner Providers are used to support the provision of road and fixed wing services.

Non-emergency patient transport within some parts of NSW is managed locally, facilitated by Regional Transport Satellite operators, and NSW Ambulance (NSWA).

Non-emergency transport providers sub-contracted by NSW Health (e.g., PTS Partner Providers) are subject to requirements set out in this document, in addition to their contractual obligations.

2.2. Non-NSW Health Non-emergency Transports

Private Operators with consent from NSW Health Secretary or delegate may facilitate non-emergency patient transport for non-NSW Health contracted work.

PTS are not responsible or liable for the services provided outside of their contracted arrangements. On occasion PTS can service private facilities, however, do so under no formal contractual obligation.

NSW Health LHDs must meet the requirements of NSW Health Policy Directive *NSW Health Procurement (Goods and Services) Policy* ([PD2023_028](#)) to engage in contracts with Private Operators to provide non-emergency patient transport.

All contracts with sub-contracted arrangements must be approved by NSW Health.

2.3. Booking Management of Non-emergency Transports

Non-emergency transport providers must be able to process incoming non-emergency patient transport bookings, answer general inquiries with a customer service focus and schedule all requests for non-emergency patient transport.

Bookings should only be accepted if the information provided meets the minimum requirements for determining suitability for non-emergency transport.

The booking system used for coordinating and dispatching on behalf of NSW Health must be able to allocate bookings directly to crews operating transport vehicles via a mobile data terminal or appropriate device.

Dispatching services must be available during all operating hours. Technical and after-hour management support should also be available.

3. TRANSPORT AND VEHICLE SPECIFICATIONS

3.1. Vehicle Interior, Mechanical and Livery

3.1.1. Interior of road vehicles

Non-emergency transport providers must ensure that:

- Vehicles and equipment are clean, hygienic, and in good working order and are capable of being cleaned as per NSW Health Policy Directive *Cleaning of the Healthcare Environment* ([PD2023_018](#)).
- The service should have capacity to transport one or more stretcher patients, and this may include dual stretchers and/or patients who can be seated with assistance.
- Vehicle configuration has sufficient seating in the patient compartment to allow for at least one staff, and for appropriate seating for all persons travelling in the vehicle.
- Vehicle interiors allow the patient to be observed at all times and monitored if required by staff undertaking the transport.
- Vehicle interiors have heating and air-conditioning in both the front and rear cabins sufficient to enable patient comfort.
- Vehicle interiors have adequate interior lighting to provide safe patient care at all times within all areas of the vehicle. Additionally, vehicle interiors must have the ability to adjust lighting from both the patient and driver compartments.
- Where the transport of a humidicrib is required, appropriate power supplies must be fitted.
- Where mobile phones are the primary source of communication, vehicles must possess 'hands free' technology consistent with Transport for NSW requirements.
- Vehicles must have windows tinted in the patient cabin consistent with Australian Standards or appropriate window coverings to ensure patient privacy.
- In all stretcher vehicles, a 240v general electrical socket outlet (General Purpose Outlet - GPO) is required. Certificates of Compliance will be required for each vehicle.
- Stretcher vehicles should include a standard vehicle entry step, in conjunction with an electric or manual step, to aid entry and exit for ambulant patients. LED step lights consisting of anti-slip material should be installed to operate when a patient is entering/exiting the vehicle.
- Vehicles that require a step-up entry, should have appropriate grab rail installed to minimise the risk of a patient falling.
- Clinical equipment and consumables are stocked to the levels specified in "Appendix A – Vehicle Clinical Equipment". Stock checklist or auditing system must be in place to ensure required volumes of in-date stock are carried.

3.1.2. Mechanical requirements

There must be a provision for an alternate method to start the vehicle in the event that the main vehicle battery is depleted. For example, an auxiliary battery should be fitted.

Each vehicle is required to have a spare tyre consistent with the design specifications of the vehicle.

