## 260421 NIGHT BRISBANE OPCEN BRIEF.xlsm



## QUEENSLAND AMBULANCE SERVICE OPERATIONS BRIEF V2.11.1



|                      |       | _  | BRISBANE |          |      |          |  |  |  |  |
|----------------------|-------|----|----------|----------|------|----------|--|--|--|--|
| SHIFT:               | NIGHT |    |          | D        | ATE: | 26/04/21 |  |  |  |  |
| ocs:                 |       |    |          |          |      |          |  |  |  |  |
| OCS:                 |       |    |          |          |      |          |  |  |  |  |
| CDS (Clinical):      |       |    |          |          |      |          |  |  |  |  |
| CDS (Tactical):      |       |    |          | (Southpo | ort) |          |  |  |  |  |
| CDS (State):         |       |    |          |          |      |          |  |  |  |  |
| OC:                  |       |    |          |          |      |          |  |  |  |  |
| SENIOR OPS SUPER(S): |       | N  | 1N       | , MS     |      |          |  |  |  |  |
| OPS SUPER(S):        |       | MN | , MS     | ;        | (F   | PACH)    |  |  |  |  |

|       |       | Shift Re  | port (Any issues/items of interest fo   | r noting that do not fit into another cate              | egory or req  | uire further | elaborat | ion)   |                   |
|-------|-------|-----------|---|---|---------------|--------------|----------|--------|-------------------|
| Entry | Time  | Acute/PTS | Issue   | Action/Case Information                                 | Entered<br>By | Incident     | Unit     | LASN   | Station/<br>OpCen |
| 1     | 18:30 | ACUTE     | BCP Print   | For Information only                                    |               | 17053512     |          | OPCENS | Brisbane          |
| 2     |       | ACUTE     | BCP Laptop Log On Successful  | For Information only                                    |               |              |          | OPCENS | Brisbane          |
| 3     | 05:28 | ACUTE     | crew refused to attend 2A case in - CDS provided direction that they must attend the case. Crew swore at CDS and then called fatigue. | LASN SOS) advised of crew actions and response to case. |               |              |          | MST    | Brisbane          |
| 4     |       |           |   |   |               |              |          |        | Brisbane          |
| 5     |       |           |   |   |               |              |          |        | Brisbane          |
| 6     |       |           |   |   |               |              |          |        |                   |
| 7     |       |           |   |   |               |              |          |        |                   |
| 8     |       |           |   |   |               |              |          |        |                   |
| 9     |       |           |   |   |               |              |          |        |                   |
| 10    |       |           |   |   |               |              |          |        |                   |
| 11    |       |           |   |   |               |              |          |        |                   |
| 12    |       |           |   |   |               |              |          |        |                   |
| 13    |       |           |   |   |               |              |          |        |                   |
| 14    |       |           |   |   |               |              |          |        |                   |
| 15    |       |           |   |   |               |              |          |        |                   |
| 16    |       |           |   |   |               |              |          |        |                   |
| 17    |       |           |   |   |               |              |          |        |                   |
| 18    |       |           |   |   |               |              |          |        |                   |
| 19    |       |           |   |   |               |              |          |        |                   |
| 20    |       |           |   |   |               |              |          |        |                   |

|          | HOSPITAL STATUS LOG         |                   |                   |                 |                 |                   |              |                |  |  |  |  |
|----------|-----------------------------|-------------------|-------------------|-----------------|-----------------|-------------------|--------------|----------------|--|--|--|--|
| Hospital | Status/<br>Escalation Level | Date<br>Initiated | Time<br>Initiated | Date<br>Changed | Time<br>Changed | Time On<br>Status | Initiated By | Action/Outcome |  |  |  |  |
|          |                             |                   |                   |                 |                 |                   |              |                |  |  |  |  |
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| Jnit V | LASN            | Incident       | Time          | cidents/Issues (M.C.I.s, QAS vehicle accidents, case Activity/Description | Action/Outcome                         | Entored   |
|--------|-----------------|----------------|---------------|---|--|-----------|
| nit    | LASN            | incident       | Time          | Activity/Description  | Action/Outcome                         | Entered I |
|        |                 |                |               |   |  |           |
|        |                 |                |               |   |  |           |
|        |                 |                |               |   |  |           |
|        |                 | · ·            | are there any | Significant Patient Care/Clinical Issues (high acus                       | ity access?                            |           |
| nit    | LASN            | Incident       | Time          | Activity/Description  | Action/Outcome                         | Entered   |
|        |                 |                |               |   |  |           |
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| +      |                 |                |               |   |  |           |
|        |                 |                |               |   |  |           |
|        | Cardia          | Arrost - Hou   | v many out of | hospital cardiac arrests were attended and were                           | they transported with BOSC2            |           |
| Init   | LASN            | Incident       | Time          | Activity/Description  | Action/Outcome                         | Entered   |
|        |                 |                |               |   |  |           |
