



Feidhmeannacht na Seirbhíse Sláinte
Health Service Executive



Ambulance Operations Procedure

MICAS (Mobile Intensive Care Adult Service) Retrieval Procedure

National Ambulance Service (NAS)

Document reference number	NASNEOC03	Document developed by	Sean Brady
Revision number	0	Document approved by	National Leadership Team
Approval date	8 th October 2018	Responsibility for implementation	Control Managers
Revision date	8 th October 2020	Responsibility for review and audit	Control Managers

NASNEOC03: MICAS (Mobile Intensive Care Adult Service) Retrieval Procedure Revision No: 0 Date Approved: 10th August 2015

Table of Contents:

1.0	Policy	3
2.0	Purpose	3
3.0	Scope	3
4.0	Legislation/other related policies	3
5.0	Glossary of Terms and Definitions	4
6.0	Roles and Responsibilities	4
7.0	Procedure	4
8.0	Implementation Plan	6
9.0	Revision and Audit	6
10.0	Revision History	7
11.0	Algorithm	8
12.0	Signatures of Approval	9

1.0 POLICY

- 1.1. The Mobile Intensive Care Adult Service, Retrieval Service will be operated by the National Ambulance Service (in partnership with the National Transport Medicine Programme, (NTMP) and the medical and nursing staff of the participating hospitals using a designated vehicle or alternative vehicle.
- 1.2. The designated vehicle and NAS staff will be based at Cherry Orchard Ambulance Base, Dublin.
- 1.3. Staff will refer to this document for further information on how this policy will be managed.
- 1.4. On receipt of a call from the host hospital requesting MICAS retrieval, this procedure will be implemented.

2.0 PURPOSE

- 2.1 The purpose of this service is to ensure the immediate and effective collection of the team and their equipment from their base, and to transport them to the referring hospital whereby the patient is collected and transported to the receiving hospital of the MICAS patient. The transport team and their equipment will then return to base.

3.0 SCOPE

- 3.1 This procedure applies to ADULT patients requiring transport from their location to the designated receiving hospital.

4.0 LEGISLATION/OTHER RELATED POLICIES

NASCC032 – Call taking/Address Verification/Dispatch.

5.0 GLOSSARY OF TERMS AND DEFINITIONS

- 5.1 NTMP – National Transport Medicine Programme
- 5.2 MPDS – Medical Priority Dispatch System.
- 5.3 ETA – Estimated Time of Arrival.
- 5.4 MICAS – Mobile Intensive Care Adult Service.
- 5.5 NEOC – National Emergency Operations Centre.

NASNEOC03: MICAS (Mobile Intensive Care Adult Service) Retrieval Procedure Revision No: 0 Date Approved: 10 th August 2015
--

6.0 ROLES AND RESPONSIBILITIES

- 6.1 The Control Manager is responsible for dissemination and clarification to all Team leaders, Dispatchers and Call-takers. Control team leaders are responsible for ensuring control staff compliance with this procedure.
- 6.2 The Control Manager is responsible for ensuring control team leaders compliance with this procedure.
- 6.3 Education and Competency assurance officers and Quality and Safety Risk managers in conjunction with the area medical advisor are responsible for reviewing any related incident/near miss report.
- 6.4 The Education and Competency Assurance team are responsible for managing remedial training.
- 6.5 Staff involved in the treatment and transports of Retrieval patients are responsible for the operation of this procedure.
- 6.6 It is the responsibility of all staff involved in the care of the retrieval patient to provide care based on the best clinical evidence available.
- 6.7 It is the responsibility of all staff members to work within their own scope of practice.
- 6.8 It is the responsibility of the National Emergency Operations Centre to dynamically deploy the appropriate resource to facilitate the Retrieval patient

7.0 PROCEDURE

- 7.1 The consultant or registrar in the referring hospital phones and arranges a bed in the hospital where the patient is to be admitted.
- 7.2 The referring consultant/registrar then calls the MICAS retrieval team to request transfer.
- 7.3 The retrieval consultant or registrar “on call” for the MICAS retrieval team discusses the individual requirements for the care of the patient, takes details and assesses urgency. Stabilisation advice is provided as required.