3.1.3. Exterior of vehicles and livery

Non-emergency transport provider vehicles **must not**:

- Display the word “ambulance” or any name, title, or description to imply an association with NSW Ambulance, unless such an association exists.
- Display the word “ambulance” on any vehicle that is not owned or operated by NSW Ambulance.
- Display the word “paramedic” on any vehicle that is not owned or operated by NSW Ambulance.
- Display the logo or images of NSW Ambulance, unless there is an association with NSW Ambulance.
- Have installed any warning beacon light (flashing red or blue lights – with exception of NSW Ambulance) other than an amber coloured beacon. Note however that the installation of a warning beacon is not a service specification.
- Have installed an audible siren on any vehicle that is not owned or operated by NSW Ambulance

3.2. Vehicle Maintenance and Equipment

Non-emergency transport providers must ensure:

- Vehicles are maintained to the manufacturer’s requirements
- Vehicles are currently registered in the appropriate category with NSW Roads and Maritime Service (RMS).
- Vehicles are always in a roadworthy condition to carry out the required work.
- An annual maintenance schedule is performed so that all equipment defined in “Appendix A – Vehicle Clinical Equipment” is kept in good operational working order, in accordance with the manufacturers' specifications.
- Access to a roadside assistance program, to ensure that any mechanical issue encountered in the field can be attended to 24 hours across 7 days.
- Retain and update an accurate record of all maintenance and repairs to vehicles and equipment for the duration of the contract as per NSW State Archives & Records – Fleet Management: <https://www.records.nsw.gov.au/recordkeeping/rules/gdas/ga28-part-1/fleet-management>

- Vehicles must not exceed a fleet age of 5 years from date of first registration, unless new vehicle warranty exceeds the 5 year period, in which case the warranty timeframe applies. In the case where vehicle age exceeds 5 years (or the warranty period) a risk assessment determining the suitability of the vehicle to remain within the fleet must be performed and approved. Within NSW Health, risk assessment approval is given by the CE or delegate. For Private providers, risk assessment approval is given by the position who is authorised to sign contracts with NSW Health or seeks NSW Health Secretary's consent to operate.

3.3. Vehicle Equipment

3.3.1. Standard equipment

The non-emergency patient transport provider is required to carry the equipment defined in "Appendix A – Vehicle Clinical Equipment" of this policy, and the equipment is required to be maintained in working order.

A non-emergency patient transport provider may use any additional health equipment, providing it is applicable to the scope of transport (Class B - Class D). The scope of the transport will be supplied by the health service from which the patient is being transported, according to the patient's clinical requirement and appropriate staffing requirement.

A non-emergency patient transport provider must ensure that all 240v electrical equipment is adequately tagged and rechargeable devices are charged to meet operational use during rostered hours.

3.3.2. Vehicle and equipment restraints

Non-emergency transport providers are required to ensure patient transport vehicles are compliant with the Australian and New Zealand Standard (AS/NZS 4535:1999) Ambulance Restraint Systems. This Standard provides the framework that applies to motor vehicles specifically designed as, or modified and converted into, ambulances for the transportation of occupants and equipment. The Standard specifies the requirements for restraining equipment and occupants sharing the same interior space.

Australian and New Zealand Standard (AS/NZS 4535:1999) Ambulance Restraint Systems defines an ambulance as "a vehicle that has been designed or modified and equipped to attend to, transport or provide medical treatment to occupants."

3.3.3. Patient Transport Stretchers

All stretchers used by non-emergency patient transport providers must be TGA approved. An engineer's certificate is required for installation of stretchers or where stretchers are removed and reinstalled due to vehicle reconfiguration. Stretchers must be serviced regularly, and records of stretcher service must be kept, as stated in section 3.2.

The foam integrity and cushioning responsiveness of stretcher mattresses should be routinely checked to ensure patients are being transported on a surface that does not increase the risk of pressure injury during transport.

3.3.4. Communication and navigation devices

Non-emergency transport providers must ensure a primary source of communication for operational staff is available, to ensure a successful communication interface is achieved and maintained.

The communication device must be able to contact NSW Ambulance (via “triple-zero” or another means) at all times, for the primary purpose of clinical escalation.

An approved Mobile Data Terminal (MDT) and associated equipment is required to be carried by all PTS Partner Provider vehicles. MDT’s have GPS and navigational functionality.