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|        |                 |                |               |   |  |           |
|        |                 |                |               |   |  |           |
| W      | ore there any a | ectivations of | First Pospon  | der Groups/Honorary Station personnel and were                            | there any issues associated with this? |           |
| Init   | LASN            | Incident       | Time          | Activity/Description  | Action/Outcome                         | Entered   |
|        |                 |                |               | <u> </u>  |  |           |
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|        |                 |                | <u> </u>      |   |  | •         |
| Init   | LASN            | Incident       | Did QAS ass   | sist/Was QAS Assisted by any other jurisdictions? Activity/Description    | ? i.e. NSW/PNG/NT etc.  Action/Outcome | Entered   |
| mit    | LASN            | incident       | Time          | Activity/Description  | Action/Outcome                         | Entered   |
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|       | How many cases were upgraded or downgraded during the shift?  LASN Incident Coded Altered To Reason for Alteration? Callback Conducted? Outcome |       |            |                        |                       |           |  |  |  |  |  |  |
|-------|---|-------|------------|------------------------|-----------------------|-----------|--|--|--|--|--|--|
| LASN  | Incident  | Coded | Altered To | Reason for Alteration? | Callback Conducted?   | Outcome   |  |  |  |  |  |  |
| LACIN | molache   | Ocaca | Altered 10 | Reason for Attendion.  | Guilback Goliaactea : | - Cutoomo |  |  |  |  |  |  |
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|            | Staffing Issues (Late Log Ons/ Late Shift Starts) |                    |      |             |                              |                    |                |  |            |  |  |
|------------|---|--------------------|------|-------------|------------------------------|--------------------|----------------|--|------------|--|--|
| Officer(s) | Unit  | Station /<br>OpCen | LASN | Shift Start | Logged On /<br>Started Shift | Early /<br>Late by | Authorised By? | Reason Needed or Given /<br>Operational Impact | Entered By |  |  |
|            |   |                    |      |             |                              |                    |                |  |            |  |  |
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|                             | Paramedic Occupational Violence Incident |                      |                                       |                          |  |  |   |  |            |  |  |
|-----------------------------|--|----------------------|---------------------------------------|--------------------------|--|--|---|--|------------|--|--|
| Incident                    | Time                                     | Officer(s) Involved  | LASN                                  | Station                  | Incident Information                     | Type of Occupational Violence              | Description                                   | Notifications<br>OS, SOS, PSDU, OCM        | Entered By |  |  |
|                             |  |                      |                                       |                          |  |  |   |  |            |  |  |
| QPS<br>Notified<br>(YES/NO) | Time QPS<br>Notified                     | Attending Supervisor | Peer Support / Priorty One Activation | Caution Note<br>Accuracy | Further Caution Note Actions<br>Required | Call Back Actions Taken<br>(If Applicable) | OCS Emailed CAD Report and Audio Files to OCM | Dot Point Summary Sent<br>(If Appropriate) | t to OCM   |  |  |
|                             |  |                      |                                       |                          |  |  |   |  |            |  |  |
|                             |  |                      |                                       |                          | Comments (Essential Additional           | Information)                               |   |  |            |  |  |
|                             |  |                      |                                       |                          |  |  |   |  |            |  |  |

|                             | Paramedic Occupational Violence Incident |                      |                                       |                          |  |  |   |   |            |  |  |
|-----------------------------|--|----------------------|---------------------------------------|--------------------------|--|--|---|---|------------|--|--|
| Incident                    | Time                                     | Officer(s) Involved  | LASN                                  | Station                  | Incident Information                     | Type of Occupational Violence              | Description                                   | Notifications OS, SOS, PSDU, OCM                  | Entered By |  |  |
|                             |  |                      |                                       |                          |  |  |   |   |            |  |  |
| QPS<br>Notified<br>(YES/NO) | Time QPS<br>Notified                     | Attending Supervisor | Peer Support / Priorty One Activation | Caution Note<br>Accuracy | Further Caution Note Actions<br>Required | Call Back Actions Taken<br>(If Applicable) | OCS Emailed CAD Report and Audio Files to OCM | Dot Point Summary Sent to OCM<br>(If Appropriate) |            |  |  |
|                             |  |                      |                                       |                          |  |  |   |   |            |  |  |
|                             |  |                      |                                       |                          | Comments (Essential Additional           | Information)                               |   |   |            |  |  |
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|      |          |                    |      |                   |              | PEER SUPPORT ACTIVATIO | NS                   |                           |             |            |
|------|----------|--------------------|------|-------------------|--------------|------------------------|----------------------|---------------------------|-------------|------------|