- 7.4 The retrieval consultant or his/her delegate, (i.e. the Retrieval Registrar) calls a designated number within the National Emergency Operations Centre at **021-4640078** and states that a MICAS retrieval is required. The retrieval consultant advises the NEOC whether the Retrieval Team must be dispatched urgently or can be delayed or scheduled, depending on the condition of the patient. The Retrieval Consultant or his/her delegate are the only person authorised to determine the urgency of the retrieval, depending on the condition of the patient. It is expected that this recommendation will be informed by the opinion of the specialist teams who will be receiving the patient.
- 7.5 The dispatcher or dispatch supervisor within the National Emergency Operations Centre (NEOC) are the only persons authorised to dispatch a vehicle for a National MICAS Retrieval.
- 7.6 The call taker will process the call as a Priority 1 (AS1 call).
- 7.7 The MPDS call determinant 33 Protocol will be authorised with immediate effect.
- 7.8 All movements of the MICAS retrieval vehicle will be coordinated through the National Emergency Operations Centre (NEOC). The vehicle dispatched must be the dedicated National Retrieval Vehicle in the first instance, or if that resource is not available, an emergency ambulance from national ambulance resources generally. This decision will be made at point of dispatch by the relevant dispatcher and/or supervisor based upon current emergency activity and resources available.
- 7.9 The National Emergency Operations Centre will take details and dispatch the appropriate vehicle. The dispatcher will give estimated time of arrival (ETA) to collect the MICAS retrieval team from the host hospital.
- 7.10 The vehicle travels to the host hospital, collects the MICAS retrieval team and their equipment. The MICAS retrieval team will contact the referring hospital with ETA.
- 7.11 The MICAS Retrieval Team arrives at the referring hospital, receives report of the patient's condition and handover and continues stabilisation for transport.
- 7.12 The MICAS Retrieval Team cares for the patient en route to the accepting hospital and gives report and handover to personnel there.
- 7.13 The MICAS Retrieval Team calls the referring hospital with information on the patient's arrival and condition.

- 7.14 The MICAS Retrieval Team is returned to their base, if different to the host hospital.
- 7.15 The transport vehicle returns to their base. Crew must clean the vehicle, replace equipment used and leave the vehicle prepared for next call.
- 7.16 The call is closed on the CAD.
- 7.17 If advice or assistance is required with this procedure please contact the duty control manager.

AIR AMBULANCE:

If in the event that air transport is considered by the MICAS Retrieval Team, the National Emergency Operations Centre (NEOC) desk should be contacted on 1850-211869. Aero Medical Desk (AMD) will coordinate the activation of ambulances (including the designated retrieval vehicle from base hospital and aircraft landing sites).

8.0 IMPLEMENTATION PLAN

- 8.1 This Procedure will be circulated electronically to all Managers, Supervisors and Staff.
- 8.2 This procedure will be available in electronic format and paper format in the control room for ease of retrieval and reference.

9.0 REVISION AND AUDIT

- 9.1 This Procedure will remain under constant review and may be subject to change to facilitate any changes/developments in service requirements.
- 9.2 Control managers have responsibility for ensuring the maintenance, regular review and updating of this procedure.
- 9.3 Revisions, amendments or alterations to the procedure can only be implemented after consultation with relevant stakeholders and approved by the relevant senior manager.

10.0 REVISION HISTORY: (This captures any changes that are made to an SOP when it has been revised).

No	Revision No	Date	Section Amended	Approved by

NASNEOC03: MICAS (Mobile Intensive Care Adult Service) Retrieval
Procedure Revision No: 0 Date Approved: 10th August 2015

Neo-Natal Retrieval Vehicle, MICAS & PICU vehicle Status Update Algorithm:
Below is the algorithm for the vehicle drivers to use showing the sequence of status updates they are required to provide to the NEOC in order to update a call at its various stages.

Dispatcher passes call to the specialist resource driver & allocates the call to the appropriate resource on the CAD system which populates a time stamp. **This gives NEOC the allocation time from code generation (AS1) or call receipt (AS2 & AS3) to resource activation for performance evaluation purposes.**

Driver (leaving base or current location) sends 01, 02 or 03 code appropriate to classification (Mobile on call) which populates CAD. **This gives NEOC the mobilisation time from activation to going mobile for performance evaluation purposes.**

Resource arrives at Team location to collect team & equipment (**Driver makes voice contact with Control advising of his arrival time**). Upon leaving for patient's location, the driver makes verbal contact to update his departure time for patient location. **Both verbal updates are entered into Notepad of the call. This will also show the time spent collecting the team & equipment**

Resource arrives at facility where patient is located. Driver sends the 04(@ Scene) status update which populates CAD.

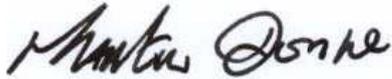
When ready to leave the facility with the patient, driver sends either the appropriate destination hospital code (if an AS1 call) or 05 codes (if an AS2 or AS3). All of these will populate into CAD, **thus showing the turn-around time when collecting the patient.**

Upon arrival at destination hospital, driver sends 06 Code (@ destination) which will populate into CAD.

When call is finished, driver sends 09 status update (Clear & Available). This will accurately show the hospital turn-around time. Vehicle then either proceeds to next job (above sequence again i.e. 01,02 or 03), or drops off the team at their base, and proceeds back to base giving the 10 code when at base ready for the next activation.

Signatures of Approval

All persons must sign and date this page after they have read and understood the Standard Operation Procedure.



Director of the National Ambulance Service
On Behalf of the National Ambulance Service

Date 20/10/2018



National Control Operations Manager
National Emergency Operations Centres

Date 20/10/2018