4. TRANSPORT STAFF SERVICE SPECIFICATIONS

4.1. Staff Classification

Non-emergency transport providers must ensure that their staff are appropriately trained to undertake duties in accordance with their staff classification listed below:

- MVD
- T-PTO
- PTO
- Paramedic
- EN
- RN

4.2. Training, Skills and Professional Registration

Non-emergency transport providers must ensure staff follow the minimum requirements and pre-employment checks as per NSW Health Policy Directive *Recruitment and Selection of Staff to the NSW Health Service* ([PD2023_024](#)). Staff must meet NSW Health education and training matrix or equivalent for individual roles as per -

<https://www.heti.nsw.gov.au/education-and-training/my-health-learning/mandatory-training/matrix-and-related-documents>.

Staff must maintain skills, training and education as required for their role, with records that can be produced to NSW Health on request.

Staff are required to have an appropriate Australian driver’s license relevant to the vehicle being operated and a satisfactory driving record (no cancellations/suspensions within the last 2 years, no more than six demerits incurred in the last three years)

Staff are required to notify the provider if there is a change to the status of any of the above. Providers must notify NSW Health of any conduct proceedings which are undertaken under the National Law with respect to any of the provider’s staff.

Additional Staff Requirements

Classifications	Additional requirements
MVD	Nil
PTO T-PTO	Nil
Paramedic, EN, RN	Maintain a valid AHPRA registration ensuring the organisation is notified, should condition, cautions or notations be applied.

4.3. Staff Identification and Uniform Requirements

Non-emergency transport providers are to ensure that staff display photo identification confirming they are employees of their respective organisation. Staff must also have access to their work areas whilst maintaining the security of both the person and the property by means of an appropriate access card or equivalent.

Staff must carry a valid Australian driver's license and be able to produce this if required.

An appropriate and clean uniform is always worn whilst on duty as per NSW Health Policy Directive *Uniforms Policy* ([PD2019_012](#)) or equivalent.

4.4. Staff Characteristics

Staff must act in a manner consistent with the [NSW Health CORE values](#) (Collaboration, Openness, Respect and Empowerment) and demonstrate the following characteristics:

- Fluency in both written and spoken English
- Adherence to road rules and safe driving practices
- Meet the requirements of NSW Health Policy Directive *Recruitment and Selection of Staff to the NSW Health Service* ([PD2023_024](#)). This includes but is not limited to valid working with children check (WWCC) and meeting citizenship/residency considerations.
- A high level of personal hygiene as per NSW Health Policy Directive *Uniforms Policy* ([PD2019_012](#)) or equivalent.
- Act professionally always and adhere to the NSW Health Policy Directive *NSW Health Code of Conduct* ([PD2015_049](#))
- Be culturally aware and respectful as described in NSW Health Respecting the Difference Being the Difference (or private equivalent) program.
- Adhere to worker obligations as per SafeWork NSW
- Excellent customer service skills
- Demonstrates care, compassion, dignity, and respect for all patients

5. STANDARD CLASSES OF TRANSPORT

The allocation of an appropriate vehicle and staff for any specific non-emergency patient transport situation is primarily dependent on the patient's clinical condition and requirements during transport. Transport is undertaken by Patient Transport Officers, Paramedics, Enrolled Nurses and Registered Nurses.

5.1. Patient Acuity and Transport Classes

All non-emergency patient transport bookings require assessment by a Registered Nurse or a Medical Practitioner or a NSW Ambulance Paramedic for clinical suitability prior to making a booking.

There are five classes of transport categorised from A to E. Once a booking is made, Patient Transport Service must be notified of changes to patient condition or acuity, and details must be updated in the transport booking. LHD staff must monitor pick up timeframes to ensure the planned pick up remains clinically suitable for the patient. If the planned pick-up time places the patient at clinical risk of deterioration, the LHD must notify the transport provider and ensure a clinically suitable plan is in place for expedited transport. If non-emergency patient transport is no longer appropriate, the booking will be cancelled, and the applicant will need to book with the appropriate transport provider.

Transport Classes

Classifications	Non-emergency transport suitability
Class A	Out of scope
Class B – Class D	In scope
Class E	Out of scope

5.1.1. Class A Transports

Patients who require active management, or intervention during transport. These patients are out of scope for non-emergency patient transport providers and must be booked directly with the appropriate transport service (NSW Ambulance or appropriate medical retrieval service).

