

Emergency and Non-Emergency Transportation Policy

Original Effective Date: May 2004

Updated Effective Date: April 2012, August 1, 2021

Purpose & Context

As requested, Presbyterian Homes & Services will provide and/or arrange Resident transportation for Residents in our Care Environments (Care Center and Assisted Living) regardless of their level of independence. Resident, Resident's responsible party and/or Power of Attorney have the right to refuse treatment including transportation. Resident or responsible party/designee have the right to choose the mode of transportation.

Procedure

1. Non-emergency transportation will be arranged according to the Resident or responsible party's wishes to the greatest extent possible. This would include but not limited to physician visits, shopping as well as scheduled activity outings.
 - Staff designees will notify transportation company, family or person responsible for scheduling the facility bus where available of need for transportation.
 - The scheduled appointment will be documented including the type of transportation, contact information, time of appointment.
 - The facility will not be responsible for any incurred charges for transportation unless indicated and discussed with the Resident/responsible party.
2. 911 will be notified if Resident requires emergency transportation. This would include but is not limited to respiratory distress, chest pain, fracture, and head injury, change in neurological status or significant unknown injury.
 - Nurse will update MD and receive order to transport Resident. If MD is not able to be reached immediately, or if the Resident is at risk for potential serious injury or decline if immediate medical assistance is not provided, the nurse or designee will immediately call 911. (PHS Care Centers: See also Change of Condition Policy).
 - Nurse or designee will call 911 to request transportation and identify location, any additional information that would be helpful and/or requested.
 - If a Resident has an unknown cause of potential significant injury or suspected head trauma and/or no RN or physician is immediately available to assess the Resident, the Resident is not to be moved and emergency personnel must be notified - call 911.
 - The Resident's advanced directives and code status will be honored. However, in the event of an emergency, nursing staff may use their discretion in calling 911 regardless of the presence of a DNR/DNI directive or advanced care plan. The emergency responders will be provided the advanced directives (POLST/IPOST/POST form) and any additional advanced care planning information and living will.
 - If the Residents advanced directive or POLST/IPOST/POST form indicate no hospitalization or emergency assistance and it is not a life-threatening situation, the nurse will notify the physician and family/ responsible party and Resident prior to proceeding to arranging emergency transport.
 - If Resident or Resident's designee disagree with mode of transportation, an explanation of risks and benefits will take place and documented in Resident's medical record.