| Time | Incident | Officer/s Involved | LASN | Station/<br>OpCen | ID Number(s) | Incident Information   | Action Taken/Outcome | Follow-Up Action required | Reported To | Entered By |
|      |          |                    |      |                   |              |                        |                      |                           |             |            |
|      |          |                    |      |                   |              |                        |                      |                           |             |            |
|      |          |                    |      |                   |              |                        |                      |                           |             |            |
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|      |          |                    |      |                   |              |                        |                      |                           |             |            |
| -    |          |                    |      |                   |              | •                      | •                    | •                         | •           |            |

|      | WORKPLACE HEALTH & SAFETY (Not Relating to Paramedic Occupational Violence) |                    |      |                   |              |                      |                      |                           |             |            |  |  |
|------|---|--------------------|------|-------------------|--------------|----------------------|----------------------|---------------------------|-------------|------------|--|--|
| Time | Incident  | Officer/s Involved | LASN | Station/<br>OpCen | ID Number(s) | Incident Information | Action Taken/Outcome | Follow-Up Action required | Reported To | Entered By |  |  |
|      |   |                    |      |                   |              |                      |                      |                           |             |            |  |  |
|      |   |                    |      |                   |              |                      |                      |                           |             |            |  |  |
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|      | REPORTABLE FATIGUE SCORES (>5) |         |      |                   |           |               |                      |                           |             |            |  |
|------|--------------------------------|---------|------|-------------------|-----------|---------------|----------------------|---------------------------|-------------|------------|--|
| Time | Shift                          | Officer | LASN | Station/<br>OpCen | ID Number | Fatigue Score | Action Taken/Outcome | Follow-Up Action required | Reported To | Entered By |  |
|      |                                |         |      |                   |           |               |                      |                           |             |            |  |
|      |                                |         |      |                   |           |               |                      |                           |             |            |  |
|      |                                |         |      |                   |           |               |                      |                           |             |            |  |
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|      |      |                       |                 | C           | OMPLAINTS                |                            |         |            |
|------|------|-----------------------|-----------------|-------------|--------------------------|----------------------------|---------|------------|
| Time | LASN | Complainant's<br>Name | Phone<br>Number | Description | Action Taken/Reported To | Further Action<br>Required | Summary | Entered By |
|      |      |                       |                 |             |                          |                            |         |            |
|      |      |                       |                 |             |                          |                            |         |            |
|      |      |                       |                 |             |                          |                            |         |            |
|      |      |                       |                 |             |                          |                            |         |            |
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| FALSE CALLS |      |          |                     |                            |                              |                  |                            |            |  |
|-------------|------|----------|---------------------|----------------------------|------------------------------|------------------|----------------------------|------------|--|
| Time        | LASN | Incident | Callers<br>Phone No | Callers Name As per<br>CLI | Address of Caller As Per CLi | Incident Address | Stated<br>Problem/Incident | Entered By |  |
|             |      |          |                     |                            |                              |                  |                            |            |  |
|             |      |          |                     |                            |                              |                  |                            |            |  |
|             |      |          |                     |                            |                              |                  |                            |            |  |
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|      | Aeromedical Response Requests (Notification / Activation / Escalation Matrix) |                     |      |                 |                    |                                 |  |                          |     |                                  |                         |
|------|---|---------------------|------|-----------------|--------------------|---------------------------------|--|--------------------------|-----|----------------------------------|-------------------------|
| Time | Incident  | MPDS<br>Determinant | Code | Primary/<br>IFT | Approved<br>Yes/No | Provide details on all requests | Enter the reason given for declining/deviation of the aeromedical resource | Requesting<br>Supervisor | sos | Escalation<br>Process<br>Enacted | SOS Escalation Comments |
|      |   |                     |      |                 |                    |                                 |  |                          |     |                                  |                         |
