

Item 1.0: Rotary Heliport HLS Deconfliction Process

**Date of
Implementation:** 19/4/22

PURPOSE

- To minimise the risk of patient delays due to multiple helicopter operations into metropolitan and regional Health Service Provider (HSP) rooftop heliport Helicopter Landing Sites (HLS);
- To provide guidance and information to the Rotary Working Group, RFDS and DFES; and
- To be provided as an attachment to the DFES Emergency Rescue Helicopter Service (ERHS) Tasking Guideline.

BACKGROUND

It was identified through the Rotary Working Group that there needs to be a clear understanding between Rotary Operators how to best minimise risk or delays associated with the following scenarios:

- Multiple inbound flights to a common Metropolitan or Regional Hospital Heliport Helicopter Landing Site; and
- An inbound flight to a Metropolitan or Regional Hospital with an occupied Heliport Helicopter Landing Site.

It has been acknowledged that the most likely conflict that may occur will be between DFES ERHS primary retrievals and RFDS Inter-Hospital Patient Transfer (IHPT). The trial of the RFDS IHPT Rotary service is being implemented through a phased approach, beginning with select sites that have an existing relationship with Fiona Stanley Hospital (FSH). The ERHS service is primarily a rescue aeromedical retrieval service that sees a high number of acute patients being transferred mainly to Royal Perth Hospital (RPH). The nature of these arrangements will likely lower the risk of conflict between the two services during the first phase of implementation.

To ensure a common state-wide deconfliction with heliport HLS operations, the RFDS helicopter process detailed below will be tabled at the ERHS Tertiary Heliport Working Group for further discussion and collaboration. This will ensure alignment and continuity for deconfliction with metropolitan and regional hospital heliport HLS operations.

PROCESS

Multiple Inbound Flights to a Common Metropolitan or Regional Hospital Heliport Helicopter Landing Site

The RFDS Coordination Centre has operational visibility of both Primary DFES ERHS retrievals and RFDS Rotary IHPT retrievals. This is achieved through collaboration with the SJA State Operations Centre (SOC) and Acute Patient Transfer Coordination (APTC) Service. It is likely any possible conflict at a hospital heliport HLS will be identified well in advance.

The following should be considered in determining HLS landing priority:

- Patient acuity will be the main factor determining landing priority.
- In the instance both patients have a competing priority, priority recommendation will be made based on clinical need after consultation between onboard clinicians, SJA SOC, and the RFDS Clinical Coordinator.
- RFDS and DFES ERHS helicopters will be on the same ATC frequency, and the pilots are able to communicate through ATC, mobile phone, or other method to communicate, if necessary.
- Any change to RFDS helicopter landing priority will be communicated to the receiving hospital, SJA SOC and directly to the RFDS helicopter pilots through the RFDS Coordination centre.
- In the event a timely decision cannot be made, alternate options will be considered for RFDS helicopters. This includes options such as, but not limited to: diverting to Jandakot airport, holding, adjusting ETA or as deemed necessary by the PIC and crew.

An Inbound RFDS Helicopter to a Metropolitan or Regional Hospital with an Occupied Hospital Heliport Helicopter Landing Site

In this instance, the RFDS Coordination Centre will have operational visibility of the location of either DFES or RFDS helicopters that may be occupying a Hospital Heliport HLS.

If there is a potential conflict, the following process should be followed:

- RFDS Coordination centre to call Hospital to confirm hospital heliport HLS is occupied and request current patient transfer status and ERHS helicopter estimated time of departure (ETD).
- If required - RFDS to confirm with SJA SOC via the SJA SOC to confirm intended ERHS departure time from hospital heliport HLS.

If the hospital heliport HLS is unable to be cleared and unacceptable delays are expected:

- Inbound RFDS helicopter divert to Jandakot Airport where ground-based transport can be arranged.
- RFDS helicopter to hold as required to allow hospital heliport HLS to be vacated. (if applicable)

To minimise the risk associated with this conflict with an RFDS helicopter occupying the heliport HLS – the RFDS process is such that the pilot will remain with the helicopter and take immediate actions to depart the hospital heliport HLS as required.

This may mean departing the hospital heliport HLS without the RFDS clinical crew if necessary, and the clinical crew returning to base by alternate means.

In summary, all rotary transfers that may have a conflict will seek to establish two-way communication with each other, the respective service's coordination centre, and the receiving hospital.

Any potential conflict shall be made known and attempted to be mitigated well in advance.