

## COMPUTER GENERATED RESIDENT I.D. BAND

Provides unmistakable positive identification and vital Resident condition alerts which will assist Emergency and RACF Staff to improve the care provided to Residents presenting at hospital or in the event of an emergency evacuation.

MANAGEMENT



### RESIDENT CONDITION DECODER

- For Hospital and RACF Staff use

### COMPUTER GENERATED I.D. BAND

- Waterproof
- Soft on skin
- Easy to apply
- Suitable for all sizes



### SOFTWARE

- Easy to use software
- Internet or Desktop based
- All colour printer compatible
- Data security

### ALL YOU WILL NEED IS:

- A computer
- Internet access (if using internet based software)
- A colour printer
- A user licence / ID Band printing licence (obtainable when purchasing the software)

## TRANSFER TO HOSPITAL ENVELOPE

### HAVE YOU EXPERIENCED THE LOSS OF DOCUMENTATION FOR A RESIDENT PRESENTING AT A HOSPITAL EMERGENCY DEPARTMENT?:

Designed and developed by the North East Valley Division of General Practice and Australian Commission on Safety and Quality in Health Care.

COMPACT REF No: CTH-E1

**Aged Care Home Transfer-to-Hospital Envelope**  
This envelope contains CONFIDENTIAL medical information which should remain with the PATIENT RECORD.

Resident / Patient's Name: \_\_\_\_\_  
Name of Aged Care Home: \_\_\_\_\_  
Contact telephone number: In-hours: \_\_\_\_\_ After-hours: \_\_\_\_\_

There is a range of residential settings with different levels of care available.  
This Aged Care Home is:  
 High Care "Nursing Home" - Registered Nurse / Registered Nurse Division 1 usually present.  
 Low Care "Hotel, but may have 'Ageing in Place' - residents may have complex medical &/or personal care needs (i.e. high care). Usually staffed by Enrolled Nurse / Registered Nurse Division 2, &/or non-nursing care staff e.g. PCA/PCW/AIN. Generally medications are administered from a Dose Administration Aid.  
 Other \_\_\_\_\_

\* Advance care plan / End-of-life wishes enclosed >  YES  NO

KEEP CLOSED WHEN NOT IN USE  
HERE  
LIFT

(Back)

**Checklist for Transfer-to-Hospital Clinical Handover**

Tick boxes to indicate

Hospital notified by telephone

Information included in envelope >

Advance care plan / End-of-life wishes

Transfer Form (include as a minimum)

- Resident details: Name, DOB, religion, language spoken & need for interpreter
- Contact details of Aged Care Home including telephone number (in- & after-hours) & address
- Pension number
- Health insurance status: (i.e. Medicare only / DVA / privately insured) & include details
- Name of usual GP & contact details
- Name of usual Pharmacist & contact details
- Name of next-of-kin &/or Medical Enduring Power of Attorney or equivalent & contact details
- Next-of-kin notified of transfer
- Reason for transfer including events leading up to transfer
- Relevant medical history
- Any known allergies
- Pre-morbid / usual condition & functioning: cognition, mobility, continence, behaviours, diet

Letter from GP, locum or Aged Care Home detailing reason for transfer

Copy of most recent Comprehensive Medical Assessment (CMA)

Copy of results of recent investigations (blood tests / x-ray / other pathology)

Copy of current drug chart / list of current medications & time of last administration

Copy of current observation, blood sugar level & bowel charts (if applicable)

**MANAGEMENT**

- Preprinted envelope provides Facility Staff with a procedure to follow for the supply of Care Documentation for Resident Hospital Transfer.
- Provides a means of conveying documentation safely and privately from Facility to Hospital.
- Standardised the hand-over procedure for all parties: Facility Staff **to** Emergency Staff **to** Hospital Staff.
- Resealable for continuous opening and closing.
- Available for purchase in small quantities of 25 as an 'Off The Shelf' item.

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