5.1.2. Class B Transports

The patient has an illness or injury that may require active treatment or monitoring during transfer and requires appropriate staff to attend to the actual/potential clinical needs and ongoing continuity of care.

Patient Acuity

This class of transport involves the transportation of a patient to whom the following apply:

- Requires ongoing monitoring and/or active treatment; may include cardiac, stable involuntary mental health, maternity, neonate and paediatric; and

- Has been assessed by a Registered Nurse or a Medical Practitioner as being stable, Between the Flags or has an altered calling criteria and a low risk of deterioration during transport.

Minimum Staffing Requirements - Two staff, at least one of which must be RN or Paramedic

Two (2) staff are required to undertake this class of transport

- Driver – Motor Vehicle Driver (MVD), Patient Transport Officer (PTO) or Trainee Patient Transport Officer (T-PTO) and
- Clinician – a Registered Nurse or a Paramedic with appropriate qualifications and competence to manage the patient's clinical condition.

The vehicle configuration must have seating in the patient compartment to allow for at least one staff to provide patient care and monitoring throughout the journey.

5.1.3. Class C Transports

The patient has an illness or injury that is unlikely to require active treatment during the transport, documented patient observations may be required.

Patient Acuity

This class of transport involves the transportation of a patient to whom the following apply:

- Has been assessed by a Registered Nurse, Medical Practitioner or NSW Ambulance as being stable, having a condition Between the Flags or has an altered calling criteria and a low risk of deterioration during transport.
- A patient requiring transport who is being cared for under a voluntary mental health order or involuntary under community treatment order (CTO).

Minimum Staffing Requirements - Two staff, at least one of which must be RN, EN or Paramedic

Two (2) staff are required to undertake this class of transport

- Driver- Motor Vehicle Driver (MVD), Patient Transport Officer (PTO) or Trainee Patient Transport Officer (T-PTO); and
- Clinician - One (1) of either a Registered Nurse, Paramedic or Enrolled Nurse

The vehicle configuration must have seating in the patient compartment to allow for at least one staff to provide patient care and monitoring throughout the journey.

5.1.4. Class D Transports

The patient has an illness or injury that does not require active treatment during transport and requires appropriate staff to attend to actual/potential clinical needs. The patient has also been assessed by a Registered Nurse, Medical Practitioner or NSW Ambulance as having a low risk of deterioration during transport.

Minimum Staffing Requirements – two staff with PTO, EN, RN or Paramedic

Two (2) staff are required to undertake this class of transport

- Driver – Patient Transport Officer (PTO), Motor Vehicle Driver or Trainee Patient Transport Officer (T-PTO); and
- Treating staff member - One (1) of either Patient Transport Officer (PTO), Registered Nurse, Paramedic or Enrolled Nurse.

The vehicle configuration must have seating in the patient compartment to allow for at least one staff member to provide patient care and monitoring throughout the journey.

5.1.5. Class E Transports

These patients do not need a stretcher for transport and are of low acuity and do not require active treatment or monitoring during transport. These patients are outpatients or fit-for-discharge by means of public/private community transport or family and friends.

Class E transfers are out of scope for PTS. There are no minimum staffing requirements associated with Class E transports.

