030521 DAY MAROOCHYDORE OPCEN BRIEF



QUEENSLAND AMBULANCE SERVICE OPERATIONS BRIEF V2.11.1



		 MAROOCHYDORE					
SHIFT:	DAY		DATE: _	03/05/21			
ocs:							
CDS:							
IOR OPS SUPER(S):							
OPS SUPER(S):							
DUTY OIC(S):							
(3)							

		Shift Re	port (Any issues/items of interest fo	r noting that do not fit into another cate	gory or req	uire furthe	r elabora	tion)	
Entry	Time	Acute/PTS	Issue	Action/Case Information	Entered By	Incident	Unit	LASN	Station/ OpCen
1			BCP Printer and Laptop Test	Confirmed Both Operational				OPCENS	MOC
2	09:30		RACQ notification -	OIC unit with flat battery at stn	Dor		4492	WBY	Sth Bundi
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
13									
14									
15									
16									
17									

	HOSPITAL STATUS LOG										
Hospital	Status/ Escalation Level	Date Initiated	Time Initiated	Date Changed	Time Changed	Time On Status	Initiated By	Action/Outcome			
L											

		Significant O	peration	al Incidents/Issues (M.C.I.s, QAS vehicle accidents, case	es incidents involving QPS / QFRS)?	
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By
			-			
11-26	LAGN			e any Significant Patient Care/Clinical Issues (high acuit	<u> </u>	Enternal D
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By
401859 406891 401774	SCT		13:39	- ? 3 vehicle TA ? 3 patients	Level 1 paged - total of 4 pt's on scene 3 pt's for tx - 2 x pt sneck pain, 1 pt lumbar pain, 1 x pt transport - 859 tx - 774 tx 2 pts	
	0 "				/	
Unit	LASN	Incident	v many o	out of hospital cardiac arrests were attended and were the Activity/Description	Action/Outcome	Entered By
401773	271011	Indiaditt	1 11110			Lincolou Dy
406891 401724	SCT		15:19	collapse ? Arrest	SR confirmed arrest - pt ROSC at this stage actively managing Tx	
		+				
1	Were there any a	activations of	First Re	sponder Groups/Honorary Station personnel and were t	here any issues associated with this?	
Unit	LASN	Incident	Time	Activity/Description	Action/Outcome	Entered By
		1				

Did QAS assist/Was QAS Assisted by any other jurisdictions? i.e. NSW/PNG/NT etc.

Time Activity/Description Action/

Action/Outcome

Entered By

LASN

Unit

Incident

Back To Main Page

				How many cases were ungraded or down	graded during the shift?	
LASN	Incident	Coded	Altered To	How many cases were upgraded or down Reason for Alteration?	Callback Conducted?	Outcome
LACIT	moraciic	Oodca	Altered 10	Reason for Attendion.	Canback Conducted:	Cutomic
	İ					
	İ					
	İ					
			<u> </u>			<u> </u>

			St	affing Issues	(Late Log Ons/	Late Shift Sta	arts)		
Officer(s)	Unit	Station / OpCen	LASN	Shift Start	Logged On / Started Shift	Early / Late by	Authorised By?	Reason Needed or Given / Operational Impact	Entered By
									\
									-
									1

					Paramedic Occupational Violen	ce Incident			
Incident	Time	Officer(s) Involved	LASN	Station	Incident Information	Type of Occupational Violence	Description	Notifications OS, SOS, PSDU, OCM	Entered By
QPS Notified (YES/NO)	Time QPS Notified	Attending Supervisor	Peer Support / Priorty One Activation	Caution Note Accuracy	Further Caution Note Actions Required	Call Back Actions Taken (If Applicable)	OCS Emailed CAD Report and Audio Files to OCM	Dot Point Summary Sent to OCM (If Appropriate)	
					Comments (Essential Additional	Information)			

	Paramedic Occupational Violence Incident Notifications										
Incident	Time	Officer(s) Involved	LASN	Station	Incident Information	Type of Occupational Violence	Description	OS, SOS, PSDU, OCM	Entered By		
QPS Notified (YES/NO)	Time QPS Notified	Attending Supervisor	Peer Support / Priorty One Activation	Caution Note Accuracy	Further Caution Note Actions Required	Call Back Actions Taken (If Applicable)	OCS Emailed CAD Report and Audio Files to OCM	Dot Point Summary Sent to OCM (If Appropriate)			
					Comments (Essential Additional	Information)					

	PEER SUPPORT ACTIVATIONS										
Time	Incident	Officer/s Involved	LASN	Station/ OpCen	ID Number(s)	Incident Information	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By	

	WORKPLACE HEALTH & SAFETY (Not Relating to Paramedic Occupational Violence)											
Time	Incident	Officer/s Involved	LASN	Station/ OpCen	ID Number(s)	Incident Information	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By		

	REPORTABLE FATIGUE SCORES (>5)											
Time	Shift	Officer	LASN	Station/ OpCen	ID Number	Fatigue Score	Action Taken/Outcome	Follow-Up Action required	Reported To	Entered By		

				C	OMPLAINTS			
Time	LASN	Complainant's Name	Phone Number	Description	Action Taken/Reported To	Further Action Required	Summary	Entered By

FALSE CALLS										
Time	LASN	Incident	Callers Phone No	Callers Name As per CLI	Address of Caller As Per CLi	Incident Address	Stated Problem/Incident	Entered By		

	Aeromedical Response Requests (Notification / Activation / Escalation Matrix)											
Time	Incident	MPDS Determinant	Code	Primary/ IFT	Approved Yes/No	Provide details on all requests	Enter the reason given for declining/deviation of the aeromedical resource	Requesting Supervisor	sos	Escalation Process Enacted	SOS Escalation Comments	
10:23		28C01L	1C	PRIMARY	No	GCS14 - L) sided Hemiplegia Pt located 60mins to ASC.	Tx Hot to for treatment and CT scan					
10:40		36D02S	1B	PRIMARY	Yes	Septic - Lower L) leg infection - Temp 40.1 and PR 121						

		SCUH Transit Allocated Unit PTS 10-18 Trial Worklo	ocated Unit PTS 10-18 Trial Workload					
Allocated								
SCUH Transit								
Unit								

3rd Party Trip Information											
Authorisation No.	LASN	Officer Name(s)	From	То	Reason	Company	Company Auth No.	Quoted Cost	Entered By		