

VIRTUAL ADMISSION SERVICE (VAS) FAQS



Who is responsible for the ongoing care of the patient until discharge?

Best practice suggests the patient remains under the care of a single clinician (in this case the MED GP) until they are discharged. This avoids multiple handovers which increase clinical risk. A patient can be handed over to an onsite GP upon their request and when it is in the patient's best interest. This is more likely to be relevant for longer admissions. A verbal handover must take place for their care to be transferred.

Does the patient need to remain in the UCC until their appointment with the VAS doctor?

No, once the MED FACEM has made the decision to admit the patient, they will document the management plan and provide appropriate documentation (medication charts, fluid charts, pathology or radiology requests if needed). Once a decision to admit has been made, the patient can be moved to the inpatient ward. Until then, the patient can be moved to a bed on the ward. If the patient deteriorates, or the nursing staff require further clinical support, a FACEM on demand call can be initiated from the ward. The patient will remain under MED's duty of care regardless of whether a FACEM or GP will tend to their needs.

Can the care be transferred to an onsite GP?

Yes, when it is clearly in the patient's best interest and when there is an onsite GP willing and able to provide ongoing care to the patient.

How is the patient handed over to the onsite GP?

The onsite staff must call MED to make a handover appointment to speak with the MED GP for a verbal handover regarding the patients in their care. The care of the patient should not be transferred until a medical (GP to GP) handover has been completed.



What happens on the day of the VAS appointment after the patient is admitted?

The day after the patient is admitted the local nursing staff will initiate the call to the MED GP using the same MED website they use for all other services. The only difference is the client must enter their unique VAS site code.

Who looks after the patient overnight if the GP does not see them until the next day?

The MED VAS service process starts when the MED FACEM providing care to a patient identifies that the patient needs to be admitted. The patient is then admitted either under the name of the local GP who is on duty the following morning or under the rostered MED GP. In both cases the MED FACEM continues management of the patient's care through to the time the patient is taken over by the GP.

How does the nurse know when the MED GP appointment is?

The MED FACEM advises the PSO to create a MED VAS appointment for the following day. Once that is done, a text message or email is sent to the local team with the MED GPs name as well as the date and time of the appointment. The local team must click 'Confirm' in the appointment email to confirm the patient's appointment with the GP.

How does the MED FACEM hand over to the MED GP?

The MED FACEM advises the PSO to create a MED VAS appointment for the following day. Once that is done, a text message or email is sent to the local team with the MED GPs name as well as the date and time of the appointment. The local team must click 'Confirm' in the appointment email to confirm the patient's appointment with the GP.

What if there is a local GP on duty the next day?

If the MED FACEM determines the patient needs to be admitted, they first ask the onsite team if there is a local doctor that the patient will be seen by. If there is a local doctor, the FACEM will request the patient be admitted under that local doctor. If there is no local doctor, the FACEM will admit the patient under a MED VAS GP, and arrange for a MED GP to see the patient the following day.

