

WOMEN IN A&E/DAU REQUIRING TRANSFER TO WORCESTERSHIRE ROYAL HOSPITAL FOR FURTHER REVIEW/CARE STANDARD OPERATING PROCEDURE (SOP)

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Approved by:	Maternity Governance Meeting	
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Key Amendments

Date	Amendments	Approved by

Service / Department: Obstetrics

Reviewed By:	Lisa Gardner, Antenatal Clinic Manager, Alexandra Hospital
Approved By:	

Aim and Purpose of SOP

A culture of safety is built on high awareness of real and potential safety issues at all times and at all levels of organizational operations.

There is a requirement to transfer patients to other hospitals for the purposes of further investigations, procedures and clinical care and for specialist care that cannot be provided at the Hospital they have presented.

There is occasionally a requirement to transfer patients to WRH for the purposes of further investigations, procedures and clinical care and for specialist care that cannot be provided at the Redditch Maternity Hub. The Trust is required to have an approved process which describes the management of risks associated with the external transfer of patients to other acute hospitals.

This guidance aims to facilitate the safe, timely, comfortable transfer of patients.
It sets out the process requirements and staff responsibilities regarding the safe transfer of patients.

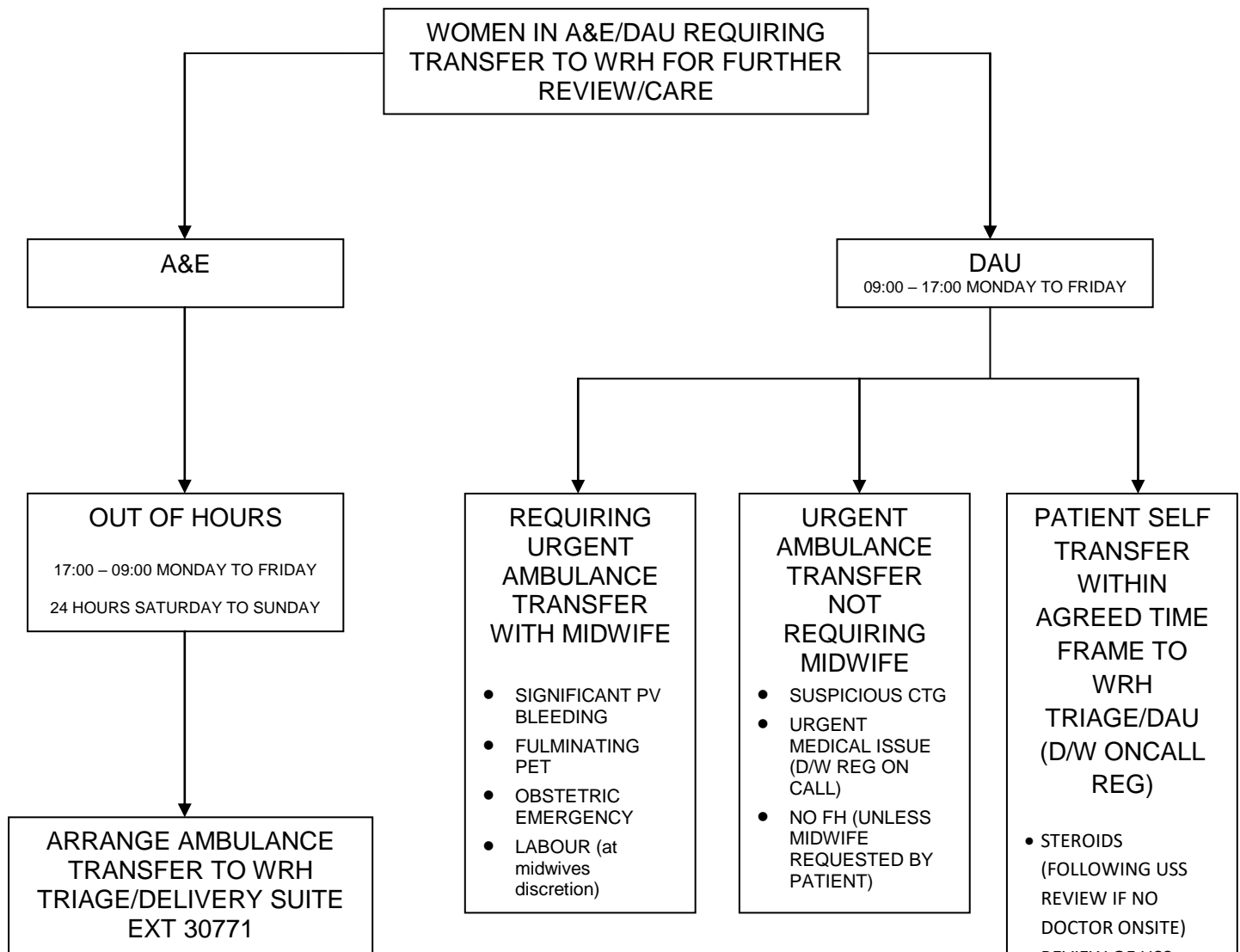
To facilitate the safe transfer of patients by either ambulance or self-transfer from Redditch Maternity Hub
To ensure the safety of patients in transit from RMH(AGH) – WRH
To ensure all staff know when to accompany a patient and when it is not necessary.

Key Staff Responsibilities

Post	Responsibilities
Departmental Manager	Ensuring the implementation of this S.O.P. at a local level and ensuring that there is an understanding and implementation of the safe transfer principles within this document. Investigating any adverse events or complaints arising from the transfer of patients. Becoming involved in any identified audit program in relation to this S.O.P.. Ensuring that the receiving area or hospital is aware of the transfer. Ensuring that the patient is aware of any transfer.

Please note that the key documents are not designed to be printed, but to be used on-line. This is to ensure that the correct and most up-to-date version is being used. If, in exceptional circumstances, you need to print a copy, please note that the information will only be valid for 24 hours and should be read in conjunction with the key document supporting information and/or Key Document intranet page, which will provide approval and review information.

	Maintaining the privacy and dignity of the patient at all times.
Staff escorting the patient	<p>Ensuring the patient is ready to be moved before the move takes place.</p> <p>Ensuring the patient has been informed of the impending move.</p> <p>Maintaining the privacy and dignity of the patients and that they are warm and comfortable at all times.</p> <p>Ensuring along with the Midwife in charge of the patient that all documentary requirements are completed and present and carried in a manner which will maintain patient confidentiality.</p> <p>Ensuring that the patient's property and valuables accompanies them.</p> <p>Ensuring the necessary equipment such as oxygen, drip stands or wheelchair is available to transfer the patient.</p>



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• STEROIDS (FOLLOWING USS REVIEW IF NO DOCTOR ONSITE)

• REVIEW OF USS

• (OUTSIDE OF REMIT OF MIDWIFE)

• OTHER NON-URGENT MEDICAL/OBSTETRIC PROBLEMS

• HIGH RISK PREGNANCY i.e. MULTIPLE NEEDING UPDATED PLAN