

Medical Emergencies Outside Emergency Department and Hospital Building – Staff Response

1. Policy Purpose

To clarify the responsibility of Emergency Department staff providing emergency medical assistance on hospital property.

2. Policy Statement

Although Emergency Department (ED) staff work primarily within hospital buildings, ED physicians and nurses are permitted, depending on the circumstances of each instance, to respond to medical emergencies in the vicinity of, and external to, the ED.

When such emergency occurs, ED staff will exercise judgment as to whether to attend, including, but not limited to, considering the urgency of the situation, safety and care needs of patients already in the ED, risk to staff safety, training and skills of staff, the location of the situation, and access to necessary equipment and supplies.

In any event, when staff determines that assistance is needed and should be provided in respect of an emergency external to the ED, they will either respond directly or summon the assistance of Emergency Health Services (Ambulance).

3. Policy Scope (departments/units and/or personnel who must comply with the policy)

This policy addresses situations in which an individual needs emergency medical help outside of the building where the ED is located.

The policy is applicable to ED staff members and security personnel.

4. Policy Principles

ED staff may be the most appropriate persons to respond to emergency situations external to the building. However, in other circumstances it may be more appropriate to rely on Emergency Health Services (EHS) staff.

5. Procedures

5.1 Assessment of Situation

- Once ED staff become aware of an individual outside the hospital requiring urgent medical attention, ED staff will assess the situation, taking into consideration:
 - » Urgency of the situation
 - » Safety and care needs of patients already in the ED vs. those outside¹
 - » Safety of staff responding to the situation

¹ A pressing need outside a quiet ED would be dealt with differently than an apparently mild problem outside a busy ED.

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- » Training and skill set of the staff responding²
- » Access to necessary equipment and supplies while outside the facility
- » Location on the hospital property³

5.2 Staff Response

- ED staff may respond on the hospital property within the vicinity of ED – assisting the patient into the department, or assessing the patient outside
- In very rare circumstances, i.e., to save life or limb, treatment and resuscitation may be started outside. The patient must be brought into ED as soon as possible
- Staff should not place themselves at risk when responding to the situation
- If it is not appropriate or safe to leave the building at that time, facility staff may call the EHS number 911 (or 1-800-461-9911 in areas where 911 is not available)
- If available, security personnel will accompany Emergency staff to ensure staff safety unless unreasonable delay would occur. Where security is not available, alternative safety measure (e.g., two staff members to respond together) should be considered

5.3 Transport

- ED staff will use clinical judgment in determining the most appropriate way to transport the patient into the ED. Transport can be by EHS, wheelchair, stretcher or ambulation.
- EHS should be dispatched to transport patients who are not in the immediate vicinity of the ED entrance, or who require specialized assistance in removal from the vehicle (e.g., spinal injury).
- Whenever possible, responding ED staff outside the ED will remain with the patient outside until transport into the building can be achieved. This may not be possible depending on the needs of patients inside the ED.

6. Roles of Staff Members

6.1 Security – when available, and unless unreasonable delay would result in the circumstances, security personnel will accompany emergency staff member responding to a situation outside the hospital building. Security personnel should not move patients unless at the direction of nursing or medical staff.

² ED staff has no special training or skill in extricating patients from vehicles. EHS should be involved. Saving life or limb could modify this principle

³ ED staff may respond on the hospital property within the vicinity of ED. In some circumstances, depending on the location on the property, EHS may be able to respond more quickly than ED staff. Generally, staff will not respond off the hospital property.

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6.2 Nursing staff – will assess the situation and help patients into the ED if appropriated; alternatively they may assess and start treatment or resuscitation outside as required. If the emergency physician is available, staff will respond as directed by emergency physician. In cases of potential spinal injury where there is not immediate life of limb threat, EHS should be notified to transfer patients into the ED using appropriate precautions.

6.3 Physicians – will assess and respond as appropriate or respond at the request of the assessing nurse; and provide urgent required treatment as needed or direct nursing staff to attend and assist as appropriate.

6.4 EHS – while ED staff may assist an individual into the building from a vehicle at the entrance, unless the situation is life or limb threatening, EHS should be dispatched for help in extricating trauma vices from a vehicle. EHS should also be dispatched if movement could be dangerous to the patient or if staff is at risk of personal injury.

EHS could be called to transport a patient from further away than the ED entrance.

6.5 Staff who make an assessment about a response to a situation where an individual requires emergency medical attention should document the circumstances and rationale for the decision made.

7. Exceptions

None

8. Tools, Forms and References

None

9. Related Policies

None

10. Definitions

None

11. References

Provincial Guidelines – Staff Response to Medical Emergencies Outside of the Emergency Department and Hospital buildings.

In original copy only:

Issued by:

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