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Transport Class Summary

Non-emergency patient categories				
<p>CLASS A</p> <p>Active monitoring, management and/or intervention</p> <ul style="list-style-type: none"> Patients requiring intravenous (IV) inotropic or IV vasodilators during transport Patients who have arterial line insitu Acute spinal cord injuries or prevention of same, requiring full spinal precautions Patients who have mental health conditions requiring mechanical or chemical restraint during transport Concern of patient deterioration <p>OUT OF SCOPE FOR non-emergency patient transport.</p>	<p>CLASS B</p> <p>Ongoing monitoring and/or active treatment or continuity of care</p> <ul style="list-style-type: none"> Stable, involuntary, mental health patients. Patient is expected to remain within 'Between the Flags' criteria Observation and monitoring of a stable cardiac monitored patient Condition is not life threatening and not likely to become life threatening during transport. <p>REQUIRES (2) STAFF, AT LEAST (1) BEING AN RN OR PARAMEDIC</p>	<p>CLASS C</p> <p>Supervision required with no active treatment</p> <ul style="list-style-type: none"> Patient is expected to remain within 'Between the Flags' criteria May require equipment monitoring (with the exception of cardiac) Observation and monitoring of an intravenous infusion Voluntary mental health patients or those with CTO. Condition is not life threatening and is not likely to become life threatening during transport <p>REQUIRES (2) STAFF, AT LEAST (1) BEING AN RN, PARAMEDIC OR EN (EN without limitations on medication endorsement)</p>	<p>CLASS D</p> <p>Supervision required with no active treatment</p> <ul style="list-style-type: none"> Patient is expected to remain within 'Between the Flags' criteria Behaviourally stable Condition is not life threatening and is not likely to become life threatening during transport. Patients requiring Oxygen therapy at 1-4LPM via nasal prongs. <p>ANY COMBINATION OF PTO, EN RN or Paramedic</p>	<p>CLASS E</p> <p>Self-Caring – Low acuity requiring no or minimal supervision</p> <ul style="list-style-type: none"> Outpatient and discharge transports not requiring stretcher Outpatients and discharge transports where public/private community transport or family and friends can be utilised <p>OUT OF SCOPE FOR non-emergency patient transport.</p>
Patients have been assessed by a Registered Nurse or Medical Practitioner as being stable, Between the Flags or has an altered calling criteria and a low risk of deterioration during transport				

5.2. Additional Transport Considerations and requirements

5.2.1. Patients with a carer or support person

Non-emergency transport providers should endeavor to accommodate requests for carers or other support persons to travel with patients.

Requests should be noted at the time of booking and an appropriate vehicle allocated. Any clinical qualification the carer or support person has will not be considered as a substitute to the required level of clinical staffing required for the class of transport.

5.2.2. Patients' mobility

Mobility needs must be advised at the time of booking. Transport providers must ensure appropriate transport resources are allocated to support the mobility requirements of the patient. Care provided during transport should include strategies and transport options to reduce the risk of falls and pressure injury. Passengers who are identified as at risk of falls and pressure injury must have appropriate injury prevention strategies actioned during transport.

5.2.3. Bariatric patients

Bariatric patients are those whose weight exceeds recommended body mass index guidelines, and where body size restricts mobility, health or access to available services and equipment.

The transfer of bariatric patients must be consistent as per guidelines 'GL2018_012 – Work Health and Safety - Management of Patients with Bariatric Needs'.

5.2.4. Paediatric patients

Paediatric patients are children under 16 years of age. Transporting non-emergency paediatric patients is within the scope of non-emergency transport providers. Paediatric patients must be transported using an approved child restraints according to Transport for NSW guidelines.

Considerations for Neonatal patients under 3kgs within non-emergency transport, NETS non-emergency transport is an option within Sydney metropolitan area, Fixed wing is currently an option in regional and rural long distant transports.

Neonates who are going for higher level care and are 28 days or under must be triaged by NETS and then referred to the appropriate transport provider by NETS.

Considerations to keep parent and child together during transport should be facilitated where possible.

5.2.5. Palliative and end of life care

Palliative care is an approach that improves the quality of life of patients and their families facing the problems associated with life-threatening illness.

End of life describes when a patient is clearly approaching the end of their life and are living with/impaired by a life-limiting illness. This is the patient's last weeks or days of life when deterioration is irreversible.

A stable (not end of life) patient who is being treated by a palliative care team may be suitable to multi-load or transfer seated. Their dignity and independence should be respected with an appropriate transport resource allocated. Patients at the end of life should be transported as a solo patient.

Appropriate discharge planning for end of life transports should involve partnership planning between LHDs and non-emergency transport provider to respect patient and family preference and any cultural requirements.

A resuscitation plan should be in place for all end of life patients requiring non-emergency transport services. This is preferable for all patients undergoing palliative care. Information regarding resuscitation plans can be found in PD2014_030 – Using Resuscitation Plans in End of Life Decisions. A copy of any resuscitation plan should be provided for transport.

