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# West Moreton Prison Health Service onsite X-ray service

Initiative Type

Model of Care

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Deliver

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## Summary

This onsite X-ray service in correctional facilities enables more care delivered closer to home and reduce avoidable hospital transfers for assessment and treatment. It reduces the barriers faced by patients in correctional facilities.

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## Key dates

Mar 2021

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## Aim

To enable patients in correctional facilities to receive more care closer to home and reduce barriers they face in accessing healthcare by taking X-rays onsite, providing appropriate treatment, and reducing avoidable transfers to hospital.

## Benefits

- reduced avoidable transfers to PAH
- reduced ambulance ramping at Emergency Departments (ED) due to the reduced number of patients transferred to hospital for X-rays

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- reduced costs for transporting patients to hospital (security costs and ambulance costs)
  - reduced infrastructure strain at PAH Secure Unit
  - increased numbers of patients treated closer to home
  - reduced failure to attend rates for outpatient appointments for X-rays
  - nurses enabled to work to their full scope of practice
  - reduced time spent in ED waiting for X-rays as the X-rays have already been done at the correctional facility prior to transferring the patient to the hospital.

## **Background**

Prisoners are the end users of the health service that is provided to meet their health needs. As with any other patient or healthcare community they have the same rights to health care services and to having their voices heard.

## **Solutions Implemented**

- 19 X-ray operators trained to take X-rays
- X-rays sent to IGH for reporting
- regular visits by radiographers to the correctional facilities to provide education and support
- plastering training package developed to train nurses how to plaster
- planning underway to establish a Virtual Fracture Clinic with IGH
- planning underway to establish a tele-orthopaedic model of care with the PAH Orthopaedic Department
- X-rays transferred to Princess Alexandra Hospital (PAH) PACS system from IGH PACS system for patients that need to be transferred to PAH for treatment.

## **Evaluation and Results**

- A total of 119 X-rays were done in the first three months after the launch of the project with 54 of the X-rays being for acute presentations and 65 were routine X-rays
- Of the 54 acute X-rays that were done, only 13 were transferred to ED for further assessment and treatment. This has resulted in a reduction of 41 ambulance transfers to hospital
- Patients transferred to PAH ED for treatment have had their images transferred to the PAH PACS system and this eliminated the need for the X-rays being repeated at the Emergency Department and as a result, patients spent less time in ED

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- Regular site visits by a radiographer and ongoing support by radiographic advisors has resulted in an improvement of image quality and minimises the potential of non-diagnostic images
  - Opportunities have emerged to further grow the model by including a tele-orthopaedic model of care (PAH) and a Virtual Fracture Clinic (IGH) and planning for these is currently in progress.

## **Lessons Learnt**

Prison Health Services still relies on paper medical records and as a result, the documentation of assessments and X-rays done onsite are not documented in Integrated Emergency Management Records (ieMR). Having an electronic medical record system that integrates with ieMR will enable continuity of care and prevent potential repeat of X-rays already done at the correctional facility. Although taking X-rays onsite creates more work for the X-ray operators, all X-ray operators report improved job satisfaction by being able to work to their full scope of practice.

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