|      |   |                     |      |                 |                    |                                 |  |                          |     |                                  |                         |
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| Were any PTS cases required to be handed over to Acute and was there any impact on Acute? |  |  |      |        |                    |  |  |  |
|---|--|--|------|--------|--------------------|--|--|--|
| Incident LASN Coding Time   |  |  | Time | Reason | Operational Impact |  |  |  |
|   |  |  |      |        |                    |  |  |  |
|   |  |  |      |        |                    |  |  |  |
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| 3rd Party Trip Information |      |                 |      |    |        |         |                  |             |            |
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| Authorisation No.          | LASN | Officer Name(s) | From | То | Reason | Company | Company Auth No. | Quoted Cost | Entered By |
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|   | Back To Main Page                 |                                 |
|---|-----------------------------------|---------------------------------|
| QAS Bris  | sbane OpCen Staff - Acute Sl      | nift Allocations                |
| SUPERVISORY TEAM                                | DAY SHIFT                         | NIGHT SHIFT                     |
| OCS - Room Manager                              |                                   |                                 |
| OCS - Additional Nightshift                     |                                   |                                 |
| CDS - Brisbane Clinical CDS - Brisbane Tactical |                                   | N/A                             |
| CDS - Virtual/Statewide                         |                                   | N/A                             |
| Operations Co-ordinator                         |                                   |                                 |
| POSITION  | DAY SHIFT                         | NIGHT SHIFT                     |
| Northern  |                                   |                                 |
| Central 2 (Central Nightshift)                  |                                   |                                 |
| Central 1                                       |                                   |                                 |
| South   |                                   |                                 |
| Bayside<br>Meal Relief - Northside              |                                   |                                 |
| Meal Relief - Southside                         |                                   |                                 |
| Night Shift Meal Relief                         |                                   |                                 |
| POSITION  | DAY SHIFT                         | NIGHT SHIFT                     |
| Acute Call Taking                               | 5/11 6/111 1                      |                                 |
| Acute Call Taking                               |                                   |                                 |
| Acute Call Taking                               | NAME O CHIET THAT                 | NADAE O CLUET TIME              |
| ABOVE CORE ROSTER                               | NAME & SHIFT TIME                 | NAME & SHIFT TIME               |
| Acute Call Taking Acute Call Taking             |                                   |                                 |
| POSITION  | DAY SUPPORT 0700-1700hrs          | AFTERNOON SUPPORT 1400-2400hrs  |
| OCS - Day Support Shift                         | DAT SOFFORT 0700-1700IIIS         | AFILKNOON SOFFORT 1400-24001113 |
| Acute Call Taking                               |                                   |                                 |
| POSITION  |                                   | AFTERNOON SUPPORT 1700-0300hrs  |
| Acute Call Taking                               |                                   |                                 |
| Acute Call Taking Acute Call Taking             |                                   |                                 |
| Acute Call Taking Acute Call Taking             |                                   |                                 |
| ABOVE CORE ROSTER                               | NAME & SHIFT TIME                 | NAME & SHIFT TIME               |
| Acute Call Taking                               | TOTALL CLOTHER THAT               | TOTALL & STATE THAT             |
| Acute Call Taking                               |                                   |                                 |
| STA   | FF ALLOCATED TO ALT OPCEN CALL TA | KING QUEUE                      |
| POSITION  | NAME, TIMES & OPCEN               | NAME, TIMES & OPCEN             |
| Acute Call Taking                               |                                   |                                 |
| Acute Call Taking                               | CHAICAL HUB DISDATCH              |                                 |
| Dispatch Clinical Hub                           | CLINICAL HUB DISPATCH             |                                 |
| Dispatch Clinical Hub                           |                                   |                                 |
| = ispaceri emireur rius                         | FLEXIBLE WORK ARRANGEMENT S       | TAFF                            |
| POSITION  | NAME & SHIFT TIME                 | NAME & SHIFT TIME               |
| Acute Call Taking                               |                                   |                                 |
| Acute Call Taking                               | STAFE ALLOCATED TO SEC DI         |                                 |
| POSITION  | STAFF ALLOCATED TO SEQ PTS        |                                 |
| POSITION  PTS Call Taking                       | NAME & SHIFT TIME                 |                                 |
| PTS Call Taking PTS Call Taking                 |                                   |                                 |
| PTS Call Taking                                 |                                   |                                 |
| PTS Call Taking                                 |                                   |                                 |
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