5.2.6. Mental Health Transfers

Mental health transfers refer to the safe transportation of patients with a mental health diagnosis or behavior disturbance symptoms.

The transfer of mental health patients must be consistent as per the Mental Health Act 2007 in accordance with Division 3 Transfer of patients. Refer to this legislation for further details of treatment and management of mental health patients.

Private providers who are approved to transport Class B patients are approved for the purposes of section 81(1)(d) of the Mental Health Act 2007, in accordance with section 45 of the Mental Health Regulation 2019. This authorises the provider to transport patients who are detained under the Mental Health Act 2007.

5.2.7. Ambulance referred transfers

Ambulance referred transfers are transfers of patients who have been identified as suitable for transfer with non-emergency transport providers. These patients must be clinically suitable, low acuity and require non-emergency transport to allocated wards, Palliative Care Units (PCU) or Emergency Departments (ED).

The acceptance and facilitation of transport referrals by NSW Health aims to reduce the burden of clinically stable transport on NSW Health resources to optimise capacity and timeliness for high priority, emergency transports.

Robust processes are required to ensure patients are clinically suitable and not double-booked between agencies. Clinical information is to be communicated appropriately.

5.2.8. Long distance transfers

Long distance transport is greater than 250km and/or where road travel time is greater than 3 hours one-way. Long distance transports should be assessed for clinical suitability and financial considerations regarding allocation of transport type (i.e. Road vs Air) are considered.

Patients on long distance transfers are required to have pressure injury prevention strategies in place during the journey, appropriate to their clinical requirements.

Long distance transfers must ensure adequate sustenance according to clinical nutritional requirements are met for the journey. Food or drink requirements for transport of the patient should be arranged with the sending facility.

5.2.9. Fixed-wing transfers

Fixed-wing transfers are non-emergency transports which are undertaken by aircraft. HSNSW are responsible for fixed-wing transfers from public hospital facilities (with exception of NSW fixed-wing transfers).

Patients that require transport of greater than 250 km or where road travel time is greater than 3 hours can be considered for fixed-wing transfers.

The decision to transport a patient by fixed-wing must be determined based on clinical requirements, with financial, environmental, and patient experience factors considered.

Fixed wing transport providers have a unique set of requirements outlined by Civil Aviation Safety Authority (CASA). The appropriateness to transport a patient at altitude, escalation processes, weather, pilot hours, luggage requirements, and the ability to provide care in a confined space, are key considerations for fixed-wing transfers.

6. CLINICAL GOVERNANCE SERVICE SPECIFICATIONS

6.1. Clinical Escalation Protocols

Should a booking be made for a patient who is or becomes out-of-scope for non-emergency transport, a mechanism is required for escalation or redirection of the booking to the appropriate transport provider (e.g. NSW/NETS).

LHD staff must escalate and /or redirect the booking if the planned pick-up time for non-emergency transport places the patient at clinical risk of deterioration.

Processes should be in place for escalation and reallocation of bookings to an appropriate resource, should a patient be allocated to a crew that does not meet the clinical requirements for transporting that class of patient.

Non-emergency transport providers are required to have documented clinical escalation procedures to manage if a patient's condition deteriorates en route, or if they have concerns regarding the patient's clinical condition / care. To support these procedures, the service specifications include the requirement that:

- The non-emergency transport provider procedures are consistent with NSW Health Policy Directive *Recognition and Management of Patients who are Deteriorating* ([PD2020_018](#)).
- Each staff member is required to undergo suitable training regarding recognising and managing patients who are deteriorating and appropriate escalation.
- All vehicles are to be fitted with a suitable communication device enabling timely contact with emergency services via triple zero.

- All clinical incidents involving NSW Health patients should be documented in the NSW Health ims+ system. Non-NSW Health contract providers are responsible for managing and maintaining their own incident records and these records must be available to be produced upon request by NSW Health.

6.2. Patient Handover

Non-emergency transport providers are to ensure transport staff complete a structured patient handover process for inter-facility and diagnostic transports prior to transfer of care. This will ensure that the patient has timely access to safe and effective care.

Patient handovers are required to adhere to ISBAR principles outlined in the NSW Health Policy Directive *Clinical Handover* ([PD2019_020](#))

6.3. Infection Prevention & Control

Non-emergency transport providers must ensure that all transport staff:

1. Maintain an Infection Prevention and Control plan that is consistent with the following NSW Health Policy Directives:
 - *Cleaning of the Healthcare Environment* ([PD2023_018](#))
 - *Infection Prevention and Control in Healthcare Settings* ([PD2023_025](#))
 - *Occupational Assessment, Screening and Vaccination Against Specified Infectious Diseases* ([PD2023_022](#))
2. Clinical Excellence Commission (CEC), Jan 2020, Infection Prevention and Control Practice Handbook. Principles for NSW public health organisations
3. Clinical Excellence Commission (CEC), July 2022, COVID-19 Infection Prevention and Control Manual
4. Evidence and staff compliance with this plan must be able to be produced to NSW Health upon request.
5. Evidence of education and training records must be able to be produced to NSW Health on request.

6.4. Medication Management

Patients may carry their own medications on board provided they are clearly labelled as belonging to the patient and can be self-administered.

Where ongoing administration is required during transportation, non-emergency transport providers may carry medications, provided they have the appropriate:

- licensing requirements
- authority to carry and administer medications.
- documentation / record keeping
- policies and procedures to comply with:

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- Poisons and Therapeutic Goods Act 1966 (NSW)
 - Poisons and Therapeutic Goods Regulation 2008 (NSW)
 - Poisons Standard for the Uniform Scheduling of Medicines and Poisons (SUSMP) 2022
 - Therapeutic Goods Act 1989 (Cth)
 - Health Services Act 1997 (NSW)
 - Drug Misuse and Trafficking Act 1985 (NSW)
 - Crimes Act 1900 (NSW)
 - NSW Health Policy Directive *Blood Management* ([PD2018_042](#))

Non-emergency transport providers must provide NSW Health the documentation which applies the Authority to administer medications under the Poisons and therapeutic Goods act 1966.

A summary of medications administered to patients booked with PTS, must be produced to NSW Health upon request.

7. RECORD KEEPING FOR INDIVIDUAL TRANSFERS

A non-emergency transport providers must ensure that all records are accurately maintained, stored in a secure manner and retained for the relevant periods as per the NSW Health Policy Directive *Records Management - Department of Health* ([PD2009_057](#)).

All records will be open to audit and inspection by the relevant governing bodies.

7.1. Patient Records

Non-emergency transport providers in NSW must ensure that patient care records are kept for each patient transportation, and include the following information:

- patient's name
- patient's address
- patient's date of birth
- patient's gender
- Aboriginal and Torres Strait Islander origin
- the time and date of the patient's transport
- the reason for the patient's transport
- the patient's pick-up location and destination
- the names and designation of staff undertaking the patient's transport
- the class of patient being transported

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- any risks the patient may cause the transport crew, including safety risks, absconding, causing harm to others, causing harm to self, etc. The admission diagnosis of the patient and all relevant clinical details of the patient, including any co-morbidities.
 - the name of the registered nurse or medical practitioner that has assessed the patient condition as being Between the Flags and at low risk of deterioration during transport and therefore suitable for non-emergency patient transport
 - clinical observations and details of any monitoring or treatment provided to the patient during transportation

7.2. Staff Records

For each transfer the details of the staff facilitating the transfer include:

Staff Information

- Full name
- Job classification
- Payroll/ID number

Transport details

- Actual time of pick up
- Actual time of drop off
- Any relevant notes during transport (e.g.: patient deterioration, need for escalation etc.)

7.3. Incidents and Complaints Management

7.3.1. Incident Management

Non-emergency transport providers must have an Incident Management System (IMS) to record all incidents that is consistent with NSW Health Policy Directive 'PD2020_047– Incident management' whether during transport or otherwise. This system needs to be open and auditable, as well as providing a system for notification of all incidents, hazards and near misses; to capture both clinical and corporate incidents and risks.

Non-emergency transport providers are accountable for managing risk. This includes identifying risk and identifying inefficient or ineffective controls. Central to this is the management of health care incidents as they occur. Management of incidents requires that a process is undertaken to ensure any immediate risks that an incident may have identified are managed appropriately, and effective action is taken. All PTS Partner Providers must notify HSNHSW for patient safety incidents or near misses, these are entered and managed via ims+.

7.3.2. Complaints and Consumer Feedback Management

Non-emergency transport providers must have an Incident Management System (IMS) to record all complaints and consumer feedback that is consistent with NSW Health Policy Directive *Complaints management* ([PD2020_013](#)) whether during transport or otherwise. This system needs to be open and auditable.

Non-emergency transport providers are accountable for managing risk. This includes identifying risk and identifying inefficient or ineffective controls. A key component is the management of health care complaints as they occur. Management of complaints requires that a process is undertaken to ensure any immediate risks that a complaint may have identified are managed appropriately, and effective action is taken. All PTS Partner Providers must notify HSNSW of any complaints or consumer feedback.

7.4. Patient Rights and Information

Non-emergency transport providers must comply with the Health Privacy Principles within the Health Records and Information Privacy Act 2002 (NSW). This Act governs the handling of health information within the NSW public sector. Guidance on implementing and abiding by the information and health privacy act can be found through the following links.

- https://www1.health.nsw.gov.au/pds/Pages/doc.aspx?dn=PD2015_036
- <https://www.health.nsw.gov.au/policies/manuals/Pages/privacy-manual-for-health-information.aspx>

8. APPENDIX A – VEHICLE CLINICAL EQUIPMENT

Minimum equipment requirements per transfer

Item	Size	Quantity (minimum)
Airway Equipment		
Oxygen supply and outlets	Fixed in vehicle	2
Fixed oxygen flowmeter		2
Portable oxygen bottles		2
Resuscitator	Paediatric	1
Resuscitator	Adult	1
Resuscitator Mask	Small	1
Resuscitator Mask	Medium	1
Resuscitator Mask	Large	1
Oropharyngeal Airway	80 mm	1
Oropharyngeal Airway	90 mm	1
Oropharyngeal Airway	100 mm	1
Nasal Prongs		2
Oxygen Mask	Paediatric	2
Oxygen Mask	Adult	2
Oxygen Tubing		2
Nebuliser & Mask		1
Patient Handling Equipment		
Powered Stretcher	250kg safe work and 90cm width capability	1
Stretcher	160kg safe work capability	1
Carry/Stair Chair	160-220kg safe work capability	1
Carry Sheet		1
Slide Sheet		1
Walk Belt		1
Slide Board		1
Suction Equipment		
Suction Device - Yankeur	Paediatric	2
Suction Device - Yankeur	Adult	2
Y Suction Catheter	8 fg	1
Y Suction Catheter	10 fg	1
Y Suction Catheter	12 fg	1
Y Suction Catheter	14 fg	1

Service Specification for Non-Emergency Transport Providers

Item	Size	Quantity (minimum)
Portable Suction Device (Disposable) Canister		1
Fixed suction device		1
Suction Tubing		2
Monitoring Equipment		
SPO2 Monitor		1
Cardiac Monitor (for Class B resources)		1
Class B & C Vehicle Bag Equipment		
Glucometer Kit		1
Sphygmomanometer - Manual		1
Cuffs	Small	1
Cuffs	Large	1
Cuffs	Bariatric	1
Neuro Torch		1
Thermometer		1
Stethoscope		1
Cleaning and Infection Control Equipment		
Disposable Gloves	Various Sizes (XS-XXXL)	
Alcohol Based Hand Rub		
Cleaning agents and disinfectants		
Cleaning signoff equipment sheet		
Gowns or aprons		
Surgical masks and P2/N95 respirators		
Eye Protection		
Clinical and general waste bags		
Linen Equipment		
Bed/Stretcher sheets		2
Pillows		2
Pillowcases		2
Blankets		2
Miscellaneous Equipment		
Automated External Defibrillator (AED)		1
Emesis Bags		3

**Service Specification for Non-Emergency Transport
Providers**

Item	Size	Quantity (minimum)
Slipper pan		2
Urine bottle		2
Water Bottles		6
Seatbelt extensions		1
Child restraints for stretcher	>3 kg	1
Torch		1
Sharps container		1
Fire Extinguisher		1
Intravenous mounting for stretcher		1
Portable First Aid Kit		1